

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 15G236	X2) MULTIPLE CONSTRUCTION A. BUILDING 02 B. WING _____	X3) DATE SURVEY COMPLETED 07/23/2014
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NAME OF PROVIDER OR SUPPLIER VOCA CORPORATION OF INDIANA	STREET ADDRESS, CITY, STATE, ZIP CODE 5990 E 500 N CHURUBUSCO, IN 46723
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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: 07/23/14</p> <p>Facility Number: 000759 Provider Number: 15G236 AIM Number: 100243290</p> <p>Surveyor: Amy Kelley, 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 33, Existing Residential Board and Care Occupancies.</p> <p>The one story facility was fully sprinklered. The facility has a fire alarm system with smoke detection in the corridors, in sleeping rooms and in common living areas. 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 1.1.</p> <p>Quality Review by Robert Booher, Life Safety Code Specialist-Medical Surveyor on 07/28/14.</p> <p>The facility was found not in compliance with the aforementioned regulatory requirements as evidenced by the following:</p>	K020130	The facility will ensure monthly fire extinguisher inspections are documented to include the date and initials of the person performing the inspections for portable fire extinguishers. The Residential Manager has been trained to inspect and document on the fire extinguishers monthly.	08/22/2014			
	<p>Based on observation, record review and interview; the facility failed to ensure monthly fire extinguisher inspections were documented, including the date and initials of the person performing the inspections for 2 of 2 portable fire extinguishers. NFPA 101 in 4.6.12.2 states existing life safety features obvious to the public, if not required by the Code, shall either be maintained or removed. NFPA 10, Standard for Portable Fire Extinguishers, 4-3.1 requires extinguishers shall be inspected monthly.</p>						

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K02S147	<p>NFPA 10, 4-2.1 defines inspection as a quick check an extinguisher is available and will operate. NFPA 10, 4-3.4.2 requires at least monthly, the date the inspection was performed and the initials of the person performing the inspection shall be recorded. This deficient practice could affect all clients.</p> <p>Findings include:</p> <p>Based on observation and record review of the fire extinguisher inspection/maintenance tag on the two fire extinguishers in the facility with the Program Manager on 07/23/14 from 12:05 p.m. to 12:10 p.m., there was no documentation on the tag to show the fire extinguishers had received a monthly inspection in June 2014. This was acknowledged by the Program Manager at the time of observation and record review for each fire extinguisher.</p> <p>483.470(j)(1)(i) LIFE SAFETY CODE STANDARD The administration of every resident board and care facility has in effect and available to all supervisory personnel written copies of a plan for protecting of all persons in the event of fire, for keeping persons in place, for evacuating persons to areas of refuge, and for evacuating persons from the building when necessary. The plan includes special</p>						

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	<p>staff response, including fire protection procedures needed to ensure the safety of any resident, and is amended or revised whenever any resident with unusual needs is admitted to the home. All employees are periodically instructed and kept informed with respect to their duties and responsibilities under the plan. Such instruction is reviewed by the staff not less than every 2 months. A copy of the plan is readily available at all times within the facility. 32.7.1, 33.7.1</p> <p>Based on record review and interview, the facility administration failed to ensure all employees are periodically instructed and kept informed with respect to their duties and responsibilities under the written fire safety plan. Such instruction is reviewed by the staff not less than every 2 months. This deficient practice affects all clients in the facility.</p> <p>Findings include:</p> <p>During the record review process with the Program Manager on 07/23/14 at 11:55 a.m., the facility failed to provide training records to show all employees have been instructed of their duties and responsibilities, at least every two months, for the previous calendar year. Based on an interview with the Program Manager at the time of record review, she was unable to provide the training documentation.</p>	K02S147	The facility administration will ensure that all employees are periodically instructed and kept informed with respect to their duties and responsibilities under the written fire safety plan. The staff will be trained on their duties and responsibilities under the written fire safety plan at least every two months. This will be conducted at staff meetings.	08/22/2014			

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K02S152	<p>483.470(j)(1)(i) LIFE SAFETY CODE STANDARD (1) The facility holds evacuation drills at least quarterly for each shift of personnel and under varied conditions to - (i) Ensure that all personnel on all shifts are trained to perform assigned tasks; (ii) Ensure that all personnel on all shifts are familiar with the use of the facility's emergency and disaster plans and procedures.</p> <p>(2) 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>(3) Facilities must meet the requirements of paragraphs (i) (1) and (2) of this section for any live-in and relief staff that they utilize. Based on record review and interview, the facility failed to conduct fire drills quarterly on each shift for 4 of the last 4 calendar quarters. This deficient practice could affect all clients.</p> <p>Findings include:</p>	K02S152	The facility will ensure that fire drills are conducted quarterly on each shift. The Residential Manager has been retrained on holding evacuation drills quarterly for each shift.	08/22/2014			

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	<p>Based on review of the fire drill reports titled "Fire Drill/Evacuation Form" with the Program Manager on 07/23/14 at 11:55 a.m., documentation was not available for the following fire drills:</p> <ul style="list-style-type: none"> a. first shift for the first quarter of 2014 b. first and third shift for the second quarter of 2014 c. first, second and third shift for the fourth quarter of 2014 d. first and third shift for the third quarter of 2014 <p>Based on an interview with the Program Manager at the time of record review, she was unable to provide documentation to confirm these fire drills were conducted.</p>				