

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 15G274	X2) MULTIPLE CONSTRUCTION A. BUILDING 01 B. WING _____	X3) DATE SURVEY COMPLETED 01/09/2014
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NAME OF PROVIDER OR SUPPLIER PUTNAM COUNTY COMPREHENSIVE SERVICES INC	STREET ADDRESS, CITY, STATE, ZIP CODE 1222 BLOOMINGTON GREENCASTLE, IN 46135
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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: 01/09/14</p> <p>Facility Number: 000794 Provider Number: 15G274 AIM Number: 100234880</p> <p>Surveyor: Bridget Brown, Life Safety Code Specialist</p> <p>At this Life Safety Code survey, Putnam County Comprehensive 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 one story facility was fully sprinklered. The facility has a fire alarm system with hard wired smoke detection in corridors, in client rooms and in common living areas. The facility has the capacity of 6 and had a census of 6 at</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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K010130	<p>the time of this survey.</p> <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 1.6.</p> <p>Quality Review by Robert Booher, Life Safety Code Specialist-Medical Surveyor on 01/16/14.</p> <p>The facility was found not in compliance with the aforementioned regulatory requirements as evidenced by the following:</p>	K010130	<p>Due to staff vacancy and the need to rely on PRN staff for coverage on shift responsible for checking the extinguisher's two months of inspections were not completed. In the future this responsibility will be moved to the House Manager. A monthly tracking sheet has been developed and implemented. At the end of each month a copy will be sent to the QA director at the home office in ensure completion. (See document entitled "Fire Extinguisher Inspection 2014").</p>	01/21/2014

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	<p>and the initials of the person performing the inspection shall be recorded. In addition NFPA 10, 4-2.1 defines inspection as a quick check an extinguisher is available and will operate. This deficient practice affects all clients, visitors and staff.</p> <p>Findings include:</p> <p>Based on observation with the Qualified Intellectual Disabilities Professional (QIDP) between 10:45 a.m. and 11:45 a.m. on 01/09/14, the service and inspection tags for the portable fire extinguishers located in the medicine room, dining room and living room lacked documentation of monthly checks since 10/29/13. The QIDP said at the time of observations, the tags were the only documentation for the monthly inspection and the extinguishers should have been checked.</p>			

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K01S053	<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 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.</p> <p>Based on record review and interview, the facility failed to ensure 7 of 7 smoke detectors had been sensitivity tested as required. LSC 9.6.2.10.1 refers to NFPA 72, National Fire Alarm Code. NFPA 72 at 7-3.2.1 states, "Detector</p>	K01S053	Our management team met with Koorsen Fire Systems to discuss concerns regarding the Detector Sensitivity Report dated 9/06/13. We received the following explanation from Koorsen. Bloomington House is equipped with a "smart panel and intelligent	01/23/2014

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	<p>sensitivity shall be checked within one year after installation and every alternative year thereafter. After the second required calibration test, if sensitivity tests indicate the detectors have remained within their listed and marked sensitivity ranges, the length of time between calibration tests may be extended to a maximum of five years. If the frequency is extended, records of detector caused nuisance alarms shall be maintained. In zones or areas where nuisance alarms show any increase over the previous year, calibration tests shall be performed. To ensure each smoke detector is within its listed and marked sensitivity range it shall be tested using the following methods:</p> <ol style="list-style-type: none"> (1) Calibrated test method. (2) Manufacturer's calibrated sensitivity test instrument. (3) Listed control equipment arranged for the purpose. (4) Smoke detector/control unit arrangement whereby the detector causes a signal at the control unit where its sensitivity is outside its acceptable sensitivity range. (5) Other calibrated sensitivity test method acceptable to the authority having jurisdiction. <p>Detectors found to have sensitivity outside the listed and marked sensitivity range shall be cleaned and recalibrated</p>		<p>smoke detectors" IT self-checks each detector and verifies each device is working permanufactures specifications. This same system has been in place since early2000s. The Sensitivity Report is the same as in previous years which havesuccessfully passed the Life safety survey. In order to expedite our Plan ofCorrection they did complete a "true test" for sensitivity on the detectors aswell as completing annual fire alarm inspection. All devices passed inspection.Our business has been moved to the Terre Haute branch and the Inspectionperformed was very thorough. In the future the "True Test" for sensitivity willbe completed. (See documents entitled "Koorsen Annual Inspection Cover Page1-23-14", "Koorsen Detection Inspection Report 1-23-14", Koorsen DetectorSensitivity Test Report 1-23-14", "Koorsen Service Call Cover Page 1-23-14", "KoorsenService Inspection Report 1-23-14 Pg. 1" & "Koorsen Service InspectionReport 1-23-14 Pg. 2").</p>		

