

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

PRINTED: 04/06/2022

FORM APPROVED

OMB NO. 0938-039

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER  15G324		X2) MULTIPLE CONSTRUCTION A. BUILDING -- B. WING		X3) DATE SURVEY COMPLETED 03/17/2022	
NAME OF PROVIDER OR SUPPLIER  VOCA CORPORATION OF INDIANA				STREET ADDRESS, CITY, STATE, ZIP COD 4516 W WALDEN DR MUNCIE, IN 47304			
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCY (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
E 0000  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: 03/17/22</p> <p>Facility Number: 000842 Provider Number: 15G324 AIM Number: 100243660</p> <p>At this Emergency Preparedness survey, Voca Corporation of Indiana 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 8 certified beds. At the time of the survey, the census was 7.</p> <p>Quality Review completed on 03/21/22</p>			E 0000			
K 0000  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: 03/17/22</p> <p>Facility Number: 000842 Provider Number: 15G324 AIM Number: 100243660</p> <p>At this Life Safety Code survey, Voca Corporation of Indiana was found not in compliance with Requirements for Participation in Medicaid, 42</p>			K 0000			

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 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 disclosable 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 S346  Bldg. 01	<p>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 facility was sprinklered. The facility has a fire alarm system with smoke detection in the corridors common living areas, and hard-wired smoke detectors in client sleeping rooms. The attic was not used for living purposes, storage or fuel-fired equipment and was provided with a heat detection system to activate the fire alarm system. The facility has a capacity of 8 and had a census of 7 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 0.8.</p> <p>Quality Review completed on 03/21/22</p> <p>NFPA 101 Fire Alarm System - Out of Service Fire Alarm System - Out of Service 2012 EXISTING (Prompt) Where a required fire alarm system is out of service for more than four hours in a 24-hour period, the authority having jurisdiction shall be notified, and the building shall be evacuated or an approved fire watch shall be provided for all parties left unprotected by the shutdown until the fire alarm system has been returned to service. 33.2.3.4.1, 9.6.1.3, 9.6.1.5, 9.6.1.6 Based on record review and interview, the facility failed to provide a complete written fire watch policy for when the fire alarm system is out of</p>			K S346	The Program Manager updated the Fire Watch Operational Standard to include the following:		04/04/2022

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K S351  Bldg. 01	<p>service for more than four hours in a 24-hour period. This deficient practice affects all clients, staff and visitors.</p> <p>Findings include:</p> <p>Based on record review and interview with the Area Supervisor present on 03/17/22 between 10:20 a.m. and 11:50 a.m. the facility provided fire watch plan documentation, but the plan did not state that the person(s) conducting the fire watch will have no other duties while conducting the fire watch.</p> <p>This finding was acknowledged by the Area Supervisor at the time of discovery and again at the exit conference at 1:00 p.m.</p> <p>NFPA 101 Sprinkler System - Installation Sprinkler System - Installation Where an automatic sprinkler system is installed, for either total or partial building coverage, the system shall be in accordance with Section 9.7 and shall initiate the fire alarm system in accordance with Section 9.6, as modified below. The adequacy of the water supply shall be documented. 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, shall be permitted. Automatic sprinklers shall not be required in closets not exceeding 24 square feet and in bathrooms not exceeding 55 square feet, provided that such spaces are finished with lath and plaster or</p>				<p>• The staff member conducting the fire watch will have no other duties while conducting the fire watch The Area Supervisor completed an all-staff in-service on the updated Fire Watch Operational Standard. The Fire Watch Operational Standard has been posted in the staff work area as a continued reference and educational tool for what staff are expected to do in the event of the Fire Alarm system malfunctioning.</p>		

