

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  15G435	X2) MULTIPLE CONSTRUCTION A. BUILDING 01 B. WING _____	X3) DATE SURVEY COMPLETED  07/03/2014
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NAME OF PROVIDER OR SUPPLIER  TRANSITIONAL SERVICES SUB LLC	STREET ADDRESS, CITY, STATE, ZIP CODE 4155 RAY ST INDIANAPOLIS, IN 46241
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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: 07/03/14</p> <p>Facility Number: 000949 Provider Number: 15G435 AIM Number: 100244680</p> <p>Surveyor: Mark Caraher, Life Safety Code Specialist,</p> <p>At this Life Safety Code survey, Transitional Services Sub LLC 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 building was fully sprinklered. The facility has a fire alarm system with smoke detection in corridors, in sleeping rooms and in all living areas. The facility has a capacity of 8 and had a census of 7 at the time of this survey.</p> <p>Calculation of the Evacuation Difficulty</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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K010130	<p>Score (E-Score) using NFPA 101A, Alternative Approaches to Life Safety, Chapter 6, rated the facility Slow with an E-Score of 2.5.</p> <p>Quality Review by Robert Booher, Life Safety Code Specialist-Medical Surveyor on 07/08/14.</p> <p>The facility was found not in compliance with the aforementioned regulatory requirements as evidenced by the following:</p> <p>Based on observation and interview, the facility failed to maintain 1 of 2 smoke barrier doors. LSC 4.6.12.2 states existing life safety features obvious to the public, if not required by the Code, shall be maintained or removed. This deficient practice could affect all clients, staff and visitors.</p> <p>Findings include:</p> <p>Based on observation with the Home Manager during a tour of the facility from 12:30 p.m. to 12:50 p.m. on 07/03/14, the set of smoke barrier doors in the east</p>	K010130	<p>A request has been made to maintenance to fix the east hallway door that dragged on the floor, leaving a gap between doors that did not allow the door to fully maintain the smoke barrier.</p> <p>The Home Manager will receive retraining to include ensuring that all smoke barrier doors in the home fit properly to maintain a smoke barrier. If it is discovered that in the future doors are not fit properly to maintain a smoke barrier, the Home Manager will report it to Indiana Mentor maintenance staff so that it can be repaired in a timely manner. Ongoing, the Home Manager will</p>	08/02/2014

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K01S016	<p>hallway are each held open by a magnetic hold device and arranged to automatically close but the bottom of the east door in the door set dragged on the floor, did not fully close and left a four inch gap between doors when tested for closing five times. Based on interview at the time of observation, the Home Manager acknowledged the aforementioned smoke barrier door set did not fully close to maintain the smoke barrier.</p> <p>483.470(j)(1)(i) LIFE SAFETY CODE STANDARD Interior wall and ceiling finish materials in accordance with 10.2 and 10.2.3 is Class A or Class B. 32.2.3.3.2, 33.2.3.3 Based on record review, observation and interview; the facility failed to ensure the interior finish in 1 of 10 rooms was rated Class A or Class B for a Slow rated facility. This deficient practice could affect all clients in the facility.</p> <p>Findings include:</p> <p>Based on record review with the Home Manager from 11:50 a.m. to 12:30 p.m. on 07/03/14, documentation of the flame spread rating for interior finishes in the facility was not available for review. Based on observation with the Home Manager during a tour of the facility from</p>	K01S016	<p>complete walkthroughs of the home at least weekly to ensure that all doors fit properly to maintain a smoke barrier. If doors are not fit properly to maintain a smoke barrier, the Home Manager will report it to Indiana Mentor maintenance staff so that it can be repaired in a timely manner.</p> <p>Responsible Party: Home Manager, Program Director, Maintenance staff.</p> <p>A request has been put in to Teike Enterprises to treat the wood paneling in the dining room walls with flame retardant material. Ongoing, the Maintenance Supervisor, Area Director and Regional Director will work with Teike Enterprises to ensure that any wood paneling that is installed in any group homes is treated with flame retardant material and that documentation of the flame spread rating for interior finishes in the facility is available for review. Responsible Party: Maintenance Supervisor, Area Director and Regional Director</p>	08/02/2014

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K01S056	<p>12:30 p.m. to 12:50 p.m. on 07/03/14, wood paneling was installed in the dining room from the floor to three feet high on each of the four walls. Based on interview at the time of record review and of the observations, the Home Manager stated the wood paneling had not been treated with flame retardant material and acknowledged documentation of the flame spread rating for wood paneling in the dining room was not available for review.</p> <p>483.470(j)(1)(i) LIFE SAFETY CODE STANDARD PROMPT 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>			

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	<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> <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><b>SLOW</b> 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</p>			

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	<p>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> <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.</p>			

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	<p>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 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. Based on observation and interview, the facility failed to keep the minimum amount and type of spare sprinklers on the premises in the spare sprinkler cabinet. LSC 9.7.5 requires automatic sprinkler systems 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, Section 2-4.1.4 states a supply of at least six spare sprinklers shall be stored in a</p>	K01S056	The Regional Director and Maintenance Supervisor, in conjunction with US Automatic, will ensure that 6 additional sprinklers are stored in the spare sprinkler cabinet. Indiana MENTOR has notified US Automatic of this deficiency and will ensure that extra sprinklers are added to the five already available. Ongoing, the Maintenance Supervisor, Regional Director, and/or the Area Director will stay in constant contact with the contact from US	08/02/2014

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	<p>cabinet on the premises for replacement purposes. The stock of spare sprinklers shall be proportionally representative of the types and temperature ratings of the system sprinklers. A minimum of two sprinklers of each type and temperature rating installed shall be provided. The cabinet shall be so located it will not be exposed to moisture, dust, corrosion, or a temperature exceeding 100°F (38°C). This deficient practice could affect all clients in the facility.</p> <p>Findings include:</p> <p>Based on observation with the Home Manager during a tour of the facility from 12:30 p.m. to 12:50 p.m. on 07/03/14, a total of five spare sprinklers were in the spare sprinkler cabinet in the sprinkler system riser room. Based on interview at the time of observation, the Home Manager acknowledged a minimum of six spare sprinklers representative of the types of installed sprinklers was not provided on the premises in the spare sprinkler cabinet.</p>		Automatic to ensure that all work and updates are completed and followed up with. Responsible Party: US Automatic, Regional Director, and Maintenance Supervisor of Indiana Mentor.		