

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  15G485	X2) MULTIPLE CONSTRUCTION A. BUILDING <u>01</u> B. WING _____	X3) DATE SURVEY COMPLETED  04/24/2015
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NAME OF PROVIDER OR SUPPLIER  ADEC INC	STREET ADDRESS, CITY, STATE, ZIP CODE 403 HAWTHORNE AVE GOSHEN, IN 46526
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K 0000  Bldg. 01	<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: 04/24/15</p> <p>Facility Number: 000999 Provider Number: 15G485 AIM Number: 100239770</p> <p>At this Life Safety Code survey, ADEC 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>The one story facility was sprinklered. The facility has a fire alarm system with smoke detection in the corridors, sleeping rooms and common living areas. The facility has a capacity of 8 and had a census of 8 at the time of this survey.</p> <p>Calculation of the Evacuation Difficulty Score (E-Score) using NFPA 101A, Alternative Approaches to Life Safety,</p>	K 0000		

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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K S046 Bldg. 01	<p>Chapter 6, rated the facility Slow with an E-Score of 3.6.</p> <p>483.470(j)(1)(i) LIFE SAFETY CODE STANDARD Utilities comply with Section 9.1. 32.2.5.1, 33.2.5.1</p> <p>Based on observation and interview, the facility failed to ensure 1 of 1 flexible cords were not used as a substitute for fixed wiring to provide power equipment with a high current draw. NFPA 70, National Electrical Code, 1999 Edition, Article 400-8 requires that, unless specifically permitted, flexible cords and cables shall not be used as a substitute for fixed wiring of a structure. This deficient practice affects staff only in the Laundry Room.</p> <p>Findings include:</p> <p>Based on observation with the Qualified Intellectual Disability Professional on 04/24/2015 at 1:21 p.m. in the Laundry Room, an extension cord was discovered powering the water softener. Based on interview at the time of observation with the Qualified Intellectual Disability Professional, she acknowledged the aforementioned condition.</p>	K S046	<p>Maintenance staff removed the extension cord that was put in place when the home opened in the late 1980's and had the water softener plugged into the outlet All staff are aware that extension cords are not permitted Person Responsible: Maintenance</p>	05/01/2015

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K S056  Bldg. 01	<p>483.470(j)(1)(i) LIFE SAFETY CODE STANDARD PROMPT</p> <p>Where an automatic sprinkler system is installed, for either total or partial building coverage, the system is in accordance with Section 9.7, 33.2.3.5.2 and activates the fire alarm system in accordance with 33.2.3.4.1. The adequacy of the water supply is documented to the authority having jurisdiction.</p> <p>Exception No. 1: In prompt evacuation facilities, an automatic sprinkler system in accordance with NFPA 13D, Standard for the Installation of Sprinkler Systems in One and two Family Dwellings and Manufactured Homes, is permitted. Automatic sprinklers are not required in closets not exceeding 24 sq. ft. and in bathrooms not exceeding 55 sq. ft., provided that such spaces are finished with lath and plaster or materials providing a 15 minute thermal barrier.</p> <p>Exception No. 2: Not applicable</p> <p>Exception No. 3: In prompt and slow evacuation capability facilities where an automatic sprinkler system is in accordance with NFPA 13, Standard for the Installation of Sprinkler Systems, automatic sprinklers are not required in closets not exceeding 24 sq. ft. and in bathrooms not exceeding 55 sq. ft., provided that such spaces are finished with lath and plaster or material providing a 15 minute thermal barrier.</p> <p>Exception No. 4: In prompt and slow evacuation capability facilities up to and including four stories in height, systems in accordance with NFPA 13R, Standard for the Installation of Sprinkler Systems in</p>						

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	<p>Residential Occupancies up to and Including Four Stories in Height, are permitted.</p> <p>Exception No. 5: Not applicable</p> <p>Exception No. 6: Initiation of the fire alarm system is not required for existing installations in accordance with 33.2.3.5.5.</p> <p>SLOW Where an automatic sprinkler system is installed, for either total or partial building coverage, the system is in accordance with Section 9.7 and activates the fire alarm system in accordance with 33.2.3.4.1. The adequacy of the water supply is documented to the authority having jurisdiction.</p> <p>Exception No. 1: Not Applicable</p> <p>Exception No. 2: Not Applicable</p> <p>Exception No. 3: In prompt and slow evacuation capability facilities where an automatic sprinkler system is in accordance with NFPA 13, Standard for the Installation of Sprinkler Systems, automatic sprinklers are not required in closets not exceeding 24 sq. ft. and in bathrooms not exceeding 55 sq. ft., provided that such spaces are finished with lath and plaster or material providing a 15 minute thermal barrier.</p> <p>Exception No. 4: In prompt and slow evacuation capability facilities up to and including four stories in height, systems in accordance with NFPA 13R, Standard for the Installation of Sprinkler Systems in Residential Occupancies up to and Including Four Stories in Height, are permitted.</p> <p>Exception No. 5: Not Applicable</p>			

