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| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 15C0001047 | X2) MULTIPLE CONSTRUCTION A. BUILDING 01 B. WING _____ | X3) DATE SURVEY COMPLETED 11/16/2012 |
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| NAME OF PROVIDER OR SUPPLIER WHITEWATER SURGERY CENTER | STREET ADDRESS, CITY, STATE, ZIP CODE 1900 CHESTER BLVD RICHMOND, IN 47374 |
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| (X4) ID PREFIX TAG | SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION) | ID PREFIX TAG | PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY) | (X5) COMPLETION DATE |
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| K0000 | <p>A Life Safety Code Recertification Survey was conducted by the Indiana State Department of Health in accordance with 42 CFR 416.44(b).</p> <p>Survey Date: 11/16/12</p> <p>Facility Number: 001222 Provider Number: 15C0001047 AIM Number: 100380930A</p> <p>Surveyor: Mark Bugni, Life Safety Code Specialist</p> <p>At this Life Safety Code survey, Whitewater Surgery Center was found not in compliance with Requirements for Participation in Medicare/Medicaid, 42 CFR Subpart 416.44(b), Life Safety from Fire and the 2000 edition of the National Fire Protection Association (NFPA) 101, Life Safety Code (LSC), Chapter 21, Existing Ambulatory Health Care Occupancies.</p> <p>This one story facility with a basement was determined to be of Type V (111) construction and fully sprinklered. The facility has a fire alarm system with smoke detection in the corridors and spaces open to the corridors.</p> | K0000 | | |
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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE _____ TITLE _____ (X6) DATE _____

Any deficiency statement ending with an asterisk (*) denotes a deficiency which the institution may be excused from correcting providing it is determined that other safeguards provide sufficient protection to the patients. (see instructions.) Except for nursing homes, the findings stated above are disclosable 90 days following the date of survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosable 14 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.

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| | <p>Quality Review by Robert Booher, Life Safety Code Specialist-Medical Surveyor on 11/21/12.</p> <p>The facility was found not in compliance with the aforementioned regulatory requirements as evidenced by the following:</p> | | | | |

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| K0130 | <p>NFPA 101 MISCELLANEOUS OTHER LSC DEFICIENCY NOT ON 2786 Based on record review and interview, the facility failed to ensure sprinkler waterflow alarm devices were tested quarterly for 3 of the past 4 quarters for 2012. LSC 21.7.6 refers to 4.6.12. LSC 4.6.12.2 requires existing life safety features obvious to the public shall be maintained. LSC 9.7.5 refers to NFPA 25, the Standard for Inspection, Testing, and Maintenance of Water-Based Fire Protection Systems. NFPA 25, at 2-3.3 requires waterflow alarm devices including but not limited to, mechanical water motor gongs, vane-type waterflow devices and pressure switches that provide audible or visual signals to be tested quarterly. This deficient practice affects all patients in the facility.</p> <p>Findings include:</p> <p>Based on a review of Sprinkler Inspection Records on 11/16/12 at 2:00 p.m. with the surgery manager, the sprinkler inspection report for the year 2012 was conducted on 03/28/12 and indicated this was an annual Sprinkler Inspection Report. Furthermore, the contract with the sprinkler inspection company was reviewed at 2:10 p.m. with the surgery manager, and the contract indicated an</p> | K0130 | Control valve maintenance and water flow test at Sprinkler Riser completed 12/5/12. Contract with Koosen has been revised to cover quarterly sprinkler inspections which include waterflow test. | 12/05/2012 | | | |

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| | annual inspection will be conducted. The lack of quarterly sprinkler inspections was verified by the surgery manager at the 2:45 p.m. exit conference on 11/16/12. | | | |