

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 15G632	X2) MULTIPLE CONSTRUCTION A. BUILDING 01 B. WING _____	X3) DATE SURVEY COMPLETED 03/28/2014
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NAME OF PROVIDER OR SUPPLIER CARDINAL SERVICES INC OF INDIANA	STREET ADDRESS, CITY, STATE, ZIP CODE 211 S BIRKEY BREMEN, IN 46506
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(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETION DATE
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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: 03/28/14</p> <p>Facility Number: 001208 Provider Number: 15G632 AIM Number: 100240170</p> <p>Surveyor: Amy Kelley, Life Safety Code Specialist</p> <p>At this Life Safety Code survey, Cardinal Services Inc. 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>The one story facility was fully sprinklered. The facility has a fire alarm system with smoke detection in the corridors, in sleeping rooms and in common living areas. The facility has a capacity of 8 and had a census of 8 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 Slow with an E-Score of 3.9.</p> <p>Quality Review by Robert Booher, Life Safety Code Specialist-Medical Surveyor on 04/01/14.</p> <p>The facility was found not in compliance with the aforementioned regulatory requirements as evidenced by the following:</p>			

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K01S040	<p>483.470(j)(1)(i) LIFE SAFETY CODE STANDARD Doors or paths of travel to a means of escape are not less than 28 inches.</p> <p>Exception: Bathroom doors are not less than 24 inches. 33.2.2.5.1 Based on observation and interview, the facility failed to ensure the path of travel to a means of escape was not less than 28 inches in 1 of 4 sleeping rooms. This deficient practice could affect 2 of 8 clients.</p> <p>Findings include:</p> <p>Based on observation with the Maintenance Manager on 03/28/14 at 12:20 p.m., there was a dresser placed near the exit door from sleeping room # 1 decreasing the width of the path travel to 24 inches. Measurements were provided by the Maintenance Manager at the time of observation.</p>	K01S040	<p>On 3/28/14 the dresser was moved to a different location, allowing more than a 28" path/door opening. DSP staff and consumers had recently rearranged the bedroom. Prior to the new arrangement, the dresser was in a different location away from the exit door. DSP staff will be retrained by 4/27/14 on ensuring a path of travel to a means of escape is not less than 28". (See attachment A) The Residential Manager completes a monthly environment check, which includes checking the exits and pathways The Facility Maintenance Manager and Coordinator each complete a quarterly environment check, which includes checking the exits and pathways to ensure regulation is met. Residential Manager, Facility Maintenance Manager, and Coordinator Responsible</p>	04/27/2014			