

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 056133	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____		(X3) DATE SURVEY COMPLETED C 09/16/2014
NAME OF PROVIDER OR SUPPLIER WEST HILLS HEALTH & REHAB CENTER			STREET ADDRESS, CITY, STATE, ZIP CODE 7940 TOPANGA CANYON BLVD. CANOGA PARK, CA 91304		
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F 000	INITIAL COMMENTS The following reflects the findings of the Department of Public Health during an Abbreviated Survey and Complaint Visit. Complaint Number CA00409202 - Substantiated. Representing the Department of Public Health: Surveyor ID No. 27787, HFEN Highest S/S = E	F 000	West Hills Health & Rehabilitation Center makes its best efforts to operate in full compliance with both the Federal and State regulations. Nothing included in this plan of correction is an admission otherwise. West Hills Health & Rehabilitation Center has submitted this plan of correction in order to comply with its regulatory obligation and does not waive any objections to the merits or form of allegation contained herein. The submission of this plan of correction constitutes our allegation of compliance.	10/17/14 LOS ANGELES COUNTY HEALTH FACILITIES DIVISION 2014 OCT 17 AM 11:43	
F 166 SS=D	483.10(f)(2) RIGHT TO PROMPT EFFORTS TO RESOLVE GRIEVANCES A resident has the right to prompt efforts by the facility to resolve grievances the resident may have, including those with respect to the behavior of other residents. This REQUIREMENT is not met as evidenced by: Based on observation, interview, and record review, the facility failed to follow their grievance policy for one out of one sample resident(s) (1). This had a potential for untimely and delay of resolving grievances in the future. Findings: According to the admission record, Resident 1 was originally admitted on January 28, 2013 and was readmitted on July 17, 2013, with diagnoses that included hypertension (high blood pressure), right hemiplegia (paralysis on the same side of the body), and right hip fracture.	F 166	483.10(f)(2) RIGHT TO PROMPT EFFORTS TO RESOLVE GRIEVANCE The facility will follow the facility's grievance policy & procedure in a prompt and timely basis. Resident 1's air conditioning (a/c) unit has been repaired and continuously works without any issue. No other a/c unit or resident was affected. The maintenance and social service staff has been inserviced to timely resolve grievances and to also complete grievance & maintenance forms at all times. Administrator will monitor through the Continuous Quality Improvement (CQI) program on a quarterly basis for continuous compliance.		

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

Jerry Catama Administrator

10/18/14

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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F 166	<p>Continued From page 1</p> <p>The Minimum Data Set (MDS) assessment dated July 29, 2014, indicated the resident's cognitive patterns were moderately impaired and needed extensive assistance for most activities of daily living.</p> <p>On August 13, 2014, at 3:30 p.m., during an observation and interview with Resident 1, she was lying in bed, alert and oriented, with family member at the bedside. Resident 1 stated that she felt uncomfortable, hot, and irritated. The room temperature gauge was between 80 to 81 degrees Fahrenheit. Resident 1 stated that the air conditioning system was not working.</p> <p>On August 13, 2014, at 3:54 p.m., during an interview with Family Member 1 (FM 1), he stated he told the facility staff a week ago regarding the hot temperature but no action was taken.</p> <p>On August 13, 2014, at 4:05 p.m., during an observation and interview with Maintenance Staff Member 1 (MSM 1), he stated the airconditioning unit was not working. According to him, he knew about it five to ten minutes ago. When asked for a temperature log to be reviewed, he was not able to provide it.</p> <p>A review of the Maintenance Request Log dated August 2014, did not indicate a requisition to check or fix the airconditioning.</p> <p>On August 13, 2014, at 4:35 p.m., during an interview with Licensed Vocational Nurse 1 (LVN 1), she stated she felt hot in the room.</p> <p>On September 12, 2014, at 3:30 p.m., during an interview with the Director of Nursing (DON), she stated it was really hot at that time.</p>	F 166			

