

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 15G181	X2) MULTIPLE CONSTRUCTION A. BUILDING 01 B. WING _____	X3) DATE SURVEY COMPLETED 11/14/2014
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NAME OF PROVIDER OR SUPPLIER CHILD ADULT RESOURCE SRV INC	STREET ADDRESS, CITY, STATE, ZIP CODE 442 VINE ST CLINTON, IN 47842
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K010000	<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: 11/14/14</p> <p>Facility Number: 000714 Provider Number: 15G181 AIM Number: 100234680</p> <p>Surveyor: Bridget Brown, Life Safety Code Specialist</p> <p>At this Life Safety Code 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.</p> <p>This two story facility with a basement was determined to be nonsprinklered. The facility has a monitored fire alarm system with hard wired smoke detection in corridors, living areas and all levels. The facility has a capacity of 6 and had a census of 6 at the time of this survey.</p>	K010000		
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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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K01S046	<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 0.4.</p> <p>Quality Review by Dennis Austill, Life Safety Code Specialist on 11/25/14.</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 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 extension cords were not used as a substitute for fixed wiring. LSC 9.1.2 requires wiring and electrical equipment be in compliance with NFPA 70, National Electrical Code, 1999 Edition. NFPA 70, Article 400-8 requires, unless specifically permitted, flexible cords and cables shall not be used as a substitute for fixed wiring of a structure. This deficient practice could affect all occupants.</p> <p>Findings include:</p>	K01S046	<p>On December 2, 2014, maintenance removed the extension cords that were being used to supply power to electric equipment in the first floor office. Maintenance installed surge protector power outlets that will now be used for electrical equipment in the first floor office.</p> <p>On December 4, 2014, maintenance removed the extension cords that were being used to supply power to electric equipment in the basement utilities area. Maintenance installed a GFI outlet that will now</p>	12/04/2014

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K01S053	<p>Based on observation with the lead staff on 11/14/14 between 10:45 a.m. and 11:45 a.m., an extension cord was used to supply power to electric equipment in the basement utilities area and in the the first floor office. The lead staff said at the time of observation, she did not know the extension cords were not permitted.</p> <p>483.470(j)(1)(i) LIFE SAFETY CODE STANDARD Approved smoke alarms are provided in accordance with 9.6.2.10. These alarms are powered from the building electrical system and when activated, initiate an alarm that is audible in all sleeping areas. Smoke alarms are installed on all levels, including basements but excluding crawl spaces and unfinished attics. Additional smoke alarms are installed for living rooms, dens, day rooms, and similar spaces. 33.2.3.4.3.</p> <p>Exception No 1: Buildings protected throughout by an approved automatic sprinkler system, in accordance with 33.2.3.5, that uses quick response or residential sprinklers, and protected with approved smoke alarms installed in each sleeping room in accordance with 9.6.2.10, that are powered by the building electrical system.</p> <p>Exception No. 2: Where buildings are protected throughout by an approved</p>		<p>be used for electrical equipment in the basement utilities area. C.A.R.S. maintenance will continue to complete a monthly inspection of each C.A.R.S. group home (which includes facility #714) to ensure extension cords are not being used to supply power to electrical equipment. C.A.R.S. Operations Manager will review all Monthly Inspection Reports and work directly with the Senior Residential Manager to ensure maintenance; accessibility and safety issues have been addressed and corrected.</p>	

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	<p>automatic sprinkler system, in accordance with 32.3.2.5, that uses quick-response or residential sprinklers, with existing battery-powered smoke alarms in each sleeping room, and where, in the opinion of the authority having jurisdiction, the facility has demonstrated that testing, maintenance, and a battery replacement program ensure the reliability of power to smoke alarms. Based on observation the facility failed to provide smoke alarms on 1 of 3 levels. This deficient practice could affect all occupants.</p> <p>Findings include:</p> <p>Based on observation with the lead staff on 11/14/14 at 10:45 a.m., a smoke detector was not provided on the basement level of the facility. The lead staff pointed out a device attached to the ceiling and powered by the AC electric service. The device was labeled, "heat detector". The lead staff acknowledged a smoke detector was not located on the basement level of the facility.</p>	K01S053	<p>On December 12, 2014 – C.A.R.S. hired B&R Fire Protection, Inc. (408 Waynetown Road, Crawfordsville, IN 47933 / 765-362-7594) to add a wired smoke detector to the basement level of facility #714. This wired smoke detector will tie into facility #714 fire alarm's system. This wired smoke detector, when activated, will initiate an alarm that will be audible in all sleeping areas. The installation of the wired smoked detector will require a new overall panel. Due to scheduling constraints of B&R Fire Protection, Inc. – this installation will be completed within the next 30 days. Documentation for the installation of the wired smoke detector will be available upon completion by B&R Fire Protection, Inc. Facility #714 will continue to implement the C.A.R.S. Residential Drill Schedule. Before each Fire Drill – staff will activate a pull station to initiate the audible fire alarm that will sound throughout the entire facility which includes all sleeping areas. After each Fire Drill – staff are required to call the alarm company to ensure the</p>	12/12/2014			

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			alarm signal was received. Staff is to document this communication on the Drill Form. The Senior Residential Manager will be responsible for reviewing all completed drill forms to (1) ensure staff is communicating with the alarm company (2) ensure drills are being completed during various times (3) ensure the form has been filled out correctly by direct care staff (4) evaluate the success of the drill (5) determine if a plan of correction needs to be put into place for a staff and/or resident.		