

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 15G334	X2) MULTIPLE CONSTRUCTION A. BUILDING <u>01</u> B. WING _____	X3) DATE SURVEY COMPLETED 07/08/2015
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NAME OF PROVIDER OR SUPPLIER VOCA CORPORATION OF INDIANA	STREET ADDRESS, CITY, STATE, ZIP CODE MAIN AND JEFFERSON DUPONT, IN 47231
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K 0000 Bldg. 01	<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: 07/08/15</p> <p>Facility Number: 000852 Provider Number: 15G334 AIM Number: 100243920</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 33, Existing Residential Board and Care Occupancies.</p> <p>This two story facility with a basement was fully sprinkled. The facility has a fire alarm system with smoke detection on all levels including the basement, the corridors, common living areas and hard wired smoke detectors in all client sleeping rooms. The facility has a capacity of 8 and had a census of 7 at the time of this survey.</p>	K 0000		
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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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K S020 Bldg. 01	<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 0.35.</p> <p>483.470(j)(1)(i) LIFE SAFETY CODE STANDARD Interior stairs are enclosed with ½ hour fire barriers, with all openings equipped with smoke-actuated automatic closing or self-closing doors having a fire protection rating comparable to that required for the enclosure. Stairs comply with 7.2.2.5.3. The entire primary means of escape is arranged so that it is not necessary for the occupants to pass from all spaces on that story by construction having not less than a ½ hour fire resistance rating. In buildings of construction other than Type II (000), Type III (200), or Type V (000), the supporting construction is protected to afford the required fire resistance rating of the supported wall. 33.2.2.4.</p> <p>Exception No. 1: Stairs that connect a story at street level to only one other story are permitted to be open to the story that is not at street level.</p> <p>Exception No. 2: Stair enclosures are not required in buildings of three or fewer stories that house prompt or slow evacuation capability facilities protected throughout by an approved automatic sprinkler system in accordance with 33.2.3.5 that uses quick response or residential sprinklers. This exception is permitted only if a primary means of escape from each sleeping area still exists that does not pass through a portion of a lower floor, unless that route is</p>			

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	<p>separated from all spaces on that floor by construction having a ½ hour fire resistance rating.</p> <p>Exception No. 3: Stair enclosures are not required in buildings of two or fewer stories that house prompt evacuation capability facilities with not more than eight residents and are protected by an approved automatic sprinkler system in accordance with 33.2.3.5 that uses quick-response or residential sprinklers. Exception No. 2 to 33.2.2.3 is not used in conjunction with this exception. The exceptions to 33.2.3.4.3 are not used in conjunction with this exception.</p> <p>Exception No. 4: In buildings of three or fewer stories that house prompt or slow evacuation capability facilities protected by an approved automatic sprinkler system in accordance with 33.2.3.5, stairs are permitted to be open at the top most story only. The entire primary means of escape of which the stairs are a part is separated from all portions of lower stairs.</p> <p>IMPRACTICAL Vertical openings are protected so as not to expose a primary means of escape. Vertical openings are considered protected if separated by smoke partitions in accordance with 8.2.4 that prevent the passage of smoke from one story to any primary means of escape on another story. Smoke partitions have a fire resistance rating of not less than ½ hour. Any doors or openings to the vertical opening are capable of resisting fire for not less than 20 minutes. 32.3.1.1, 33.2.3.1.1</p> <p>Exception: Stairs are permitted to be open where complying with Exception No. 2 or</p>			

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	<p>Exception No. 3 to 32.2.2.4 and 33.2.2.4. Based on observation, the facility failed to ensure 1 of 1 basement stairway door was capable of resisting fire and smoke for at least 1/2 hour. NFPA 101, LSC 2000 Edition, in 8.2.4.3.4 requires doors in smoke barriers to be in accordance with NFPA 80, 1999 Edition, the Standard for Fire Doors and Windows. NFPA 80, Section 2-3.1.7 requires the clearance between the edge of the door and the pull side of the frame not exceed 1/8 inch. This deficient practice affects all clients, staff, and visitors who would use the first floor kitchen exit during an evacuation.</p> <p>Findings include:</p> <p>Based on observation on 07/08/15 at 10:45 a.m. with the home manager, the basement stairway door to the first floor kitchen was not smoke and fire resistant due to a gap 1 inch wide along the top and latching side of the door with the door in the closed position. This was verified by the home manager at the time of observation and acknowledged at the exit conference on 07/08/15 at 11:30 a.m.</p>	K S020	<p>Corrective Action:</p> <ul style="list-style-type: none"> The gap 1 inch wide along the top and latching side of the basement stairway door to the first floor kitchen has been fixed <p>How we will identify others:</p> <ul style="list-style-type: none"> Environmental Service Worker will inspect all doorways to ensure compliance. <p>Measures to be put in place:</p> <ul style="list-style-type: none"> Environmental Service Worker will inspect all doorways on a monthly basis to ensure compliance. <p>Monitoring of Corrective Action:</p> <ul style="list-style-type: none"> Clinical Supervisor, Program Manager, Executive Director, Business Manager, HR Manager, Nursing Manager will perform Best In Class reviews at all locations within the year. The results will be shared with all team members. 	08/07/2015	

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K S046 Bldg. 01	<p>483.470(j)(1)(i) LIFE SAFETY CODE STANDARD Utilities comply with Section 9.1. 32.2.5.1, 33.2.5.1</p> <p>Based on observation and interview, the facility failed to ensure 2 of 2 kitchen receptacles were provided with ground fault circuit interrupter (GFCI) protection against electric shock near an electrical outlet. NFPA 101, 33.2.5.1 requires utilities comply with Section 9.1. LSC 9.1.2 requires electrical wiring and equipment shall be in accordance with NFPA 70, National Electrical Code. NFPA 70, Article 210.8, Ground-Fault Circuit-Interrupter Protection for Personnel, in 210.8(A), Dwelling Units, requires ground-fault circuit-interrupter (GFCI) protection for all personnel in bathrooms, and kitchens at receptacles intended to serve the counter top surfaces. Note: Moisture can reduce the contact resistance of the body and electrical insulation is more subject to failure. This deficient practice affects all clients who would use the kitchen.</p> <p>Findings include:</p>	K S046	<p>Completion Date: 8-7-15</p> <p>K0046: Utilities comply with Section 9.1. 32.2.5.1,33.2.5.1</p> <p>Corrective Action:</p> <ul style="list-style-type: none"> · Environmental Service worker has installed 2 of 2 kitchen receptacles with GFI outlets. <p>How we will identify others:</p> <ul style="list-style-type: none"> · Environmental Service Worker will inspect all areas of the home to ensure compliance. <p>Measures to be put in place:</p> <ul style="list-style-type: none"> · Environmental Service Worker will inspect all outlets on a monthly basis to ensure compliance. 	08/07/2015

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	Based on observation on 07/08/15 at at 10:40 a.m. with the home manager, the kitchen had two electric outlets one foot and three foot from the kitchen sink not provided with a ground-fault circuit interrupters. Furthermore, the main electric panel in the basement was checked and confirmed that the electric receptacles one foot and three foot from the kitchen sink were not provided with GFCI protection to prevent electric shock. This was verified by the home manager at the time of observation and acknowledged at the exit conference on 07/08/15 at 11:30 a.m.		<p>Monitoring of Corrective Action:</p> <p>·Clinical Supervisor, Program Manager, Executive Director, Business Manager, HR Manager, Nursing Manager will perform Best In Class reviews at all locations within the year. The results will be shared with all team members.</p> <p>Completion Date: 8-7-15</p>		