

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 15G241	X2) MULTIPLE CONSTRUCTION A. BUILDING 02 B. WING _____	X3) DATE SURVEY COMPLETED 01/03/2012
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NAME OF PROVIDER OR SUPPLIER COMMUNITY ALTERNATIVES SW IN	STREET ADDRESS, CITY, STATE, ZIP CODE 651 SOUTH 100 EAST WASHINGTON, IN47501
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K0000	<p>A Post Survey Revisit (PSR) to the Life Safety Code Recertification Survey conducted on 11/28/11 was conducted by the Indiana State Department of Health in accordance with 42 CFR 483.470(j).</p> <p>Survey Date: 01/03/12</p> <p>Facility Number: 000764 Provider Number: 15G241 AIM Number: 100234870</p> <p>Surveyor: Lex Brashear, Life Safety Code Specialist</p> <p>At this PSR survey, Community Alternatives SW IN 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 sprinklered. The facility has a fire</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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K0130	<p>alarm system with smoke detection in the corridors, sleeping rooms, and common living areas. The facility has a capacity of eight and had a census of eight 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 0.5.</p> <p>Quality Review by Robert Booher, Life Safety Code Specialist-Medical Surveyor on 01/05/12.</p> <p>The facility was found not in compliance with the aforementioned regulatory requirements as evidenced by the following:</p> <p>OTHER LSC DEFICIENCY NOT ON 2786</p> <p>Based on observation and interview, the facility failed to ensure a yearly fire extinguisher inspection was performed for 3 of 3 portable fire extinguishers. NFPA 101, Section 4.5.7, states any device or equipment required for compliance with this code shall</p>	K0130	K130: The Director of Property Management had called Simplex Grinnell to set up a contract for this site to serve our fire/sprinkler needs. Attachment "A". Simplex Grinnell came to the location and checked all of our portable fire extinguishers. Attachment "C". This will ensure the safety of all consumers at the site and will comply with the NFPA Life Safety	01/06/2012	

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	<p>there after be maintained according to the Code unless the Code exempts such maintenance. NFPA 10, Standard for Portable Fire Extinguishers, 4-4.1 requires extinguishers shall be subjected to maintenance at intervals of not more than 1 year, at the time of hydrostatic test, or when specifically indicated by an inspection. This deficient practice could affect all clients, staff, and visitors.</p> <p>Findings include:</p> <p>Based on observation of fire extinguisher inspection/maintenance tags on 01/03/12 between 10:00 a.m. and 10:15 a.m. during a tour of facility with the Regional Manager, the most recent yearly inspection was July of 2010. During an interview at 10:15 a.m. on 01/03/12, the Regional Manager indicated there was no other evidence the three portable fire extinguishers had an annual inspection since July of 2010.</p> <p>This deficiency was cited on 11/28/11. The facility failed to</p>		Code.DATE OF COMPLETION: 1-4-12		

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KS051	<p>implement a systemic plan of correction to prevent recurrence.</p> <p>A manual fire alarm system is provided in accordance with Section 9.6. 32.2.3.4.1.</p> <p>Based on record review and interview, the facility failed to ensure 1 of 1 fire alarm system's components and devices such as smoke detectors, fire alarm boxes (manual pull stations), horn/strobe devices (audible and visual), and a fire alarm control panel were tested at least annually. LSC 9.6.1.4 refers to NFPA 72, the National Fire Alarm Code. NFPA 72, 7-3.2 requires fire alarm system devices such as smoke detectors, fire alarm boxes, horn/strobe devices, door holder devices, and fire alarm control equipment be tested annually. This deficient practice could affect all clients, as well as staff and visitors.</p> <p>Findings include:</p> <p>Based on review of the facility's fire alarm system inspection reports in the Drills book on 01/03/12 at 10:20 a.m. with the</p>	KS051	<p>K0051: The Director of Property Management contacted Simplex Grinnell to set up a contract for Simplex to be our provider for our fire/sprinkler needs. Attachment "A". SimplexGrinnell came to the site and inspected the fire alarm system. Attachment "B". This will ensure the safety of all the consumers at the site and will comply with the NFPA Life Safety Code.]DATE OF COMPLETION: 1-4-12</p>	01/04/2012

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KS053	<p>Regional Manager present, there was no written documentation to ensure the fire alarm system and its components and devices were inspected and tested within the past twelve months. During an interview at the time of record review, the Regional Manager stated there was no documentation available to show the fire alarm system had been inspected during the past twelve months.</p> <p>This deficiency was cited on 11/28/11. The facility failed to implement a systemic plan of correction to prevent recurrence.</p> <p>Approved smoke alarms are provided in accordance with 9.6.2.10, 32.2.3.43.1. Smoke alarms are installed on all levels, including basements but excluding crawl spaces and unfinished attics. Additional smoke alarms are installed for all living areas as defined in 3.3.119.</p> <p>Exception: Smoke alarms are not required in buildings protected throughout by an approved automatic sprinkler system in accordance with 32.2.3.5.</p> <p>Based on record review and interview, the facility failed to provide documentation 9 of 9 smoke detectors were tested for sensitivity. LSC 9.6.2.10.1 refers</p>	KS053	K0053: The Director of Property Management contacted SimplexGrinnell to be the provider of all of our fire/sprinkler needs. Attachment "A". SimplexGrinnell came to the location and did the	01/04/2012	