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	<p>or replaced.</p> <p>The detector sensitivity shall not be tested or measured using any device that administers an unmeasured concentration of aerosol into the detector." This deficient practice affects all occupants.</p> <p>Findings include:</p> <p>Based on a review of the 09/06/13 Detector Sensitivity Report with the Qualified Intellectual Disabilities Professional (QIDP) on 01/09/14 at 11:35 a.m., the report was incomplete. The record noted each smoke detector, its location and the range within which each detector should test, however, Tested Alarm Point for each was noted as "Internal." The QIDP acknowledged at the time of record review, there was no recorded information for tested alarm points which would ensure each smoke detector was within it's listed sensitivity range.</p>				

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K01S056	<p>483.470(j)(1)(i) LIFE SAFETY CODE STANDARD PROMPT</p> <p>Where an automatic sprinkler system is installed, for either total or partial building coverage, the system is in accordance with Section 9.7, 33.2.3.5.2 and activates the fire alarm system in accordance with 33.2.3.4.1. The adequacy of the water supply is documented to the authority having jurisdiction.</p> <p>Exception No. 1: In prompt evacuation facilities, an automatic sprinkler system in accordance with NFPA 13D, Standard for the Installation of Sprinkler Systems in One and two Family Dwellings and Manufactured Homes, is permitted. Automatic sprinklers are not required in closets not exceeding 24 sq. ft. and in bathrooms not exceeding 55 sq. ft., provided that such spaces are finished with lath and plaster or materials providing a 15 minute thermal barrier.</p> <p>Exception No. 2: Not applicable</p> <p>Exception No. 3: In prompt and slow evacuation capability facilities where an automatic sprinkler system is in accordance with NFPA 13, Standard for the Installation of Sprinkler Systems, automatic sprinklers are not required in closets not exceeding 24 sq. ft and in bathrooms not exceeding 55 sq. ft., provided that such spaces are finished with lath and plaster or material providing a 15 minute thermal barrier.</p> <p>Exception No. 4: In prompt and slow evacuation capability facilities up to and including four stories in height, systems in accordance with NFPA 13R, Standard for the Installation of Sprinkler Systems in</p>			

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	<p>Residential Occupancies up to and Including Four Stories in Height, are permitted.</p> <p>Exception No. 5: Not applicable</p> <p>Exception No. 6: Initiation of the fire alarm system is not required for existing installations in accordance with 33.2.3.5.5.</p> <p>SLOW Where an automatic sprinkler system is installed, for either total or partial building coverage, the system is in accordance with Section 9.7 and activates the fire alarm system in accordance with 33.2.3.4.1. The adequacy of the water supply is documented to the authority having jurisdiction.</p> <p>Exception No. 1: Not Applicable</p> <p>Exception No. 2: Not Applicable</p> <p>Exception No. 3: In prompt and slow evacuation capability facilities where an automatic sprinkler system is in accordance with NFPA 13, Standard for the Installation of Sprinkler Systems, automatic sprinklers are not required in closets not exceeding 24 sq. ft. and in bathrooms not exceeding 55 sq. ft., provided that such spaces are finished with lath and plaster or material providing a 15 minute thermal barrier.</p> <p>Exception No. 4: In prompt and slow evacuation capability facilities up to and including four stories in height, systems in accordance with NFPA 13R, Standard for the Installation of Sprinkler Systems in Residential Occupancies up to and Including Four Stories in Height, are permitted.</p> <p>Exception No. 5: Not Applicable</p>			

