

DEPARTMENT OF HEALTH AND HUMAN SERVICES  
CENTERS FOR MEDICARE & MEDICAID SERVICES

PRINTED: 12/14/2022  
FORM APPROVED  
OMB NO. 0938-039

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| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:<br>15G640 | X2) MULTIPLE CONSTRUCTION<br>A. BUILDING -- _____<br>B. WING _____ | X3) DATE SURVEY COMPLETED<br>12/02/2022 |
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| NAME OF PROVIDER OR SUPPLIER<br>OPPORTUNITY ENTERPRISES INC | STREET ADDRESS, CITY, STATE, ZIP COD<br>3102 AIRPORT RD<br>PORTAGE, IN 46368 |
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| (X4) ID PREFIX TAG | SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)  | ID PREFIX TAG | PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY) | (X5) COMPLETION DATE |
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| E 0000<br>Bldg. -- | <p>An Emergency Preparedness Survey was conducted by the Indiana Department of Health in accordance with 42 CFR 483.475.</p> <p>Survey Date: 12/02/22</p> <p>Facility Number: 001220<br/>Provider Number: 15G640<br/>AIM Number: 100245730</p> <p>At this Emergency Preparedness survey, Opportunity Enterprises Inc was found in compliance with Emergency Preparedness Requirements for Medicare and Medicaid Participating Providers and Suppliers, 42 CFR 483.475</p> <p>The facility has 6 certified beds. All 6 beds are certified for Medicaid. At the time of the survey, the census was 5.</p> <p>Quality Review completed on 12/07/22</p> | E 0000        |   |                      |
| K 0000<br>Bldg. 01 | <p>A Life Safety Code Recertification Survey was conducted by the Indiana Department of Health in accordance with 42 CFR 483.470(j).</p> <p>Survey Date: 12/02/22</p> <p>Facility Number: 001220<br/>Provider Number: 15G640<br/>AIM Number: 100245730</p> <p>At this Life Safety Code survey, Opportunity</p>  | K 0000        |   |                      |

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| LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE | TITLE                 | (X6) DATE  |
| Valerie Thill   | Chief Program Officer | 12/13/2022 |

Any deficiency statement ending with an asterisk (\*) denotes a deficiency which the institution may be excused from correcting providing it is determined other safeguards provide sufficient protection to the patients. (see instructions.) Except for nursing homes, the findings stated above are disclosable 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 disclosed 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 S353<br>Bldg. 01 | <p>Enterprises Inc was found not in compliance with Requirements for Participation in Medicaid, 42 CFR Subpart 483.470(j), Life Safety from Fire and the 2012 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 with heat detection in the attic. The facility has a monitored fire alarm system with hard-wired smoke detection in corridors, in client sleeping rooms and all living areas. The facility has a capacity of 6 and had a census of 5 at 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 Prompt with an E-Score of 1.12<br/>Quality Review completed on 12/07/22</p> <p>NFPA 101<br/>Sprinkler System - Maintenance and Testing<br/>Sprinkler System - Maintenance and Testing<br/>2012 EXISTING (Prompt)<br/>NFPA 13 and 13R Systems<br/>All sprinkler systems installed in accordance with NFPA 13, Standard for the Installation of Sprinkler Systems, and NFPA 13R, Standard for the Installation of Sprinkler Systems in Residential Occupancies Up To and Including Four Stories in Height, are inspected, tested and maintained in accordance with NFPA 25, Standard for Inspection, Testing and Maintenance of Water Based Fire Protection System.<br/>NFPA 13D Systems<br/>Sprinkler systems installed in accordance with NFPA 13D, Standard for the Installation</p> |               |   |                      |

