

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 15G397	X2) MULTIPLE CONSTRUCTION A. BUILDING 02 B. WING _____	X3) DATE SURVEY COMPLETED 12/28/2012
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NAME OF PROVIDER OR SUPPLIER VOCA CORPORATION OF INDIANA	STREET ADDRESS, CITY, STATE, ZIP CODE 6613 AVALON FOREST DR INDIANAPOLIS, IN 46250
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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: 12/28/12</p> <p>Facility Number: 000911 Provider Number: 15G397 AIM Number: 100244420</p> <p>Surveyor: Mark Caraher, Life Safety Code Specialist</p> <p>At this Life Safety Code survey, Voca Corporation of Indiana 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 building with a basement was not sprinklered. The facility has a fire alarm system with smoke detection on all levels including 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>	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>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 1.5.</p> <p>Quality Review by Robert Booher, Life Safety Code Specialist-Medical Surveyor on 01/02/13.</p> <p>This facility was found not in compliance with the aforementioned regulatory requirements as evidenced by the following:</p>				

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KS152	<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 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>Facilities meet the requirements of paragraphs (1) and (2) of this section for any live-in and relief staff that they utilize.</p> <p>1. Based on record review and interview, the facility failed to provide documentation of fire drills conducted on the first shift for 1 of 4 quarters. This deficient practice affects all clients, staff and visitors.</p> <p>Findings include: Based on review of "Emergency Evacuation Drill" documentation with the</p>	KS152	<p>CORRECTION: The facility holds evacuation drills at least quarterly for each shift of personnel and under varied conditions. Specifically, the facility has conducted additional evacuation drills on the first shift at varied times shift during the current quarter.</p> <p>PREVENTION: Professional staff will be retrained regarding the need to conduct</p>	01/27/2013	

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	<p>Maintenance Aide during record review from 11:35 a.m. to 12:35 p.m. on 12/28/12, documentation of a fire drill being conducted on the first shift in the first quarter of 2012 was not available for review. Based on interview at the time of record review, the Maintenance Aide acknowledged documentation of a fire drill conducted on the first shift in the first quarter of 2012 was not available for review.</p> <p>2. Based on record review and interview, the facility failed to completely document fire drills conducted on the second shift for 2 of 4 quarters and the third shift for 4 of 4 quarters to assure they were conducted under varied conditions. This deficient practice could affect all clients, staff and visitors.</p> <p>Findings include:</p> <p>Based on review of "Emergency Evacuation Drill" documentation with the Maintenance Aide during record review from 11:35 a.m. to 12:35 p.m. on 12/28/12, documentation for second shift fire drills conducted on 03/13/12 and 12/10/12 did not include the time of day each fire drill was conducted. In addition, documentation for third shift fire drills conducted on 03/19/12, 04/12/12, 07/16/12 and 10/26/12 did not include the</p>		<p>evacuation drills at varied times on each shift for all staff each quarter. Training will also focus on proper completion of evacuation drill forms and assessment of individual drill compliance. The Quality Assurance Team will review and track all facility evacuation drill reports and follow up with professional staff as needed to assure drills occur as scheduled and follow up with the agency Safety Committee accordingly.</p> <p>Responsible Parties: QDDPD, Support Associates, Quality Assurance Team, Operations Team</p>				

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	time of day each fire drill was conducted. Documentation for each of the aforementioned fire drills included the shift the drill was conducted but did not include the time of day when the drill was conducted. Based on interview at the time of record review, the Maintenance Aide acknowledged documentation for the aforementioned fire drills did not include the time of day each drill was conducted.			