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F 166	Continued From page 2 On September 12, 2014, at 3:53 p.m., during an interview with the Social Worker (SW), she stated the temperature was discussed in the stand-up meeting and she stated she was there. The previous Administrator told the Maintenance Director to check the thermostat in the room. There was a work request form that was initiated and followed up by the corporate office. The work request is to repair the airconditioning unit. She also stated that there was a grievance form that was completed and was given to the previous Administrator. When asked for the copy of the grievance form and the actions taken by the facility in the presence of the DON and the current Administrator, she was not able to provide one. On September 12, 2014, at 4 p.m., during an interview with the current Administrator, he stated he was not aware of any grievance paperwork regarding the airconditioning unit. The facility's policy and procedure titled "Concern Resolution Program" dated July 2013, indicated the facility will identify, investigate, and resolve concerns of residents/family members, and others. The Administrator is the concern coordinator. After resolution of the concern, the Administrator completes the final review that includes recommendations to prevent future recurrences. The Administrator's signature and date reflect conclusion of the concern. Concern forms collected will be placed in a concern book.	F 166			
F 246 SS=D	483.15(e)(1) REASONABLE ACCOMMODATION OF NEEDS/PREFERENCES A resident has the right to reside and receive	F 246	483.15(e)(1) REASONABLE ACCOMMODATION OF NEEDS/PREFERENCES		10/17/14

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F 246	<p>Continued From page 3</p> <p>services in the facility with reasonable accommodations of individual needs and preferences, except when the health or safety of the individual or other residents would be endangered.</p> <p>This REQUIREMENT is not met as evidenced by: Based on observation, interview, and record review, the facility failed to ensure that the needs for a safe and comfortable temperature was accommodated for one out of one sample resident(s) (1). This had a potential for the increase in the resident's blood pressure and potential for increased anxiety related to the resident's intolerance for heat.</p> <p>Findings:</p> <p>According to the admission record, Resident 1 was originally admitted on January 28, 2013 and was readmitted on July 17, 2013, with diagnoses that included hypertension (high blood pressure) and depression.</p> <p>The Minimum Data Set (MDS) assessment dated July 29, 2014, indicated the resident's cognitive patterns were moderately impaired and needed extensive assistance from staff members for most of the activities of daily living.</p> <p>On August 13, 2014, at 3:30 p.m., during an observation and interview with Resident 1, she was lying in bed, alert and oriented, with family member at the bedside. Resident 1 stated that she felt uncomfortable, hot, and irritated. The room temperature gauge was between 80 to 81</p>	F 246	<p>The facility will ensure residents receive facility services with reasonable accommodation of his or her individual needs in regards to comfortable temperature. Resident 1's air conditioning (a/c) unit has been repaired and continuously works without any issue. No other a/c unit or resident was affected. The maintenance staff has been inserviced to ensure residents' rooms temperature is comfortable. Also, the maintenance staff will randomly monitor and log room temperature on a weekly basis. Administrator will monitor through the Continuous Quality Improvement (CQI) program on a quarterly basis for continuous compliance.</p>		

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F 246	<p>Continued From page 4</p> <p>degrees Fahrenheit. Resident 1 stated that the air conditioning system was not working.</p> <p>On August 13, 2014, at 3:54 p.m., during an interview with Family Member 1 (FM 1), he stated he told the facility staff a week ago regarding the hot temperature but no action was taken.</p> <p>On August 13, 2014, at 4:05 p.m., during an observation and interview with Maintenance Staff Member 1 (MSM 1), he stated the air conditioner was not working. According to him, he knew about it five to ten minutes ago. When asked for a temperature log to be reviewed, he was not able to provide it.</p> <p>On August 13, 2014, at 4:35 p.m., during an interview with Licensed Vocational Nurse 1 (LVN 1), she stated she felt hot in the room.</p> <p>On September 12, 2014, at 3:30 p.m., during an interview with the Director of Nursing (DON), she stated it was really hot at that time.</p> <p>A review of the Maintenance Request Log dated August 2014, did not indicate a requisition to check or repair air conditioner.</p> <p>A review of the Work Order Form dated August 14, 2014, indicated HVAC (heating, ventilation, and air conditioning) unit number six was not working. The rooms affected were 39, 41, 43, and 45.</p> <p>The facility's undated policy and procedure titled "Accommodation of Needs", indicated residents will receive services in the facility with reasonable accommodation of individual needs and preferences. Efforts will be made to individualize</p>	F 246			

