

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 15G761	X2) MULTIPLE CONSTRUCTION A. BUILDING <u>01</u> B. WING _____	X3) DATE SURVEY COMPLETED 11/25/2015
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NAME OF PROVIDER OR SUPPLIER DUNGARVIN INDIANA LLC	STREET ADDRESS, CITY, STATE, ZIP CODE 60650 LILAC RD SOUTH BEND, IN 46614
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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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K 0000 Bldg. 01	<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: 11/25/15</p> <p>Facility Number: 011959 Provider Number: 15G761 AIM Number: 200970870</p> <p>At this Life Safety Code Survey, Dungarvin Indiana 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 32, New Residential Board and Care Occupancies.</p> <p>This one story facility was fully sprinklered. The facility has a fire alarm system with smoke detection in the corridors, in client sleeping rooms and in common living areas. There were also battery operated smoke detectors in client sleeping rooms and in common living areas. The facility has a capacity of 4 and had a census of 4 at the time of this survey.</p>	K 0000		
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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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K S046 Bldg. 01	<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 0.6</p> <p>Quality Review completed 12/01/15 - DA</p> <p>483.470(j)(1)(i) LIFE SAFETY CODE STANDARD Utilities comply with Section 9.1. 32.2.5.1, 33.2.5.1</p> <p>1. Based on observation and interview, the facility failed to maintain 1 of 6 dining room electrical outlets. NFPA 70, National Electrical Code 70, 1999 edition, Article 410-3, Live Parts, requires receptacles to have no live parts normally exposed to contact. This deficient practice could affect all staff and clients.</p> <p>Findings include:</p> <p>Based on observations with the Program Director on 11/25/15 at 11:59 a.m., an electrical outlet was missing a cover in the dining room. Based on interview at the time of observation, the Program Director acknowledged the aforementioned condition.</p> <p>2. Based on observation and interview,</p>	K S046	<p>K0046</p> <p>483.470(j)(1)(i) LIFE SAFETY CODE STANDARD</p> <p>The Lead DSP, Program Director/QDDP, and Maintenance Coordinator will review this standard.</p> <p>1. On 12/7/15, a cover was installed on the electrical outlet in the dining room that was missing a cover.</p> <p>2. The extension cord identified is not powering a storage tank for the sprinkler system; it is powering a low current draw heat-tape which keeps the water line and storage tank from freezing in cold weather, and therefore does not appear to be a violation of Code.</p> <p>Ongoing, and as part of the existing</p>	12/07/2015

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	<p>the facility failed to ensure 1 of 1 flexible cords were not used as a substitute for fixed wiring to provide power equipment with a high current draw. NFPA 70, National Electrical Code, 1999 Edition, Article 400-8 requires that, unless specifically permitted, flexible cords and cables shall not be used as a substitute for fixed wiring of a structure. This deficient practice could affect staff and all clients.</p> <p>Findings include:</p> <p>Based on observation with Program Director on 11/25/15 at 11:54 a.m., an extension cord was powering a storage tank for the sprinkler system. Based on interview at the time of observation, the Program Director acknowledged the aforementioned condition.</p>		<p>monthly inspection, the house will be inspected on a monthly basis by the Lead DSP and/or Program Director to ensure all outlets have covers and that no flexible cords are used as a substitute for fixed wiring to provide power equipment with a high current draw.</p> <p>Completed: 12/7/15</p> <p>Persons Responsible: Program Director/QDDP, Lead DSP, and Maintenance Director.</p>		