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	<p>Exception No. 6: Initiation of the fire alarm system is not required for existing installations in accordance with 33.2.3.5.5.</p> <p>IMPRACTICAL Where an automatic sprinkler system is installed, for either total or partial building coverage, the system is in accordance with Section 9.7 and activates the fire alarm system in accordance with 33.2.3.4.1. The adequacy of the water supply is documented to the authority having jurisdiction. 33.2.3.5.2.</p> <p>Exception No. 1: Not Applicable.</p> <p>Exception No. 2: In slow and impractical evacuation capability facilities, an automatic sprinkler system in accordance with NFPA 13D, Standard for the Installation of Sprinkler Systems in One and Two Family Dwellings and Manufactured Homes, with a 30 minute water supply, is permitted. All habitable areas and closets are sprinklered. Automatic sprinklers are not required in bathrooms not exceeding 55 sq. ft., provided that such spaces are finished with lath and plaster or materials providing a 15 minute thermal barrier.</p> <p>Exception No. 3: Not Applicable.</p> <p>Exception No. 4: Not Applicable.</p> <p>Exception No. 5: In impractical evacuation capability facilities up to and including four stories in height, systems in accordance with NFPA 13R, Standard for the Installation of Sprinkler Systems in Residential Occupancies up to and Including Four Stories in Height, are permitted. All</p>			

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	<p>habitable areas and closets are sprinklered. Automatic sprinklers are not required in bathrooms not exceeding 55 sq. ft., provided that such spaces are finished with lath and plaster or materials providing a 15 minute thermal barrier.</p> <p>Exception No. 6: Initiation of the fire alarm system is not required for existing installations in accordance with 33.2.3.5.5.</p> <p>1. Based on observation and interview, the facility failed to replace 1 of 1 corroded sprinklers in the "Back Bedroom". LSC 9.7.5 requires all automatic sprinkler systems shall be inspected, tested and maintained in accordance with NFPA 25, Standard for the Inspection, Testing, and Maintenance of Water-Based Fire Protection Systems. NFPA 25, 1998 edition, 2-2.1.1 requires any sprinkler shall be replaced which is painted, corroded, damaged, loaded, or in the improper orientation. This deficient practice could affect 2 clients.</p> <p>Findings include:</p> <p>Based on observation with the Qualified Intellectual Disability Professional on 4/24/15 at 1:48 p.m., the sprinkler head in the "Back Bedroom" was corroded with a green substance. Based on interview at the time of the observation, the Qualified Intellectual Disability Professional acknowledged the condition of the sprinkler head.</p>	K S056	<p>The fire has the decorative ring in stock and will have a tech to the house this week during inspections the fire inspection company will replace missing rings Person responsible: manager</p>	05/07/2015

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K S147 Bldg. 01	<p>2. Based on observation and interview, the facility failed to ensure 1 of 1 sprinkler heads in Bedroom #1 were maintained. This deficient practice could affect 2 clients.</p> <p>Findings include:</p> <p>Based on observations with the Qualified Intellectual Disability Professional on 04/24/15 at 1:55 p.m., the sprinkler head in Bedroom #1 was missing an escutcheon. Based on interview at the time of observation, the Qualified Intellectual Disability Professional acknowledged the missing escutcheon in Bedroom #1.</p> <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</p>						

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	<p>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 failed to ensure 1 of 1 fire protection plan included special staff response to ensure the safety of five clients in the event of a fire. This deficient practice affects 8 of 8 clients.</p> <p>Findings include:</p> <p>Based on record review of the written fire safety plan titled "Procedure for Actual Fire", with the Qualified Intellectual Disability Professional on 04/24/2015 at 1:21 p.m., clients were to be evacuated in the event of fire to a location outside the home. Based on review of the F-1 Worksheet(s) for Rating Residents and Fire Drill(s) noted clients #1, #2, #3 each "Needs Full Assistance from 2 Staff" to evacuate in the event of fire. Clients #4 and #5 each "Needs Full Assistance or Very Slow." Based on interview at the time of written review, the Qualified Intellectual Disability Professional confirmed the written fire safety plan did</p>	K S147	<p>There are specific safety measures put into place that address the needs of client 1,2,3,4,5 and all others. They are as follows: 1. The home has two overnight staff and an average of four staff on each awake shift. There is an adequate number of staff to address the safe evacuation of the home. 2. Each bedroom has its own egress door. In the event of a fire while in bed, staff will be able to quickly assist those who need assist out of the home. 3. The most evident is that the home is fully sprinkled. The sprinkler system provides ample time for all staff to evacuate each individual in the event of a fire. This is why the sprinkler system was installed, so that we will have time to help evacuate until the fire department arrives. All staff have been trained in fire drills, and the use of the fire system. All staff are aware of the bedroom egress in each room. All staff run fire drills each quarter and they are run on all shifts using a variety of egress and staff ratios. The fore</p>	05/15/2015

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	not include the aforementioned special staff response in the event of a fire.		department conducts at least annual trainings with the staff on fire safety. The facility believes that with all safety measures that are in place, the evacuation plan is appropriate. Person Responsible: Director		