

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 15G375	X2) MULTIPLE CONSTRUCTION A. BUILDING 02 B. WING _____	X3) DATE SURVEY COMPLETED 06/22/2012
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NAME OF PROVIDER OR SUPPLIER CHILD ADULT RESOURCE SRV INC	STREET ADDRESS, CITY, STATE, ZIP CODE 8787 N NELLY LN BRAZIL, IN 47834
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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: 06/22/12</p> <p>Facility Number: 000889 Provider Number: 15G375 AIM Number: 100244340</p> <p>Surveyor: Bridget Brown, Life Safety Code Specialist</p> <p>At this Life Safety Code survey, Child Adult Resource Services 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 two story facility was fully sprinklered. The facility has a monitored fire alarm system with</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>smoke detection in client rooms, corridors and common living areas on all levels. The facility has the capacity for 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 Prompt with an E-Score of 0.8.</p> <p>Quality Review by Robert Booher, Life Safety Code Specialist-Medical Surveyor on 06/25/12.</p> <p>The facility was found not in compliance with the aforementioned regulatory requirements as evidenced by the following:</p>			

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KS147	<p>483.470(j)(1)(i) LIFE SAFETY CODE STANDARD The administration of every resident board and care facility has in effect and available to all supervisory personnel written copies of a plan for protecting of all persons in the event of fire, for keeping persons in place, for evacuating persons to areas of refuge, and for evacuating person from the building when necessary. The plan includes special staff response, including fire protection procedures needed to ensure the safety of any resident, and is amended or revised whenever any resident with unusual needs is admitted to the home. All employees are periodically instructed and kept informed with respect to their duties and responsibilities under the plan. Such instruction is reviewed by the staff no less than every 2 months. A copy of the plan is readily available at all times within the facility. 32.7.1, 33.7.1</p> <p>Based on record review and interview, the facility administration failed to provide a plan which included a response to battery powered smoke detector alarms to ensure all employees were instructed and informed with respect to their duties and responsibilities for special staff response to ensure the safety of 8 of 8 clients. This deficient practice could affect all clients.</p> <p>Findings include:</p> <p>Based on review of the Fire Drill</p>	KS147	Each month the Brazil House conducts a Life Safety Training during the monthly House Staff Meeting. Starting July 2012 - this training will include a review of how staff will need to respond to battery operated smoke detector alarms to ensure each staff knows and understands thier duties and responsibilities to ensure the safety of all 8 clients within the home. Starting in July 2012 - Brazil House staff will be responsible for completing a Battery Operated Smoke Detector Monthly Checklist. This check will include making sure that each smoke detector alarm sounds when the test button is pushed as well as making sure each smoke detector is free from cracks,	07/13/2012			

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	Plan with the house manager on 06/22/12 at 2:30 p.m., there was no mention of battery powered smoke detectors included in the fire plan designed to train staff to respond to fire alarms in the facility. The house manager confirmed at the time of record review, drills or special training based on battery powered alarms were not conducted for staff. She also confirmed other fire system alarms were sent to a monitoring station.		dents and excessive dust. Batteries for each smoke detector will be replaced 2 times per year (recommended during Daylight Savings Time) Starting in July 2012 - The yearly drill schedule will include 3 Fire Drills with battery operated smoke detectors. This is to ensue that all 8 clients in the home recognize the sound of a battery operated smoke detector and know how to appropriately respond to this type of alarm. A Fire Drill was completed at the Brazil House on July 4, 2021 for this purpose. Battery Operated Smoke Detector Monthly Checklists forms and Drill forms will be reviewed monthly by the Residential Manager as well as quarterly by Quality Assurance to ensure procedures are being completed properly for the safety of the 8 clients within the home.		