

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 15G499		X2) MULTIPLE CONSTRUCTION A. BUILDING 00 B. WING _____		X3) DATE SURVEY COMPLETED 03/26/2013	
NAME OF PROVIDER OR SUPPLIER DEVELOPMENTAL SERVICE ALTERNATIVES INC				STREET ADDRESS, CITY, STATE, ZIP CODE 7603 E 10TH ST INDIANAPOLIS, IN 46219			
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W000000	<p>This visit was for the fundamental recertification and state licensure survey.</p> <p>Dates of Survey: 3/19/13, 3/20/13, 3/25/13 and 3/26/13.</p> <p>Facility Number: 001013 Provider Number: 15G499 AIM Number: 100245100</p> <p>Surveyor: Keith Briner, Medical Surveyor III</p> <p>These deficiencies also reflect state findings in accordance with 460 IAC 9.</p> <p>Quality review completed April 2, 2013 by Dotty Walton, Medical Surveyor III.</p>			W000000			

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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W000125	<p>483.420(a)(3) PROTECTION OF CLIENTS RIGHTS The facility must ensure the rights of all clients. Therefore, the facility must allow and encourage individual clients to exercise their rights as clients of the facility, and as citizens of the United States, including the right to file complaints, and the right to due process.</p> <p>Based on record review and interview for 1 of 3 sampled clients (#1), the facility failed to ensure client #1's right to use tobacco products.</p> <p>Findings include:</p> <p>Client #1's record was reviewed on 3/20/13 at 11:31 AM. Client #1's ISP (Individual Support Plan) dated 10/11/12 indicated client #1 did not have or need a guardian or HCR (Health Care Representative) to assist him with decisions. Client #1's IST (Individual Support Team) meeting notes dated 5/25/12 indicated, "[Client #1] has not been allowed to smoke since prior to his move to [group home]. Many of [client #1's] current behaviors revolve around his addiction to smoking. [Client #1] is picking up butts and chewing them or smoking them. [Client #1] is sneaking out of the workshop, in an attempt to smoke, going through staff's possessions looking for cigarettes. [Client #1] is emancipated. [Client #1] has the right to follow or not follow health recommendations."</p>	W000125	<p>There will be staff training completed to ensure that staff are educated regarding the rights of the individuals to include the right to consume tobacco products. Staff will review policy 7.03 Consumer Civil Rights in this training as well. Annual review of consumer rights will occur with staff to ensure knowledge of the consumer's inherent civil rights on an ongoing basis.</p> <p>Responsible persons: Area Director and Residential Director</p>	04/25/2013			

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	<p>QMRP #1 (Qualified Mental Retardation Professional) was interviewed on 3/20/13 at 12:35 PM. QMRP #1 indicated client #1 was restricted from smoking cigarettes or using tobacco products such as chewing tobacco. QMRP #1 indicated client #1's PCP (Primary Care Physician) and Cardiologist recommended client #1 discontinue the use of tobacco products. QMRP #1 indicated client #1 was able to understand the risks of continuing to smoke and/or use tobacco products. QMRP #1 indicated client #1 would continue to smoke or use chewing tobacco if offered the choice. QMRP #1 indicated client #1 should have the choice to refuse the medical recommendation for tobacco cessation.</p> <p>Client #1 was interviewed on 3/26/13 at 11:15 AM. When asked how staff were treating him at the group home, client #1 stated, "They don't let me do things. Sometimes they don't let me have snacks. They don't let me smoke." When asked if he knew why staff didn't let him smoke, client #1 indicated he understood his doctor did not want him to smoke. When asked if he knew that smoking was bad for his health and his doctor wanted him to not smoke, client #1 stated, "Yes." When asked if he still wanted to smoke even though the doctor said he shouldn't,</p>						

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	<p>client #1 stated, "Yes, I want to smoke. I'm 55 years old. I should be able to say if I want to or not."</p> <p>AS (Administrative Staff) #1 was interviewed on 3/26/13 at 12:05 PM. AS #1 indicated client #1 was restricted from the use of tobacco products. AS #1 indicated client #1 was an emancipated adult.</p> <p>9-3-2(a)</p>			

