

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  155253	X2) MULTIPLE CONSTRUCTION A. BUILDING 01 B. WING _____	X3) DATE SURVEY COMPLETED  09/29/2015
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NAME OF PROVIDER OR SUPPLIER  MEADOWOOD HEALTH PAVILION	STREET ADDRESS, CITY, STATE, ZIP CODE 2455 TAMARACK TR BLOOMINGTON, IN 47408
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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: 09/29/15</p> <p>Facility Number: 000156 Provider Number: 155253 AIM Number: NA</p> <p>At this Life Safety Code survey, Meadowood Health Pavilion was found not in compliance with Requirements for Participation in Medicare, 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 V (111) construction and was fully sprinklered. The facility has a fire alarm system with smoke detection in the corridor and in all areas open to the corridor. The facility has battery operated smoke detectors in resident sleeping rooms 1 through 11 and 34 through 47. The facility has single</p>	K 0000		
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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 0052 SS=F Bldg. 01	<p>station smoke detectors hard wired to the building's electrical system in resident sleeping rooms 12 through 33. The facility has a capacity of 66 and had a census of 36 at the time of this survey.</p> <p>All areas where residents have customary access were sprinklered. All areas providing facility services were sprinklered.</p> <p>Quality Review completed 10/01/15 - DA</p> <p>NFPA 101 LIFE SAFETY CODE STANDARD A fire alarm system required for life safety is installed, tested, and maintained in accordance with NFPA 70 National Electrical Code and NFPA 72. The system has an approved maintenance and testing program complying with applicable requirements of NFPA 70 and 72. 9.6.1.4</p> <p>1. Based on record review and interview, the facility failed to document annual testing of the facility fire alarm system. NFPA 72, 7-3.2 refers to fire alarm component testing frequencies in Table 7-3.2 which requires an annual fire alarm system test. Section 7-5.2 requires a permanent record of all inspections, testing and maintenance shall be provided that includes information requested in Figure 7-5.2.2. This deficient practice could affect all residents, staff and visitors in the facility.</p>	K 0052	<p>FacilityPosition: The facility has and had at the time of survey, policies and procedures in place to assure testing and maintenance of the Fire Alarm System in accordance with applicable requirements. Plan of Correction: 1. Appropriate fire system contractor has been contacted and scheduled to inspect all applicable manual fire alarm boxes and alter their report such that all tested boxes will be identified individually. Inspection has been scheduled to be completed in a timely manner</p>	10/29/2015

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	<p>Findings include:</p> <p>Based on review of Telgian Corporation "Annual Fire Alarm" inspection documentation dated 03/10/15 with the Executive Director during record review from 9:10 a.m. to 11:40 a.m. on 09/29/15, documentation of annual testing of all fire alarm system initiating devices was not available for review. A total of 52 manual fire alarm boxes were listed as being tested but the location and test results of each manual fire alarm box was not available for review. Based on interview at the time of record review, the Executive Director stated documentation of additional fire alarm system manual fire alarm boxes initiating devices testing within the most recent twelve month period was not available for review and acknowledged documentation of annual testing of all fire alarm system initiating devices was not available for review.</p> <p>3-1.19(b)</p> <p>2. Based on record review, observation and interview; the facility failed to document 1 of 1 fire alarm systems was maintained in accordance with the applicable requirements of NFPA 72, National Fire Alarm Code. NFPA 72,</p>		<p>to insure compliance. Future inspection times have been entered into PM system to properly alert Maintenance Director of upcoming inspection needs. 2. FirePanel batteries were replaced by appropriate fire system contractor on 10/01/2015. Batteries were marked with the date on installation and due date of future replacement. Future replacement times have been entered into PM system to properly alert Maintenance Director of upcoming replacement needs.</p>	

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	<p>7-3.2 requires an annual check of all fire alarm system batteries. Table 7-3.2 at Section 6 states sealed lead-acid type batteries shall be replaced every four years. Section 7-1.1.2 states system defects and malfunctions shall be corrected. NFPA 72, 7-5.2.2 states a permanent record of all inspections, testing and maintenance shall be provided. This deficient practice could affect all residents, staff and visitors.</p> <p>Findings include:</p> <p>Based on review of Telgian Corporation "Annual Fire Alarm" inspection documentation dated 03/10/15 with the Executive Director during record review from 9:10 a.m. to 11:40 a.m. on 09/29/15, the "Deficiencies" section of the inspection report stated "Battery outdated - Replace the battery(ies) in the fire panel that are outdated. Ensure that the installation date is clearly written on the new battery (ies) at the time of installation" and "The two 12 volt batteries located underneath the FACP have no install dates indicated on them. NFPA requires that FACP batteries are changed every five years. Due to being unable to confirm an install date it is recommended that these batteries are replaced" was also stated in the "Deficiencies" section of the</p>			

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K 0062 SS=F Bldg. 01	<p>aforementioned report. Based on interview at the time of record review, the Executive Director stated battery replacement documentation on or after 03/10/15 was not available for review and acknowledged fire alarm system battery replacement had not been documented on or after 03/10/15. Based on observations with the Executive Director during a tour of the facility from 11:40 a.m. to 1:20 p.m. on 09/29/15, the two fire alarm system control panel batteries had no affixed documentation stating the age or installation date of the batteries. Two batteries were observed on a table in the fire alarm system panel room but no age or date was listed on either battery and it was not known if these two batteries were intended to be replacement batteries or were the replaced batteries. Based on interview at the time of the observations, the Executive Director acknowledged it could not be assured fire alarm system control panel batteries were replaced on or after 03/10/15.</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 record review, observation and interview; the facility failed to ensure quarterly sprinkler inspections were conducted for the sprinkler system for 1 of 4 calendar quarters. LSC 4.6.12.1 requires any device, equipment or system required for compliance with this Code to be maintained in accordance with applicable NFPA requirements. Sprinkler systems shall be properly maintained in accordance with NFPA 25, Standard for the Inspection, Testing, and Maintenance of Water-Based Fire Protection Systems. NFPA 25, 1-8 requires records of inspections and tests of the sprinkler system and its components shall be made available to the authority having jurisdiction upon request. This deficient practice could affect all residents, staff and visitors in the facility.</p> <p>Findings include:</p> <p>Based on record review with the Executive Director during record review from 9:10 a.m. to 11:40 a.m. on 09/29/15, documentation of a quarterly sprinkler inspection for the fourth quarter (October, November, December) 2014 was not available for review. Based on interview at the time of record review,</p>	K 0062	<p>FacilityPosition: The facility has and had at the time of survey, policies and procedures in place to assure testing and maintenance of the automaticsprinkler system in accordance with applicable requirements. Plan of Correction: Appropriate fire system contractor has completed appropriate inspections to the automatic sprinkler system – mostrecently 08/2015. Administrator, Executive Director and Maintenance Director reviewed and updated inspectionbook by 10/9/2015 to insure documentation of required inspections are accountedfor and accessible. Future inspection timeshave been entered into PM system to properly alert Maintenance Director of upcoming inspection needs</p>	10/29/2015

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	<p>the Executive Director acknowledged documentation of a quarterly sprinkler inspection for the fourth quarter 2014 was not available for review. Based on observations with the Executive Director during a tour of the facility from 11:40 a.m. to 1:20 p.m. on 09/29/15, calendar quarter sprinkler inspection tags affixed to the wet and dry sprinkler system risers did not document sprinkler inspections were conducted in the fourth quarter of 2014. Based on interview at the time of the observations, the Executive Director acknowledged documentation of a quarterly sprinkler inspection for the fourth quarter 2014 was not available for review.</p> <p>3.1-19(b)</p>						