

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 155770	X2) MULTIPLE CONSTRUCTION A. BUILDING 01 B. WING _____	X3) DATE SURVEY COMPLETED 03/15/2016
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NAME OF PROVIDER OR SUPPLIER VILLAS OF GUERIN WOODS	STREET ADDRESS, CITY, STATE, ZIP CODE 1002 SISTER BARBARA WAY GEORGETOWN, IN 47122
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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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K 0000 Bldg. 01	<p>A Life Safety Code Recertification and State Licensure Survey was conducted by the Indiana State Department of Health in accordance with 42 CFR 483.70(a).</p> <p>Survey Date: 03/15/16</p> <p>Facility Number: 011509 Provider Number: 155770 AIM Number: 200909280</p> <p>At this Life Safety Code survey, Villas of Guerin Woods, was found in substantial compliance with Requirements for Participation in Medicare/Medicaid, 42 CFR Subpart 483.70(a), Life Safety from Fire and the 2000 edition of the National Fire Protection Association (NFPA) 101, Life Safety Code (LSC), and 410 IAC 16.2. Villa 1002 was surveyed with Chapter 18, New Health Care Occupancies. The facility is using a categorical waiver for a residential kitchen open to the corridor, which meets the requirements of the 2012 edition of the National Fire Protection Association (NFPA) 101, Life Safety Code (LSC), Section 19.3.2.5.3.</p> <p>This one story facility was determined to be of Type V (111) construction and fully</p>	K 0000	Submission of this plan of correction shall not constitute an admission by the Villas of Guerin Woods to the allegations contained in this survey report. This plan of correction is submitted in accordance with the requirements of the state and federal laws.	
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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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K 0050 SS=C Bldg. 01	<p>sprinkled. The facility has a fire alarm system with smoke detection in the corridors, spaces open to the corridors, and all resident sleeping rooms. The facility has a capacity of 10 and had a census of 9 at the time of this visit.</p> <p>All areas where residents have customary access were sprinkled and all areas providing facility services were sprinkled.</p> <p>Quality Review completed on 03/21/16 - DA</p> <p>NFPA 101 LIFE SAFETY CODE STANDARD Fire drills include the transmission of a fire alarm signal and simulation of emergency fire conditions. Fire drills are held at unexpected times under varying conditions, at least quarterly on each shift. The staff is familiar with procedures and is aware that drills are part of established routine. Responsibility for planning and conducting drills is assigned only to competent persons who are qualified to exercise leadership. Where drills are conducted between 9:00 PM and 6:00 AM a coded announcement may be used instead of audible alarms. 18.7.1.2, 19.7.1.2</p> <p>Based on record review and interview, the facility failed to ensure fire drills were held at varied and unexpected times for 3 of 3 employee shifts during 4 of 4 quarters. This deficient practice could affect all residents in the facility.</p>	K 0050	No Elders were found to have been affected by the deficient practice. All Elders had the potential to be affected by the deficient practice. The Property Manager and the Administrator were reeducated by LexBrasher about the necessity of fire drills to be held at unexpected times	04/04/2016

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K 0144 SS=C Bldg. 01	<p>Findings include:</p> <p>Based on review of the facility's fire drills on 03/15/16 between 12:15 p.m. and 3:00 p.m. with the Administrator and the Property Manager present, the following was noted:</p> <ol style="list-style-type: none"> Three of four first shift (day) fire drills were performed between 10:01 a.m. and 10:55 a.m. Three of four second shift (evening) fire drills were performed between 1:42 p.m. and 2:45 p.m. Three of four third shift (night) fire drills were performed between 9:25 p.m. and 9:48 p.m. <p>This was acknowledged by the Administrator and the Property Manager at the time of record review.</p> <p>3.1-19(b) 3.1-51(c)</p> <p>NFPA 101 LIFE SAFETY CODE STANDARD Generators inspected weekly and exercised under load for 30 minutes per month and shall be in accordance with NFPA 99 and NFPA 110. 3-4.4.1 and 8-4.2 (NFPA 99), Chapter 6 (NFPA 110)</p> <p>Based on record review and interview, the facility failed to ensure 1 of 1 emergency generator (for home 1002) was allowed a 5 minute cool down period after each load test, furthermore, the</p>	K 0144	<p>and under varying conditions, during monthly fire drills. Both the Property Manager and the Administrator reread the Life Safety regulation on conducting a proper fire drill. The monthly fire drills will be audited to insure they are held at unexpected times and under varying conditions. An audit tool was designed to be used to monitor the monthly fire drills are held at unexpected times and under varying conditions. See (Exhibit #1). The Property Manager/designee will audit times of fire drills monthly times 12 months then annually thereafter. The Administrator will assure the audits are conducted and the results of the audits will be reviewed by the Q.A.P.I. committee monthly X's 3 then quarterly X's 3 to ensure compliance.</p> <p>No Elders were found to have been affected by the deficient practice. All Elders had the potential to be affected by the deficient practice. The Property Manager and the Administrator were reeducated by Lex Brasher</p>	04/04/2016			

