

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  15G307	X2) MULTIPLE CONSTRUCTION A. BUILDING 02 B. WING _____	X3) DATE SURVEY COMPLETED  11/13/2014
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NAME OF PROVIDER OR SUPPLIER  CHILD ADULT RESOURCES SRV INC	STREET ADDRESS, CITY, STATE, ZIP CODE 206 W STATE ST KINGMAN, IN 47952
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K020000	<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: 11/13/14</p> <p>Facility Number: 000826 Provider Number: 15G307 AIM Number: 100249120</p> <p>Surveyor: Bridget Brown, Life Safety Code Specialist</p> <p>At this LSC 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 33, Existing Residential Board and Care Occupancies for the original nonsprinklered one story building with a basement.</p> <p>The facility was surveyed as two buildings due to the addition of a northwest sleeping room wing in 2005. The original one story building with a basement was nonsprinklered. The facility has a monitored fire alarm system</p>	K020000		
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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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K02S152	<p>with hard wired smoke detection in corridors, sleeping rooms and common living areas. 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 0.6.</p> <p>Quality Review by Dennis Austill, Life Safety Code Specialist on 11/20/14.</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 (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</p>						

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	<p>disabilities:</p> <p>(iii) File a report and evaluation on each drill:</p> <p>(iv) Investigate all problems with evacuation drills, including accidents and take corrective action: and</p> <p>(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 ensure fire and evacuation drills were varied for 1 of 3 shifts. This deficient practice affects all occupants.</p> <p>Findings include:</p> <p>Based on review of fire Drill Forms on 11/13/14 at 4:35 p.m. with the Lead Staff, fire drills were varied less than one hour apart for all overnight drills during the past year. Overnight drills were conducted at 5:50 a.m. on 03/12/14, 5:30 a.m. on 06/04/14, 5:45 a.m. on 08/13/14, and on 10/07/14. The Lead Staff agreed at the time of record review, the overnight drills were done around the same time period.</p>	K02S152	<p>On November 26, 2014, the C.A.R.S. Residential Drill Schedule was updated. This updated Drill Schedule will be implemented on December 1, 2014 for all C.A.R.S. group homes (which includes facility #826). The updated drill schedule now includes a specific 1.50 hour timeframe for a "sleep time" drill to be completed by direct care staff. Time frames include...Midnight to 1:30am / 1:30am to 3:00am / 3:00am – 4:30am / 4:30am – 5:59am. After an evacuation drill has been completed, the appropriate direct care staff will complete the necessary drill form. The Senior Residential Manager will be responsible for reviewing all completed drill forms to (1) ensure drills are being completed during various times (2) ensure the form has been filled out correctly by direct care staff (3) evaluate the success of the drill (4) determine if a plan of</p>	12/01/2014	

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K030000	<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: 11/13/14</p> <p>Facility Number: 000826 Provider Number: 15G307 AIM Number: 100249120</p> <p>Surveyor: Bridget Brown, Life Safety Code Specialist</p> <p>At this LSC 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 for the 2005 addition to the northwest side of the original building.</p> <p>The facility was surveyed as two</p>	K030000	correction needs to be put into place for a staff and/or resident. The updated Residential Drill Schedule has been attached to this Plan of Correction for review.		

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K03S152	<p>buildings due to the addition of a northwest sleeping room wing in 2005. The one story sprinklered 2005 addition has a monitored fire alarm system with hardwired smoke detection in corridors and in all living areas. 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 0.6.</p> <p>Quality Review by Dennis Austill, Life Safety Code Specialist on 11/20/14.</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 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</p>						

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	<p>one drill each year on each shift;</p> <p>(ii) Make special provisions for the evacuation of clients with physical disabilities;</p> <p>(iii) File a report and evaluation on each drill;</p> <p>(iv) Investigate all problems with evacuation drills, including accidents and take corrective action: and</p> <p>(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.</p> <p>Based on record review and interview, the facility failed to ensure fire and evacuation drills were varied for 1 of 3 shifts. This deficient practice affects all occupants.</p> <p>Findings include:</p> <p>Based on review of fire Drill Forms on 11/13/14 at 4:35 p.m. with the Lead Staff, fire drills were varied less than one hour apart for all overnight drills during the past year. Overnight drills were conducted at 5:50 a.m. on 03/12/14, 5:30 a.m. on 06/04/14, 5:45 a.m. on 08/13/14, and on 10/07/14. The Lead Staff agreed at the time of record review, the overnight drills were done around the same time period.</p>	K03S152	<p>On November 26, 2014, the C.A.R.S. Residential Drill Schedule was updated. This updated Drill Schedule will be implemented on December 1, 2014 for all C.A.R.S. group homes (which includes facility #826). The updated drill schedule now includes a specific 1.50 hour timeframe for a "sleep time" drill to be completed by direct care staff. Time frames include...Midnight to 1:30am / 1:30am to 3:00am / 3:00am – 4:30am / 4:30am – 5:59am. After an evacuation drill has been completed, the appropriate direct care staff will complete the necessary drill form. The Senior Residential Manager will be responsible for reviewing all completed drill forms to (1) ensure drills are being completed during various times (2) ensure the form has been filled out</p>	12/01/2014	

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			correctly by direct care staff (3) evaluate the success of the drill (4) determine if a plan of correction needs to be put into place for a staff and/or resident. The updated Residential Drill Schedule has been attached to this Plan of Correction for review.		