

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  15G137	X2) MULTIPLE CONSTRUCTION A. BUILDING 00 B. WING _____	X3) DATE SURVEY COMPLETED  07/16/2012
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NAME OF PROVIDER OR SUPPLIER  NORMAL LIFE OF INDIANA	STREET ADDRESS, CITY, STATE, ZIP CODE 8616 NORTHFIELD DR EVANSVILLE, IN 47713
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W0000	<p>This visit was for an annual fundamental recertification and state licensure survey.</p> <p>Dates of Survey: 7/10, 7/11, 7/12 and 7/16/12</p> <p>Facility Number: 000674 Provider Number: 15G137 AIM Number: 100234390</p> <p>Surveyor: Jenny Rida, Medical Surveyor III</p> <p>This deficiency also reflects state findings in accordance with 460 IAC 9. Quality Review completed 7/24/12 by Ruth Shackelford, Medical Surveyor III.</p>	W0000		

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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W0240	<p>483.440(c)(6)(i) INDIVIDUAL PROGRAM PLAN The individual program plan must describe relevant interventions to support the individual toward independence.</p> <p>Based on interview and record review for 1 of 4 sampled clients (#4), the client's Individual Support Plan (ISP) failed to clearly indicate how facility staff were to address/handle client #4 after he refuses his medications.</p> <p>Findings include:</p> <p>The facility's reportable incident reports and/or facility incident reports were reviewed on 7/10/12 at 12:30 PM. The facility's incident/reportable incident reports indicated client #4 refused his medications of Depakote 250 mg (milligrams) (Epilepsy) and Keppra 500 mg (Epilepsy) during the 6:00 AM 12:00 PM, 4:30 PM or 8:00 PM medication administration times on 2/10 (4:30 PM), 2/3 (4:30 PM and 8:00 PM), 2/7 (8:00 PM), 2/10 (8:00 PM), 2/13 (8:00 PM), 2/15 (4:30 PM and 8:00 PM), 2/19/12 (8:00 PM), 2/22 (8:00 PM), 2/27 (4:30 PM and 8:00 PM), 2/29 (8:00 PM), 3/3 (12:00 PM), 3/5 (12:00 PM), 3/15 (12:00 PM), 3/18 (12:00 PM), 3/21 (6:00 AM), 3/22 (4:30 PM and 8:00 PM), 3/25 (12:00 PM), 3/26 (6:00 AM), 3/28 (12:00 PM and 4:30 PM), 4/3 (4:30 PM), 4/4 (4:30 PM and 8:00 PM), 4/14 (8:00 PM), 4/16</p>	W0240	<p>- Client #4's Behavior Support Plan has been revised to instruct staff members how to address the individual after he has refused his medications. - All staff members will be retrained on Client #4's Behavior Support Plan. - The Program Coordinator will review all individual' plans monthly based on data and ensure that they are accurate and resemble the needs of the clients, specifically that of Client #4's. - The Program Coordinator will conduct weekly home visits to ensure that client plans are appropriate and that staff members are actively implementing the plans. Staff Responsible: Home Staff &amp; Program Coordinator.</p>	08/15/2012			

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	<p>(4:30 PM and 8:00 PM), 4/25 (4:30 PM), 4/27 (4:30 PM and 8:00 PM), 4/28 (6:00 AM, 12:00 PM and 4:30 PM), 5/1 (8:00 PM), 5/2 (8:00 PM), 5/5 (12:00 PM and 4:30 PM), 5/6 (4:30 PM), 5/8 (4:30 PM), 5/9 (8:00 PM), 5/15 (8:00 PM), 5/16 (4:30 PM and 8:00 PM), 5/20 (4:30 PM and 8:00 PM), 5/26 (12:00 PM, 4:30 PM and 8:00 PM), 5/30 (8:00 PM), 6/1 (4:30 and 8:00 PM), 6/2 (4:30 PM and 8:00 PM), 6/3 (4:30 PM and 8:00 PM), 6/7 (8:00 PM), 6/10 (4:30 PM and 8:00 PM), 6/11 (4:30 PM and 8:00 PM), 6/12 (4:30 PM and 8:00 PM), 6/16 (12:00 PM), 6/17 (12:00 PM), 6/20 (4:30 and 8:00 PM), 6/22 (6:00 AM), 6/24 (8:00 PM), 6/26 (4:30 PM and 8:00 PM), 7/3 (8:00 PM) and 7/4 (8:00 PM).</p> <p>Client #4's record was reviewed on 7/12/12 at 10:30 AM. Client #4's 6/6/12 Individual Support Plan indicated client #4's diagnoses included, but were not limited to, Intermittent Explosive Disorder, Bipolar Mixed type, Moderate Mental Retardation, Complex Partial or Pseudo Seizure and Urge incontinence.</p> <p>Client #4's 6/6/12 BSP (Behavioral Support Plan) indicated the client's targeted behavior was "Resistance." The 6/6/12 BSP defined the Resistance as "resisting or refusing to take his medications, resisting going to work,</p>						

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	<p>resisting to participate in other various activities or chores." Client #4's 6/6/12 BSP indicated the following reactive strategy:</p> <ol style="list-style-type: none"> <li>1. Give no more than 3 verbal prompts to complete a task.</li> <li>2. If [client #4] continues to be resistant, remind him you will come back in (sic) ask him to complete a task again in 15 minutes.</li> <li>3. Be sure to praise [client #4] in specific terms when he does complete a task requested.</li> <li>4. Requests should be made in a positive way rather than a chore." Client #4's 6/6/12 BSP did not indicate how facility staff were specifically to address/handle client #4's refusal of medications.</li> </ol> <p>Interview with administrative staff #2 on 7/12/12 at 1:40 PM indicated client #4 refuses his medications at times. Administrative staff #2 indicated when client #4 refuses his meds after 3 verbal prompts, staff are to call the nurse, the nurse then notifies the doctor, and the staff is to follow doctor's orders. Administrative staff #2 stated "We have talked with his doctors several times and they refuse to change his Depakote and Keppra to 6:00 AM." Administrative staff #2 indicated client #4 takes the majority of his medications at the 6:00</p>			

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	<p>AM medication administration time.</p> <p>Administrative staff #2 indicated client #4's 6/6/12 BSP did not specifically address how staff were to address/handle client #4's medication refusals.</p> <p>9-3-4(a)</p>			