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	<p>facility failed to provide documentation that the transfer time for the generator was being recorded after each load test. LSC 19.2.9.1 refers to LSC 7.9 which refers to LSC 7.9.2.3 which requires generators to be installed, tested and maintained in accordance with NFPA 110, Standard for Emergency and Standby Power Systems, 1999 Edition. NFPA 110, 4-2.4.8 Time Delay on Engine Shutdown requires that a minimum time delay of 5 minutes shall be provided for unloaded running of the Emergency Power Supply (EPS) prior to shutdown. This delay provides additional engine cool down. This time delay shall not be required on small (15 kW or less) air-cooled prime movers. This deficient practice could affect all residents, as well as staff and visitors.</p> <p>Findings include:</p> <p>Based on review of the facility's monthly generator log on 03/15/16 between 12:15 p.m. and 3:00 p.m. with the Administrator and the Property Manager present, the generator log form documented the generator was tested weekly for over 30 minutes under load, however, there was no documentation on the form that showed the generator had a cool down time following its load test, furthermore, there was no documentation</p>		<p>about the necessity of including the 5 minute cool down documentation and the generator transfer time documentation after each monthly load test. Both the Property Manager and the Administrator reread the Life Safety regulation on the proper monthly testing of a generator that includes a 5 minute cool down and generator transfer time documentation following each load test. An audit tool was designed to be used to monitor the monthly generator test to include the documentation of a 5 minute cool downtime and documentation of the generator transfer time after the load test (See exhibit #2). The Property Manager/designee will audit the monthly generator tests monthly X's 3, quarterly X's 3 then annually.</p> <p>The Administrator will assure the audits are conducted and the results reviewed by the Q.A.P.I. committee monthly X's 3, then quarterly X's 3 to ensure compliance.</p>	

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K 0000 Bldg. 03	<p>that showed the generator transfer time being recorded following its load test. During an interview at the time of record review, the Administrator and the Property Manager confirmed the monthly generator log did not include documentation of a cool down time being recorded or the generator transfer time being recorded.</p> <p>3.1-19(b)</p> <p>A Life Safety Code Recertification and State Licensure Survey was conducted by the Indiana State Department of Health in accordance with 42 CFR 483.70(a).</p> <p>Survey Date: 03/15/16</p> <p>Facility Number: 011509 Provider Number: 155770 AIM Number: 200909280</p> <p>At this Life Safety Code survey, Villas of Guerin Woods, was found in substantial compliance with Requirements for Participation in Medicare/Medicaid, 42 CFR Subpart 483.70(a), Life Safety from Fire and the 2000 edition of the National Fire Protection Association (NFPA) 101,</p>	K 0000	Submission of this plan of correction shall not constitute an admission by the Villas of Guerin Woods to the allegations contained in this survey report. This plan of correction is submitted in accordance with the requirements of the state and federal laws.	

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K 0050 SS=C Bldg. 03	<p>Life Safety Code (LSC), and 410 IAC 16.2. Villa 1004 was surveyed with Chapter 18, New Health Care Occupancies. The facility is using a categorical waiver for a residential kitchen open to the corridor, which meets the requirements of the 2012 edition of the National Fire Protection Association (NFPA) 101, Life Safety Code (LSC), Section 19.3.2.5.3.</p> <p>This one story facility was determined to be of Type V (111) construction and fully sprinkled. The facility has a fire alarm system with smoke detection in the corridors, spaces open to the corridors, and all resident sleeping rooms. The facility has a capacity of 10 and had a census of 9 at the time of this visit.</p> <p>All areas where residents have customary access were sprinkled and all areas providing facility services were sprinkled.</p> <p>Quality Review completed on 03/21/16 - DA</p> <p>NFPA 101 LIFE SAFETY CODE STANDARD Fire drills include the transmission of a fire alarm signal and simulation of emergency fire conditions. Fire drills are held at unexpected times under varying conditions, at least quarterly on each shift. The staff is familiar with procedures and is aware that</p>						

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	<p>drills are part of established routine. Responsibility for planning and conducting drills is assigned only to competent persons who are qualified to exercise leadership. Where drills are conducted between 9:00 PM and 6:00 AM a coded announcement may be used instead of audible alarms. 18.7.1.2, 19.7.1.2</p> <p>Based on record review and interview, the facility failed to ensure fire drills were held at varied and unexpected times for 2 of 3 employee shifts during 4 of 4 quarters. This deficient practice could affect all residents in the facility.</p> <p>Findings include:</p> <p>Based on review of the facility's fire drills on 03/15/16 between 12:15 p.m. and 3:00 p.m. with the Administrator and the Property Manager present, the following was noted:</p> <ol style="list-style-type: none"> Three of four first shift (day) fire drills were performed between 10:26 a.m. and 11:08 a.m. Three of four third shift (night) fire drills were performed between 9:38 p.m. and 9:58 p.m. <p>This was acknowledged by the Administrator and the Property Manager at the time of record review.</p> <p>3.1-19(b) 3.1-51(c)</p>	K 0050	<p>No Elders were found to have been affected by the deficient practice. All Elders had the potential to be affected by the deficient practice. The Property Manager and the Administrator were reeducated by LexBrasher about the necessity of fire drills to be held at unexpected times and under varying conditions, during monthly fire drills. Both the Property Manager and the Administrator reread the Life Safety regulation on conducting a proper fire drill. The monthly fire drills will be audited to insure they are held at unexpected times and under varying conditions. An audit tool was designed to be used to monitor the monthly fire drills are held at unexpected times and under varying conditions. See (Exhibit #1). The Property Manager/designee will audit times of fire drills monthly times 12 months then annually thereafter. The Administrator will assure the audits are conducted and the results of the audits will be reviewed by the Q.A.P.I. committee monthly X's 3 then quarterly X's 3 to ensure compliance.</p>	04/04/2016

