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| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:<br><br>155549 | X2) MULTIPLE CONSTRUCTION<br>A. BUILDING 01<br>B. WING _____ | X3) DATE SURVEY COMPLETED<br><br>03/12/2013 |
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| NAME OF PROVIDER OR SUPPLIER<br><br>WILLOWBEND LIVING CENTER | STREET ADDRESS, CITY, STATE, ZIP CODE<br>7524 E JACKSON ST<br>MUNCIE, IN 47302 |
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|--------------------|---|---------------|---|----------------------|
| K010000            | <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: 03/12/13</p> <p>Facility Number: 000681<br/>Provider Number: 155549<br/>AIM Number: 100286100</p> <p>Surveyor: Phillip Komsiski, Life Safety Code Specialist</p> <p>At this Life Safety Code survey, Willowbend Living Center 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), Chapter 19, Existing Health Care Occupancies and 410 IAC 16.2.</p> <p>This one story facility was determined to be of Type II (111) construction and was fully sprinklered. The facility has a fire alarm system with smoke detection in the corridors, spaces open to the corridors and battery powered smoke detectors in all</p> | K010000       | 1/2. No residents were affected with the potential for all residents to be affected. Emergency lighting has been placed on the preventative maintenance program check log, is being tested on a routine basis, and documentation is being completed as required. 3. The preventative maintenance program has been reviewed and no changes are indicated at this time. The Maintenance Director has been re-educated on preventative maintenance with special emphasis on emergency lighting. 4. The Maintenance Director or designee will test emergency lights once a month for thirty seconds and ninety minute yearly on an ongoing basis to ensure proper functioning and complete the documentation required. Should concern(s) be noted, corrective measures will be completed. The results of these tests will be reviewed during the facility's quarterly QA meetings and the plan adjusted accordingly as indicated. |                      |

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>resident rooms. The facility has a capacity of 60 and had a census of 47 at the time of this survey.</p> <p>All areas where the residents have customary access were sprinklered. All areas providing facility services were sprinklered except for the two detached barns used for facility storage which were not sprinklered.</p> <p>Quality Review by Robert Booher, Life Safety Code Specialist-Medical Surveyor on 03/19/13.</p> <p>The facility was found in substantial compliance with the aforementioned regulatory requirements as evidenced by the following:</p> |   |   |                      |   |

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| K010046<br>SS=C  | <p>NFPA 101<br/>LIFE SAFETY CODE STANDARD<br/>Emergency lighting of at least 1½ hour duration is provided in accordance with 7.9.19.2.9.1.</p> <p>Based on observation, record review and interview; the facility failed to ensure 11 of 11 emergency battery backup lights were tested monthly for 30 seconds or annually for 90 minutes duration to ensure lighting during periods of power outages to protect all residents. Section 7.9.3 requires a functional test shall be conducted on every required emergency lighting system at 30 day intervals for not less than 30 seconds. An annual test shall be conducted on every required battery powered emergency lighting system for not less than 1 1/2 hours. Equipment shall be fully operational for the duration of the test. Written records of visual inspections and tests shall be kept by the owner for inspection by the authority having jurisdiction. This deficient practice could affect all residents in the facility.</p> <p>Findings include:</p> <p>Based on observation on 03/12/13 during the tour between 2:30 p.m. and 3:30 p.m. with the Maintenance Supervisor, all eleven battery operated emergency lights were working at the time of inspection.<br/>Based on review of Battery Operated</p> | K010046   | <p>1/2. No residents were affected with the potential for all residents to be affected. Emergency lighting has been placed on the preventative maintenance program check log, is being tested on a routine basis, and documentation is being completed as required. 3. The preventative maintenance program has been reviewed and no changes are indicated at this time (See Attachment A). The Maintenance Director has been re-educated on preventative maintenance with special emphasis on emergency lighting (See Attachment B). An Emergency Lighting Battery Test form has been implemented (See Attachment C). 4. The Maintenance Director or designee will test emergency lights once a month for thirty seconds and ninety minute yearly on an ongoing basis to ensure proper functioning and complete the documentation required. Should concern(s) be noted, corrective measures will be completed. The results of these tests will be reviewed during the facility's quarterly QA meetings and the plan adjusted accordingly as indicated.</p> | 03/22/2013   |  |   |  |

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|  | <p>Emergency light check list on 03/12/13 at 3:45 p.m. with the Maintenance Supervisor, it was not documented the emergency battery backup lights were tested monthly for thirty seconds or annually for ninety minutes. Based on interview concurrent with record review, it was acknowledged by the Maintenance Supervisor the emergency battery backup lights were tested, but they lacked documentation for the thirty second monthly and ninety minute annual tests.</p> <p>3.1-19(b)</p> |   |   |                      |   |