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	<p>materials providing a 15-minute thermal barrier.</p> <p>In Prompt Evacuation Capability facilities where an automatic sprinkler system is in accordance with NFPA 13, Standard for the Installation of Sprinkler Systems, automatic sprinklers shall not be required in closets not exceeding 24 square feet and in bathrooms not exceeding 55 square feet, provided that such spaces are finished with lath and plaster or material providing a 15-minute thermal barrier.</p> <p>In Prompt Evacuation Capability facilities in buildings four or fewer stories above grade plane, systems in accordance with NFPA 13R, Standard for the Installation of Sprinkler Systems in Residential Occupancies up to and including Four Stories in Height, shall be permitted.</p> <p>Initiation of the fire alarm system shall not be required for existing installations in accordance with 33.2.3.5.6.</p> <p>Where an automatic sprinkler is installed, attics used for living purposes, storage, or fuel-fired equipment are sprinkler protected by July 5, 2019. Attics not used for living purposes, storage, or fuel-fired equipment meet one of the following:</p> <ol style="list-style-type: none"> <li>1. Protected by heat detection system to activate the fire alarm system according to 9.6.</li> <li>2. Protected by automatic sprinkler system according to 9.7.</li> <li>3. Constructed of noncombustible or limited-combustible construction; or</li> <li>4. Constructed of fire-retardant-treated wood according to NFPA 703.</li> </ol> <p>33.2.3.5.3, 33.2.3.5.3.1, 33.2.3.5.3.3,</p>						

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K S353  Bldg. 01	<p>33.2.3.5.3.4, 33.2.3.5.3.6, 33.2.3.5.7</p> <p>Based on observation and interview, the facility failed to ensure only new sprinklers were available to be utilized for its sprinkler system. NFPA 13R, Standard for the Installation of Sprinkler Systems in Residential Occupancies up to and Including 4 Stories, 2010 Edition; Section 5.1.1.1 states only new sprinklers shall be installed. This deficient practice could affect all occupants within the facility.</p> <p>Findings include:</p> <p>Based on observation during a tour of the facility with Area Supervisor and Maintenance Professional on 03/17/22 between 12:05 p.m. and 12:30 p.m., the spare sprinkler cabinet located in the riser closet contained what appeared to be used and new sprinklers. Two or three of the spare sprinklers had threads which appeared to reflect a previous installation. Based on interview at the time of observation, the Area Supervisor confirmed there appeared to be a mix of new and used spare sprinkler heads.</p> <p>This finding was acknowledged by the Area Supervisor at the time of discovery and again at the exit conference at 1:00 p.m.</p>			K S351	The Area Supervisor removed the used spare sprinkler heads from the storage cabinet to assure that they would not be installed in the event that the current sprinkler heads malfunctioned or needed replaced. The remaining spare sprinkler heads are new and additional new sprinkler heads will be ordered as needed to assure all spares are not used. The maintenance man will be in-serviced to remove all replaced/used sprinkler heads from the premises in the event of replacing the sprinkler heads in the future.		04/04/2022
	<p>NFPA 101</p> <p>Sprinkler System - Maintenance and Testing</p> <p>Sprinkler System - Maintenance and Testing</p> <p>2012 EXISTING (Prompt)</p> <p>NFPA 13 and 13R Systems</p> <p>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,</p>						

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	<p>Standard for Inspection, Testing and Maintenance of Water Based Fire Protection System.</p> <p>NFPA 13D Systems</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</li> </ol>						

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	<p>annually (NFPA 25, section 13.3.3.1).</p> <p>14. Operating stems of OS&amp;Y valves are lubricated annually (NFPA 25, section 13.3.4).</p> <p>15. Dry pipe systems extending into unheated portions of the building are 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.)</p> <p>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 provide a sprinkler wrench in the spare sprinkler cabinet. NFPA 25, Standard for the Inspection, Testing, and Maintenance of Water-Based Fire Protection Systems, in Section 5-4.1.6 requires a special sprinkler wrench to be provided and kept in the cabinet to be used in the removal and installation of sprinklers. One sprinkler wrench shall be provided for each type of sprinkler installed. This deficient practice could affect all clients in the facility.</p> <p>Findings include:</p> <p>Based on observation during a tour of the facility with Area Supervisor and Maintenance Professional on 03/17/22 between 12:05 p.m. and 12:30 p.m., there was no sprinkler wrench in the spare sprinkler cabinet. Based on interview at the</p>			K S353	The homes maintenance personal has purchased a sprinkler wrench to keep in the spare sprinkler cabinet of the home. This sprinkler wrench will always remain at the site.		04/04/2022