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F 246 F 257 SS=E	<p>Continued From page 5 the resident's environment. 483.15(h)(6) COMFORTABLE & SAFE TEMPERATURE LEVELS</p> <p>The facility must provide comfortable and safe temperature levels. Facilities initially certified after October 1, 1990 must maintain a temperature range of 71 - 81° F</p> <p>This REQUIREMENT is not met as evidenced by: Based on observation, interview, and record review, the facility failed to maintain a safe and comfortable temperature level for a resident who complained of hot temperature in her room and was verified of hot temperatures in other rooms in the facility for one out of one sample residents (1). This had a potential for the increase the resident's blood pressure who was diagnosed with hypertension and potential to feel more uncomfortable for residents who were wearing plastic disposable underpants.</p> <p>Findings:</p> <p>According to the admission record, Resident 1 was originally admitted on January 28, 2013 and was readmitted on July 17, 2013, with diagnoses that included hypertension (high blood pressure), right hemiplegia (paralysis on the same side of the body), and right hip fracture.</p> <p>The Minimum Data Set (MDS) assessment dated July 29, 2014, indicated the resident's cognitive patterns were moderately impaired and needed extensive assistance for most activities of daily living.</p>	F 246 F 257	<p>483.15(h)(6) COMFORTABLE & SAFE TEMPERATURE LEVELS</p> <p>The facility will provide comfortable and safe temperature levels for the residents. Resident 1's air conditioning (a/c) unit has been repaired and continuously works without any issue. No other a/c unit or resident was affected. The maintenance staff has been inserviced to ensure residents' rooms temperature is maintained at a comfortable and safe temperature level. Also, the maintenance staff will randomly monitor and log room temperature on a weekly basis to ascertain proper temperature. Administrator will monitor through the Continuous Quality Improvement (CQI) program on a quarterly basis for continuous compliance.</p>	10/17/14	

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F 257	<p>Continued From page 6</p> <p>On August 13, 2014, at 3:30 p.m., during an observation and interview with Resident 1, she was lying in bed, alert and oriented, with family member at the bedside. Resident 1 stated that she felt uncomfortable, hot, and irritated. The room temperature gauge was between 80 to 81 degrees Fahrenheit. Resident 1 stated that the air conditioning system was not working.</p> <p>On August 13, 2014, at 3:54 p.m., during an interview with Family Member 1 (FM 1), he stated he told the facility staff a week ago regarding the hot temperature but no action was taken.</p> <p>On August 13, 2014, at 4:05 p.m., during an observation and interview with Maintenance Staff Member 1 (MSM 1), he stated the air conditioner was not working. According to him, he knew about it five to ten minutes ago. When asked for a temperature log to be reviewed, he was not able to provide it. When the Surveyor and MSM 1 checked rooms 39, 41, and 45, the following temperatures were noted:</p> <p>room 39- 82 degrees Fahrenheit room 41- 80 to 81 degrees Fahrenheit room 45- 80 to 81 degrees Fahrenheit with two electric fans in the room.</p> <p>A review of the Work Order Form dated August 14, 2014, indicated HVAC (heating, ventilation, and air conditioning) unit number six was not working. The rooms affected were 39, 41, 43, and 45.</p> <p>On August 13, 2014, at 4:35 p.m., during an interview with Licensed Vocational Nurse 1 (LVN 1), she stated she felt hot in the room.</p>	F 257			

