

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 15G508	X2) MULTIPLE CONSTRUCTION A. BUILDING 01 B. WING _____	X3) DATE SURVEY COMPLETED 04/05/2012
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NAME OF PROVIDER OR SUPPLIER NORMAL LIFE OF INDIANA	STREET ADDRESS, CITY, STATE, ZIP CODE 4475 N 17TH ST TERRE HAUTE, IN 47805
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K0000	<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: 04/05/12</p> <p>Facility Number: 001022 Provider Number: 15G508 AIM Number: 100245140</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 fully sprinklered. The facility has a fire alarm system with smoke</p>	K0000		

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>detection in corridors, client rooms and in all 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, Chapter 6, rated the facility Slow with an E-Score of 2.0.</p> <p>Quality Review by Robert Booher, Life Safety Code Specialist-Medical Surveyor on 04/10/12.</p> <p>The facility was found not in compliance with the aforementioned regulatory requirements as evidenced by the following:</p>				

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K0130	<p>Based on observation and interview, the facility failed to ensure 1 of 5 sleeping room doors was not prevented from closing. LSC 4.6 General Requirements at 4.6.12.2 requires existing LSC features obvious to the public, such as door closers, to be either maintained or removed. This deficient practice affects all occupants.</p> <p>Findings include:</p> <p>Based on observation with the program director on 04/05/12 at 10:35 a.m., the self closing door to the first sleeping room on the west side of the corridor would not close. The door was caught on the carpeting. The program director acknowledged at the time of observation, the door was not closing.</p>	K0130	<p>Repairs to the sleeping room door were completed on 4-5-12 so that it is no longer prevented from closing. This repair included replacing the hydraulic closer on the door. All sleeping room doors are inspected on at least a quarterly basis as part of the agencies safety inspections. Additionally, the Home Manager is responsible to report any safety issues immediaely to the Maintenance Department. Any doors found to be defective or unable to close are scheduled for immediate repair. The Licensing and Compliance Director is responsible for coordinating any such necessary repairs.</p>	05/04/2012	

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KS056	<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 habitable areas and closets are sprinklered. Automatic</p>			

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	<p>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 record review and interview, the facility failed to ensure sprinkler waterflow alarm devices were tested during 3 of 4 quarters during the past year. LSC 9.7.5 refers to NFPA 25, the Standard for the Inspection, Testing, and Maintenance of Water-Based Fire Protection Systems. NFPA 25 at 2-3.3 requires waterflow alarm devices including but not limited to mechanical water motor gongs, vane type waterflow devices and pressure switches that provide audible or visual signals be tested quarterly. This deficient practice could affect all clients and staff.</p> <p>Findings include:</p> <p>Based on review of the sprinkler system Inspection Reports with the program director on 04/05/12 at 10:15 a.m., documentation for 2011 inspections of waterflow</p>	KS056	<p>1. A quarterly inspection of the homes sprinkler system was conducted in 6/2011. The copy of this report was not filed properly at the time of the survey. The Home Manager will receive training on the content and expectations for the home fire system documentation book. The Program Director will be responsible for this training. The Licensing and Compliance Director will be responsible of tracking and coordinating the distribution of inspection reports to assure timely filing of these documents.</p> <p>2. Replacement escutcheons are being ordered for those that were missing. Inspection of sprinkler escutcheons is part of the agencies quarterly safety inspections. Any missing escutcheons identified during those inspections will be scheduled for immediate repair. The Licensing and</p>	05/04/2012

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	<p>alarm devices was dated 03/11/11 and 12/14/11. The program director acknowledged the nine month interval between the inspections did not meet the quarterly inspection requirement.</p> <p>2. Based on observation and interview, the facility failed to ensure sprinkler heads providing protection for 2 of 5 client rooms were maintained. LSC 9.7.5 refers to NFPA 25, the Standard for the Inspection, Testing, and Maintenance of Water-Based Fire Protection Systems. NFPA 25 at 2-2.1.1 requires sprinklers be free of damage such as missing components like escutcheons. This deficient practice could affect all staff, visitors and residents.</p> <p>Findings include:</p> <p>Based on observation with the program director on 04/05/12 between 10:30 a.m. and 11:00 a.m., sprinkler head escutcheons were missing in client rooms on the west side of the sleeping corridor in the second sleeping room and in the first sleeping room on the east side of the</p>		Compliance Director is responsible for coordinating any such necessary repairs.		

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	sleeping room corridor. The program director acknowledged the escutcheons were missing at the time of observation.			