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K S354  Bldg. 01	<p>time of observation, the Maintenance Professional agreed there was not a special sprinkler wrench in the cabinet or in the home but stated he carried one in his truck.</p> <p>This finding was acknowledged by the Area Supervisor at the time of discovery and again at the exit conference at 1:00 p.m.</p> <p>NFPA 101 Sprinkler System - Out of Service Sprinkler System - Out of Service 2012 EXISTING (Prompt) Where a required automatic sprinkler system is out of service for more than 10 hours in a 24-hour period, the authority having jurisdiction shall be notified, and the building shall be evacuated or an approved fire watch system be provided for all parties left unprotected by the shutdown until the sprinkler system has been returned to service.</p> <p>33.2.3.5.3, 9.7.6.1, 15.5.2 (NFPA 25) Based on record review and interview, the facility failed to provide 1 of 1 correct written policies in the event the automatic sprinkler system has to be placed out-of-service for 10 hours or more in a 24-hour period in accordance with LSC, Section 9.7.5. LSC 9.7.6 requires sprinkler impairment procedures comply with NFPA 25, 2011 Edition, the Standard for the Inspection, Testing and Maintenance of Water-Based Fire Protection Systems. NFPA 25, 15.5.2 requires nine procedures that the impairment coordinator shall follow. A.15.5.2 (4) (b) states a fire watch should consist of trained personnel who continuously patrol the affected area. Ready access to fire extinguishers and the ability to promptly notify the fire department are important items to consider. During the patrol of the area, the person</p>			K S354	<p>The Program Manager updated the Fire Watch Operational Standard to include the following:</p> <ul style="list-style-type: none"> <li>• The staff member conducting the fire watch will have no other duties while conducting the fire watch</li> </ul> <p>The Area Supervisor completed an all-staff in-service on the updated Fire Watch Operational Standard. The Fire Watch Operational Standard has been posted in the staff work area for continued reference and educational tool for what staff are expected to do in the event of the sprinkler system malfunctioning.</p>		04/04/2022



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K S511  Bldg. 01	<p>should not only be looking for fire, but making sure that the other fire protection features of the building such as egress routes and alarm systems are available and functioning properly. This deficient practice could affect all occupants in the facility.</p> <p>Findings include:</p> <p>Based on record review and interview with the Area Supervisor present on 03/17/22 between 10:20 a.m. and 11:50 a.m. the facility provided fire watch plan documentation, but the plan did not state that the person(s) conducting the fire watch will have no other duties while conducting the fire watch.</p> <p>This finding was acknowledged by the Area Supervisor at the time of discovery and again at the exit conference at 1:00 p.m.</p> <p>NFPA 101 Utilities - Gas and Electric Utilities - Gas and Electric Equipment using gas or related gas piping complies with NFPA 54, National Fuel Gas Code, electrical wiring and equipment complies with NFPA 70, National Electric Code. 32.2.5.1, 33.2.5.1, 9.1.1, 9.1.2 1. Based on observation and interview, the facility failed to ensure all flexible cords were installed properly and used in a safe manor. NFPA 99, Section 10.2.4.2 states adapters and extension cords meeting the requirements of 10.2.4.2.1 through 10.2.4.2.3 shall be permitted. Section 10.2.4.2.3 states the cabling shall comply with 10.2.3. Section 10.2.3.5.1 states cord strain relief shall be provided at the attachment of the power cord to the appliance so that mechanical stress,</p>			K S511	<p>The Area Supervisor secured the loose power strip attached to the living room entertainment system to the wall so that no stress or damage will be placed on the cord.</p> <p>The Area Supervisor removed the multi-plug adaptor in the staff area and replaced it with an approved</p>		04/08/2022

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	<p>either pull, twist, or bend, is not transmitted to internal connections.</p> <p>Findings include:</p> <p>Based on observation during a tour of the facility with Area Supervisor and Maintenance Professional on 03/17/22 between 12:05 p.m. and 12:30 p.m., in the front room near the television a power strip was being used to power entertainment equipment and was not secured, dangling from the wall. This condition could put stress on the power cord causing damage to the power cord. Based on interview at the time of observations, the Area Supervisor agreed the power strip was dangling, not secured, and stated the power strip will need to be mounted or set on the floor.</p> <p>This finding was acknowledged by the Area Supervisor at the time of discovery and again at the exit conference at 1:00 p.m.</p> <p>2. Based on observation and interview, the facility failed to ensure 1 of 1 flexible cords was not used as a substitute for fixed wiring according to 33.2.5.1. LSC 33.2.5.1 states utilities shall comply with Section 9.1. LSC 9.1.2 requires electrical wiring and equipment shall be in accordance with NFPA 70, National Electrical Code. NFPA 70, 2011 Edition, Article 400.8 requires that, unless specifically permitted, flexible cords and cables shall not be used as a substitute for fixed wiring of a structure. This deficient practice could affect all occupants.</p> <p>Findings include:</p> <p>Based on observation during a tour of the facility with Area Supervisor and Maintenance</p>				<p>power strip and attached the strip to the wall to assure no stress or damage will be placed on the cord.</p> <p>The maintenance personal has contacted a certified electrician to replace the GFI in both the "male bathroom" and the ½ bathroom so that both receptacles are grounded appropriately. The task is scheduled to be completed by April 8th, 2022.</p>		

