

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 15G705	X2) MULTIPLE CONSTRUCTION A. BUILDING 02 B. WING _____	X3) DATE SURVEY COMPLETED 06/11/2014
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NAME OF PROVIDER OR SUPPLIER AWS	STREET ADDRESS, CITY, STATE, ZIP CODE 59310 IRELAND RIDGE CT SOUTH BEND, IN 46614
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K020000	<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: 06/11/14</p> <p>Facility Number: 003799 Provider Number: 15G705 AIM Number: 200447350</p> <p>Surveyor: Brett Overmyer, Life Safety Code Specialist</p> <p>At this Life Safety Code survey, AWS 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 32, New 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 and in common living areas. The facility has a capacity of 4 and had a census of 4 at the time of this survey.</p> <p>Calculation of the Evacuation Difficulty</p>	K020000		
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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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K02S043	<p>Score (E-Score) using NFPA 101A, Alternative Approaches to Life Safety, Chapter 6, rated the facility Slow with an E-Score of 2.4.</p> <p>Quality Review by Robert Booher, Life Safety Code Specialist-Medical Surveyor on 06/16/14.</p> <p>The facility was found not in compliance with the aforementioned regulatory requirements as evidenced by the following:</p> <p>483.470(j)(1)(i) LIFE SAFETY CODE STANDARD No door in any means of escape is locked against egress when the building is occupied.</p> <p>Exception: Delayed egress locks complying with 7.2.1.6.1 are permitted on exterior doors. 32.2.2.5.5, 33.2.2.5.5.</p> <p>Based on observation and interview, the facility failed to ensure the doors to 2 of 3 bedrooms were arranged so the staff can open the door from the outside. This deficient practice could affect the residents in the two bedrooms if the doors were locked during an emergency.</p> <p>Findings include:</p>	K02S043	<p>The maintenance contractor was contacted to replace the bedroom door handles with non-locking handles. The handles were replaced on 6/13/14.</p> <p>The residential director completed a walk through of the home to ensure all bedroom door handles have been properly replaced with non-locking handles.</p>	07/11/2014

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K02S123	<p>Based on observation with the Residential Manager on 06/11/14 between 11:20 a.m. and 12:15 p.m., the door to bedroom one and two had a door handle lockable from the inside of the bedroom requiring the use of a key or tool in order to unlock the door from outside of the bedroom. A "key" was not evident at either bedroom door. The Residential Manager was asked at the time of observation if there was a key or some other device available to use to unlock the bathroom doors. The Resident Manager said that they have no device to unlock the doors from the outside.</p> <p>483.470(j)(1)(i) LIFE SAFETY CODE STANDARD Every bathroom door is designed to allow opening from the outside during an emergency when locked. 32.2.2.5.4, 33.2.2.5.4</p> <p>Based on observation and interview, the facility failed to ensure 2 of 2 bathroom doors could be unlocked from the outside during an emergency. This deficient practice could affect anyone locked in the bathroom during a fire or other emergency.</p> <p>Findings include:</p>	K02S123	The maintenance contractor was contacted to replace the bathroom door handles with non-locking handles. The handles were replaced on 6/13/14. The residential director completed a walk through of the home to ensure all bedroom door handles have been properly replaced with non-locking handles.	07/11/2014			

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	Based on observations made during the tour with Residential Manager between 11:20 a.m. and 12:15 p.m. on 06/11/2014, the bathroom door on one side of the Living area had a lock that could be locked from inside the bathroom and the bathroom on the other side of the living area also had a lock that could be locked from inside the bathroom. A "key" was not evident at either bathroom door. The Residential Manager was asked at the time of observation if there was a key or some other device available to use to unlock the bathroom doors. The Resident Manager said that they have no device to unlock the bathroom doors from the outside.			