

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

PRINTED: 08/17/2023

FORM APPROVED

OMB NO. 0938-039

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| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:<br>15G811 | X2) MULTIPLE CONSTRUCTION<br>A. BUILDING -- _____<br>B. WING _____ | X3) DATE SURVEY COMPLETED<br>07/31/2023 |
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| NAME OF PROVIDER OR SUPPLIER<br><br>RES-CARE INC | STREET ADDRESS, CITY, STATE, ZIP COD<br>1306 S BLOOMINGTON STREET<br>GREENCASTLE, IN 46135 |
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| (X4) ID PREFIX TAG     | SUMMARY STATEMENT OF DEFICIENCIE (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><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: 07/31/23</p> <p>Facility Number: 013405<br/>Provider Number: 15G811<br/>AIM Number: 201267570</p> <p>At this Emergency Preparedness survey, Res-Care 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 21 certified beds. All 21 beds are certified for Medicaid. At the time of the survey, the census was 20.</p> <p>Quality Review completed on 08/01/23</p> | E 0000        |   |                      |
| K 0000<br><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: 07/31/23</p> <p>Facility Number: 013405<br/>Provider Number: 15G811<br/>AIM Number: 201267570</p> <p>At this Life Safety Code survey, Res-Care Inc. was found not in compliance with Requirements</p>   | K 0000        |   |                      |

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|---|-------|------------|
| LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE | TITLE | (X6) DATE  |
| Patrick O'Heran   | QAM   | 08/16/2023 |

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><br>Bldg. 01   | <p>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 and with 410 IAC 9, Community Residential Facilities for Persons with Developmental Disabilities.</p> <p>This one story facility with a partial basement was fully sprinklered. The facility has a fire alarm system with hard wired smoke detection on all levels including client sleeping rooms, corridors and common living areas. The attic is protected with automatic sprinkler system. The facility has the capacity for 21 and had a census of 20 at the time 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 .49.</p> <p>Quality Review completed on 08/01/23</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.</p> |                     |  |                            |

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|                          | <p><b>NFPA 13D Systems</b></p> <p>Sprinkler systems installed in accordance with NFPA 13D, Standard for the Installation 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</li> </ol> |                     |  |                            |

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|                          | <p>13.3.4).<br/>15. Dry pipe systems extending into unheated portions of the building are inspected, tested and maintained (NFPA 25, section 13.4.4).<br/>A. Date sprinkler system last checked and necessary maintenance provided.<br/>_____<br/>B. Show who provided the service.<br/>_____<br/>C. Note the source of the water supply for the automatic sprinkler system.<br/>_____</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 record review and interview, the facility failed to provide written documentation or other evidence the sprinkler system components had been inspected and tested during 1 of 4 quarters. LSC 4.6.12.1 requires any device, equipment or system required for compliance with this Code be maintained in accordance with applicable NFPA requirements. Sprinkler systems shall be properly maintained in accordance with NFPA 25, Standard for the Inspection, Testing, and Maintenance of Water-Based Fire Protection Systems. NFPA 25, 4.3.1 requires records shall be made for all inspections, tests, and maintenance of the system components and shall be made available to the authority having jurisdiction upon request. 4.3.2 requires that records shall indicate the procedure performed (e.g., inspection, test, or maintenance), the organization that performed the work, the results, and the date. NFPA 25, 5.2.5 requires that waterflow alarm devices shall be inspected quarterly to verify they are free of physical damage. NFPA 25, 5.3.3.1 requires the mechanical</p> | K S353              | To correct the deficient practice the service provider has been contacted to ensure all quarterly inspections are completed. The Maintenance supervisor and PM will complete an LSC checklist monthly to ensure all inspections are completed. Any deficiencies found will require follow-up with the service provider. Ongoing monitoring will be achieved by the QA department receiving, reviewing and tracking all inspection reports monthly. | 08/31/2023                 |

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|                    | <p>waterflow alarm devices including, but not limited to, water motor gongs, shall be tested quarterly. 5.3.3.2 requires vane-type and pressure switch-type waterflow alarm devices shall be tested semiannually. This deficient practice could affect all clients, staff, and visitors in the facility.</p> <p>Findings include:</p> <p>Based on record review on 07/31/23 between 9:50 a.m. and 11:45 a.m. with the Quality Assurance Manager (QAM) present, there were only three quarterly sprinkler system inspection report available for review for the past 12 month period. There was no quarterly report available for the third quarter (July, August, September) of 2022. During an interview at the time of record review, the Quality Assurance Manager (QAM) said he had contacted the facility's sprinkler inspection vendor who stated that the sprinkler system had not been inspected in the third quarter of 2022. The QAM confirmed there were no other sprinkler system inspection reports available to review.</p> <p>This finding was reviewed with the Quality Assurance Manager during the exit conference.</p> |               |   |                      |