

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	X2) MULTIPLE CONSTRUCTION A. BUILDING 00 B. WING	X3) DATE SURVEY COMPLETED 06/07/2013
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NAME OF PROVIDER OR SUPPLIER  LAMPLIGHT INN AT THE LELAND	STREET ADDRESS, CITY, STATE, ZIP CODE 900 SOUTH A STREET RICHMOND, IN 47374
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R000000	<p>This visit was for a State Residential Licensure Survey.</p> <p>Survey dates: June 5, 6 and 7, 2013</p> <p>Facility number: 012497 Provider number: 012497 AIM number: N/A</p> <p>Survey team: Sharon Lasher RN, TC (June 6 and 7, 2013) Barbara Gray RN Angel Tomlinson RN (June 6, 2013) Leslie Parrett RN (June 6, 2013)</p> <p>Census bed type: Residential: 78 Total: 78</p> <p>Census bed type: Other 78 Total: 78</p> <p>Sample: 9</p> <p>These state findings are cited in accordance with 410 IAC 16.2.</p> <p>Quality review 6/13/13 by Suzanne Williams, RN</p>	R000000	<p>This Plan of Correction (POC) is prepared and executed because it is required by the provisions of State and Federal Law, and not because Lamplight Inn at the Leland agrees with the allegations contained there-in. Please let these POC responses serve as the facility's Credible Allegation of Compliance. We respectfully request paper compliance.</p>	

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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R000144	<p>410 IAC 16.2-5-1.5(a) Sanitation and Safety Standards - Deficiency (a) The facility shall be clean, orderly, and in a state of good repair, both inside and out, and shall provide reasonable comfort for all residents.</p> <p>Based on observation and interview, the facility failed to provide clean carpeting, for 8 of 8 floors with carpeted areas, utilized by 78 of 78 residents.</p> <p>Findings include:</p> <p>An interview with the Administrator on 6/6/13 at 10:12 A.M., indicated professional carpet cleaners had cleaned carpets in the main floor lobby and dining room "approximately 3 weeks ago." The Administrator indicated the carpets were old and stained, and the stains would reappear in just a few days after the carpets had been professionally cleaned. He indicated the facility's business plan within the next year included having new flooring laid in the first floor lobby, dining room, and the mezzanine next to the second floor ball room. He indicated the carpeting in the hallways and the landings outside the elevators on floors 3 through 7 were stained, but he did not believe those carpeted areas were in the business plans to be replaced.</p>	R000144	<p><b>R144</b> 1&amp;2. Each area of concern and it's remedy is listed below: <u>MAIN FLOOR LOBBY, DINING RM &amp; 2 ND FLOOR MEZZANINE</u> – See attached agreement (uploaded) with Huard Constr. for the replacement of existing flooring in each area to be completed by 11/30/2013. <u>ELEVATOR LANDING AREAS FLOORS 3-7</u> – Existing flooring in each landing area will be replaced with new flooring by internal staff. The work will start in July 2013, continue through 12/30/2013, completing a landing area each month. <u>HALLWAYS FLOORS 3-7, EXERCISE RM LOWER LEVEL</u> – Existing floor replacement in these areas will be appropriated for completion during the first quarter of 2014. See attached letter.3&amp;4. Administrator will monitor repairs &amp; report to ownership on a monthly basis, until replacements are complete and compliance is achieved.</p>	07/20/2013			

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	<p>An environmental tour was conducted with the Maintenance Director on 6/6/13 at 10:25 A.M. The carpet in the Exercise Room in the basement had numerous areas of discoloration, ranging from rust to brownish/black in color. The carpet in the first floor lobby had numerous dark brownish/black areas of discoloration. The carpet in the second floor hallways leading to the resident's rooms, and the mezzanine next to the second floor ball room, had numerous dark brownish/black areas of discoloration. The carpeting on the 3rd, 4th, 5th, 6th, and 7th floor elevator landings and hallways leading to the residents' rooms, had numerous dark browninsh/black areas of discoloration.</p> <p>An interview with the Maintenance Director during the environmental tour, indicated the carpets were stained in the basement exercise room, main floor lobby, second floor mezzanine, 3rd, 4th, 5th, 6th, and 7th floor hallways leading to the residents' rooms, and elevator landings.</p> <p>On 6/6/13 at 10:45 A.M., during interview, Resident #9 indicated the facility needed new carpeting throughout the building.</p>			

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	On 6/7/13 at 11:35 A.M., Resident #20's Power of Attorney indicated the carpets had "so many dirty spots."						