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W000227	<p>483.440(c)(4) INDIVIDUAL PROGRAM PLAN The individual program plan states the specific objectives necessary to meet the client's needs, as identified by the comprehensive assessment required by paragraph (c)(3) of this section. Based on record review and interview for 1 of 3 sampled clients (#1), the clients ISP (Individual Support Plan) failed to address client #1's identified behavioral needs in regard to tobacco cessation.</p> <p>Findings include:</p> <p>Client #1's record was reviewed on 3/20/13 at 11:31 AM. Client #1's IST (Individual Support Team) meeting notes dated 5/25/12 indicated, "[Client #1] has not been allowed to smoke since prior to his move to [group home]. Many of [client #1's] current behaviors revolve around his addiction to smoking. [Client #1] is picking up butts and chewing them or smoking them. [Client #1] is sneaking out of the workshop, in an attempt to smoke, going through staff's possessions looking for cigarettes.</p> <p>Client #1's ISP dated 10/11/12 did not address client #1's tobacco use/cessation. Client #1's BSP dated 5/25/12 did not indicate supports to address client #1's addiction to tobacco products.</p>	W000227	<p>Client 1's individual support plan has been revised to reflect the history of consuming used tobacco products and his dangerous behavior with the use of chewing tobacco. (See attachment A)A programmatic goal has been implemented which addresses Client 1's need for continued tobacco use education. (See attachment B)Responsible persons: Area Director and Residential Director</p>	04/25/2013			

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	<p>AS (Administrative Staff) #1 was interviewed on 3/26/13 at 12:05 PM. AS #1 indicated client #1 was restricted from the use of tobacco products. AS #1 indicated the IST had discussed implementing a tobacco titration/reduction plan but had not developed or implemented a plan to assist client #1 with his tobacco addiction.</p> <p>9-3-4(a)</p>			

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W000247	<p>483.440(c)(6)(vi) INDIVIDUAL PROGRAM PLAN The individual program plan must include opportunities for client choice and self-management. Based on record review and interview for 1 of 3 sampled clients (#1), the facility failed to ensure client #1's program plans included opportunities for personal choice and self management regarding the use of tobacco products.</p> <p>Finding include:</p> <p>Client #1's record was reviewed on 3/20/13 at 11:31 AM. Client #1's ISP (Individual Support Plan) dated 10/11/12 indicated client #1 did not have or need a guardian or HCR (Health Care Representative) to assist him with decisions. Client #1's IST (Individual Support Team) meeting notes dated 5/25/12 indicated, "[Client #1] has not been allowed to smoke since prior to his move to [group home]. Many of [client #1's] current behaviors revolve around his addiction to smoking. [Client #1] is picking up butts and chewing them or smoking them. [Client #1] is sneaking out of the workshop, in an attempt to smoke, going through staff's possessions looking for cigarettes. [Client #1] is emancipated. [Client #1] has the right to follow or not follow health recommendations."</p>	W000247	<p>Client 1's individual support plan has been revised to reflect the history of consuming used tobacco products and his dangerous behavior with the use of chewing tobacco. (See attachment A) A programmatic goal has been implemented which addresses Client 1's need for continued tobacco use education. (See attachment B) Responsible persons: Area Director and Residential Director</p>	04/25/2013			

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	<p>QMRP #1 (Qualified Mental Retardation Professional) was interviewed on 3/20/13 at 12:35 PM. QMRP #1 indicated client #1 was restricted from smoking cigarettes or using tobacco products such as chewing tobacco. QMRP #1 indicated client #1's PCP (Primary Care Physician) and Cardiologist recommended client #1 discontinue the use of tobacco products. QMRP #1 indicated client #1 was able to understand the risks of continuing to smoke and/or use tobacco products. QMRP #1 indicated client #1 would continue to smoke or use chewing tobacco if offered the choice. QMRP #1 indicated client #1 should have the choice to refuse the medical recommendation for tobacco cessation.</p> <p>Client #1 was interviewed on 3/26/13 at 11:15 AM. When asked how staff were treating him at the group home, client #1 stated, "They don't let me do things. Sometimes they don't let me have snacks. They don't let me smoke." When asked if he knew why staff didn't let him smoke, client #1 indicated he understood his doctor did not want him to smoke. When asked if he knew that smoking was bad for his health and his doctor wanted him to not smoke, client #1 stated, "Yes." When asked if he still wanted to smoke even though the doctor said he shouldn't, client #1 stated, "Yes, I want to smoke."</p>						

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	I'm 55 years old. I should be able to say if I want to or not." 9-3-4(a)				

