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| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 155744 | X2) MULTIPLE CONSTRUCTION A. BUILDING 01 B. WING _____ | X3) DATE SURVEY COMPLETED 03/04/2015 |
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| NAME OF PROVIDER OR SUPPLIER LUTHERAN LIFE VILLAGES | STREET ADDRESS, CITY, STATE, ZIP CODE 351 N ALLEN CHAPEL RD KENDALLVILLE, IN 46755 |
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| K 000 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: 03/04/14</p> <p>Facility Number: 000570 Provider Number: 155744 AIM Number: 100275010</p> <p>Surveyors: Amy Kelley, Life Safety Code Specialist and Scott Wytosick, Life Safety Code Specialist</p> <p>At this Life Safety Code survey, Lutheran Life Villages was found not in 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 with a basement was determined to be of Type V (111) construction and was fully sprinklered. The facility has a fire alarm system with smoke detection in the corridors, areas</p> | K 000 | | |
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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 056 SS=D Bldg. 01 | <p>open to the corridors and hard wired smoke detectors in the resident rooms. The facility has a capacity of 101 and had a census of 75 at the time of this survey.</p> <p>All areas where the residents have customary access are sprinklered. The facility does have a garage providing facility services that was not sprinklered.</p> <p>Quality Review by Dennis Austill, Life Safety Code Specialist on 03/13/15.</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 If there is an automatic sprinkler system, it is installed in accordance with NFPA 13, Standard for the Installation of Sprinkler Systems, to provide complete coverage for all portions of the building. The system is properly maintained in accordance with NFPA 25, Standard for the Inspection, Testing, and Maintenance of Water-Based Fire Protection Systems. It is fully supervised. There is a reliable, adequate water supply for the system. Required sprinkler systems are equipped with water flow and tamper switches, which are electrically connected to the building fire alarm system. 19.3.5</p> | | | |

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| | <p>1. Based on observation and interview, the facility failed to ensure 1 of 1 east hall shower rooms, 1 of 1 east hall pantry rooms, and 1 of 1 west hall shower rooms sprinkler heads were installed in accordance with NFPA 13, 1999 Edition, Installation of Sprinkler Systems, 5-3.1.5.2 states when existing light hazard systems are converted to use quick response or residential sprinklers, all sprinklers in a smoke compartment shall be changed. This deficient practice could affect staff members and 1-2 residents in each shower room.</p> <p>Findings include:</p> <p>Based on observations and interview on 3/4/15 at 12:27 p.m. to 1:40 p.m., the Director of Maintenance confirmed the shower room in the east hall, the pantry room in the east hall, and the shower room in the west hall had a mixture of quick response sprinkler heads with the thin glass rod and standard response sprinkler heads with the thick glass rods. Based on an interview with the Director of Maintenance at the time of observation, he acknowledged the mix of quick response sprinkler heads with standard response sprinkler heads.</p> <p>3.1-19(b)</p> | K 056 | <p>Pranger Enterprises will furnish and install eight (8) new,quick response sidewall sprinkler heads by Tuesday, March 31 (See attachment 1).</p> <p>Pranger Enterprises will furnish and install two (2) newquick response sprinkler heads in Record Room by Tuesday, March 31 (Seeattachment 1).</p> | 03/31/2015 | | | |

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| K 062 SS=D Bldg. 01 | <p>2. Based on observation and interview, the facility failed to ensure 1 of 1 sprinkler head was installed in accordance with NFPA 13, Standard for the Installation of Sprinkler Systems. NFPA 13, 1999 edition, Section 5-6.4.1.1 states under unobstructed construction, the distance between the sprinkler deflector and the ceiling shall be a minimum of 1 in. (25.4 mm) and a maximum of 12 in. (305 mm). This deficient practice could affect 1 staff member.</p> <p>Findings include:</p> <p>Based on observation with the Director of Maintenance at 11:31 a.m. on 3/4/15, the sprinkler head was mounted more than the maximum of 12 inches from the ceiling in the record storage room. At the time of observation, the Director of Maintenance measured and acknowledged the sprinkler head was mounted 41 inches from the ceiling.</p> <p>3.1-19(b)</p> <p>NFPA 101 LIFE SAFETY CODE STANDARD Required automatic sprinkler systems are continuously maintained in reliable operating condition and are inspected and tested</p> | | | |

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| | <p>periodically. 19.7.6, 4.6.12, NFPA 13, NFPA 25, 9.7.5</p> <p>Based on observation and interview, the facility failed to provide a complete supply of spare sprinklers for the automatic sprinkler system in accordance with NFPA 25, 1998 Edition 2-4.1.4 which requires a supply of at least six spare sprinklers shall be stored in a cabinet on the premises for replacement purposes. The stock of spare sprinklers shall be proportionally representative of the types and temperature ratings of the system sprinklers. A minimum of two sprinklers of each type and temperature rating installed shall be provided. This deficient practice could affect all residents if the sprinkler system had to be shut down because a proper sprinkler wasn't available as a replacement.</p> <p>Findings include:</p> <p>Based on observation with the Director of Maintenance on 3/4/15 at 11:42 p.m., there were no quick response sprinklers in the spare sprinkler cabinet. Based on observations during the tour, quick response sprinkler heads were installed in the shower room in the east hall, pantry room in the east hall, and shower room in the west hall. This was acknowledged by the Maintenance Supervisor at the time of observation.</p> | K 062 | Pranger Enterprises will furnish and install (1) sprinkler head box with six (6) spare quickresponse sprinkler heads and wrench by Tuesday, March 31 (See attachment 1). | 03/31/2015 | | | |