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	<p>Exception No. 6: Initiation of the fire alarm system is not required for existing installations in accordance with 33.2.3.5.5.</p> <p>IMPRACTICAL Where an automatic sprinkler system is installed, for either total or partial building coverage, the system is in accordance with Section 9.7 and activates the fire alarm system in accordance with 33.2.3.4.1. The adequacy of the water supply is documented to the authority having jurisdiction. 33.2.3.5.2.</p> <p>Exception No. 1: Not Applicable.</p> <p>Exception No. 2: In slow and impractical evacuation capability facilities, an automatic sprinkler system in accordance with NFPA 13D, Standard for the Installation of Sprinkler Systems in One and Two Family Dwellings and Manufactured Homes, with a 30 minute water supply, is permitted. All habitable areas and closets are sprinklered. Automatic sprinklers are not required in bathrooms not exceeding 55 sq. ft., provided that such spaces are finished with lath and plaster or materials providing a 15 minute thermal barrier.</p> <p>Exception No. 3: Not Applicable.</p> <p>Exception No. 4: Not Applicable.</p> <p>Exception No. 5: In impractical evacuation capability facilities up to and including four stories in height, systems in accordance with NFPA 13R, Standard for the Installation of Sprinkler Systems in Residential Occupancies up to and Including Four Stories in Height, are permitted. All</p>			

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	<p>habitable areas and closets are sprinklered. Automatic sprinklers are not required in bathrooms not exceeding 55 sq. ft., provided that such spaces are finished with lath and plaster or materials providing a 15 minute thermal barrier.</p> <p>Exception No. 6: Initiation of the fire alarm system is not required for existing installations in accordance with 33.2.3.5.5. Based on observation and interview, the facility failed to ensure sprinkler heads providing protection for 6 of 6 clients were maintained. LSC 9.7.5 refers to NFPA 25, Standard for the Inspection, Testing, and Maintenance of Water-Based Fire Protection Systems. NFPA 25, 2-2.1.1 requires sprinklers to be maintained and free of damage. This deficient practice could affect all occupants.</p> <p>Findings include:</p> <p>Based on observation with the Qualified Intellectual Disabilities Professional (QIDP) on 01/09/14 between 10:45 a.m. and 11:45 a.m., the sprinkler head escutcheons were displaced in the medicine room (four), the northeast sleeping room (one) and the living room (one) leaving a gaps of 1/4 to 1/2 inch into the attic above. The QIDP acknowledged at the time of observations, the escutcheons were not properly secured.</p>	K01S056	<p>Our management team met with Koorsen Fire Systems to discuss concerns regarding the conditions of sprinkler heads throughout the facility. Although inspections had been conducted as specified the sprinkler heads were not adequately inspected in previous quarterly inspections. Our business has been moved to the Terre Haute branch as of today. Although the technicians that were here today did not understand how or why the sprinkler heads had not been repaired they proceeded to complete a very thorough inspection and repaired all identified sprinkler heads. House Manager and QIDP were given direction on what to look for in order to ensure maintenance and repairs are completed in a timely manner. (See documents entitled "Koorsen Annual Inspection Cover Page 1-23-14", "Koorsen Detection Inspection Report 1-23-14", "Koorsen Detector Sensitivity Test Report 1-23-14", "Koorsen Service Call Cover Page 1-23-14", "Koorsen Service Inspection</p>	01/23/2014

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			Report 1-23-14 Pg. 1" & "Koorsen Service InspectionReport 1-23-14 Pg. 2").	