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K 0000 Bldg. 04	<p>A Life Safety Code Recertification and State Licensure Survey was conducted by the Indiana State Department of Health in accordance with 42 CFR 483.70(a).</p> <p>Survey Date: 03/15/16</p> <p>Facility Number: 011509 Provider Number: 155770 AIM Number: 200909280</p> <p>At this Life Safety Code survey, Villas of Guerin Woods, was found in substantial compliance with Requirements for Participation in Medicare/Medicaid, 42 CFR Subpart 483.70(a), Life Safety from Fire and the 2000 edition of the National Fire Protection Association (NFPA) 101, Life Safety Code (LSC), and 410 IAC 16.2. Villa 1003 was surveyed with Chapter 18, New Health Care Occupancies. The facility is using a categorical waiver for a residential kitchen open to the corridor, which meets the requirements of the 2012 edition of the National Fire Protection Association (NFPA) 101, Life Safety Code (LSC), Section 19.3.2.5.3.</p> <p>This one story facility was determined to be of Type V (111) construction and fully</p>	K 0000	Submission of this plan of correction shall not constitute an admission by the Villas of Guerin Woods to the allegations contained in this survey report. This plan of correction is submitted in accordance with the requirements of the state and federal laws.	

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K 0050 SS=C Bldg. 04	<p>sprinkled. The facility has a fire alarm system with smoke detection in the corridors, spaces open to the corridors, and all resident sleeping rooms. The facility has a capacity of 10 and had a census of 9 at the time of this visit.</p> <p>All areas where residents have customary access were sprinkled and all areas providing facility services were sprinkled.</p> <p>Quality Review completed on 03/21/16 - DA</p> <p>NFPA 101 LIFE SAFETY CODE STANDARD Fire drills include the transmission of a fire alarm signal and simulation of emergency fire conditions. Fire drills are held at unexpected times under varying conditions, at least quarterly on each shift. The staff is familiar with procedures and is aware that drills are part of established routine. Responsibility for planning and conducting drills is assigned only to competent persons who are qualified to exercise leadership. Where drills are conducted between 9:00 PM and 6:00 AM a coded announcement may be used instead of audible alarms. 18.7.1.2, 19.7.1.2</p> <p>Based on record review and interview, the facility failed to ensure fire drills were held at varied and unexpected times for 1 of 3 employee shifts during 3 of 4 quarters. This deficient practice could affect all residents in the facility.</p>	K 0050	No Elders were found to have been affected by the deficient practice. All Elders had the potential to be affected by the deficient practice. The Property Manager and the Administrator were reeducated by LexBrasher about the necessity of fire drills to	04/04/2016

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K 0144 SS=C Bldg. 04	<p>Findings include:</p> <p>Based on review of the facility's fire drills on 03/15/16 between 12:15 p.m. and 3:00 p.m. with the Administrator and the Property Manager present, the following was noted:</p> <p>Three of four third shift (night) fire drills were performed between 10:30 p.m. and 11:20 p.m.</p> <p>This was acknowledged by the Administrator and the Property Manager at the time of record review.</p> <p>3.1-19(b) 3.1-51(c)</p> <p>NFPA 101 LIFE SAFETY CODE STANDARD Generators inspected weekly and exercised under load for 30 minutes per month and shall be in accordance with NFPA 99 and NFPA 110. 3-4.4.1 and 8-4.2 (NFPA 99), Chapter 6 (NFPA 110)</p> <p>Based on record review and interview, the facility failed to ensure 1 of 1 emergency generator (for home 1003) was allowed a 5 minute cool down period after each load test, furthermore, the facility failed to provide documentation that the transfer time for the generator</p>	K 0144	<p>be held at unexpected times and under varying conditions, during monthly fire drills. Both the Property Manager and the Administrator reread the Life Safety regulation on conducting a proper fire drill. The monthly fire drills will be audited to insure they are held at unexpected times and under varying conditions. An audit tool was designed to be used to monitor the monthly fire drills are held at unexpected times and under varying conditions. See (Exhibit #1). The Property Manager/designee will audit times of fire drills monthly times 12 months then annually thereafter. The Administrator will assure the audits are conducted and the results of the audits will be reviewed by the Q.A.P.I. committee monthly X's 3 then quarterly X's 3 to ensure compliance.</p> <p>No Elders were found to have been affected by the deficient practice. All Elders had the potential to be affected by the deficient practice. The Property Manager and the Administrator were reeducated by Lex Brasher about the necessity of including the 5 minute cool down</p>	04/04/2016			

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	<p>was being recorded after each load test. LSC 19.2.9.1 refers to LSC 7.9 which refers to LSC 7.9.2.3 which requires generators to be installed, tested and maintained in accordance with NFPA 110, Standard for Emergency and Standby Power Systems, 1999 Edition. NFPA 110, 4-2.4.8 Time Delay on Engine Shutdown requires that a minimum time delay of 5 minutes shall be provided for unloaded running of the Emergency Power Supply (EPS) prior to shutdown. This delay provides additional engine cool down. This time delay shall not be required on small (15 kW or less) air-cooled prime movers. This deficient practice could affect all residents, as well as staff and visitors.</p> <p>Findings include:</p> <p>Based on review of the facility's monthly generator log on 03/15/16 between 12:15 p.m. and 3:00 p.m. with the Administrator and the Property Manager present, the generator log form documented the generator was tested weekly for over 30 minutes under load, however, there was no documentation on the form that showed the generator had a cool down time following its load test, furthermore, there was no documentation that showed the generator transfer time being recorded following its load test.</p>		<p>documentation and the generator transfer time documentation after each monthly load test. Both the Property Manager and the Administrator reread the Life Safety regulation on the proper monthly testing of a generator that includes a 5 minute cool down and generator transfer time documentation following each load test. An audit tool was designed to be used to monitor the monthly generator test to include the documentation of a 5 minute cool downtime and documentation of the generator transfer time after the load test (See exhibit #2). The Property Manager/designee will audit the monthly generator tests monthly X's 3, quarterly X's 3 then annually.</p> <p>The Administrator will assure the audits are conducted and the results reviewed by the Q.A.P.I. committee monthly X's 3, then quarterly X's 3 to ensure compliance.</p>	

