

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 15G403	X2) MULTIPLE CONSTRUCTION A. BUILDING 00 B. WING _____	X3) DATE SURVEY COMPLETED 05/21/2015
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NAME OF PROVIDER OR SUPPLIER DAMAR SERVICES INC--BRADFORD	STREET ADDRESS, CITY, STATE, ZIP CODE 8835 E CR 200 S AVON, IN 46168
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W 0000 Bldg. 00	<p>This visit was for the investigation of complaint #IN00173658.</p> <p>Complaint #IN00173658: Substantiated, federal/state deficiencies related to the allegations are cited at: W102, W104, W406 and W446.</p> <p>Dates of Survey: 5/14/15 and 5/21/15.</p> <p>Facility Number: 000917 Provider Number: 15G403 AIMS Number: 100249320</p> <p>These deficiencies also reflect state findings in accordance with 460 IAC 9.</p>	W 0000		
W 0102 Bldg. 00	<p>483.410 GOVERNING BODY AND MANAGEMENT The facility must ensure that specific governing body and management requirements are met.</p> <p>Based on observation, record review and interview, the facility failed to meet the Condition of Participation: Governing Body for 4 of 4 sampled clients (A, B, C and D). The governing body failed to exercise general policy, budget and operating direction over the facility to</p>	W 0102	<p>1. Staffing on the 3rd shift has now been adjusted to two full time awake staff on 3rd shift 2. All Group Homes will be experiencing admissions within the coming months. All Group Homes F-1 rating was reviewed and compare to this home to determine if increased staffing</p>	06/20/2015

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>ensure adequate staffing levels in the home to ensure the evacuation of clients A, B, C and D.</p> <p>Findings include:</p> <p>1. The governing body failed to exercise general policy, budget and operating direction over the facility to ensure adequate staffing levels in the home to ensure the evacuation of clients A, B, C and D. Please see W104.</p> <p>2. The governing body failed to meet the Condition of Participation: Physical Environment and to ensure adequate staffing levels in the home to ensure the evacuation of clients A, B, C and D. Please see W406.</p> <p>This federal tag relates to complaint #IN00173658.</p> <p>9-3-1(a)</p>		<p>would be needed. It appears at this time no other Group Homes within Damar Services would have to increase their staffing on 3rd shift. 3. During the last year – there were several discharges and admissions within the home that resulted in a new total F-1 score. Admits added all had significant lower F-1 rating (unknown until after admission). A new protocol has been added to assessing individuals referred for placement. Protocol includes during the preplacement visits two fire drill assessments will be completed. One will be during awake time and the other during sleep time and an F-1 will be completed to gather a general idea of ones ability. Those with high rating will be assessed to determine if training should be done to improve one's score and/or if this is likely the functioning level of the person. The results will help determine if individual is appropriate for placement within the staffing ratio present. In addition to this – F-1 rating will be completed by the IDT instead of the Residential Manager. Clarifications on rating for the "risk factors" have been discussed with all team members to and now a better understanding of the scores is known. F-1 scores at time of survey were slightly incorrect. 4. All F-1 worksheets will be completed by the IDT upon considering a new admission and</p>		

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W 0104 Bldg. 00	<p>483.410(a)(1) GOVERNING BODY The governing body must exercise general policy, budget, and operating direction over the facility. Based on observation, record review and interview for 4 of 4 sampled clients (A, B, C and D), the governing body failed to exercise general policy, budget and operating direction over the facility to ensure adequate staffing levels in the home to ensure the evacuation of clients A, B, C and D.</p> <p>Findings include: The governing body failed to exercise general policy, budget and operating direction over the facility to ensure adequate staffing levels in the home to ensure the evacuation of clients A, B, C and D. Please see W446.</p> <p>This federal tag relates to complaint #IN00173658.</p> <p>9-3-1(a)</p>	W 0104	<p>quarterly on all residents to asses the overall scores of a home. Staffing will be adjusted if scores indicate a significant lower overall score than in previous years.</p> <p>1. Staffing on the 3rd shift has now been adjusted to two full time awake staff on 3rd shift 2. All residents F-1 scores have been recalculated by the IDT team. All Residential Manager and Lead staff have received training regarding how to scores one F-1 rating. Score given should not be based on ones poorest performance during a drill or anticipated problems that could occur but rather ones average response over several drills. Since the survey, client A has been discharged as expected and client B continues to be referred for adult placement. It is anticipated discharge will occur within the end of the year. 3. Clarifications on rating for the "risk factors" have been discussed with all team members and now a better understanding of how to scores is known. Individuals visiting during preplacement will participate in two fire drill assessments. One will be during awake time and the other during sleep time and an F-1 will be completed to gather a</p>	06/20/2015	