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| K 067 SS=F Bldg. 01 | <p>3.1-19(b)</p> <p>NFPA 101 LIFE SAFETY CODE STANDARD Heating, ventilating, and air conditioning comply with the provisions of section 9.2 and are installed in accordance with the manufacturer's specifications. 19.5.2.1, 9.2, NFPA 90A, 19.5.2.2</p> <p>Based on interview and record review, the facility failed to ensure an undetermined number of dampers in the ductwork at smoke barriers and fire barriers were inspected and provided necessary maintenance at least every four years in accordance with NFPA 90A to protect 88 of 88 residents. LSC 19.5.2.1 refers to Section 9.2. LSC 9.2.1 requires air conditioning, heating, ventilating ductwork and related equipment shall be in accordance with NFPA 90A, Standard for the Installation of Air-Conditioning and Ventilating Systems. NFPA 90A, 1999 Edition, 3.4.7, Maintenance, requires at least every 4 years, fusible links shall be removed; all dampers shall be operated to verify they fully close; the latch, if provided, shall be checked, and moving parts shall be lubricated as necessary. This deficient practice affects all residents, staff and visitors.</p> <p>Findings include:</p> | K 067 | Koorsen Fire and Security Co. contracted Dirig Sheet Metalto complete the inspection which was done on March 20,2015. Inspection is attached for your review indicatingall inspections passed (See attachment 2). | 03/20/2015 |

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| K 147 SS=D Bldg. 01 | <p>Based on record review at 11:15 a.m. on 3/4/15, the Director of Maintenance failed to provide any documentation of damper inspection during record review. Based on interview, at the time of record review, the Director of Maintenance acknowledged the facility has dampers in the building but was unable to confirm the number of dampers.</p> <p>3.1-19(b)</p> <p>NFPA 101 LIFE SAFETY CODE STANDARD Electrical wiring and equipment is in accordance with NFPA 70, National Electrical Code. 9.1.2</p> <p>Based on observation and interview, the facility failed to ensure 2 of 2 flexible cords such as extension cord power strips were not used as a substitute for fixed wiring. LSC 9.1.2 requires electrical wiring and equipment to comply with NFPA 70, National Electrical Code, 1999 Edition. NFPA 70, Article 400-8 requires unless specifically permitted, flexible cords and cables shall not be used as a substitute for fixed wiring of a structure. This deficient practice was not in a resident care area but could affect staff.</p> | K 147 | At the time of observation, the Director of Maintenance acknowledged and removed the power strip in the maintenance room. He installed an electrical outlet on Friday, March 5 to eliminate the need of a power strip in the future in that location. | 03/05/2015 | | | |

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| K 160 SS=E Bldg. 01 | <p>Findings include: Based on an observation with the Director of Maintenance on 3/4/15 at 11:23 a.m., an extension cord power strip was plugged in and providing power to another extension cord power strip in the maintenance room. At the time of observation the Director of Maintenance acknowledged and removed the power strip in the maintenance room. 3.1-19(b)</p> <p>NFPA 101 LIFE SAFETY CODE STANDARD All existing elevators, having a travel distance of 25 ft. or more above or below the level that best serves the needs of emergency personnel for fire fighting purposes, conform with Firefighter's Service Requirements of ASME/ANSI A17.3, Safety Code for Existing Elevators and Escalators. 19.5.3, 9.4.3.2</p> <p>Based on observation and interview; the facility failed to ensure 1 of 1 elevator equipment rooms was provided with an electrical shunt trip when provided with sprinkler coverage. NFPA 13, 5-13.6.2 states automatic sprinklers in elevator machine rooms shall be of ordinary or intermediate temperature rating. ASME/ANSI A17.1 permits sprinklers in elevator machine rooms when there is a means for disconnecting the main power supply to the affected elevator</p> | K 160 | <p>Electrical contractor provided shunt breaker and wired infor Koorson Fire and Safety Co. on March 25. Koorsons will install one (1) module, one (1) heat detector and one (1)relay module. Technician will connectmodules into existing Notifier fire alarm panel and program so that relay willactivate shunt trip relay when heat detector goes into alarm. Project will be completed on March 31, 2015 (See attachment 3).</p> | 03/31/2015 | | | |

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| | <p>automatically upon or prior to the application of water from the sprinkler located in the elevator machine room. This deficient practice would affect staff and 3-4 residence in the therapy room.</p> <p>Findings include:</p> <p>Based on observation with the Director of Maintenance at 11:50 a.m. on 3/4/15, the elevator equipment room contained 1 sprinkler head and a smoke detector. Based on interview at the time of observation, the Director of Maintenance was unable to confirm the elevator equipment was provided with an elevator shunt trip.</p> <p>3.1-19(b)</p> | | | | |