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W000264	<p>483.440(f)(3)(iii) PROGRAM MONITORING & CHANGE The committee should review, monitor and make suggestions to the facility about its practices and programs as they relate to drug usage, physical restraints, time-out rooms, application of painful or noxious stimuli, control of inappropriate behavior, protection of client rights and funds, and any other areas that the committee believes need to be addressed.</p> <p>Based on record review and interview for 1 of 3 sampled clients (#1), the facility's HRC (human rights committee) failed to review, monitor and approve client #1's restriction from the use of tobacco products.</p> <p>Findings include:</p> <p>Client #1's record was reviewed on 3/20/13 at 11:31 AM. Client #1's IST (Individual Support Team) meeting notes dated 5/25/12 indicated, "[Client #1] has not been allowed to smoke since prior to his move to [group home]." Client #1's record did not indicate the facility HRC had reviewed or approved restricting client #1 from the use of tobacco products.</p> <p>QMRP #1 (Qualified Mental Retardation Professional) was interviewed on 3/20/13 at 12:35 PM. QMRP #1 indicated client #1 was restricted from smoking cigarettes or using tobacco products such as</p>	W000264	Professional staff will receive retraining regarding the use of any restrictive measures and the necessity to obtain Human Rights Committee approval prior to the implementation of any measure which could be considered restrictive. Responsible person: Area Director and Residential Director	04/25/2013			

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	<p>chewing tobacco. QMRP #1 indicated the facility HRC had not reviewed or approved restricting client #1 from the use of tobacco products.</p> <p>Client #1 was interviewed on 3/26/13 at 11:15 AM. When asked how staff were treating him at the group home, client #1 stated, "They don't let me do things. Sometimes they don't let me have snacks. They don't let me smoke."</p> <p>AS (Administrative Staff) #1 was interviewed on 3/26/13 at 12:05 PM. AS #1 indicated client #1 was restricted from the use of tobacco products. AS #1 indicated the facility did not have HRC approval for client #1 to be restricted from tobacco products.</p> <p>9-3-4(a)</p>			

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W000289	<p>483.450(b)(4) MGMT OF INAPPROPRIATE CLIENT BEHAVIOR</p> <p>The use of systematic interventions to manage inappropriate client behavior must be incorporated into the client's individual program plan, in accordance with §483.440(c)(4) and (5) of this subpart. Based on record review and interview for 1 of 3 sampled clients (#1), the facility failed to ensure client #1's tobacco restriction was included in his BSP (Behavior Support Plan)/ISP (Individual Support Plan).</p> <p>Findings include:</p> <p>Client #1's record was reviewed on 3/20/13 at 11:31 AM. Client #1's IST (Individual Support Team) meeting notes dated 5/25/12 indicated, "[Client #1] has not been allowed to smoke since prior to his move to [group home]. Many of [client #1's] current behaviors revolve around his addiction to smoking. [Client #1] is picking up butts and chewing them or smoking them. [Client #1] is sneaking out of the workshop, in an attempt to smoke, going through staff's possessions looking for cigarettes.</p> <p>Client #1's ISP dated 10/11/12 did not indicate client #1's should be restricted from tobacco products. Client #1's ISP dated 10/11/12 indicated he had moved to</p>	W000289	<p>Client 1's behavior development program will be revised to reflect the client's PICA tendencies with tobacco products, given that Client 1 does not smoke the cigarettes but rather eats picks up and eats used cigarette butts from the ground and has in the past fallen asleep with chewing tobacco in his mouth as well as eaten used cigarette butts from the ground. Client 1 will be offered products to assist in addressing his desire to consume tobacco such as an electronic cigarette or a nicotine patch or other primary care physician recommended method.</p> <p>Responsible persons: Area Director and Residential Director</p>	04/25/2013	

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	<p>his current group home September 2011. Client #1's BSP dated 5/25/12 did not indicate client #1 should be restricted from the use of tobacco products.</p> <p>QMRP #1 (Qualified Mental Retardation Professional) was interviewed on 3/20/13 at 12:35 PM. QMRP #1 indicated client #1 was restricted from smoking cigarettes or using tobacco products such as chewing tobacco. QMRP #1 indicated being restricted from tobacco products was not included in client #1's ISP/BSP. QMRP #1 indicated client #1's ISP/BSP should include restrictive practices.</p> <p>Client #1 was interviewed on 3/26/13 at 11:15 AM. When asked how staff were treating him at the group home, client #1 stated, "They don't let me do things. Sometimes they don't let me have snacks. They don't let me smoke."</p> <p>AS (Administrative Staff) #1 was interviewed on 3/26/13 at 12:05 PM. AS #1 indicated client #1 was restricted from the use of tobacco products. AS #1 indicated client #1's tobacco restriction should be included in his ISP/BSP.</p> <p>9-3-5(a)</p>						