

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 15G796	X2) MULTIPLE CONSTRUCTION A. BUILDING 00 B. WING _____	X3) DATE SURVEY COMPLETED 02/28/2014
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NAME OF PROVIDER OR SUPPLIER AWS	STREET ADDRESS, CITY, STATE, ZIP CODE 6856 WHEELLOCK RD FORT WAYNE, IN 46835
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W000000	<p>This visit was for a fundamental annual recertification and state licensure survey.</p> <p>Dates of survey: February 25, 26, 27 and 28, 2014.</p> <p>Facility number: 012549 Provider number: 15G796 AIM number: 201019420</p> <p>Surveyor: Kathy Wanner, QIDP</p> <p>The following federal deficiency also reflects a state finding in accordance with 460 IAC 9. Quality Review completed 3/7/14 by Ruth Shackelford, QIDP.</p>	W000000		
W000312	<p>483.450(e)(2) DRUG USAGE</p> <p>Drugs used for control of inappropriate behavior must be used only as an integral part of the client's individual program plan that is directed specifically towards the reduction of and eventual elimination of the behaviors for which the drugs are employed. Based on record review and interview, the facility failed to identify a specific medication as part of a plan of reduction for medications used for the</p>	W000312	All Behavior Support Plans (BSP) and their plans of reduction have been reviewed by the QMRP for the consumers who reside in this home. Plans which did not	03/30/2014

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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	<p>management or elimination of behaviors and/or symptoms of diagnoses for which the drugs were prescribed for 3 of 4 sampled clients (clients #1, #2 and #3).</p> <p>Findings include:</p> <p>Client #1's record was reviewed on 2/27/14 at 1:07 P.M. Client #1's Physician's Orders (PO) dated for December 2014 indicated he was prescribed Celexa (anti-depressant) for anxiety, Risperidone (anti-psychotic) for anxiety, and Xanax (anti-anxiety) for anxiety. Client #1's Behavior Support Plan (BSP) dated 11/1/13 indicated "A plan of reduction will be contingent upon [Client #1] meeting his objectives as stated below. When the below objectives are met then the team will recommend to the psychiatrist that a reduction be made. The reduction will not be made if the team headed by the psychiatrist believes that the reduction would have a negative outcome on [Client #1]. 1a. [Client #1] will reduce incidents of anxiety from 10 to 5 for six months (estimated completion date 6/30/14). 2a. [Client #1] will reduce incidents of anxiety from 5 to 0 for six months (estimated completion date 10/31/14)." Client #1's BSP did not indicate which medication would be targeted for possible reduction.</p>		<p>indicate specific medications have been updated to include this information. Each goal for medication reduction includes the specific medication targeted for reduction. To ensure that this oversight does not recur, the director will review all annual and new BSP's prior to submission to the Human Rights Committee (HRC). The HRC approval form has been updated to include a review of the plan of reduction to ensure specific medication is targeted.</p>				

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	<p>Client #2's record was reviewed on 2/27/14 at 2:08 P.M. Client #2's Physician's Orders (PO) dated for December 2014 indicated he was prescribed Trazodone (anti-depressant/insomnia) for insomnia and Luvox (anti-depressant) for bedtime obsessive compulsive disorder (pulling threads from blankets etc.). Client #2's Behavior Support Plan (BSP) dated 10/8/13 indicated he had the targeted behaviors of, PICA (eating non-edible items), property destruction, insomnia, and rumination. Client #2's BSP indicated "A plan of reduction will be contingent upon [Client #2] meeting his objectives as stated below. When the below objectives are met then the team will recommend to the psychiatrist that a reduction be made. The reduction will not be made if the team headed by the psychiatrist believes that the reduction would have a negative outcome on [Client #2]. Client #2's BSP did not indicate which medication would be targeted for possible reduction.</p> <p>Client #3's record was reviewed on 2/27/14 at 2:40 P.M. Client #3's Physician's Orders (PO) dated for December 2014 indicated he was prescribed Depakote (mood stabilizer) for mood disorder, Seroquel</p>			

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	<p>(anti-psychotic) for mood disorder and Abilify (anti-psychotic) for Bi-Polar and Strattera (ADHD) attention deficit hyperactivity disorder. Client #3's Behavior Support Plan (BSP) dated 10/1/13 indicated he had the targeted behaviors of, physical aggression, property destruction and verbal aggression. Client #3's BSP indicated "1a. [Client #3] will reduce incidents of physical aggression from 42 to 20 for six months (estimated completion date 3/30/14). 1b. [Client #3] will reduce incidents of verbal aggression (threats) from 76 to 40 for six months (estimated completion date 3/30/14)." 2a. [Client #3] will reduce incidents of physical aggression from 20 to 5 for six months (estimated completion date 9/30/14). 2b. [Client #3] will reduce incidents of verbal aggression (threats) from 40 to 5 for six months (estimated completion date 9/30/14)." Client #3's BSP did not indicate which medication would be targeted for possible reduction.</p> <p>An interview was conducted with the Qualified Intellectual Disabilities Professional (QIDP) and the Residential Director (RD) on 2/27/14 at 2:05 P.M. When asked about plans of reduction for behavior medication, the QIDP and the RD indicated the behavior plans for clients #1, #2, and #3 did not identify a</p>			
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	specific medication in their plans of reductions. 9-3-5(a)				