

## Department of Veterans Affairs State Veterans Home Survey Report

This survey report and the information contained herein, resulted from the State Veterans Home (SVH) Survey as a Summary Statement of Deficiencies. (Each Deficiency Must be Preceded by Full Regulatory or applicable Life Safety Code Identifying Information.) Title 38 Code of Federal Regulations Part 51 is applied for SVHs applicable by level of care.

### General Information:

**Facility:** Alaska State Veterans and Pioneers Home

**Location:** 250 East Fireweed, Palmer, AK 99645

**Onsite / Virtual:** Virtual

**Dates of Survey:** 4/27/22-4/28/22

**NH / DOM / ADHC:** DOM

**Survey Class:** Annual

**Total Available Beds:** 65

**Census on First Day of Survey:** 63

Deficiency	Findings
	<p>Initial Comments:</p> <p>A VA Annual survey was conducted from April 27, 2022, through April 28, 2022, at the Alaska State Veterans and Pioneers Home. The survey revealed the facility was not in compliance with 38 CFR part 51 Federal Regulations for State Veterans Homes.</p>
<p><b>§51.43(b) Drugs and medicines for certain veterans</b></p> <p>(b) VA will also furnish drugs and medicines to a State home for a veteran receiving nursing home, domiciliary, or adult day health care in a State home pursuant to <a href="#">38 U.S.C. 1712(d)</a>, as implemented by <a href="#">§ 17.96 of this chapter</a>, subject to the limitation in <a href="#">§ 51.41(c)(2)</a>.</p> <p>Level of Harm – No Actual Harm, with potential for minimal harm. Residents Affected – Many</p>	<p>The facility was unable to demonstrate they received medications from the VA of jurisdiction for only those residents who were eligible.</p> <p>During a telephone interview with Administrative Staff A on 4/21/22 and record reviews on 4/25/22, it was reported that 32 Veteran residents were receiving medications from the VA of jurisdiction. It was reported that zero (0) of the 32 residents were eligible to receive medications from the VA of jurisdiction as outlined in 38 U.S.C. 1712(d), as implemented by §17.96 of this chapter.</p>