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F 257	Continued From page 7 A review of the Maintenance Request Log dated August 2014, did not indicate a requisition to check or repair the air conditioner. On September 12, 2014, at 3:30 p.m., during an interview with the Director of Nursing (DON), she stated it was really hot at that time. The facility's undated policy and procedure titled "Maintenance Log", indicated to keep the maintenance log in a designated place in the maintenance shop or work area at all times unless it is requested by the Administrator or other authorized person. Keep the maintenance log up to date. Notate and initial all required repair jobs, service jobs, service units, and daily, weekly, monthly, and annual checks and inspections as soon as possible after they are completed.	F 257			
F 425 SS=D	483.60(a),(b) PHARMACEUTICAL SVC - ACCURATE PROCEDURES, RPH The facility must provide routine and emergency drugs and biologicals to its residents, or obtain them under an agreement described in §483.75(h) of this part. The facility may permit unlicensed personnel to administer drugs if State law permits, but only under the general supervision of a licensed nurse. A facility must provide pharmaceutical services (including procedures that assure the accurate acquiring, receiving, dispensing, and administering of all drugs and biologicals) to meet the needs of each resident. The facility must employ or obtain the services of	F 425	483.60(a),(b) PHARMACEUTICAL SVC - ACCURATE PROCEDURE, RPH The facility will ensure safe administration of medications by a license nurse to residents for the proper timing and dosage of medication. Resident 1 medication is now being provided only by a license nurse. No other residents are affected with this procedure. License nurses have been inserviced to administer medication on a timely and accurate basis. DON will randomly observe medication pass by licensed nurses to ascertain compliance. DON will also monitor through the Continuous Quality Improvement (CQI) program on a quarterly basis for continuous compliance.		10/17/14

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F 425	<p>Continued From page 8</p> <p>a licensed pharmacist who provides consultation on all aspects of the provision of pharmacy services in the facility.</p> <p>This REQUIREMENT is not met as evidenced by: Based on observation, interview, and record review, the facility failed to ensure safe administration of medications to a resident by giving the medications to the resident's family member to administer the medication without the supervision of the licensed nurse for one out of one sample resident(s) (1). This had a potential for untimely or delay in administration of the medications that may result to inaccurate documentation of the time the medication was actually administered and the method of administration may be inconsistent such as breaking or crushing of the medications and mixing with applesauce by the family member.</p> <p>Findings:</p> <p>On August 13, 2014, at 3:15 p.m., during an observation, Resident 1 was lying in bed with her son at the bedside.</p> <p>According to the admission record, Resident 1 was originally admitted on January 28, 2013 and was readmitted on July 17, 2013, with diagnoses that included hypertension, depression, seizure disorder, right hip fracture, and respiratory failure.</p> <p>The Minimum Data Set (MDS) assessment dated July 29, 2014, indicated the resident's cognitive patterns were moderately impaired and needed</p>	F 425			

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F 425	<p>Continued From page 9 extensive assistance from staff members for most of the activities of daily living.</p> <p>A review of the physician's orders (Order Summary Report) for the month of September 1, 2014, indicated the following:</p> <ol style="list-style-type: none"> 1. Aspirin chewable tablet 81 milligrams (mg) one tablet by mouth one time a day for cerebrovascular accident (CVA) prophylaxis April 16, 2014. 2. Bisacodyl enteric coated (EC) delayed release five mg. Give two tablets by mouth one time a day for constipation. Hold for loose stool dated February 16, 2014. 3. Cranberry tablet 450 mg. Give two tablets by mouth one time a day for prophylaxis dated December 26, 2013. 4. Fish oil capsule 500 mg. Give two capsules by mouth one time a day related to other and unspecified hyperlipidemia dated February 16, 2014. 5. Hydralazine hydrochloride (HCl) 25 mg. Give one tablet by mouth two times a day related to unspecified essential hypertension. Hold for systolic blood pressure below 110 dated July 17, 2013. 6. Hydrochlorothiazide tablet - Give one tablet by mouth one time a day related to unspecified essential hypertension dated July 17, 2013. 7. Keppra tablet 500 mg. Give one tablet by mouth two times a day related to other convulsions dated July 17, 2013. 	F 425			

