STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER	X2) MULTIPLE CONSTRUCTION	X3) DATE SURVEY COMPLETED
	155126	A. BUILDING -- B. WING	04/23/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP COD
SPRINGS VALLEY MEADOWS	457 S SR 145 FRENCH LICK, IN 47432

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIE (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETION DATE
E 0000 Bldg. --	An Emergency Preparedness Survey was conducted by the Indiana Department of Health in accordance with 42 CFR 483.73. Survey Date: 04/23/24 Facility Number: 000054 Provider Number: 155126 AIM Number: 100287850 At this Emergency Preparedness survey, Springs Valley Meadows was found in substantial compliance with Emergency Preparedness Requirements for Medicare and Medicaid Participating Providers and Suppliers, 42 CFR 483.73. The facility has 74 certified beds. At the time of the survey, the census was 72. Quality Review completed on 04/25/24	E 0000	This Plan of Correction constitutes the written allegation of compliance for the deficiencies cited. However, submission of this Plan of Correction is not an admission that a deficiency exists or that one was cited correctly. The Plan of Correction is submitted to meet requirements established by state and federal law. Springs Valley Meadows desires this Plan of Correction to be considered the facility's Allegation of Compliance. We would like to request a desk review, please feel free to contact Riley Widdifield, Executive Director should you need any additional information to support the desk review. Thank you for your consideration.	
E 0041 SS=C Bldg. --	482.15(e), 483.73(e), 485.625(e) Hospital CAH and LTC Emergency Power §482.15(e) Condition for Participation: (e) Emergency and standby power systems. The hospital must implement emergency and standby power systems based on the emergency plan set forth in paragraph (a) of this section and in the policies and procedures plan set forth in paragraphs (b)(1)(i) and (ii) of this section. §483.73(e), §485.625(e) (e) Emergency and standby power systems. The [LTC facility and the CAH] must implement emergency and standby power			

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
Riley Widdifield	Executive Director	05/10/2024

Any defiencystatement ending with an asterisk (*) denotes a deficency which the institution may be excused from correcting providing it is determin other safegaurds provide sufficient protection to the patients. (see instructions.) Except for nursing homes, the findings stated above are disclosable 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 disclo 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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	systems based on the emergency plan set forth in paragraph (a) of this section. §482.15(e)(1), §483.73(e)(1), §485.625(e)(1) Emergency generator location. The generator must be located in accordance with the location requirements found in the Health Care Facilities Code (NFPA 99 and Tentative Interim Amendments TIA 12-2, TIA 12-3, TIA 12-4, TIA 12-5, and TIA 12-6), Life Safety Code (NFPA 101 and Tentative Interim Amendments TIA 12-1, TIA 12-2, TIA 12-3, and TIA 12-4), and NFPA 110, when a new structure is built or when an existing structure or building is renovated. 482.15(e)(2), §483.73(e)(2), §485.625(e)(2) Emergency generator inspection and testing. The [hospital, CAH and LTC facility] must implement the emergency power system inspection, testing, and [maintenance] requirements found in the Health Care Facilities Code, NFPA 110, and Life Safety Code. 482.15(e)(3), §483.73(e)(3), §485.625(e)(3) Emergency generator fuel. [Hospitals, CAHs and LTC facilities] that maintain an onsite fuel source to power emergency generators must have a plan for how it will keep emergency power systems operational during the emergency, unless it evacuates. *[For hospitals at §482.15(h), LTC at §483.73(g), and CAHs §485.625(g):] The standards incorporated by reference in this section are approved for incorporation by reference by the Director of the Office of the Federal Register in accordance with 5 U.S.C. 552(a) and 1 CFR part 51. You may obtain			

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	the material from the sources listed below. You may inspect a copy at the CMS Information Resource Center, 7500 Security Boulevard, Baltimore, MD or at the National Archives and Records Administration (NARA). For information on the availability of this material at NARA, call 202-741-6030, or go to: http://www.archives.gov/federal_register/code_of_federal_regulations/ibr_locations.html. If any changes in this edition of the Code are incorporated by reference, CMS will publish a document in the Federal Register to announce the changes. (1) National Fire Protection Association, 1 Batterymarch Park, Quincy, MA 02169, www.nfpa.org, 1.617.770.3000. (i) NFPA 99, Health Care Facilities Code, 2012 edition, issued August 11, 2011. (ii) Technical interim amendment (TIA) 12-2 to NFPA 99, issued August 11, 2011. (iii) TIA 12-3 to NFPA 99, issued August 9, 2012. (iv) TIA 12-4 to NFPA 99, issued March 7, 2013. (v) TIA 12-5 to NFPA 99, issued August 1, 2013. (vi) TIA 12-6 to NFPA 99, issued March 3, 2014. (vii) NFPA 101, Life Safety Code, 2012 edition, issued August 11, 2011. (viii) TIA 12-1 to NFPA 101, issued August 11, 2011. (ix) TIA 12-2 to NFPA 101, issued October 30, 2012. (x) TIA 12-3 to NFPA 101, issued October 22, 2013. (xi) TIA 12-4 to NFPA 101, issued October 22, 2013.			