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<p><b>§51.200(h)(2) Other environmental conditions</b></p> <p>(2) Have adequate outside ventilation by means of windows, or mechanical ventilation, or a combination of the two;</p> <p>Level of Harm – No Actual Harm, with potential for more than minimal harm.</p> <p>Residents Affected - Many</p>	<p>Based on observation and interview the facility failed to provide adequate outside ventilation by means of windows, or mechanical ventilation, or a combination of the two (2) in the Dirty utility room. The deficient practice affected six (6) of seven (7) smoke compartments, staff, and 63 residents. The facility had the capacity for 65 beds with a census of 63 on the day of survey.</p> <p>The findings include:</p> <ol style="list-style-type: none"><li>1. Observation during the virtual tour on 04/27/2022 at 10:29 a.m. revealed the Dirty utility room on [LOCATION] was used to store two (2) soiled linen barrels, two (2) trash cans, and one (1) biological barrel for waste. Further observation revealed the Dirty utility room did not have adequate ventilation and was broken; Maintenance Staff A repaired the exhaust on site.</li><li>An interview at that time with Maintenance Staff A indicated that the Dirty linen room was used to store two (2) soiled linen barrels, two (2) trash cans, and one (1) biological barrel for waste. When asked how this could affect the residents, they indicated that it could expose residents and staff to foul odors since the exhaust was broken.</li><li>2. Observation during the virtual tour on 04/27/2022 at 10:36 a.m. revealed the Dirty utility room/Laundry in the [LOCATION], was used to store two (2) soiled linen barrels, two (2) trash cans, and one (1) biological barrel for waste. Further observation revealed the Dirty utility/Laundry room did not have adequate ventilation and was broken; Maintenance Staff A repaired the exhaust on site.</li><li>An interview at that time with Maintenance Staff A indicated that the Dirty utility room/Laundry in the [LOCATION] was used to store two (2) soiled linen barrels, two (2) trash cans, and one (1) biological barrel for waste. When asked how this could affect the residents, they indicated that it could expose residents and staff to foul odors since the exhaust was broken and Maintenance Staff A was unaware of the issue.</li><li>3. Observation during the virtual tour on 04/27/2022 at 10:42 a.m. revealed the Dirty utility room in the [LOCATION] was used to store two (2) soiled linen barrels, two (2) trash cans, and one (1) biological barrel for waste. Further observation revealed the Dirty utility/Laundry room did not have outside ventilation by</li></ol>
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	<p>means of windows, or mechanical ventilation, or a combination of the two.</p> <p>An interview at that time with Maintenance Staff A indicated that the Dirty utility room in the [LOCATION] was used to store two (2) soiled linen barrels, two (2) trash cans, and one (1) biological barrel for waste. When asked how this could affect the residents, they indicated that it could expose residents and staff to foul odors since it did not have outside ventilation by means of windows, or mechanical ventilation, or a combination of the two.</p> <p>4. Observation during the virtual tour on 04/27/2022 at 10:54 a.m. revealed the Dirty utility room in the [LOCATION] was used to store two (2) soiled linen barrels, two (2) trash cans, and one (1) biological barrel for waste. Further observation revealed the Dirty utility room in the [LOCATION] did not have adequate ventilation and was broken; Maintenance Staff A repaired the exhaust on site.</p> <p>An interview at that time with Maintenance Staff A indicated that the Dirty utility room in the [LOCATION] was used to store two (2) soiled linen barrels, two (2) trash cans, and one (1) biological barrel for waste. When asked how this could affect the residents, they indicated that it could expose residents and staff to foul odors since the exhaust was broken.</p> <p>5. Observation during the virtual tour on 04/27/2022 at 10:55 a.m. revealed the Dirty utility room in the [LOCATION] was used to store two (2) soiled linen barrels, two (2) trash cans, and one (1) biological barrel for waste. Further observation revealed the Dirty utility room in the [LOCATION] did not have adequate ventilation and was broken; Maintenance Staff A repaired the exhaust on site.</p> <p>An interview at that time with Maintenance Staff A indicated that the Dirty utility room in the [LOCATION] was used to store two (2) soiled linen barrels, two (2) trash cans, and one (1) biological barrel for waste. When asked how this could affect the residents, they indicated that it could expose residents and staff to foul odors since the exhaust was broken.</p> <p>6. Observation during the virtual tour on 04/27/2022 at 11:00 a.m. revealed the Dirty utility room in the [LOCATION] was used to store two (2) soiled linen</p>
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	<p>barrels, two (2) trash cans, and one (1) biological barrel for waste. Further observation revealed the Dirty utility room in the [LOCATION] did not have adequate ventilation and was broken; Maintenance Staff A repaired the exhaust on site.</p> <p>An interview at that time with Maintenance Staff A indicated that the Dirty utility room in the [LOCATION] was used to store two (2) soiled linen barrels, two (2) trash cans, and one (1) biological barrel for waste. When asked how this could affect the residents, they indicated that it could expose residents and staff to foul odors since the exhaust was broken.</p> <p>The census of 63 was verified by Administrative Staff A on 04/27/2022. The findings were acknowledged by Administrative Staff A and Maintenance Staff A during the exit interview on 04/27/2022.</p>
<p><b>§51.350(c) Life Safety from Fire</b> The facility must meet the applicable requirements of the National Fire Protection Association's NFPA 101, Life Safety Code, as incorporated by reference in § 51.200.</p> <p>Level of Harm – No Actual Harm, with potential for more than minimal harm. Resident Affected - Few</p>	<p>Based on observation and interview, the facility failed to install a placard that shall be conspicuously placed near the extinguisher that states that the fire protection system shall be actuated prior to using the Class K fire extinguisher. The deficient practice affected one (1) of seven (7) smoke compartments, staff, and no residents. The facility had a capacity for 65 beds with a census of 63 on the day of the survey.</p> <p>The findings include:</p> <p>Observation during the virtual inspection tour on 04/27/2022 at 11:17 a.m. of the kitchen revealed there was no placard conspicuously placed near the Class K extinguisher that stated that the fire protection system shall be actuated prior to using the fire extinguisher, as required by section 5.5.5.3 of NFPA 10, Standard for Portable Fire Extinguishers. An interview at that time with Maintenance Staff A, revealed that they believed there was a placard at some point, but that it may have been removed and they did not know what happened to the placard.</p> <p>The census of 63 was verified by Administrative Staff A on 04/27/2022. The findings were acknowledged by Administrative Staff A and verified by Maintenance Staff A during the exit interview on 04/27/2022.</p> <p><b>Actual NFPA Standard: NFPA 101 Life Safety Code (2012) 19.3.5.12 Portable fire extinguishers shall be provided in all health care occupancies in accordance with 9.7.4.1.</b> 9.7.4 Manual Extinguishing Equipment. 9.7.4.1* Where required by the provisions of another section</p>

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of this Code, portable fire extinguishers shall be selected, installed, inspected, and maintained in accordance with NFPA 10, Standard for Portable Fire Extinguishers.

**Actual NFPA Standard: NFPA 10 Standard for Portable Fire Extinguishers (2010)**

5.5.5\* Class K Cooking Media Fires. Fire extinguishers provided

for the protection of cooking appliances that use combustible cooking media (vegetable or animal oils and fats) shall be listed and labeled for Class K fires.

5.5.5.1 Class K fire extinguishers manufactured after January 1, 2002, shall not be equipped with extended wand-type discharge devices.

5.5.5.2 Fire extinguishers installed specifically for the protection of cooking appliances that use combustible cooking media (animal or vegetable oils and fats) without a Class K rating shall be removed from service.

5.5.5.3\* A placard shall be conspicuously placed near the extinguisher that states that the fire protection system shall be actuated prior to using the fire extinguisher.