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K 0000 Bldg. 05	<p>During an interview at the time of record review, the Administrator and the Property Manager confirmed the monthly generator log did not include documentation of a cool down time being recorded or the generator transfer time being recorded.</p> <p>3.1-19(b)</p> <p>A Life Safety Code Recertification and State Licensure Survey was conducted by the Indiana State Department of Health in accordance with 42 CFR 483.70(a).</p> <p>Survey Date: 03/15/16</p> <p>Facility Number: 011509 Provider Number: 155770 AIM Number: 200909280</p> <p>At this Life Safety Code survey, Villas of Guerin Woods, was found in substantial compliance with Requirements for Participation in Medicare/Medicaid, 42 CFR Subpart 483.70(a), Life Safety from Fire and the 2000 edition of the National Fire Protection Association (NFPA) 101, Life Safety Code (LSC), and 410 IAC 16.2. Villa 1005 was surveyed with Chapter 18, New Health Care</p>	K 0000	Submission of this plan of correction shall not constitute an admission by the Villas of Guerin Woods to the allegations contained in this survey report. This plan of correction is submitted in accordance with the requirements of the state and federal laws.	

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 155770		X2) MULTIPLE CONSTRUCTION A. BUILDING <u>05</u> B. WING _____		X3) DATE SURVEY COMPLETED 03/15/2016	
NAME OF PROVIDER OR SUPPLIER VILLAS OF GUERIN WOODS				STREET ADDRESS, CITY, STATE, ZIP CODE 1002 SISTER BARBARA WAY GEORGETOWN, IN 47122			
(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			
K 0050 SS=C Bldg. 05	<p>Occupancies. The facility is using a categorical waiver for a residential kitchen open to the corridor, which meets the requirements of the 2012 edition of the National Fire Protection Association (NFPA) 101, Life Safety Code (LSC), Section 19.3.2.5.3.</p> <p>This one story facility was determined to be of Type V (111) construction and fully sprinkled. The facility has a fire alarm system with smoke detection in the corridors, spaces open to the corridors, and all resident sleeping rooms. The facility has a capacity of 10 and had a census of 10 at the time of this visit.</p> <p>All areas where residents have customary access were sprinkled and all areas providing facility services were sprinkled.</p> <p>Quality Review completed on 03/21/16 - DA</p> <p>NFPA 101 LIFE SAFETY CODE STANDARD Fire drills include the transmission of a fire alarm signal and simulation of emergency fire conditions. Fire drills are held at unexpected times under varying conditions, at least quarterly on each shift. The staff is familiar with procedures and is aware that drills are part of established routine. Responsibility for planning and conducting drills is assigned only to competent persons who are qualified to exercise leadership.</p>						

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 155770		X2) MULTIPLE CONSTRUCTION A. BUILDING <u>05</u> B. WING _____		X3) DATE SURVEY COMPLETED 03/15/2016	
NAME OF PROVIDER OR SUPPLIER VILLAS OF GUERIN WOODS				STREET ADDRESS, CITY, STATE, ZIP CODE 1002 SISTER BARBARA WAY GEORGETOWN, IN 47122			
(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			
K 0144	<p>Where drills are conducted between 9:00 PM and 6:00 AM a coded announcement may be used instead of audible alarms. 18.7.1.2, 19.7.1.2</p> <p>Based on record review and interview, the facility failed to ensure fire drills were held at varied and unexpected times for 3 of 3 employee shifts during 4 of 4 quarters. This deficient practice could affect all residents in the facility.</p> <p>Findings include:</p> <p>Based on review of the facility's fire drills on 03/15/16 between 12:15 p.m. and 3:00 p.m. with the Administrator and the Property Manager present, the following was noted:</p> <ol style="list-style-type: none"> Three of four first shift (day) fire drills were performed between 10:37 a.m. and 11:20 a.m. Three of four second shift (evening) fire drills were performed between 2:45 p.m. and 3:53 p.m. Three of four third shift (night) fire drills were performed between 9:45 p.m. and 10:35 p.m. <p>This was acknowledged by the Administrator and the Property Manager at the time of record review.</p> <p>3.1-19(b) 3.1-51(c) NFPA 101</p>	K 0050	<p>No Elders were found to have been affected by the deficient practice. All Elders had the potential to be affected by the deficient practice. The Property Manager and the Administrator were reeducated by LexBrasher about the necessity of fire drills to be held at unexpected times and under varying conditions, during monthly fire drills. Both the Property Manager and the Administrator reread the Life Safety regulation on conducting a proper fire drill. The monthly fire drills will be audited to insure they are held at unexpected times and under varying conditions. An audit tool was designed to be used to monitor the monthly fire drills are held at unexpected times and under varying conditions. See (Exhibit #1). The Property Manager/designee will audit times of fire drills monthly times 12 months then annually thereafter. The Administrator will assure the audits are conducted and the results of the audits will be reviewed by the Q.A.P.I. committee monthly X's 3 then quarterly X's 3 to ensure compliance.</p>	04/04/2016			