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	to NFPA 72, National Fire Alarm Code. NFPA 72, at 7-3.2.1 states, "Detector sensitivity shall be checked within one year after installation and every alternative year thereafter. After the second required calibration test, if sensitivity tests indicate the detectors have remained within their listed and marked sensitivity ranges, the length of time between calibration tests may be extended to a maximum of five years. If the frequency is extended, records of detector caused nuisance alarms shall be maintained. In zones or areas where nuisance alarms show any increase over the previous year, calibration tests shall be performed. To ensure each smoke detector is within its listed and marked sensitivity range it shall be tested using the following methods: (a) Calibrated test method. (b) Manufacturer's calibrated sensitivity test instrument. (c) Listed control equipment arranged for the purpose. (d) Smoke detector/control unit arrangement whereby the detector causes a signal at the control unit		sensitivity testing on our system. Attachment "B". This will ensure the safety of all consumers at the location and will comply with the NFPA Life Safety Code. Date Of COMPLETION: 1-4-12		

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	<p>where its sensitivity is outside its acceptable sensitivity range.</p> <p>(e) Other calibrated sensitivity test method acceptable to the authority having jurisdiction. Detectors found to have sensitivity outside the listed and marked sensitivity range shall be cleaned and recalibrated or replaced. The detector sensitivity shall not be tested or measured using any device that administers an unmeasured concentration of aerosol into the detector. NFPA 72, 7-5.2 requires inspection, testing and maintenance reports be provided for the owner or a designated representative. It shall be the responsibility of the owner to maintain these records for the life of the system and to keep them available for examination by the authority having jurisdiction. Paper or electronic media shall be acceptable. This deficient practice could affect all clients, as well as staff and visitors.</p> <p>Findings include:</p> <p>Based on review of the facility's fire alarm system testing reports in the Drills book on 01/03/12 at</p>				

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	<p>10:20 a.m. with the Regional Manager present, there was no documented report available to show all smoke detectors had been tested for sensitivity. During an interview at the time of record review, the Regional Manager confirmed there was no documented report available all smoke detectors had been tested for sensitivity.</p> <p>This deficiency was cited on 11/28/11. The facility failed to implement a systemic plan of correction to prevent recurrence.</p>				

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KS056	<p>PROMPT</p> <p>Where an automatic sprinkler system is installed, for either total or partial building coverage, the system is in accordance with Section 9.7 and initiates the fire alarm system in accordance with 32.2.3.4.1, 32.2.3.5.2. 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. Facilities with more than eight residents are permitted. Facilities with more than eight residents are treated as two-family dwellings with regard to water supply. Additionally, entrance foyers are sprinklered.</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 an Including Four Stories in Height, are permitted.</p>			

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	<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 initiates the fire alarm system in accordance with 32.2.3.4.1. The adequacy of the water supply is documented to the authority having jurisdiction.</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. Facilities with more than eight residents are treated as two family dwellings with regard to water supply.</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</p>				

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	<p>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> <p>Exception No. 6: Initiation of the fire alarm system is not required for existing installations in accordance with 32.2.3.5.5.</p> <p>MPRACTICAL Where an automatic sprinkler system is installed, for either total or partial building coverage, the system is in accordance with Section 9.7 and shall initiate the fire alarm system in accordance with 32.2.3.4.1. The adequacy of the water supply is documented to the authority having jurisdiction. 32.2.3.5.2.</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 system in One and Two Family Dwellings and Manufactured Homes, with a 30 minute water supply, is permitted. All habitable areas and closets are sprinklered. Facilities with more than eight residents are treated as two family dwellings with regard to water supply.</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 stores in height, systems in accordance with NFPA 13R, Standard for the Installation of Sprinkler Systems in Residential Occupancies</p>			

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	<p>up to and including Four Stores in Height, are permitted. All habitable areas and closets are sprinklered.</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>Based on record review and interview, the facility failed to ensure sprinkler waterflow alarm devices were tested quarterly for 1 of 1 sprinkler systems. LSC 32.2.3.5.2 refers to LSC section 9.7. LSC 9.7.5 refers to NFPA 25, the Standard for the Inspection, Testing, and Maintenance of Water-Based Fire Protection Systems. NFPA 25, at 2-3.3 requires waterflow alarm devices including but not limited to mechanical water motor gongs, vane-type waterflow devices and pressure switches that provide audible or visual signals be tested quarterly. This deficient practice could affect all clients, as well as staff and visitors.</p> <p>Findings include:</p> <p>Based on review of the facility's sprinkler system inspection and testing records in the Drills book on 01/03/12 at 10:20 a.m. with</p>	KS056	<p>K0056: The Director of Property Management contacted SimplexGrinnell to be the provider of all our fire/sprinkler needs at this location. Attachment "A". SimplexGrinnell came to the location and completed an inspection on the fire alarm system. Attachment "D". Simplex Grinnell noted deficiencies in their sprinkler system report of the facility at their visit on 1-6-12. Property Director contacted SimplexGrinnell regarding these deficiencies: 1-During waterflow testing the water did not appear to have enough pressure to move flow switch to activate the alarm condition.2- Sprinkler head wrench is missing. Need one to fit Viking 1/2" pendant mount.3-water control valve needs to be chained and locked as they are not supervised by the fire alarm panel. Simplex returned to the location on 1-26-12 to work on the issues and returned on 1-27-12 to complete the repairs. Attached is the signed quote from Simplex signed by Rescare for the repairs to be made. This will ensure the safety of all consumers living at the site and will comply with the NFPA Life Safety Code.DATE OF</p>	01/27/2012	

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	<p>the Regional Manager present, there was no documentation available to show the facility's sprinkler system's waterflow alarm devices were tested during the past twelve months. During an interview at the time of record review, the Regional Manager stated there was no documentation or other evidence to show the sprinkler system's waterflow alarm devices were tested during the past twelve months.</p> <p>This deficiency was cited on 11/28/11. The facility failed to implement a systemic plan of correction to prevent recurrence.</p>		COMPLETION: 01/27/2012		