

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 155177	X2) MULTIPLE CONSTRUCTION A. BUILDING 01 B. WING _____	X3) DATE SURVEY COMPLETED 01/29/2015
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NAME OF PROVIDER OR SUPPLIER WESTMINSTER VILLAGE - WEST LAFAYETTE	STREET ADDRESS, CITY, STATE, ZIP CODE 2741 N SALISBURY ST WEST LAFAYETTE, IN 47906
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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: 01/29/15</p> <p>Facility Number: 000093 Provider Number: 155177 AIM Number: NA</p> <p>Surveyor: Phillip Komsiski, Life Safety Code Specialist</p> <p>At this Life Safety Code survey, Westminster Village-West Lafayette was found not in compliance with Requirements for Participation in Medicare/Medicaid, 42 CFR Subpart 483.70(a), Life Safety from Fire, the 2000 edition of the NFPA (National Fire Protection Association) 101, LSC (Life Safety Code) and 410 IAC 16.2. The Courtyard was surveyed with Chapter 19, Existing Health Care Occupancies.</p> <p>The facility consists of the Courtyard, Pavilion and Terrace in a one story sprinklered building determined to be of Type III (211) construction. The facility has a fire alarm system with smoke detection in the corridors, resident</p>	K010000	K 000 The facility has elected to utilize a Categorical Waiver pertaining to the café kitchen open to the corridor. Quality Review by Dennis Austill, Life Safety Code Specialist on 02/06/2015	

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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K010070 SS=E	<p>sleeping rooms and spaces open to the corridors. The facility has a capacity of 72 and had a census of 69 at the time of this survey.</p> <p>All areas where the residents have customary access were sprinklered and all areas providing facility services were sprinklered.</p> <p>The facility has elected to utilize a Categorical Waiver pertaining to the cafe kitchen open to the corridor.</p> <p>Quality Review by Dennis Austill, Life Safety Code Specialist on 02/06/15.</p> <p>The facility was found not in compliance with the aforementioned regulatory requirements as evidenced by the following:</p> <p>NFPA 101 LIFE SAFETY CODE STANDARD Portable space heating devices are prohibited in all health care occupancies, except in non-sleeping staff and employee areas where the heating elements of such devices do not exceed 212 degrees F. (100 degrees C) 19.7.8 Based on observation, interview and record review, the facility failed to</p>	K010070	K 070 The portable space heating device was removed from the	02/19/2015			

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K040000	<p>regulate the use of 1 of 1 portable space heaters observed in non resident rooms. This deficient practice could affect any resident on Administrative hall as well as visitors and staff.</p> <p>Findings include:</p> <p>Based on observation on 01/29/15 at 1:25 p.m. with the Maintenance Supervisor, one portable space heater was plugged in and running unattended in the Assistant Dietary office adjacent to Administrative hall. Based on interview on 01/29/15 concurrent with the observation, it was acknowledged by the Maintenance Supervisor the space heater was being used unattended and no documentation pertaining to the portable space heater was available for review.</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</p>	K040000	<p>assistant dietary office on 1/29/15. The facility was inspected to determine if there were other portable space heating devices in use. Upon completion of the inspection, the maintenance supervisor determined that there were no other portable space heating devices in use. Portable space heating devices may be utilized in non-sleeping staff and employee areas only where the heating element does not exceed 212 degrees F. These devices will be inspected before use and will be powered to the "OFF" position when there are no staff present in these areas. On 2/2/15, the Assistant Dietary Director received in-service training on the use of the portable space heating device. The maintenance supervisor or his designee will inspect the portable space heating device monthly to ensure the device is functioning properly. Findings of the inspections will be reported to the Quality Assurance Performance Improvement (QAPI) committee and a performance plan will be established based on the findings. The QAPI committee will meet monthly.</p> <p>K 000 The facility has elected to utilize a Categorical Waiver pertaining to the café kitchen open to the corridor. Quality</p>		

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	<p>accordance with 42 CFR 483.70(a).</p> <p>Survey Date: 01/29/15</p> <p>Facility Number: 000093 Provider Number: 155177 AIM Number: NA</p> <p>Surveyor: Phillip Komsiski, Life Safety Code Specialist</p> <p>At this Life Safety Code survey, Westminster Village-West Lafayette was found in compliance with Requirements for Participation in Medicare/Medicaid, 42 CFR Subpart 483.70(a), Life Safety from Fire, the 2000 edition of the NFPA (National Fire Protection Association) 101, LSC (Life Safety Code) and 410 IAC 16.2. The Terrace and Pavilion were surveyed with Chapter 18, New Health Care Occupancies.</p> <p>The facility consists of the Courtyard, Pavilion and Terrace in a one story sprinklered building determined to be of Type III (211) construction. The facility has a fire alarm system with smoke detection in the corridors, resident sleeping rooms and spaces open to the corridors. The facility has a capacity of 72 and had a census of 69 at the time of this survey.</p>		Review by Dennis Austill, Life Safety Code Specialist on 02/06/2015				

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