DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

PRINTED: 11/30/2012
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 185172	(X2) MULTIPLE CONSTRUCTION A. BUILDING B. WING	(X3) DATE SURVEY COMPLETED 11/15/2012
NAME OF PROVIDER OR SUPPLIER WILLIAMSON ARH		STREET ADDRESS, CITY, STATE, ZIP CODE 260 HOSPITAL DRIVE SOUTH WILLIAMSON, KY 41503	

RECEIVED
DEC - 6 2012
Division of Health Care
Southern Enforcement Branch

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (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
F 000	INITIAL COMMENTS	F 000	Plan of Correction F323	12/6/2012
	A standard health survey was conducted on 11/13-15/12. Deficient practice was identified at "E" level.		I. Address what corrective action will be accomplished for those residents found to have been affected by the deficient practice:	
F 323 SS=E	483.25(h) FREE OF ACCIDENT HAZARDS/SUPERVISION/DEVICES	F 323	On 11/14/212 the hot water temp was noted to be from 108 to 119 degrees Fahrenheit with an acceptable range of 100 to 110 degrees Fahrenheit. Maintenance was notified at the time of the findings during the survey and temp was adjusted at the boiler room lever and was noted to be within acceptable range upon recheck during process of the survey. All residents have the potential to be impacted by this practice. At the time of the survey no residents were noted to wander or have access to the water without supervision of staff who would adjust water temp prior to use.	
	The facility must ensure that the resident environment remains as free of accident hazards as is possible; and each resident receives adequate supervision and assistance devices to prevent accidents.		A in-service (see attachment #1) was provided to staff the day of the findings on 11/14/2012 and new practice started to monitor the water temp in random rooms daily and recorded (see attachment #2) with any abnormal to be reported to Maintenance for correction of water temp to ensure temp remains from 100 to 110 degrees Fahrenheit.	
	This REQUIREMENT is not met as evidenced by: Based on observation and interview, it was determined the facility failed to ensure the residents' environment remained as free of accident hazards as possible. A review of the Kentucky Administrative Regulations at 902 KAR 20:021, Section 15.(6)(a), revealed plumbing fixtures which require hot water and which are intended for patient use shall be supplied with water which is controlled to provide a water temperature of 100 to 110 degrees Fahrenheit at the fixture. However, during the environmental tour on 11/14/12 at 9:45 AM, water temperatures in resident rooms and shower rooms ranged from 108 degrees Fahrenheit to 119 degrees Fahrenheit.			
	The findings include:			
	Interview with the Administrator on 11/14/12 at			

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE | TITLE | (X6) DATE

Sonya D Wasserman RN BSN DON/NHA 12/6/2012

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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	185172		11/15/2012

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
WILLIAMSON ARH	260 HOSPITAL DRIVE SOUTH WILLIAMSON, KY 41503

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F 323	Continued From page 1 9:50 AM, revealed the facility did not have a policy related to acceptable water temperatures in the facility. Interview with the facility's plumber on 11/14/12 at 10:00 AM, revealed the water temperature in the facility should not exceed 110 degrees Fahrenheit. A review of the Kentucky Administrative Regulations at 902 KAR 20:021, Section 15.(6)(a), revealed plumbing fixtures which require hot water and which are intended for patient use shall be supplied with water which is controlled to provide a water temperature of 100 to 110 degrees Fahrenheit at the fixture. Observation during the environmental tour revealed water temperatures in resident rooms and the shower rooms ranged from 108 degrees Fahrenheit to 119 degrees Fahrenheit, and exceeded the regulatory requirement of 100 to 110 degrees Fahrenheit at the fixtures. An interview conducted on 11/14/12 at 9:50 AM, with the Administrator, and observations conducted on 11/14/12, revealed there were no residents that ambulated or wheeled themselves in wheelchairs, unassisted, or that wandered in the facility. Interview with Certified Nursing Assistant (CNA) #1 on 11/14/12 at 10:30 AM, with CNA #2 on 11/14/12 at 10:35 AM, and with CNA #3 on 11/14/12 at 10:45 AM, confirmed there were no residents that accessed the bathrooms unassisted or that wandered in the facility, and no residents were able to get up to the bathrooms	F 323	II. Address how the facility will identify other residents having the potential to be affected by the same deficient practice: All rooms have the potential to have improper hot water temp in turn all residents have the potential to be impacted from this practice identified on 11/14/2012 when the hot water temp was noted to be from 108 to 119 degrees Fahrenheit with an acceptable range of 100 to 110 degrees Fahrenheit. At the time of the survey no residents were noted to wander or have access to the water without supervision of staff who would adjust water temp prior to use. Maintenance lowered the temp upon the findings and additional daily checks were started by nursing (see attachment #2) to ensure the temp will be maintained at 100 – 110 degrees Fahrenheit. Staff will notify maintenance with any temp below 100 or above 110 for adjustment of hot water temp as necessary (see attachment #1 in-service). III. Address what measures will put into place or systemic changes made to ensure that the deficient practice will not recur: Staff in-service on 11/14/21012 (see attachment #1) to start spot check daily on hot water temp and tempt to be 100 – 110 degrees Fahrenheit and any abnormal to be conveyed to Maintenance for adjustment with a log maintained (see attachment #2) daily of temps.	

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F 323	Continued From page 2 without assistance. The CNAs revealed they checked the water temperature before assisting residents into the shower and before giving bed baths to ensure the water temperature was safe. The CNAs acknowledged the water temperatures were hot and stated they adjusted the water temperatures by adding cold water to obtain the desired temperature for bathing. Interview with the facility's Plumber and the Maintenance Supervisor on 11/14/12 at 10:00 AM, revealed water temperatures were obtained at the hot water tanks in the facility every two hours. Although the facility's Plumber stated the hot water should not exceed 110 degrees Fahrenheit, the interviews revealed the hot water tanks in the boiler room had an alarm device that had been programmed to alarm if the water temperatures reached 135 degrees Fahrenheit. Interview with the Administrator on 11/14/12 at 9:50 AM, revealed there were no residents that wandered in the facility and that all residents required assistance from staff to access showers and bathrooms. According to the Administrator, the staff adjusted the water temperatures for the residents by adding cold water to the hot water, and stated there had not been any resident in the facility that had sustained an injury related to the temperature of the hot water.	F 323	IV. Indicate how the facility plans to monitor its performance to ensure that solutions are sustained: A PI monitor will be started to monitor for compliance of water temp checks to be checked weekly (see attachment #3) by DON/NHA to ensure water temp log completed to assess for any abnormal temps and to ensure the temp was adjusted/followed up with by Maintenance and adjusted accordingly as necessary. Along with collection of the data the data will be compiled monthly and reported to Skilled nursing PI committee quarterly.	

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION A. BUILDING **01 - MAIN BUILDING 01** B. WING _____	(X3) DATE SURVEY COMPLETED
	185172		**11/14/2012**

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WILLIAMSON ARH	**260 HOSPITAL DRIVE** **SOUTH WILLIAMSON, KY 41503**

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K 000	INITIAL COMMENTS	K 000		

Building: 01

Plan Approval: Unknown

Survey under: NFPA 101 (2000 Edition)

Facility type: SNF/NF

Type of structure: Type I (332) Protected

Smoke Compartment: Three

Fire Alarm: Complete Fire alarm System

Sprinkler System: Complete Sprinkler System (Wet)

Generator: Type I Diesel and Type I Natural Gas. Natural Gas was original and Diesel was installed in 1996.

A standard Life Safety Code survey was conducted on 11/14/12. Williamson ARH was found to be in compliance with the requirements for participation in Medicare and Medicaid.

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