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W 0406 Bldg. 00	483.470 PHYSICAL ENVIRONMENT The facility must ensure that specific physical environment requirements are met. Based on observation, record review and interview, the facility failed to meet the Condition of Participation: Physical Environment for 4 of 4 sampled clients (A, B, C and D). The facility failed to ensure adequate staffing levels in the home to ensure the evacuation of clients A, B, C and D. Findings include: The facility failed to ensure adequate staffing levels in the home to ensure the evacuation of clients A, B, C and D. Please see W446.	W 0406	general idea of ones ability. Those with high rating will be assessed to determine if training should be done to improve one's score and/or if this is likely the functioning level of the person. The results will help determine if individual is appropriate for placement within the staffing ratio present. 4. All F-1 worksheets will be completed by the IDT upon considering a new admission and quarterly on all residents to asses the overall scores of a home. Staffing will be adjusted if scores indicate a significant lower overall score than in previous years. 1. Staffing on the 3rd shift has now been adjusted to two full time awake staff on 3rd shift 2. All Group Homes will be experiencing admissions within the coming months. All Group Homes F-1 rating was reviewed and compare to this home to determine if increased staffing would be needed. It appears at this time no other Group Homes within Damar Services would have to increase their staffing on 3rd shift 3. During the last year – there were several discharges and admissions within the home that resulted in a new total F-1 score. Admits added all had significant lower F-1 rating	06/20/2015	

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W 0446 Bldg. 00	<p>This federal tag relates to complaint #IN00173658.</p> <p>9-3-7(a)</p> <p>483.470(i)(2)(ii) EVACUATION DRILLS The facility must make special provisions for the evacuation of clients with physical</p>		<p>(unknown until after admission). A new protocol has been added to assessing individuals referred for placement. Protocol includes during the preplacement visits two fire drill assessments will be completed. One will be during awake time and the other during sleep time and an F-1 will be completed to gather a general idea of ones ability. Those with high rating will be assessed to determine if training should be done to improve one's score and/or if this is likely the functioning level of the person. The results will help determine if individual is appropriate for placement within the staffing ratio present. In addition to this – F-1 rating will be completed by the IDT instead of the Residential Manager. Clarifications on rating for the “risk factors” have been discussed with all team members to and now a better understanding of the scores is known. F-1 scores at time of survey were slightly incorrect.</p> <p>4. All F-1 worksheets will be completed by the IDT upon considering a new admission and quarterly on all residents to assess the overall scores of a home. Staffing will be adjusted if scores indicate a significant lower overall score than in previous years.</p>		

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	<p>disabilities.</p> <p>Based on record review and interview for 4 of 4 sampled clients (A, B, C and D), the facility failed to ensure adequate staffing levels in the home to ensure the evacuation of clients A, B, C and D.</p> <p>Findings include:</p> <p>1. The facility's F-1 (Fire Safety Form) worksheets for rating clients A, B, C and D dated 4/28/15 were reviewed on 5/14/15 at 1:30 PM. The review indicated the following:</p> <p>-Client A's F-1 form dated 4/28/15 indicated, "1. Risk of Resistance (to evacuation). Risk of Strong Resistance; 2. Impaired Mobility: Needs full assistance or very slow;... 4. Need for extra help: Needs limited assistance from 2 staff; 5. Response to Instructions: Requires considerable attention/may not respond."</p> <p>-Client B's F-1 form dated 4/28/15 indicated, "1. Risk of Resistance (to evacuation). Risk of Strong Resistance; 2. Impaired Mobility: Needs full assistance or very slow;... 4. Need for extra help: Needs limited assistance from 2 staff; 5. Response to Instructions: Requires considerable attention/may not respond."</p>	W 0446	<p>1. Staffing on the 3rd shift has now been adjusted to two full time awake staff on 3rd shift</p> <p>2. All residents F-1 scores have been recalculated by the IDT team. All Residential Manager and Leadstaff have received training regarding how to score one F-1 rating. Score given should not be based on one's poorest performance during a drill or anticipated problems that could occur but rather on one's average response over several drills. Since the survey, client A has been discharged as expected and client B continues to be referred for adult placement. It is anticipated discharge will occur within the end of the year.</p> <p>3. Clarifications on rating for the "risk factors" have been discussed with all team members and now a better understanding of how to score is known. Individuals visiting during preplacement will participate in two fire drill assessments. One will be during awake time and the other during sleep time and an F-1 will be completed to gather a general idea of one's ability. Those with high rating will be assessed to determine if training should be done to improve one's score and/or if this is likely the functioning level of the person. The results will help determine if individual is appropriate for placement within the staffing ratio</p>	06/20/2015			

