

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 15G544	X2) MULTIPLE CONSTRUCTION A. BUILDING 02 B. WING _____	X3) DATE SURVEY COMPLETED 02/10/2014
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NAME OF PROVIDER OR SUPPLIER NORMAL LIFE OF INDIANA	STREET ADDRESS, CITY, STATE, ZIP CODE 887 BUNKERHILL DR TERRE HAUTE, IN 47802
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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: 02/10/14</p> <p>Facility Number: 001058 Provider Number: 15G544 AIM Number: 100245350</p> <p>Surveyor: Bridget Brown, Life Safety Code Specialist</p> <p>At this Life Safety Code survey, Normal Life 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 33, Existing Residential Board and Care Occupancies.</p> <p>This one story facility with was not sprinklered. The facility has a fire alarm system with hardwired smoke detection in corridors, in common living areas and in client rooms. The facility has a capacity of 8 and had a census of 8 at the time of this survey.</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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K020130	<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 02/11/14.</p> <p>The facility was found not in compliance with the aforementioned regulatory requirements as evidenced by the following:</p> <p>Based on observation and interview, the facility failed to maintain a clear path of travel for 1 of 3 exits to evacuate clients to an area of refuge. LSC 7.1.6.4 requires walking surfaces in the means of egress shall be slip resistant under foreseeable conditions. This deficient practice could affect 4 of 8 clients.</p> <p>Findings include:</p> <p>Based on observation with the maintenance director on 02/10/14 at 2:45 p.m., the exterior exit discharge for</p>	K020130	The facility will maintain a clear path of travel at all exits to evacuate clients to an area of refuge. All walking surfaces in the means of egress shall be slip resistant under all foreseeable conditions. All homes maintain a supply of ice melt and snow shovels to keep walkways clear of weather related hazards. All staff at the home will receive training on expectations to assure all exits and walkways are clear of obstacles or potential weather related slip hazards. The Residential Manager is responsible for providing this training. The Residential Manager	03/12/2014

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	the west sleeping room corridor was covered with a two inch layer of ice and snow. The maintenance director agreed at the time of observation, the exit discharge had not been cleared and could be unsafe.		is responsible to insure that supplies are available in the home and that all exits are made clear at all times. The Residential Manager and QIDP, as part of weekly home visits, will observe to assure all exits are free of obstructions or hazards. In times of inclement weather involving snow the Residential Manager will be responsible to assure staff on duty have cleared all exits of snow and or ice.		