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 155770	X2) MULTIPLE CONSTRUCTION A. BUILDING <u>05</u> B. WING _____	X3) DATE SURVEY COMPLETED 03/15/2016
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NAME OF PROVIDER OR SUPPLIER VILLAS OF GUERIN WOODS	STREET ADDRESS, CITY, STATE, ZIP CODE 1002 SISTER BARBARA WAY GEORGETOWN, IN 47122
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SS=C Bldg. 05	<p>LIFE SAFETY CODE STANDARD Generators inspected weekly and exercised under load for 30 minutes per month and shall be in accordance with NFPA 99 and NFPA 110. 3-4.4.1 and 8-4.2 (NFPA 99), Chapter 6 (NFPA 110)</p> <p>Based on record review and interview, the facility failed to ensure 1 of 1 emergency generator (for home 1005) was allowed a 5 minute cool down period after each load test, furthermore, the facility failed to provide documentation that the transfer time for the generator was being recorded after each load test. LSC 19.2.9.1 refers to LSC 7.9 which refers to LSC 7.9.2.3 which requires generators to be installed, tested and maintained in accordance with NFPA 110, Standard for Emergency and Standby Power Systems, 1999 Edition. NFPA 110, 4-2.4.8 Time Delay on Engine Shutdown requires that a minimum time delay of 5 minutes shall be provided for unloaded running of the Emergency Power Supply (EPS) prior to shutdown. This delay provides additional engine cool down. This time delay shall not be required on small (15 kW or less) air-cooled prime movers. This deficient practice could affect all residents, as well as staff and visitors.</p> <p>Findings include: Based on review of the facility's monthly</p>	K 0144	<p>No Elders were found to have been affected by the deficient practice. All Elders had the potential to be affected by the deficient practice. The Property Manager and the Administrator were reeducated by LexBrasher about the necessity of including the 5 minute cool down documentation and the generator transfer time documentation after each monthly load test. Both the Property Manager and the Administrator reread the Life Safety regulation on the proper monthly testing of a generator that includes a 5 minute cool down and generator transfer time documentation following each load test. An audit tool was designed to be used to monitor the monthly generator test to include the documentation of a 5 minute cool downtime and documentation of the generator transfer time after the load test (See exhibit #2). The Property Manager/designee will audit the monthly generator tests monthly X's 3, quarterly X's 3 then annually.</p> <p>The Administrator will assure the audits are conducted and the results reviewed by the Q.A.P.I. committee monthly X's 3, then quarterly X's 3 to ensure compliance.</p>	04/04/2016

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 155770	X2) MULTIPLE CONSTRUCTION A. BUILDING <u>05</u> B. WING _____	X3) DATE SURVEY COMPLETED 03/15/2016
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NAME OF PROVIDER OR SUPPLIER VILLAS OF GUERIN WOODS	STREET ADDRESS, CITY, STATE, ZIP CODE 1002 SISTER BARBARA WAY GEORGETOWN, IN 47122
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K 0000 Bldg. 06	<p>generator log on 03/15/16 between 12:15 p.m. and 3:00 p.m. with the Administrator and the Property Manager present, the generator log form documented the generator was tested weekly for over 30 minutes under load, however, there was no documentation on the form that showed the generator had a cool down time following its load test, furthermore, there was no documentation that showed the generator transfer time being recorded following its load test. During an interview at the time of record review, the Administrator and the Property Manager confirmed the monthly generator log did not include documentation of a cool down time being recorded or the generator transfer time being recorded.</p> <p>3.1-19(b)</p> <p>A Life Safety Code Recertification and State Licensure Survey was conducted by the Indiana State Department of Health in accordance with 42 CFR 483.70(a).</p> <p>Survey Date: 03/15/16</p> <p>Facility Number: 011509 Provider Number: 155770</p>	K 0000	Submission of this plan of correction shall not constitute an admission by the Villas of Guerin Woods to the allegations contained in this survey report. This plan of correction is submitted in accordance with the requirements of the state and federal laws.	

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 155770	X2) MULTIPLE CONSTRUCTION A. BUILDING 06 B. WING _____	X3) DATE SURVEY COMPLETED 03/15/2016
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NAME OF PROVIDER OR SUPPLIER VILLAS OF GUERIN WOODS	STREET ADDRESS, CITY, STATE, ZIP CODE 1002 SISTER BARBARA WAY GEORGETOWN, IN 47122
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	<p>AIM Number: 200909280</p> <p>At this Life Safety Code survey, Villas of Guerin Woods, was found in substantial compliance with Requirements for Participation in Medicare/Medicaid, 42 CFR Subpart 483.70(a), Life Safety from Fire and the 2000 edition of the National Fire Protection Association (NFPA) 101, Life Safety Code (LSC), and 410 IAC 16.2. Villa 1006 was surveyed with Chapter 18, New Health Care Occupancies. The facility is using a categorical waiver for a residential kitchen open to the corridor, which meets the requirements of the 2012 edition of the National Fire Protection Association (NFPA) 101, Life Safety Code (LSC), Section 19.3.2.5.3.</p> <p>This one story facility was determined to be of Type V (111) construction and fully sprinkled. The facility has a fire alarm system with smoke detection in the corridors, spaces open to the corridors, and all resident sleeping rooms. The facility has a capacity of 10 and had a census of 8 at the time of this visit.</p> <p>All areas where residents have customary access were sprinkled and all areas providing facility services were sprinkled.</p>			