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F 425	<p>Continued From page 10</p> <p>8. Lexapro 10 mg tablet. Give one tablet by mouth one time a day related to depressive disorder manifested by feeling of hopelessness dated December 30, 2013.</p> <p>9. Lopid 600 mg tablet. Give one tablet by mouth every 12 hours related to hyperlipidemia dated August 4, 2014.</p> <p>10. Lopressor tablet. Give 25 mg by mouth two times a day related to essential hypertension. Hold for systolic blood pressure below 110 dated July 17, 2013.</p> <p>11. Milk of Magnesia suspension 30 cubic centimeters (cc). Give 30 cc by mouth as needed every day for constipation if ordered stool softeners are ineffective dated July 17, 2013.</p> <p>12. Norco tablet 5-325 mg. Give one tablet by mouth every six hours as needed for moderate to severe pain dated August 1, 2013.</p> <p>13. Norvasc tablet five mg. Give one tablet by mouth one time a day related to essential hypertension. Hold for systolic blood pressure below 110 dated July 17, 2013.</p> <p>14. Pepcid 20 mg tablet. Give one tablet by mouth two times a day for GERD (gastroesophageal reflux disease) dated July 17, 2013.</p> <p>15. Potassium Chloride extended release (ER) tablet eight milliequivalent (meq). Give two tablets by mouth one time a day for potassium supplement dated November 21, 2013.</p>			F 425			

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F 425	<p>Continued From page 11</p> <p>16. Tylenol 325 mg. Give two tablets by mouth every four hours as needed for mild pain dated February 17, 2013.</p> <p>A review of the Self Administration of Drugs Assessment dated July 18, 2013, indicated the interdisciplinary team (IDT) had determined that it was not safe for the resident to self-administer drugs. Licensed nurse to administer medications for proper timing and dosage.</p> <p>A review of the care plan did not indicate that a family member will administer the medications of the resident.</p> <p>On August 13, 2014, at 3:54 p.m., during an interview with Family Member 1 (FM 1), he stated Licensed Vocational Nurse 2 (LVN 2) always gives him his mother's medications which LVN 2 should not have done.</p> <p>On September 12, 2014, at 4:15 p.m., during an interview with LVN 2, he stated that he usually works on the 3 to 11 p.m. shift. The resident sometimes refuses to take the medications even with the family member. He said he then gives the medications to the family member and goes to the next residents. Usually, those were the routine medications that Resident 1 takes, according to LVN2.</p> <p>The facility's policy and procedure titled "Medication Administration - General Guidelines" dated April 2008, indicated medications are administered as prescribed in accordance with good nursing principles and practices and only by persons legally authorized to do so. Personnel authorized to administer medications do so only after they have familiarized themselves with the</p>	F 425			

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

PRINTED: 10/10/2014
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 056133	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____		(X3) DATE SURVEY COMPLETED C 09/16/2014
NAME OF PROVIDER OR SUPPLIER WEST HILLS HEALTH & REHAB CENTER			STREET ADDRESS, CITY, STATE, ZIP CODE 7940 TOPANGA CANYON BLVD. CANOGA PARK, CA 91304		
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F 425	Continued From page 12 medication. The facility has sufficient staff to allow administering of medications without unnecessary interruptions. Medications are administered only by licensed nursing, medical, pharmacy or other personnel authorized by state laws and regulations to administer medications. The person who prepares the dose for administration is the person who administers the dose. The resident is always observed after administration to ensure that the dose was completely ingested. The individual who administers the medication dose records the administration on the resident's MAR (medication administration record) directly after the medication is given.	F 425			