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	<p>Professional on 03/17/22 between 12:05 p.m. and 12:30 p.m., in the back office electrical equipment was plugged into and powered by a multi-plug adaptor. Based on interview at the time of observation, the Area Supervisor agreed electrical equipment was plugged into a multi-plug adaptor and did unplug the adaptor during the survey.</p> <p>This finding was acknowledged by the Area Supervisor at the time of discovery and again at the exit conference at 1:00 p.m.</p> <p>3. Based on observation and interview, the facility failed to ensure 2 of 4 ground fault circuit interrupter (GFCI) tested worked properly to provide protection against electric shock. LSC sections 9.1.2 requires all electrical wiring and equipment shall be in accordance with NFPA 70, National Electrical Code. NFPA 70, Article 210.8 Ground-Fault Circuit-Interrupter Protection for Personnel, in 210.8(A), Dwelling Units, requires ground-fault circuit-interrupter (GFCI) protection for all personnel in bathrooms and kitchens where the receptacles are intended to serve the countertop surfaces. Moisture can reduce the contact resistance of the body, and electrical insulation is more subject to failure. This deficient practice could affect clients and staff.</p> <p>Findings include:</p> <p>Based on observation during a tour of the facility with Area Supervisor and Maintenance Professional on 03/17/22 between 12:05 p.m. and 12:30 p.m., there was one GFCI receptacle in the male bathroom which when tested showed "open ground" and did not trip. Also, the GFCI in the ½ bathroom when tested showed "open ground" and did not trip. Based on interview at the time of observations the Maintenance Professional stated</p>						

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

PRINTED: 04/06/2022

FORM APPROVED

OMB NO. 0938-039

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER  15G324		X2) MULTIPLE CONSTRUCTION A. BUILDING 01 B. WING		X3) DATE SURVEY COMPLETED 03/17/2022	
NAME OF PROVIDER OR SUPPLIER  VOCA CORPORATION OF INDIANA				STREET ADDRESS, CITY, STATE, ZIP COD 4516 W WALDEN DR MUNCIE, IN 47304			
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K S741  Bldg. 01	<p>they have had this issue before and had submitted paperwork from an electrician which, in the past had been sufficient. The Maintenance Professional stated that they would simply need to replace or rewire the GFCI's which tested open ground.</p> <p>This finding was acknowledged by the Area Supervisor at the time of discovery and again at the exit conference at 1:00 p.m.</p> <p>NFPA 101 Smoking Regulations Smoking regulations shall be adopted by the administration of board and care occupancies. Where smoking is permitted, noncombustible safety type ashtrays or receptacles shall be provided in convenient locations. 32.7.4.1, 32.7.4.2, 33.7.4.1, 33.7.4.2 Based on observation and interview; the facility failed to ensure 1 of 1 smoking areas were maintained by disposing cigarette butts in a metal or noncombustible container with a self-closing cover. This deficient practice could affect all clients and staff.</p> <p>Findings include:</p> <p>Based on observation during a tour of the facility with Area Supervisor and Maintenance Professional on 03/17/22 between 12:05 p.m. and 12:30 p.m., in the smoking area at the front of the home, there was a metal tray containing cigarette butts positioned on top of a plastic storage cart up against the house. The metal tray had over 30 cigarette butts. The Area Supervisor emptied the tray into the smoker's tower during the survey.</p>			K S741	<p>The Area Supervisor removed the metal tray containing cigarette butts. The smoking tower on the property is appropriately placed and in working order. All staff were in-serviced on only using the smoking tower to extinguish cigarettes. The 2 clients in the home that also participate in smoking were provided an ISP goal to educate them daily on appropriate disposal of their cigarette butts into the approved smoking tower to prevent future occurrences.</p>		04/04/2022

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	This finding was acknowledged by the Area Supervisor at the time of discovery and again at the exit conference at 1:00 p.m.						