

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  15G144	X2) MULTIPLE CONSTRUCTION A. BUILDING 01 B. WING _____	X3) DATE SURVEY COMPLETED  03/31/2014
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NAME OF PROVIDER OR SUPPLIER  PARENTS AND FRIENDS INC	STREET ADDRESS, CITY, STATE, ZIP CODE 720 ROYAL RD MICHIGAN CITY, IN 46360
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K010000	<p>A Life Safety Code Recertification Survey was conducted by the Indiana State Department of health in accordance with 42 CFR 483.470(j).</p> <p>Survey Date: 03/31/14</p> <p>Facility Number: 000680 Provider Number: 15G144 AIM Number: 100243080</p> <p>Surveyor: W. Chris Greeney, Life Safety Code Specialist.</p> <p>At this Life Safety Code survey, Parents and Friends, Inc. was found not in compliance with Requirements for Participation in Medicaid, 42 CFR Subpart 483.470(j), Life Safety from Fire and the 2000 edition of the National Fire Protection Association (NFPA) 101, Life Safety Code (LSC), Chapter 33, Existing Residential Board and Care Occupancies.</p> <p>This one story facility was fully sprinklered. The facility has a fire alarm system with smoke detection in the corridors, in client sleeping rooms and in common living areas. The facility has a capacity of 6 and had a census of 6 at the time of this survey.</p>	K010000		
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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

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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	<p>Calculation of the Evacuation Difficulty Score (E-Score) using NFPA 101A, Alternative Approaches to Life Safety, Chapter 6, rated the facility Prompt with an E-Score of 0.46.</p> <p>Quality Review by Robert Booher, Life Safety Code Specialist-Medical Surveyor on 04/03/14.</p> <p>The facility was found not in compliance with the aforementioned regulatory requirements as evidenced by the following:</p>			

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K01S147	<p>483.470(j)(1)(i) LIFE SAFETY CODE STANDARD The administration of every resident board and care facility has in effect and available to all supervisory personnel written copies of a plan for protecting of all persons in the event of fire, for keeping persons in place, for evacuating persons to areas of refuge, and for evacuating persons from the building when necessary. The plan includes special staff response, including fire protection procedures needed to ensure the safety of any resident, and is amended or revised whenever any resident with unusual needs is admitted to the home. All employees are periodically instructed and kept informed with respect to their duties and responsibilities under the plan. Such instruction is reviewed by the staff not less than every 2 months. A copy of the plan is readily available at all times within the facility. 32.7.1, 33.7.1</p> <p>Based on record review and interview, the facility administration failed to ensure all employees are periodically instructed and kept informed with respect to their duties and responsibilities under the plan for special staff response, including fire protection procedures needed to ensure the safety of 6 of 6 clients which is amended, or revised, whenever any resident with unusual needs is admitted to the home. Such instruction is reviewed by the staff at least every two months. This deficient practice could affect all clients.</p> <p>Findings include:</p>	K01S147	The Residential Program Manager will schedule all disaster drills in accordance with the Life Safety Code Standards. These schedules will be provided to all homes and posted in a central location for all staff access. The RPM will also add the drills to the staffing schedule and the staffing assignment sheets as further reminder. The RPM will provide a Disaster Drill Training with all staff no later than April 29, 2014. During this training she will specifically cover the timeframe regulations and ensure staff understand the importance of conducting drills on their scheduled day and time. To ensure systemic compliance	04/30/2014			

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	Based on review of "Record of Fire Drill" documentation with the Residential Program Manager (RPM) on 03/31/14 at 10:00 A.M., lapses in staff fire safety training times were more than the two months allowed as evidenced by the lack of any record of fire drills for the 2:00 P.M. to 10:00 P.M. shift during the third quarter of 2013. The records reflect a lapse in training for the 2:00 P.M. to 10:00 P.M. shift between May 2013 and November 2013. The RPM indicated there was no other fire drill documentation or other fire safety staff training documentation available during this time frame and the drills intended for that shift during this period had been run during an earlier shift on it's scheduled day.		of this citation, the Residential Director and the Residential Program Manager will review alldisaster drills from all homes to ensure the staff are following the specifieddates and times. This monitor will be ongoing and will take place each month. Responsible Parties: Residential Director, ResidentialProgram Manager				

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K01S152	<p>483.470(j)(1)(i) LIFE SAFETY CODE STANDARD (1) The facility holds evacuation drills at least quarterly for each shift of personnel and under varied conditions to - (i) Ensure that all personnel on all shifts are trained to perform assigned tasks; (ii) Ensure that all personnel on all shifts are familiar with the use of the facility's emergency and disaster plans and procedures.</p> <p>(2) The facility must - (i) Actually evacuate clients during at least one drill each year on each shift; (ii) Make special provisions for the evacuation of clients with physical disabilities: (iii) File a report and evaluation on each drill: (iv) Investigate all problems with evacuation drills, including accidents and take corrective action: and (v) During fire drills, clients may be evacuated to a safe area in facilities certified under the Health Care Occupancies Chapter of the Life Safety Code.</p> <p>(3) Facilities must meet the requirements of paragraphs (i) (1) and (2) of this section for any live-in and relief staff that they utilize. Based on record review and interview, the facility failed to ensure fire and evacuation drills were provided for each shift for 1 of 4 quarters. This deficient practice affects all occupants.</p> <p>Findings include:  Based on review of "Record of Fire Drill" documentation with the Residential</p>	K01S152	The Residential Program Manager will schedule all disaster drills in accordance with the Life Safety Code Standards. These schedules will be provided to all homes and posted in a central location for all staff access. The RPM will also add the drills to the staffing schedule and the staffing assignment sheets as further reminder. The RPM will provide a Disaster Drill Training	04/30/2014			

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	Program Manager (RPM) on 03/31/14 at 10:00 A.M., there was no evidence of a fire drill for the 2:00 P.M. to 10:00 P.M. shift during the third quarter of 2013 (July-September). The RPM indicated there was no other fire drill documentation and that the drills intended for that shift during this period had been run during an earlier shift on it's scheduled day.		with all staff no later than April 29, 2014. During this training shewill specifically cover the timeframe regulations and ensure staff understandthe importance of conducting drills on their scheduled day and time. To ensure systemic compliance of this citation, theResidential Director and the Residential Program Manager will review alldisaster drills from all homes to ensure the staff are following the specifieddates and times. This monitor will be ongoing and will take place each month. Responsible Parties: Residential Director, ResidentialProgram Manager				