

State Veterans' Homes (SVH) Corrective Action Plan
Western Nebraska Veterans Home NH 5/14-5/16/24

Important: Attestation by the SVH leadership, including the SVH nurse leader, of actions to assure timely completion of goals and establishment of oversight to assure continued improvement in areas identified for correction. The Corrective Action Plan (CAP) should include input from all levels of staff and affected resident(s), as is applicable and appropriate, impacted by the issue identified. This CAP is intended to become a source towards Quality Assessment and Assurance.

State the Issue Identify the Regulation and Findings	Address how corrective action will be accomplished for those residents found to be affected by the deficient practice (Actions should align with Quality Assessment and Assurance fundamentals)	Address how the SVH will identify other residents having the potential to be affected by the same deficient practice	Address what measures will be put into place or systemic changes made to ensure that the deficient practice will not recur	How does the SVH plan to monitor its performance to make sure that solutions are sustained (Actions should align with Quality Assessment and Assurance)	Proposed Completion Date (i.e. when corrective action will be fully implemented and sustained)
<p>SS 51.200 (a) Life Safety from Fire</p> <p>1.The exit signs that contained a battery-operated emergency illumination source were not properly tested and inspected per the code.</p>	<p>NHA provided education to Maintenance Director on the requirements for battery operated exit sign testing.</p> <p>Exit lighting will be added to the emergency lighting monthly checklist conducted by maintenance staff with instructions to "test the batteries and verify proper function of each light". Checklist revision completed on 5/14/24.</p>	<p>Battery testing and verifying proper functioning of each light in all exit signs was completed and documented by Maintenance Supervisor on 5/21/24.</p>	<p>Emergency lighting monthly checklist was revised to include testing of batteries and verifying proper functioning of each light.</p> <p>Documentation will be reviewed by Maintenance Office Specialist on a monthly basis to ensure that testing is taking place.</p>	<p>Monthly audits will be conducted by Maintenance Supervisor to ensure Emergency and exit lighting checklist is completed monthly including all required tests with a compliance goal of 100%. Audits will begin 5/28/24 through 8/30/24.</p> <p>Results of monthly audits will be reviewed by the Quality Assurance Committee and will determine when audits can be discontinued.</p>	<p>Education completed on 6/5/24.</p> <p>Audits to be completed on 8/30/24.</p>
<p>2.The kitchen equipment located under the kitchen hood extinguishing system did not have a design system in place to ensure that it was returned to its approved design location.</p>	<p>NHA provided education to Maintenance Director and Food Service Director on developing a design system for ensuring kitchen equipment under the kitchen hood extinguishing system is always located in its approved designed location.</p> <p>Stainless Steel casters will be installed on the kitchen floor to hold the front wheels of the equipment in place to designate location of equipment according to the approved design location. A map of the location for equipment has been posted in the kitchen for staff reference. Casters were ordered on 5/17/24 and installed 6/10/24 upon arrival.</p>	<p>Verification of proper placement of all kitchen equipment under the kitchen hood extinguishing system and posting of sign in kitchen showing location of this equipment was completed by Maintenance Supervisor on 5/21/24.</p>	<p>Stainless steel casters have been placed on kitchen floor to designate proper placement of kitchen equipment located under the kitchen hood extinguishing system to ensure correct placement will be maintained along with a map posted in the kitchen showing proper equipment location.</p> <p>Correct placement will be verified by Maintenance Staff when completing weekly preventative maintenance work order to switch out the hood vents for cleaning (PM/RM B22-01-01-01) beginning 6/17/24.</p>	<p>Weekly visual inspection of proper placement of kitchen equipment under the kitchen hood extinguishing system audit will be performed by Maintenance Supervisor for 4 weeks with a compliance goal of 100%. Beginning 5/28/24 ending 6/18/24.</p> <p>Monthly visual inspection of proper placement of kitchen equipment under the kitchen hood extinguishing system audits will be performed by Maintenance Supervisor for 3 months with a compliance goal of 100%. Beginning 7/3/24 and ending 9/4/24.</p> <p>Results of monthly audits will be reviewed by the Quality Assurance Committee and will determine when audits can be discontinued.</p>	<p>Education completed on 6/5/24.</p> <p>Weekly audits completed on 6/18/24.</p> <p>Monthly audits to be completed on 9/4/24</p>