

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 15G793	X2) MULTIPLE CONSTRUCTION A. BUILDING 01 B. WING _____	X3) DATE SURVEY COMPLETED 08/22/2014
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NAME OF PROVIDER OR SUPPLIER DUNGARVIN INDIANA LLC	STREET ADDRESS, CITY, STATE, ZIP CODE 113 S 325 E VALPARAISO, IN 46385
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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: 08/22/14</p> <p>Facility Number: 012584 Provider Number: 15G793 AIM Number: 201018520</p> <p>Surveyor: Mark Caraher, Life Safety Code Specialist,</p> <p>At this Life Safety Code survey, Dungarvin Indiana LLC, 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 32, New Residential Board and Care Occupancies.</p> <p>This one story building was determined to be fully sprinklered. The facility has a monitored fire alarm system with smoke detection in corridors, in bedrooms and in all living areas. The facility has a capacity of 4 and had a census of 3 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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K01S056	<p>Calculation of the Evacuation Difficulty Score (E-Score) using NFPA 101A, Alternative Approaches to Life Safety, Chapter 6, rated the facility Prompt with an E-Score of 0.4.</p> <p>Quality Review by Robert Booher, Life Safety Code Specialist-Medical Surveyor on 08/25/14.</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 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 and initiates the fire alarm system in accordance with 32.2.3.4.1, 32.2.3.5.2. 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.</p>			

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	<p>Facilities with more than eight residents are permitted. Facilities with more than eight residents are treated as two-family dwellings with regard to water supply. Additionally, entrance foyers are sprinklered.</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 an 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 initiates the fire alarm system in accordance with 32.2.3.4.1. The adequacy of the water supply is documented to the authority having jurisdiction.</p>			

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	<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. Facilities with more than eight residents are treated as two family dwellings with regard to water supply.</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> <p>Exception No. 6: Initiation of the fire alarm system is not required for existing installations in accordance with 32.2.3.5.5.</p> <p>MPRACTICAL Where an automatic sprinkler system is installed, for either total or partial building coverage, the system is in accordance with Section 9.7 and shall initiate the fire alarm</p>						

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	<p>system in accordance with 32.2.3.4.1. The adequacy of the water supply is documented to the authority having jurisdiction. 32.2.3.5.2.</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 system in One and Two Family Dwellings and Manufactured Homes, with a 30 minute water supply, is permitted. All habitable areas and closets are sprinklered. Facilities with more than eight residents are treated as two family dwellings with regard to water supply.</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 stores in height, systems in accordance with NFPA 13R, Standard for the Installation of Sprinkler Systems in Residential Occupancies up to and Including Four Stores in Height, are permitted. All habitable areas and closets are sprinklered.</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 record review, observation and interview; the facility failed to ensure 1 of 1 sprinkler gauges was tested or replaced every five years. LSC 9.7.5 requires automatic sprinkler systems be inspected, tested and maintained in</p>	K01S056	<p>K0056 483.470(j)(1)(i) LIFE SAFETY CODE STANDARD The Maintenance Coordinator has been retrained on this standard. The sprinkler gauge that is over five years old will be replaced on 9/9/14. The</p>	09/09/2014			

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	<p>accordance with NFPA 25, Standard for the Inspection, Testing, and Maintenance of Water-Based Fire Protection Systems. NFPA 25, Section 2-3.2 states gauges shall be replaced every five years or tested every five years by comparison with a calibrated gauge. Gauges not accurate to within 3 percent of the full scale shall be recalibrated or replaced. This deficient practice could affect all clients, staff and visitors.</p> <p>Findings include:</p> <p>Based on review of VFP Fire Systems "Report of Inspection" documentation dated 07/16/14 with the House Manager from 10:35 a.m. to 12:00 p.m. on 08/22/14, the date of sprinkler gauge replacement or recalibration was not available for review. Based on observation with the House Manager during a tour of the facility from 12:00 p.m. to 12:30 p.m. on 08/22/14, the manufacture date of 2006 was listed on the face of the sprinkler system gauge with no recalibration date recorded on the gauge. Based on interview at the time of record review and of observation, the House Manager acknowledged the sprinkler system gauge had not been replaced or recalibrated within the last five years.</p>		<p>Maintenance Coordinator has added calibration checks of the sprinkler gauges to the Maintenance monthly site inspections, in order to ensure all gauges have been tested, recalibrated, or replaced every five years, per Code.</p> <p>Target Date of Completion: 9/9/14 Persons Responsible: Maintenance Director.</p>				

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K01S152	<p>483.470(j)(1)(i) LIFE SAFETY CODE STANDARD The facility holds evacuation drills at least quarterly for each shift of personnel and under varied conditions to ensure that all personnel on all shifts are trained to perform assigned tasks; and ensure that all personnel on all shifts are familiar with the use of the facility's emergency and disaster plans and procedures.</p> <p>The facility must - (i) Actually evacuate clients during at least one drill each year on each shift; (ii) Make special provisions for the evacuation of clients with physical disabilities; (iii) File a report and evaluation on each drill; (iv) Investigate all problems with evacuation drills, including accidents and take corrective action: and (v) During fire drills, clients may be evacuated to a safe area in facilities certified under the Health Care Occupancies Chapter of the Life Safety Code.</p> <p>Facilities meet the requirements of paragraphs (1) and (2) of this section for any live-in and relief staff that they utilize. Based on record review and interview, the facility failed to provide complete documentation of fire drills conducted on the first, second and third shifts for 4 of 4 quarters. This deficient practice could affect all clients, staff and visitors.</p>	K01S152	<p>K0152 483.470(j)(1)(i) LIFE SAFETY CODE STANDARD The QDDP, House Manager, and all staff will be retrained on this standard. Standard agency practice and staff training require all fire</p>	09/21/2014			

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	<p>Findings include:</p> <p>Based on review of "Fire Drill Record" and Spectrum Community Services (SCS) of Indiana LLC "Emergency Drill Report: Fire" documentation with the House Manager from 10:35 a.m. to 12:00 p.m. on 08/22/14, each of 44 fire drills conducted within the most recent twelve month period did not include activation of the fire alarm system. The "Fire Drill Record" dated 03/19/14 at 11:53 p.m. was the only one of 44 drill records in which a second version of the the aforementioned report had inserted a section entitled "For Group Homes That Have Monitored Alarms" "Pull Station Used for Test" in the drill record but this section was left blank. Based on interview at the time of record review, the House Manager stated SCS owned the facility until the end of 2013 and acknowledged documentation for each of 44 fire drills conducted within the most recent twelve month period did not include activation of the fire alarm system.</p>		<p>drills conducted in a setting where there is a monitored fire alarm system, to actually set-off the alarms and evacuate all clients to a "safe-area". All staff will be retrained on fully and accurately completing the entire Fire Drill Record form, including the portions relating to utilizing the pull-station and notification to the fire-alarm monitoring company. Immediately, and ongoing, the House Manager will review weekly all Fire Drill documentation to ensure it has been completed accurately and completely. After one month, if compliance has been demonstrated, the House Manager will review all fire-drill documentation on a monthly basis going forward.</p> <p>Target Date of Completion: 9/21/14</p> <p>Persons Responsible: QDDP and House Manager.</p>		