

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 15G798	X2) MULTIPLE CONSTRUCTION A. BUILDING <u>01</u> B. WING _____	X3) DATE SURVEY COMPLETED 02/23/2015
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NAME OF PROVIDER OR SUPPLIER BENCHMARK HUMAN SERVICES	STREET ADDRESS, CITY, STATE, ZIP CODE 8424 FANTASIA WAY FORT WAYNE, IN 46809
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K 000 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: 02/23/15</p> <p>Facility Number: 012577 Provider Number: 15G798 AIM Number: 201018530</p> <p>Surveyor: Amy Kelley, Life Safety Code Specialist and Scott Wytosick, Life Safety Code Specialist</p> <p>At this Life Safety Code survey, AWS 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 building was not sprinklered. This facility has a fire alarm system with smoke detection in all common living areas, corridors and sleeping rooms. The facility has a capacity of 8 and a census of 8 at the time</p>	K 000		
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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 046 Bldg. 01	<p>of this survey.</p> <p>Calculation of the Evacuation Difficulty Score (E-Score) using NFPA 101, Alternative Approaches to Life Safety, Chapter 6, rated the facility Prompt with an E-Score of 0.9.</p> <p>Quality Review by Dennis Austill, Life Safety Code Specialist on 02/27/15.</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 1 of 2 electrical receptacles in the master bathroom, a wet location client care area, was provided with a ground fault circuit interrupter (GFCI) protection against electric shock. LSC sections 9.1.2 requires all 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</p>	K 046	<p>Awork order was submitted and Byall Homes completed work on 3/3/15.The receptacle in master bed bath is wired into GFI receptical insame bath to make it GFI protected. All other wet locations have beenchecked to ensure that they are GFCI protected. The Director willalso complete a walk through to ensure compliance.</p>	03/25/2015			

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K 120 Bldg. 01	<p>all personnel in bathrooms and kitchens where the receptacles are intended to serve the countertop surfaces. Moisture can reduce the contact resistance of the body, and electrical insulation is more subject to failure. This deficient practice affects 1 of 8 clients.</p> <p>Findings include:</p> <p>Based on observation with the Qualified Intellectual Disability Professional on 12/23/15 at 11:06 a.m., the master bedroom bathroom had one GFCI receptacle and one non-GFCI receptacle on the wall within two feet of the hand sink. When the test button was pressed on the GFCI receptacle, power was not interrupted on the non-GFCI receptacle indicating the non-GFCI receptacle was not on the circuit with the GFCI receptacle. At the time of observation, the Qualified Intellectual Disability Professional acknowledged power was not interrupted when the receptacles were tested.</p> <p>483.470(j)(1)(i) LIFE SAFETY CODE STANDARD In addition to the primary route, each sleeping room in facilities that use Exception No. 1 to 32.2.3.5.1 has a second means of escape that consists of one of the following:</p> <p>(a) It is a door, stairway, passage, or hall</p>						

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	<p>providing a way of unobstructed travel to the outside of the dwelling at street or ground level that is independent of and remotely located from the primary means of escape.</p> <p>(b) It is a passage through an adjacent nonlockable space, independent of and remotely located from the primary means of escape, to an approved means of escape.</p> <p>(c) It is an outside window or door operable from the inside without the use of tools, keys, or special effort that provides a clear opening of not less than 5.7 sq. ft. The width is not less than 24 inches. The bottom of the opening is not more than 44 inches above the floor. Such means of escape is acceptable where one of the following criteria are met:</p> <p>(1) The window is within 20 ft of grade.</p> <p>(2) The window is directly accessible to fire department rescue apparatus as approved by the authority having jurisdiction.</p> <p>(3) The window or door opens onto an exterior balcony. 33.2.2.3</p> <p>Exception No. 1: If the sleeping room has a door leading directly to the outside of the building with access to grade or to a stairway that meets the requirements of exterior stairs in 33.2.3.1.2, that means of escape is considered as meeting all the escape requirements for the sleeping room.</p> <p>Exception No. 2: A second means of escape from each sleeping room is not required where the facility is protected throughout by approved automatic sprinkler system in accordance with 33.2.3.5.</p>						

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	<p>Exception No. 3: Existing approved means of escape is permitted to continue to be used.</p> <p>Based on observation and interview, the facility failed to ensure 1 of 8 client sleeping rooms was provided with a secondary means of escape. This deficient practice could affect 1 of 8 clients.</p> <p>Findings include:</p> <p>Based on interview and observation, the Qualified Intellectual Disability Professional on 2/23/2015 at 11:09 a.m., confirmed that the window lever was missing and the Qualified Intellectual Disability Professional was unable to open the window.</p>	K 120	<p>Awork order was submitted and the missing window lever in the bedroomwas replaced on 3/3/15. Benchmark completes a monthly maintenancewalk through that the residential manager completes monthly(Environmental CQA) that checks for and will ensure that all windowlevers are present and all windows will be able to be opened toprovide a second means of escape. This walk through (EnvironmentalCQA) will be reviewed by the residential director to ensurecompliance.</p>	03/25/2015			