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|   | <p>of Sprinkler Systems in One- and Two-Family Dwellings and Manufactured Homes, are inspected, tested and maintained in accordance with the following requirements of NFPA 25:</p> <ol style="list-style-type: none"> <li>1. Control valves inspected monthly (NFPA 25, section 13.3.2).</li> <li>2. Gauges inspected monthly (NFPA 25, section 13.2.71).</li> <li>3. Alarm devices inspected quarterly (NFPA 25, section 5.2.6).</li> <li>4. Alarm devices tested semiannually (NFPA 25, section 5.3.3).</li> <li>5. Valve supervisory switches tested semiannually (NFPA 25, section 13.3.3.5).</li> <li>6. Visible sprinklers inspected annually ((NFPA 25, section 5.2.1).</li> <li>7. Visible pipe inspected annually (NFPA 25, section 5.2.2).</li> <li>8. Visible pipe hangers inspected annually (NFPA 25, section 5.2.3).</li> <li>9. Buildings inspected annually prior to freezing weather for adequate heat for water filled piping (NFPA 25, section 5.2.5).</li> <li>10. A representative sample of fast response sprinklers are tested at 20 years (NFPA 25, section 5.3.1.1.1.2).</li> <li>11. A representative sample of dry pendant sprinklers are tested at 10 years (NFPA 25, section 5.3.1.1.15).</li> <li>12. Antifreeze solutions are tested annually (NFPA 25, section 5.3.4).</li> <li>13. Control valves are operated through their full range and returned to normal annually (NFPA 25, section 13.3.3.1).</li> <li>14. Operating stems of OS&amp;Y valves are lubricated annually (NFPA 25, section 13.3.4).</li> <li>15. Dry pipe systems extending into unheated portions of the building are</li> </ol> |   |   |                      |   |

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|  | <p>inspected, tested and maintained (NFPA 25, section 13.4.4).</p> <p>A. Date sprinkler system last checked and necessary maintenance provided.</p> <p>_____</p> <p>B. Show who provided the service.</p> <p>_____</p> <p>C. Note the source of the water supply for the automatic sprinkler system.</p> <p>_____</p> <p>(Provide in REMARKS information on coverage for any non-required or partial automatic sprinkler system.)<br/>33.2.3.5.3, 33.2.3.5.8, 9.7.5, 9.7.7, 9.7.8, and NFPA 25</p> <p>Based on observation and interview, the facility failed to ensure 1 of 1 sprinkler systems were provided with spare sprinklers, a spare sprinkler cabinet large enough to fit all spare sprinkler heads, and a sprinkler wrench on the premises. NFPA 25, Standard for the Inspection, Testing, and Maintenance of Water-Based Fire Protection Systems, 2011 Edition, Section 5.4.1.4 states a supply of spare sprinklers (never fewer than six) shall be maintained on the premises so that any sprinklers that have been operated or damaged in any way can be promptly replaced. The sprinklers shall correspond to the types and temperature ratings of the sprinklers on the property. The sprinklers shall be kept in a cabinet located where the temperature in which they are subjected will at no time exceed 100 degrees Fahrenheit. A special sprinkler wrench shall be provided and kept in the cabinet to be used in the removal and installation of sprinklers. This deficient practice could affect all residents and staff in the facility.</p> <p>Findings include:</p> <p>Based on observation with the Senior Director on</p> | K S353 | <p>This deficiency had the potential to affect all clients.</p> <p>Our Facilities Manager contacted Shambaugh, our Fire Protection Partner, regarding the citation and they responded by saying they have scheduled to come to Airport GH on Dec. 28 and will put a larger head box so all heads can be enclosed and protected. Further, he said the technician will focus on the number of spare heads, ensure they are all in the head box and ensure there is a wrench for each box.</p> <p>The Assistant Service Manager will retrain his field technicians to ensure they are looking for these specific items on each visit. Finally, this item will be added to the OE facilities monthly checklist to ensure Shambaugh has thoroughly completed their tasks. This will be ongoing.</p> | 12/28/2022 |
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|                          | <p>12/02/22 at 3:35 p.m., the spare sprinkler cabinet in the riser room was not large enough to contain all sprinkler heads and prevent damage to the sprinkler heads. 5 spare sprinkler heads were laying on top of the spare sprinkler head cabinet. Based on interview at the time of the observations, the Senior Director agreed the cabinet was not large enough to contain all spare sprinkler heads.</p> <p>This finding was reviewed with the Senior Director during the exit conference.</p> |                     |  |                            |