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 155770	X2) MULTIPLE CONSTRUCTION A. BUILDING <u>06</u> B. WING _____	X3) DATE SURVEY COMPLETED 03/15/2016
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NAME OF PROVIDER OR SUPPLIER VILLAS OF GUERIN WOODS	STREET ADDRESS, CITY, STATE, ZIP CODE 1002 SISTER BARBARA WAY GEORGETOWN, IN 47122
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K 0050 SS=C Bldg. 06	<p>Quality Review completed on 03/21/16 - DA</p> <p>NFPA 101 LIFE SAFETY CODE STANDARD Fire drills include the transmission of a fire alarm signal and simulation of emergency fire conditions. Fire drills are held at unexpected times under varying conditions, at least quarterly on each shift. The staff is familiar with procedures and is aware that drills are part of established routine. Responsibility for planning and conducting drills is assigned only to competent persons who are qualified to exercise leadership. Where drills are conducted between 9:00 PM and 6:00 AM a coded announcement may be used instead of audible alarms. 18.7.1.2, 19.7.1.2</p> <p>Based on record review and interview, the facility failed to ensure fire drills were held at varied and unexpected times for 3 of 3 employee shifts during 4 of 4 quarters. This deficient practice could affect all residents in the facility.</p> <p>Findings include:</p> <p>Based on review of the facility's fire drills on 03/15/16 between 12:15 p.m. and 3:00 p.m. with the Administrator and the Property Manager present, the following was noted:</p> <ol style="list-style-type: none"> Three of four first shift (day) fire drills were performed between 10:45 a.m. and 11:46 a.m. Three of four second shift (evening) 	K 0050	No Elders were found to have been affected by the deficient practice. All Elders had the potential to be affected by the deficient practice. The Property Manager and the Administrator were reeducated by Lex Brasher about the necessity of fire drills to be held at unexpected times and under varying conditions, during monthly fire drills. Both the Property Manager and the Administrator reread the Life Safety regulation on conducting a proper fire drill. The monthly fire drills will be audited to insure they are held at unexpected times and under varying conditions. An audit tool was designed to be used to monitor the monthly fire drills are held at unexpected times and under varying conditions. See (Exhibit #1). The Property	04/04/2016

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 155770	X2) MULTIPLE CONSTRUCTION A. BUILDING <u>06</u> B. WING _____	X3) DATE SURVEY COMPLETED 03/15/2016
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NAME OF PROVIDER OR SUPPLIER VILLAS OF GUERIN WOODS	STREET ADDRESS, CITY, STATE, ZIP CODE 1002 SISTER BARBARA WAY GEORGETOWN, IN 47122
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K 0144 SS=C Bldg. 06	<p>fire drills were performed between 3:10 p.m. and 3:35 p.m.</p> <p>3. Three of four third shift (night) fire drills were performed between 9:30 p.m. and 10:17 p.m.</p> <p>This was acknowledged by the Administrator and the Property Manager at the time of record review.</p> <p>3.1-19(b) 3.1-51(c)</p> <p>NFPA 101 LIFE SAFETY CODE STANDARD Generators inspected weekly and exercised under load for 30 minutes per month and shall be in accordance with NFPA 99 and NFPA 110. 3-4.4.1 and 8-4.2 (NFPA 99), Chapter 6 (NFPA 110)</p> <p>Based on record review and interview, the facility failed to ensure 1 of 1 emergency generator (for home 1006) was allowed a 5 minute cool down period after each load test, furthermore, the facility failed to provide documentation that the transfer time for the generator was being recorded after each load test. LSC 19.2.9.1 refers to LSC 7.9 which refers to LSC 7.9.2.3 which requires generators to be installed, tested and maintained in accordance with NFPA 110, Standard for Emergency and Standby Power Systems, 1999 Edition. NFPA 110, 4-2.4.8 Time Delay on Engine Shutdown requires that a</p>	K 0144	<p>Manager/designee will audit times of fire drills monthly times 12 months then annually thereafter. The Administrator will assure the audits are conducted and the results of the audits will be reviewed by the Q.A.P.I. committee monthly X's 3 then quarterly X's 3 to ensure compliance.</p> <p>No Elders were found to have been affected by the deficient practice. All Elders had the potential to be affected by the deficient practice. The Property Manager and the Administrator were reeducated by Lex Brasher about the necessity of including the 5 minute cool down documentation and the generator transfer time documentation after each monthly load test. Both the Property Manager and the Administrator reread the Life Safety regulation on the proper monthly testing of a generator that includes a 5 minute cool down and generator transfer time documentation following each load test. An audit tool was designed to be used to</p>	04/04/2016

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 155770	X2) MULTIPLE CONSTRUCTION A. BUILDING <u>06</u> B. WING _____	X3) DATE SURVEY COMPLETED 03/15/2016
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NAME OF PROVIDER OR SUPPLIER VILLAS OF GUERIN WOODS	STREET ADDRESS, CITY, STATE, ZIP CODE 1002 SISTER BARBARA WAY GEORGETOWN, IN 47122
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	<p>minimum time delay of 5 minutes shall be provided for unloaded running of the Emergency Power Supply (EPS) prior to shutdown. This delay provides additional engine cool down. This time delay shall not be required on small (15 kW or less) air-cooled prime movers. This deficient practice could affect all residents, as well as staff and visitors.</p> <p>Findings include:</p> <p>Based on review of the facility's monthly generator log on 03/15/16 between 12:15 p.m. and 3:00 p.m. with the Administrator and the Property Manager present, the generator log form documented the generator was tested weekly for over 30 minutes under load, however, there was no documentation on the form that showed the generator had a cool down time following its load test, furthermore, there was no documentation that showed the generator transfer time being recorded following its load test. During an interview at the time of record review, the Administrator and the Property Manager confirmed the monthly generator log did not include documentation of a cool down time being recorded or the generator transfer time being recorded.</p> <p>3.1-19(b)</p>		<p>monitorthemonthly generator test to include the documentation of a 5 minute cool downtime and documentation of the generator transfer time after the load test (See exhibit #2). The Property Manager/designee will audit the monthly generator tests monthly X's 3, quarterly X's 3 then annually.</p> <p>The Administrator will assure the audits are conducted and the results reviewed by the Q.A.P.I. committee monthly X's 3, then quarterly X's 3 to ensure compliance.</p>	