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F 246	Continued From page 5	F 246			
F 257 SS=E	<p>the resident's environment.</p> <p>483.15(h)(6) COMFORTABLE & SAFE TEMPERATURE LEVELS</p> <p>The facility must provide comfortable and safe temperature levels. Facilities initially certified after October 1, 1990 must maintain a temperature range of 71 - 81° F</p> <p>This REQUIREMENT is not met as evidenced by: Based on observation, interview, and record review, the facility failed to maintain a safe and comfortable temperature level for a resident who complained of hot temperature in her room and was verified of hot temperatures in other rooms in the facility for one out of one sample residents (1). This had a potential for the increase the resident's blood pressure who was diagnosed with hypertension and potential to feel more uncomfortable for residents who were wearing plastic disposable underpants.</p> <p>Findings:</p> <p>According to the admission record, Resident 1 was originally admitted on January 28, 2013 and was readmitted on July 17, 2013, with diagnoses that included hypertension (high blood pressure), right hemiplegia (paralysis on the same side of the body), and right hip fracture.</p> <p>The Minimum Data Set (MDS) assessment dated July 29, 2014, indicated the resident's cognitive patterns were moderately impaired and needed extensive assistance for most activities of daily living.</p>	F 257	<p>483.15(h)(6) COMFORTABLE & SAFE TEMPERATURE LEVELS</p> <p>The facility will provide comfortable and safe temperature levels for the residents. The room temperature gauge was 80-81degrees at time of visit which is within proper levels. Resident 1's air conditioning (a/c) unit has been repaired and continuously works without any issue. No other a/c unit or resident was affected. The maintenance staff has been inserviced to ensure residents' rooms temperature is maintained at a comfortable and safe temperature level. Also, the maintenance staff will randomly monitor and log room temperature on a weekly basis to ascertain proper temperature. Administrator will monitor through the Continuous Quality Improvement (CQI) program on a quarterly basis for continuous compliance.</p>		10/17/14

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F 246	Continued From page 5 the resident's environment.	F 246			
F 257 SS=E	483.15(h)(6) COMFORTABLE & SAFE TEMPERATURE LEVELS The facility must provide comfortable and safe temperature levels. Facilities initially certified after October 1, 1990 must maintain a temperature range of 71 - 81° F This REQUIREMENT is not met as evidenced by: Based on observation, interview, and record review, the facility failed to maintain a safe and comfortable temperature level for a resident who complained of hot temperature in her room and was verified of hot temperatures in other rooms in the facility for one out of one sample residents (1). This had a potential for the increase the resident's blood pressure who was diagnosed with hypertension and potential to feel more uncomfortable for residents who were wearing plastic disposable underpants. Findings: According to the admission record, Resident 1 was originally admitted on January 28, 2013 and was readmitted on July 17, 2013, with diagnoses that included hypertension (high blood pressure), right hemiplegia (paralysis on the same side of the body), and right hip fracture. The Minimum Data Set (MDS) assessment dated July 29, 2014, indicated the resident's cognitive patterns were moderately impaired and needed extensive assistance for most activities of daily living.	F 257	483.15(h)(6) COMFORTABLE & SAFE TEMPERATURE LEVELS The facility will provide comfortable and safe temperature levels for the residents. The room temperature gauge was 80- 84 degrees at time of visit which is within proper levels. Resident 1's air conditioning (a/c) unit has been repaired and continuously works without any issue. No other a/c unit or resident was affected. The maintenance staff has been inserviced to ensure residents' rooms temperature is maintained at a comfortable and safe temperature level. Also, the maintenance staff will randomly monitor and log room temperature on a weekly basis to ascertain proper temperature. Administrator will monitor through the Continuous Quality Improvement (CQI) program on a quarterly basis for continuous compliance.		10/17/14