

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 15G400	X2) MULTIPLE CONSTRUCTION A. BUILDING 01 B. WING _____	X3) DATE SURVEY COMPLETED 11/25/2014
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NAME OF PROVIDER OR SUPPLIER NORMAL LIFE OF INDIANA	STREET ADDRESS, CITY, STATE, ZIP CODE 605 W CRAIG BRAZIL, IN 47834
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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: 11/25/14</p> <p>Facility Number: 000914 Provider Number: 15G400 AIM Number: 100244450</p> <p>Surveyor: Bridget Brown, Life Safety Code Specialist</p> <p>At this Life Safety Code survey, Normal Life of Indiana 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 not sprinklered. The facility has a fire alarm system with smoke detection in corridors and common living areas. The fire alarm system is not monitored. The facility has the capacity for 8 and had a census of 6 at the time of this survey.</p>	K010000		

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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K01S147	<p>Calculation of the Evacuation Difficulty Score (E-Score) using NFPA 101A, Alternative Approaches to Life Safety, Chapter 6, rated the facility Slow with an E-Score of 2.2.</p> <p>Quality Review by Dennis Austill, Life Safety Code Specialist on 12/03/14.</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 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 Based on record review and interview,</p>	K01S147				12/25/2014	

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	<p>the facility failed to ensure a written fire protection plan included the necessary means for evacuating 1 of 6 clients during the night shift in the event of fire. This deficient practice affects 1 of 6 clients.</p> <p>Findings include:</p> <p>Based on review of the Fire Drill Procedure with house staff #1 on 11/25/14 at 2:30 p.m., clients were to be evacuated in the event of fire to a location outside the home. House staff #1 said at the time of record review, one staff person was on duty for the overnight shift, sometimes there were two but they were short handed. A review of the F-1's, Worksheet for Rating Residents on risk factors, noted Client #1 had impaired mobility and needed "full assistance or very slow"; The Client's need for extra help was determined to "Needs Limited Assistance from two staff" (to evacuate). Staff #1 confirmed Client #1 would need the assistance of two to complete a prompt emergency evacuation. A review of the employee schedule for the week confirmed one staff was scheduled to work.</p>		<p>The facility will ensure that sufficient staffing and written fire protection and evacuation plans are available and all staff are familiar with their implementation.</p> <p>a. There has been a recent change in the number of residents in the home. A review of the current evacuation procedures will be conducted. This review will include a timed supervised drill on the overnight shift to evaluate client's current assistance needs for evacuation. The QIDP will be assigned to supervise and time a drill to determine the evacuation process and assistance needs of the individuals. Results of this drill will be reviewed with the Program Manager and Clinical Supervisor. Drills from the past year for all shifts will be reviewed to analyze for any trends or concerns regarding client evacuations. If additional staffing needs are identified, the agency will immediately adjust scheduled staffing to accommodate client safety for evacuations.</p> <p>b. The home specific evacuation procedures will be updated to reflect current client needs. The emergency procedures specific to the home will be updated and made available to all staff in the homes life safety book. All staff will complete formal training on the revised procedures and guidelines. These procedures will include steps to</p>				

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			<p>follow in the event of a fire/ emergency including a designated meeting place for evacuations, alarm use, and contacting the fire department as well as specific evacuation needs of each current individual in the home.</p> <p>The Home Manager is responsible for insuring that these emergency procedures are current and that all staff receive training on these procedures. The Safety Committee will audit the procedures as part of quarterly home checks to insure that they are complete and current. Any issues will be addressed immediately.</p>		