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	(xiii) NFPA 110, Standard for Emergency and Standby Power Systems, 2010 edition, including TIAs to chapter 7, issued August 6, 2009.. Based on observation and interview, the facility failed to ensure 1 of 1 temporary emergency generator was provided with an operating alarm annunciator in a location readily observed by operating personnel at a regular workstation such as a nurses' stations. NFPA 99, 2012 Edition, Health Care Facilities Code, at 6.4.1.1.17 requires a remote annunciator that is storage battery powered shall be provided to operate outside of the generating room in a location readily observed by operating personnel at a regular workstation. The annunciator shall be hard-wired to indicate alarm conditions of the emergency or auxiliary power source as follows: (1) Individual visual signals shall indicate: a. When the emergency or auxiliary power source is operating to supply power to load. b. When the battery charger is malfunctioning. (2) Individual visual signals plus a common audible signal to warn of an engine-generator alarm condition shall indicate: a. Low lubricating oil pressure. b. Low water temperature. c. Excessive water temperature. d. Low fuel when the main fuel storage tank contains less than a 4-hour operating supply. e. Overcrank (failed to start). f. Overspeed. 6.4.1.1.17.1 A remote, common audible alarm shall be provided as specified in 6.4.1.1.17.4 that is powered by the storage battery and located outside of the EPS service room at a work site observable by personnel. 6.4.1.1.17.4 Individual alarm indication to	E 0041	1 What corrective action(s) will be accomplished for those residents found to have been affected by the deficient practice? No residents were affected by the alleged deficient practice. 2 How other residents having the potential to be affected by the same deficient practice will be identified and what corrective action(s) will be taken? All residents within the facility have the potential to be affected by this alleged deficient practice. Evapar completed repairs of the current generator on 5/1/2024, ensured proper connection to the annunciator panel and ran a successful Load Bank Test. 3 What measures will be put into place and what systemic changes will be made to ensure that the deficient practice does not recur? The maintenance director was in-serviced on the generator being connected to a functioning annunciator panel within the facility. 4 How the corrective action(s) will be monitored to ensure the	05/01/2024

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	annunciate any of the conditions listed in Table 6.4.1.1.16.2 shall have the following characteristics: (1) It shall be battery powered. (2) It shall be visually indicated. (3) It shall have additional contacts or circuits for a common audible alarm that signals locally and remotely when any of the itemized conditions occurs (4) It shall have a lamp test switch(es) to test the operation of all alarm lamps. This deficient practice could affect all residents, as well as visitors and staff in the facility. Findings include: Based on interview during record review on 04/23/24 between 9:00 a.m. and 12:00 p.m. with the Maintenance Supervisor, Regional Support, and Executive Director present, the Maintenance Supervisor said the facility has been using a temporary generator since March 26, 2024, due to issues which arose during a load bank test by the facility's emergency generator maintenance vendor on the same day and parts are on order to repair the generator. Based on observations between 12:00 p.m. and 1:45 p.m. during a tour of the facility with the Maintenance Supervisor, Regional Support, and Executive Director, there was no remote annunciator panel for the temporary generator and the temporary generator was not connected to the current annunciator panel located at the south unit Nurse's Station. This was confirmed by the Maintenance Supervisor at the time of observation. This finding was reviewed with the Maintenance Supervisor, Regional Support, and Executive Director during the exit conference.		deficient practice will not recur, i.e., what quality assurance program will be put into place? The maintenance director will be responsible for the completion of the annual generator preventative maintenance schedule in correlation with the proper functioning of the annunciator panel.	