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 155770	X2) MULTIPLE CONSTRUCTION A. BUILDING 06 B. WING _____	X3) DATE SURVEY COMPLETED 03/15/2016
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K 0000 Bldg. 07	<p>A Life Safety Code Recertification and State Licensure Survey was conducted by the Indiana State Department of Health in accordance with 42 CFR 483.70(a).</p> <p>Survey Date: 03/15/16</p> <p>Facility Number: 011509 Provider Number: 155770 AIM Number: 200909280</p> <p>At this Life Safety Code survey, Villas of Guerin Woods, was found in substantial compliance with Requirements for Participation in Medicare/Medicaid, 42 CFR Subpart 483.70(a), Life Safety from Fire and the 2000 edition of the National Fire Protection Association (NFPA) 101, Life Safety Code (LSC), and 410 IAC 16.2. Villa 1007 was surveyed with Chapter 18, New Health Care Occupancies. The facility is using a categorical waiver for a residential kitchen open to the corridor, which meets the requirements of the 2012 edition of the National Fire Protection Association (NFPA) 101, Life Safety Code (LSC), Section 19.3.2.5.3.</p> <p>This one story facility was determined to be of Type V (111) construction and fully</p>	K 0000	Submission of this plan of correction shall not constitute an admission by the Villas of Guerin Woods to the allegations contained in this survey report. This plan of correction is submitted in accordance with the requirements of the state and federal laws.	
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STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 155770		X2) MULTIPLE CONSTRUCTION A. BUILDING <u>07</u> B. WING _____		X3) DATE SURVEY COMPLETED 03/15/2016	
NAME OF PROVIDER OR SUPPLIER VILLAS OF GUERIN WOODS				STREET ADDRESS, CITY, STATE, ZIP CODE 1002 SISTER BARBARA WAY GEORGETOWN, IN 47122			
(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			
K 0144 SS=C Bldg. 07	<p>sprinkled. The facility has a fire alarm system with smoke detection in the corridors, spaces open to the corridors, and all resident sleeping rooms. The facility has a capacity of 10 and had a census of 10 at the time of this visit.</p> <p>All areas where residents have customary access were sprinkled and all areas providing facility services were sprinkled.</p> <p>Quality Review completed on 03/21/16 - DA</p> <p>NFPA 101 LIFE SAFETY CODE STANDARD Generators inspected weekly and exercised under load for 30 minutes per month and shall be in accordance with NFPA 99 and NFPA 110. 3-4.4.1 and 8-4.2 (NFPA 99), Chapter 6 (NFPA 110)</p> <p>Based on record review and interview, the facility failed to ensure 1 of 1 emergency generator (home 1007 and 1008 share a generator) was allowed a 5 minute cool down period after each load test, furthermore, the facility failed to provide documentation that the transfer time for the generator was being recorded after each load test. LSC 19.2.9.1 refers to LSC 7.9 which refers to LSC 7.9.2.3 which requires generators to be installed, tested and maintained in accordance with NFPA 110, Standard for Emergency and Standby Power Systems, 1999 Edition.</p>	K 0144	No Elders were found to have been affected by the deficientpractice. All Elders had the potential to be affected by the deficientpractice. The Property Manager and the Administrator were reeducated by LexBrasher about the necessity of including the 5 minute cool down documentationand the generator transfer time documentation after each monthly load test.Both the Property Manager and the Administrator reread the Life Safetyregulation on the proper monthly testing of a generator that includes a 5minute cool down	04/04/2016			

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 155770	X2) MULTIPLE CONSTRUCTION A. BUILDING <u>07</u> B. WING _____	X3) DATE SURVEY COMPLETED 03/15/2016
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NAME OF PROVIDER OR SUPPLIER VILLAS OF GUERIN WOODS	STREET ADDRESS, CITY, STATE, ZIP CODE 1002 SISTER BARBARA WAY GEORGETOWN, IN 47122
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	<p>NFPA 110, 4-2.4.8 Time Delay on Engine Shutdown requires that a minimum time delay of 5 minutes shall be provided for unloaded running of the Emergency Power Supply (EPS) prior to shutdown. This delay provides additional engine cool down. This time delay shall not be required on small (15 kW or less) air-cooled prime movers. This deficient practice could affect all residents, as well as staff and visitors.</p> <p>Findings include:</p> <p>Based on review of the facility's monthly generator log on 03/15/16 between 12:15 p.m. and 3:00 p.m. with the Administrator and the Property Manager present, the generator log form documented the generator was tested weekly for over 30 minutes under load, however, there was no documentation on the form that showed the generator had a cool down time following its load test, furthermore, there was no documentation that showed the generator transfer time being recorded following its load test. During an interview at the time of record review, the Administrator and the Property Manager confirmed the monthly generator log did not include documentation of a cool down time being recorded or the generator transfer time being recorded.</p>		<p>and generator transfer time documentation following each loadtest. An audit tool was designed to be used to monitor the monthly generator test to include the documentation of a 5 minute cool downtime and documentation of the generator transfer time after the load test (See exhibit #2). The Property Manager/designee will audit the monthly generator tests monthly X's 3, quarterly X's 3 then annually.</p> <p>The Administrator will assure the audits are conducted and the results reviewed by the Q.A.P.I. committee monthly X's 3, then quarterly X's 3 to ensure compliance.</p>	

