

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 155665	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 10/27/2025
NAME OF PROVIDER OR SUPPLIER Majestic Care of North Vernon		STREET ADDRESS, CITY, STATE, ZIP CODE 701 Henry Street North Vernon, IN 47265	
For information on the nursing home's plan to correct this deficiency, please contact the nursing home or the state survey agency.			
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (Each deficiency must be preceded by full regulatory or LSC identifying information)		
<p>F 0921</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Make sure that the nursing home area is safe, easy to use, clean and comfortable for residents, staff and the public.</p> <p>Based on observation, interview, and record review, the facility failed to provide safe water temperatures for 5 of 9 resident bathrooms and 1 of 2 common area bathrooms observed. (Rooms C 101, C 102, D 114, D 115, D 116, and Women's Visitor Restroom) Findings include: During an observation, on 10/27/2025 at 10:35 A.M., the water in the Women's Visitor Restroom in the main hallway was hot to touch, not able to hold the hand under the water. The door was unlocked, unless it was in use and several residents had independently passed by the restroom. During an observation and interview, on 10/27/2025 at 10:40 A.M., Resident Room D 116's bathroom sink water was hot to touch. Resident E indicated she had no concerns with her water. During an observation, on 10/27/2025 from 10:47 A.M. to 11:01 A.M., the Maintenance Director checked the water temperatures in the following rooms:-Room D-116 the water temperature was 124.0 degrees Fahrenheit,-Room D-115 the water temperature was 122.5 degrees Fahrenheit,-Room D-114 the water temperature was 124.3 degrees Fahrenheit,-Room C-101 the water temperature was 123.3 degrees Fahrenheit,-Room C-102 the water temperature was 123.0 degrees Fahrenheit, and-Women's Visitor Restroom the water temperature was 134.5 degrees Fahrenheit. The Maintenance Director indicated the Women's Restroom had its own on demand water heater. They had placed a piece of tape over the dial that indicated to stop and do not touch. They had put the tape in place because people were adjusting the temperature on their own. The door to the restroom was only locked from the inside while in use. It was open for anyone to use but did have a sign on the door that the restroom was for visitors and care team members only. The water temperature should be 115 degrees Fahrenheit. He checked them daily in each hallway. He drained the water from the on-demand unit at that time and was going to adjust the water to the resident rooms. During an interview, on 10/27/2025 at 11:05 A.M., the Administrator indicated there had not been concerns of hot water temperatures or any burns from the water. During an interview, on 10/27/2025 at 11:07 A.M., the Director of Nursing (DON) indicated there had not been any reported burns in the building. During an interview, on 10/27/2025 at 11:20 A.M., the Administrator indicated the Maintenance Director was going to lock the Women's Bathroom at that time so no residents would be able to access it. They had also adjusted the temperatures for the residents' rooms. They would be monitoring the water temperatures until they were the correct temperatures. The September and October 2025 temperature logs were reviewed and indicated the water temperatures were 115 degrees Fahrenheit on the following dates:-09/01/2025 through 09/05/2025,-09/22/2025 through 09/26/2025,-10/06/2025 through 10/09/2025,-10/10/2025, and-10/20/2025 through 10/24/2025. No other dated temperature logs were provided. The current facility policy titled, Water Temperatures was provided by the Administrator on 10/27/2025 at 11:20 A.M. The policy indicated, .To maintain appropriate water temperatures in resident/patient care areas. Water temperatures will be set to a temperature of no more than the state's allowable minimum and maximum water temperature.</p>		

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.

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