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	<p>-Client C's F-1 form dated 4/28/15 indicated, "1. Risk of Resistance (to evacuation). Risk of Strong Resistance; 2. Impaired Mobility: Needs full assistance or very slow;... 4. Need for extra help: Needs limited assistance from 2 staff; 5. Response to Instructions: Requires considerable attention/may not respond."</p> <p>-Client D's F-1 form dated 4/28/15 indicated, "1. Risk of Resistance (to evacuation). Risk of Strong Resistance; 2. Impaired Mobility: Needs full assistance or very slow;... 4. Need for extra help: Needs limited assistance from 2 staff; 5. Response to Instructions: Requires considerable attention/may not respond."</p> <p>AS (Administrative Staff) #1 was interviewed on 5/14/15 at 2:32 PM. AS #1 indicated clients A, B, C and D were assessed as needing two staff to evacuate the group home in the event of a fire or emergency. AS #1 indicated the group home was staffed with one overnight staff. AS #1 indicated there should be two staff present in the home during the overnight hours to assist clients A, B, C or D in the event of a fire.</p> <p>2. K130</p>				<p>present. 4. All F-1 worksheets will be completed by the IDT upon considering a new admission and quarterly on all residents to assess the overall scores of a home. Staffing will be adjusted if scores indicate a significant lower overall score than in previous years.</p>		

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	<p>Based on review of "Fire Safety Survey - 2000 Life Safety Code Worksheet for Rating Residents F-1" forms during record review with the Home Manager from 9:40 a.m. to 10:50 a.m. on 05/14/15, the resident evacuation capability for the facility was rated as "Impractical." Based on interview at the time of record review, the Home Manager stated evacuation capability scoring on "F-1" forms was correctly completed for each resident, one staff member is present on the overnight shift from 11:30 p.m. to 7:30 a.m. and acknowledged the resident evacuation capability for the facility was rated as "Impractical." Based on observations with the Home Manager during a tour of the facility from 10:50 a.m. to 11:20 a.m. on 05/14/15, the building was not protected throughout by an approved, supervised automatic sprinkler system for an Impractical rated evacuation capability facility. Based on interview at the time of the observations, the Home Manager acknowledged the facility is not protected throughout by an approved, supervised automatic sprinkler system for an impractical rated evacuation capability facility.</p> <p>3. K147</p>			

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	<p>Based on review of "Emergency Action Plan" documentation with the Home Manager during record review from 9:40 a.m. to 10:50 a.m. on 05/14/15, the number of staff required for resident assistance for each of three facility shifts was not stated. In addition, review of "Fire Safety Survey - 2000 Life Safety Code Worksheet for Rating Residents F-1" forms stated "Needs Limited Assistance from 2 staff" for residents identified as [client A], [client B], [client C] and [client D]. Based on interview at the time of record review, the Home Manager stated evacuation capability scoring on "F-1" forms was correctly completed for each of the aforementioned four residents, one staff member is present on the overnight shift from 11:30 p.m. to 7:30 a.m. and acknowledged only one staff member is present in the facility on the overnight shift.</p> <p>This federal tag relates to complaint #IN00173658.</p> <p>9-3-7(a)</p>				