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 155770	X2) MULTIPLE CONSTRUCTION A. BUILDING <u>07</u> B. WING _____	X3) DATE SURVEY COMPLETED 03/15/2016
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K 0000 Bldg. 08	<p>3.1-19(b)</p> <p>A Life Safety Code Recertification and State Licensure Survey was conducted by the Indiana State Department of Health in accordance with 42 CFR 483.70(a).</p> <p>Survey Date: 03/15/16</p> <p>Facility Number: 011509 Provider Number: 155770 AIM Number: 200909280</p> <p>At this Life Safety Code survey, Villas of Guerin Woods, was found in substantial compliance with Requirements for Participation in Medicare/Medicaid, 42 CFR Subpart 483.70(a), Life Safety from Fire and the 2000 edition of the National Fire Protection Association (NFPA) 101, Life Safety Code (LSC), and 410 IAC 16.2. Villa 1008 was surveyed with Chapter 18, New Health Care Occupancies. The facility is using a categorical waiver for a residential kitchen open to the corridor, which meets the requirements of the 2012 edition of the National Fire Protection Association (NFPA) 101, Life Safety Code (LSC), Section 19.3.2.5.3.</p>	K 0000	Submission of this plan of correction shall not constitute an admission by the Villas of Guerin Woods to the allegations contained in this survey report. This plan of correction is submitted in accordance with the requirements of the state and federal laws.	

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 155770	X2) MULTIPLE CONSTRUCTION A. BUILDING <u>08</u> B. WING _____	X3) DATE SURVEY COMPLETED 03/15/2016
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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
K 0144 SS=C Bldg. 08	<p>This one story facility was determined to be of Type V (111) construction and fully sprinkled. The facility has a fire alarm system with smoke detection in the corridors, spaces open to the corridors, and all resident sleeping rooms. The facility has a capacity of 8 and had a census of 8 at the time of this visit.</p> <p>All areas where residents have customary access were sprinkled and all areas providing facility services were sprinkled.</p> <p>Quality Review completed on 03/21/16 - DA</p> <p>NFPA 101 LIFE SAFETY CODE STANDARD Generators inspected weekly and exercised under load for 30 minutes per month and shall be in accordance with NFPA 99 and NFPA 110. 3-4.4.1 and 8-4.2 (NFPA 99), Chapter 6 (NFPA 110)</p> <p>Based on record review and interview, the facility failed to ensure 1 of 1 emergency generator (home 1007 and 1008 share a gererator) was allowed a 5 minute cool down period after each load test, furthermore, the facility failed to provide documentation that the transfer time for the generator was being recorded after each load test. LSC 19.2.9.1 refers to LSC 7.9 which refers to LSC 7.9.2.3 which requires generators to be installed,</p>	K 0144	No Elders were found to have been affected by the deficientpractice. All Elders had the potential to be affected by the deficientpractice. The Property Manager and the Administrator were reeducated by LexBrasher about the necessity of including the 5 minute cool down documentationand the generator transfer time documentation after each monthly load test.Both the Property Manager and the	04/04/2016

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 155770	X2) MULTIPLE CONSTRUCTION A. BUILDING <u>08</u> B. WING _____	X3) DATE SURVEY COMPLETED 03/15/2016
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NAME OF PROVIDER OR SUPPLIER VILLAS OF GUERIN WOODS	STREET ADDRESS, CITY, STATE, ZIP CODE 1002 SISTER BARBARA WAY GEORGETOWN, IN 47122
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	<p>tested and maintained in accordance with NFPA 110, Standard for Emergency and Standby Power Systems, 1999 Edition. NFPA 110, 4-2.4.8 Time Delay on Engine Shutdown requires that a minimum time delay of 5 minutes shall be provided for unloaded running of the Emergency Power Supply (EPS) prior to shutdown. This delay provides additional engine cool down. This time delay shall not be required on small (15 kW or less) air-cooled prime movers. This deficient practice could affect all residents, as well as staff and visitors.</p> <p>Findings include:</p> <p>Based on review of the facility's monthly generator log on 03/15/16 between 12:15 p.m. and 3:00 p.m. with the Administrator and the Property Manager present, the generator log form documented the generator was tested weekly for over 30 minutes under load, however, there was no documentation on the form that showed the generator had a cool down time following its load test, furthermore, there was no documentation that showed the generator transfer time being recorded following its load test. During an interview at the time of record review, the Administrator and the Property Manager confirmed the monthly generator log did not include</p>		<p>Administrator reread the Life Safety regulation on the proper monthly testing of a generator that includes a 5 minute cool down and generator transfer time documentation following each loadtest. An audit tool was designed to be used to monitor the monthly generator test to include the documentation of a 5 minute cool downtime and documentation of the generator transfer time after the load test (See exhibit #2). The Property Manager/designee will audit the monthly generator tests monthly X's 3, quarterly X's 3 then annually.</p> <p>The Administrator will assure the audits are conducted and the results reviewed by the Q.A.P.I. committee monthly X's 3, then quarterly X's 3 to ensure compliance.</p>	

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	documentation of a cool down time being recorded or the generator transfer time being recorded. 3.1-19(b)				