

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 15G369	X2) MULTIPLE CONSTRUCTION A. BUILDING 01 B. WING _____	X3) DATE SURVEY COMPLETED 03/27/2013
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NAME OF PROVIDER OR SUPPLIER REM- INDIANA INC	STREET ADDRESS, CITY, STATE, ZIP CODE 7044 CASTLE MANOR INDIANAPOLIS, IN 46214
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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: 03/27/13</p> <p>Facility Number: 000883 Provider Number: 15G369 AIM Number: 100244300</p> <p>Surveyor: Mark Caraher, Life Safety Code Specialist,</p> <p>At this Life Safety Code survey, REM-Indiana, 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 33, Existing Residential Board and Care Occupancies.</p> <p>This one story building was determined to be fully sprinklered. The facility has a fire alarm system with smoke detection in corridors, bedrooms and 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</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>Score (E-Score) using NFPA 101A, Alternative Approaches to Life Safety, Chapter 6, rated the facility Slow with an E-Score of 3.0.</p> <p>Quality Review by Robert Booher, Life Safety Code Specialist-Medical Surveyor on 04/01/13.</p> <p>The facility was found not in compliance with the aforementioned regulatory requirements as evidenced by the following:</p>				

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K01S056	<p>483.470(j)(1)(i) LIFE SAFETY CODE STANDARD PROMPT 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</p>			

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	<p>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. 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 automatic sprinkler systems was maintained in reliable operating condition. LSC 9.7.1.1 refers to NFPA 13R, the Standard for the Installation of Sprinkler Systems in Residential Occupancies. NFPA 13R, Section 2-4.1 states where a common supply main is used to supply both domestic and sprinkler systems, a single, listed control valve shall be provided to shut off both the domestic and sprinkler systems, and a separate shutoff valve shall be provided for the domestic system only. Exception: The sprinkler system piping shall be permitted to have a separate control valve where supervised by one of the following methods:</p> <p>(a) Central station, proprietary, or remote alarm service</p> <p>(b) Local alarm service that causes the sounding of an audible signal at a constantly attended location</p> <p>(c) Valves that are locked open</p> <p>This deficient practice affects all clients,</p>	K01S056	<p>USAutomatic installed a lock and chain in order to ensure secure the valve on the backflow device on 4/3/2013. Ongoing, the Maintenance supervisor, in conjunction with the Area Director, will review all reports from USAutomatic, to ensure that all area's of negligence are followed up on. Responsible Party: Maintenance Supervisor and Area Director</p>	04/21/2013

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	<p>staff and visitors.</p> <p>Findings include:</p> <p>Based on review of USAutomatic Fire and Security "Addendum Report: Recommendations" documentation dated 01/29/13 with the Regional Director during record review at the Corporate Office from 9:20 a.m. to 10:30 a.m. on 03/27/13, the following comments were stated in the aforementioned report, "Two of the system control valves are not locked, sealed or monitored." Based on observation with the Direct Services Provider (DSP) during a tour of the facility from 12:30 p.m. to 12:50 p.m. on 03/27/13, automatic sprinkler system shutoff valves were not locked or monitored. Based on interview at the time of observation, the DSP acknowledged the automatic sprinkler system shutoff valves were not locked or monitored.</p>				

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K01S152	<p>483.470(j)(1)(i) LIFE SAFETY CODE STANDARD (1) The facility holds evacuation drills at least quarterly for each shift of personnel and under varied conditions to - (i) Ensure that all personnel on all shifts are trained to perform assigned tasks; (ii) Ensure that all personnel on all shifts are familiar with the use of the facility's emergency and disaster plans and procedures.</p> <p>(2) 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>(3) Facilities must meet the requirements of paragraphs (i) (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 conduct fire drills under varied conditions on the second shift for 3 of 4 quarters. This deficient practice affects all clients, staff and visitors.</p> <p>Findings include: Based on review of "Fire Drill Report" documentation with the Regional Director</p>	K01S152	All Direct Support Staff will be retrained on completing fire drills as scheduled and correctly. The Home Manager will be retrained on ensuring that all fire drills are completed appropriately, correctly, and as scheduled, per Indiana MENTOR. Ongoing, if completed incorrectly, it will be expected that the Direct Support Staff will complete again, until corrected. Ongoing, the Quality	04/26/2013			

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	during record review at the Corporate Office from 9:20 a.m. to 10:30 a.m. on 03/27/13, fire drills conducted on the second shift on 06/15/12, 08/06/12 and 11/19/12 were conducted, respectively, at 7:00 p.m., 7:25 p.m. and 7:12 p.m. Based on interview at the time of record review, the Regional Director acknowledged second shift fire drills for three of four quarters were not conducted under varied conditions.		Assurance staff, in conjunction with the Program Director and Area Director will review all fire drills to ensure adequacy, accuracy, and thoroughness. Responsible Party: Direct Care Staff, Home Manager, Program Director, Quality Assurance Staff, and Area Director	