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K 0000 Bldg. 01	A Life Safety Code Recertification and State Licensure Survey was conducted by the Indiana Department of Health in accordance with 42 CFR 483.90(a). Survey Date: 04/23/24 Facility Number: 000054 Provider Number: 155126 AIM Number: 100287850 At this Life Safety Code survey, Springs Valley Meadows was found in substantial compliance with Requirements for Participation in Medicare/Medicaid, 42 CFR Subpart 483.90(a), Life Safety from Fire and the 2012 edition of the National Fire Protection Association (NFPA) 101, Life Safety Code (LSC), Chapter 19, Existing Health Care Occupancies and 410 IAC 16.2. This one story facility was determined to be of Type V (000) construction and was fully sprinklered. The facility has a fire alarm system with hard wired smoke detectors in the corridors and spaces open to the corridors, plus battery operated smoke detectors in all resident sleeping rooms. The facility has a capacity of 74 and had a census of 72 at the time of this survey. All areas where residents have customary access were sprinklered and all areas providing facility services were sprinklered, except a detached laundry building, as well as two small detached wood sheds used for facility storage and bio hazard storage. Quality Review completed on 04/25/24	K 0000	This Plan of Correction constitutes the written allegation of compliance for the deficiencies cited. However, submission of this Plan of Correction is not an admission that a deficiency exists or that one was cited correctly. The Plan of Correction is submitted to meet requirements established by state and federal law. Springs Valley Meadows desires this Plan of Correction to be considered the facility's Allegation of Compliance. We would like to request a desk review, please feel free to contact Riley Widdifield, Executive Director should you need any additional information to support the desk review. Thank you for your consideration.	

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K 0916 SS=C Bldg. 01	NFPA 101 Electrical Systems - Essential Electric Syste Electrical Systems - Essential Electric System Alarm Annunciator A remote annunciator that is storage battery powered is provided to operate outside of the generating room in a location readily observed by operating personnel. The annunciator is hard-wired to indicate alarm conditions of the emergency power source. A centralized computer system (e.g., building information system) is not to be substituted for the alarm annunciator. 6.4.1.1.17, 6.4.1.1.17.5 (NFPA 99) Based on observation and interview, the facility failed to ensure 1 of 1 temporary emergency generator was provided with an operating alarm annunciator in a location readily observed by operating personnel at a regular workstation such as a nurses' stations. NFPA 99, 2012 Edition, Health Care Facilities Code, at 6.4.1.1.17 requires a remote annunciator that is storage battery powered shall be provided to operate outside of the generating room in a location readily observed by operating personnel at a regular workstation. The annunciator shall be hard-wired to indicate alarm conditions of the emergency or auxiliary power source as follows: (1) Individual visual signals shall indicate: a. When the emergency or auxiliary power source is operating to supply power to load. b. When the battery charger is malfunctioning. (2) Individual visual signals plus a common audible signal to warn of an engine-generator alarm condition shall indicate: a. Low lubricating oil pressure. b. Low water temperature. c. Excessive water temperature. d. Low fuel when the main fuel storage tank	K 0916	1 What corrective action(s) will be accomplished for those residents found to have been affected by the deficient practice? No residents were affected by the alleged deficient practice. 2 How other residents having the potential to be affected by the same deficient practice will be identified and what corrective action(s) will be taken? All residents within the facility have the potential to be affected by this alleged deficient practice. Evapar completed repairs of the current generator on 5/1/2024, ensured proper connection to the annunciator panel and ran a successful Load Bank Test. 3 What measures will be put into place and what systemic	05/01/2024

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	contains less than a 4-hour operating supply. e. Overcrank (failed to start). f. Overspeed. 6.4.1.1.17.1 A remote, common audible alarm shall be provided as specified in 6.4.1.1.17.4 that is powered by the storage battery and located outside of the EPS service room at a work site observable by personnel. 6.4.1.1.17.4 Individual alarm indication to annunciate any of the conditions listed in Table 6.4.1.1.16.2 shall have the following characteristics: (1) It shall be battery powered. (2) It shall be visually indicated. (3) It shall have additional contacts or circuits for a common audible alarm that signals locally and remotely when any of the itemized conditions occurs (4) It shall have a lamp test switch(es) to test the operation of all alarm lamps. This deficient practice could affect all residents, as well as visitors and staff in the facility. Findings include: Based on interview during record review on 04/23/24 between 9:00 a.m. and 12:00 p.m. with the Maintenance Supervisor, Regional Support, and Executive Director present, the Maintenance Supervisor said the facility has been using a temporary generator since March 26, 2024, due to issues which arose during a load bank test by the facility's emergency generator maintenance vendor on the same day and parts are on order to repair the generator. Based on observations between 12:00 p.m. and 1:45 p.m. during a tour of the facility with the Maintenance Supervisor,		changes will be made to ensure that the deficient practice does not recur? The maintenance director was in-serviced on the generator being connected to a functioning annunciator panel within the facility. 4 How the corrective action(s) will be monitored to ensure the deficient practice will not recur, i.e., what quality assurance program will be put into place? The maintenance director will be responsible for the completion of the annual generator preventative maintenance schedule in correlation with the proper functioning of the annunciator panel.	

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	Regional Support, and Executive Director, there was no remote annunciator panel for the temporary generator and the temporary generator was not connected to the current annunciator panel located at the south unit Nurse's Station. This was confirmed by the Maintenance Supervisor at the time of observation. This finding was reviewed with the Maintenance Supervisor, Regional Support, and Executive Director during the exit conference. 3.1-19(b)			