

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 15G563	X2) MULTIPLE CONSTRUCTION A. BUILDING 01 B. WING _____	X3) DATE SURVEY COMPLETED 04/19/2013
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NAME OF PROVIDER OR SUPPLIER ST VINCENT NEW HOPE INC	STREET ADDRESS, CITY, STATE, ZIP CODE 2999 WESTLANE RD INDIANAPOLIS, IN 46268
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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: 04/19/13</p> <p>Facility Number: 001077 Provider Number: 15G563 AIM Number: 100245490</p> <p>Surveyor: Mark Caraher, Life Safety Code Specialist,</p> <p>At this Life Safety Code survey, St. Vincent New Hope, 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 one story building was determined to be fully sprinklered. The facility has a monitored fire alarm system with smoke detection in corridors, sleeping rooms and all living areas. The facility has a capacity of 8 and had a census of 7 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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	<p>Calculation of the Evacuation Difficulty Score (E-Score) using NFPA 101A, Alternative Approaches to Life Safety, Chapter 6, rated the facility Slow with an E-Score of 3.5.</p> <p>Quality Review by Robert Booher, Life Safety Code Specialist-Medical Surveyor on 04/22/13.</p> <p>The facility was found not in compliance with the aforementioned regulatory requirements as evidenced by:</p>			

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K01S152	<p>483.470(j)(1)(i) LIFE SAFETY CODE STANDARD</p> <p>(1) The facility holds evacuation drills at least quarterly for each shift of personnel and under varied conditions to -</p> <p>(i) Ensure that all personnel on all shifts are trained to perform assigned tasks;</p> <p>(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 -</p> <p>(i) Actually evacuate clients during at least one drill each year on each shift;</p> <p>(ii) Make special provisions for the evacuation of clients with physical disabilities:</p> <p>(iii) File a report and evaluation on each drill;</p> <p>(iv) Investigate all problems with evacuation drills, including accidents and take corrective action: and</p> <p>(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.</p> <p>1. Based on record review and interview, the facility failed to activate the fire alarm system to simulate emergency fire conditions on 1 of 4 second shift fire drills. This deficient practice affects all clients and staff.</p> <p>Findings include: Based on review of "Fire Drill/Fire</p>	K01S152	St. Vincent New Hope has reviewed its policy and procedures for drills and evacuations. The deficiencies noted were a deviation in the standard practice for drill evacuations. The facility staff and leadership were retrained on the requirements for evacuations and drill reports. The facility also has a schedule of drills developed annually to incorporate all the	05/17/2013			

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	<p>Report" documentation with the Human Resources Assistant during record review at the Corporate Office from 9:50 a.m. to 10:50 a.m. on 04/19/13, documentation for the second shift fire drill conducted at 5:15 p.m. on 05/28/12 stated "N/A" to "Type and location of the device which activated alarm." In the comments section of the aforementioned fire drill documentation it was stated "Clients were told there was a kitchen fire and were assisted with leaving the building." Based on interview at the time of record review, the Human Resource Assistant acknowledged the aforementioned first shift fire drill documentation did not include activation of the fire alarm system.</p> <p>2. Based on record review and interview, the facility failed to conduct fire drills under varied conditions for 3 of 4 third shift fire drills. This deficient practice affects all clients and staff.</p> <p>Findings include:</p> <p>Based on review of "Fire Drill/Fire Report" documentation with the Human Resources Assistant during record review at the Corporate Office from 9:50 a.m. to 10:50 a.m. on 04/19/13, third shift fire drills conducted on 06/09/12, 09/12/12 and 03/24/13 were conducted at,</p>		<p>requirements. The schedule had not been followed for the 3 overnight drills. The time change happened because that was a naturally occurring opportunity in the overnight shift to conduct a drill, therefore resulting in 3 drills of similar time. The drill schedule and its timeframes were reviewed with all staff. The adherence to the scheduled drill times and dates will be more closely monitored by the manager assigned to oversee drill compliance. Any variation from the drill schedule or procedures will result in follow up action, most likely correction of the drill, report or procedure as indicated. Director will review drill compliance at the bimonthly department meeting.</p>				

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	respectively, 2:30 a.m., 2:00 a.m. and 2:20 a.m. Based on interview at the time of record review, the Human Resource Assistant acknowledged third shift fire drills were not conducted under varied conditions.			