

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 15G791	X2) MULTIPLE CONSTRUCTION A. BUILDING 00 B. WING _____	X3) DATE SURVEY COMPLETED 01/12/2012
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NAME OF PROVIDER OR SUPPLIER SPECTRUM COMMUNITY SERVICES OF INDIANA LLC	STREET ADDRESS, CITY, STATE, ZIP CODE 474 WHITEWOOD DR VALPARAISO, IN 46385
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W0000	<p>This visit was for the investigation of complaints #IN00100900 and #IN00101868.</p> <p>Complaint #IN00100900: Substantiated, Federal/state deficiencies related to the allegations are cited at W122, W149, W154, W157 and W249.</p> <p>Complaint #IN00101868: Substantiated, Federal/state deficiencies related to the allegations are cited at W122, W149, W154, W157 and W249.</p> <p>Dates of Survey: January 4, 5, 6, 9, 10, 11 and 12, 2012.</p> <p>Facility number: 012557 Provider number: 15G791 AIM number: 201017960A</p> <p>Surveyor: Christine Colon, Medical Surveyor III/QMRP</p> <p>The following federal deficiencies also reflect state findings in accordance with 460 IAC 9. Quality Review completed 1/23/12 by Ruth Shackelford, Medical Surveyor III.</p>	W0000		
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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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W0122	<p>The facility must ensure that specific client protections requirements are met.</p> <p>Based on record review and interview, the Condition of Participation: Client Protections, is not met as the facility failed to protect 1 of 4 clients (client A) living in the home from Self Injurious Behavior (SIB), neglected to prevent her elopement from the group home, failed to have written documentation to indicate thorough investigations were completed and failed to take effective/sufficient corrective action to prevent recurrence of incidents.</p> <p>Findings include:</p> <ol style="list-style-type: none"> 1. Please refer to W149. The facility failed to implement their abuse/neglect policy to ensure 1 of 4 clients (client A) living in the group home was free from SIB and neglected to prevent her elopement from the group home. 2. Please refer to W154. The facility failed for 4 of 4 incidents of SIB/elopement, involving 1 of 4 clients (client A), to provide evidence thorough investigations were conducted. 3. Please refer to W157 as the facility failed to take effective corrective action to protect 1 of 4 clients (client A) living in the home from SIB and elopement. 	W0122	<p>Client A's behavior support plan has been updated to reflect recent history of elopement and strategies for preventing elopement. If Client A attempts to elope from the home, Client A will be escorted back to the home before leaving the property. A directive has been given to QMRP to complete investigations for incidents of self injurious behavior. QMRP will receive a statement from responsible supervising staff and customer as to how the item was obtained. If an individual is showing signs of elopement or SIB, additional staff will be utilized if possible to assist in ensuring that individuals safety.</p>	01/18/2012			

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	<p>These federal tag relates to complaints #IN00101868 and #IN00100900.</p> <p>9-3-2(a)</p>			
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W0149	<p>The facility must develop and implement written policies and procedures that prohibit mistreatment, neglect or abuse of the client.</p> <p>Based on record review and interview, for 1 of 4 clients residing at the group home (client A), the facility neglected to implement its abuse/neglect policy by assuring the client was not self injurious and neglected to prevent elopement from the group home.</p> <p>Findings include:</p> <p>A review of the facility's records was conducted on 1/4/12 at 1:30 P.M.. Review of the facility's incident reports dated 12/1/11 to 1/4/12 indicated the following:</p> <p>1. Incident report dated 12/4/11: "[Client A] was upset due to being on constant watch status for self harming. [Client A] began to yell and cuss at staff, staff continued attempting to de-escalate [client A]. [Client A] told staff that she did 'not want to be here anymore.' [Client A] stated to staff that she was going to harm them. [Client A] then called QDDP (Qualified Developmental Disabilities Professional) and stated that the staff was 'pissing' her off because she did not need to be on constant watch. QDDP informed [client A] that if she continued to not participate in self harm that she could come off constant watch later in the evening, [client A] ended the call by hanging up. [Client A] then walked out the front door, staff followed. [Client A] ran from staff, staff continued to follow her down the street. [Client A] then picked up a small item on the road and attempted to cut her throat, staff physically restrained [client A] (staff's arms over/under [client A]'s arms-additional staff holding [client A]'s legs to get the item away from [client A]. [Client A] was in this restraint for about five</p>	W0149	Daily room sweeps have been implemented at varying times to prevent Client A from successfully obtaining items that can be used for SIB. Whole House sweeps have also been implemented three times a day to prevent Client A from hiding objects in common areas. Room sweeps and whole house sweeps are documented on appropriate form. QMRP will complete investigation when SIB with an object occurs.	01/18/2012
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	<p>minutes. A neighbor saw the incident and yelled 'I'm calling the police!' After [client A] was let up from the hold and continued to walk, while the incident was going on, QDDP had talked to [client A]'s Psychiatrist office to inform them of the situation and stated if [client A] continued to escalate to call for an ambulance for a transport to the emergency room for evaluation and that they would inform her psychiatrist of the incident. Staff called QDDP with an update and stated that [client A] was continuing to yell and was trying to pick up small items in an attempt to harm herself, staff also informed QDDP that a neighbor had called the police. QDDP instructed staff to followup and request an ambulance transport to the emergency room due to [client A]'s level of self harm and attempts, (sic) Police arrived before an ambulance could be called, staff spoke to the police and stated that [client A] was having a mental health emergency and needed transport to the emergency room for evaluation. QDDP arrived shortly after, while arriving at the scene, [client A]'s Psychiatrist [Doctor name] called QDDP. QDDP informed her of the chain of events, through the conversation [Doctor name] stated that [client A] should be evaluated, and also stated that if [client A] was no (sic) admitted to have [client A] come to her office for an injection of Deproevera (sic). Police cleared the scene after talking to [client A], (sic) Police did not do anything further. [Client A] was transported to [Hospital name] for evaluation. [Client A] was evaluated by a crisis counselor and it was determined that [client A] was not a threat to herself. [Client A] was given an injection of Haldol, Ativan and Cogentin, [client A] was released. "</p> <p>2. Incident dated 12/15/11 at 9:05 A.M.: "[Client A] wanted to talk to the House Manager (HM) about who was working with her today. She did</p>			
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	<p>not want to work with the staff that was assigned to work with her. Staff was in the office administering meds and [client A] was asked to wait a moment until she was available. [Client A] did not want to wait and tried to get in the office, staff was concerned for client that was in the office taking meds and tried to redirect [client A]. [Client A] began pushing staff out of the way and began hitting staff. [Client A] tried to kick, punch, hit and pull staff's hair. Staff placed [client A] in an approved restraint. [Client A] began yelling obscenities at staff. Staff ignored the comments and continued the hold. [Client A] spit in staff's face, calling staff n----- b----- and white honkey b-----, telling them to get their fat a---- away from her. Staff prompted [client A] to take a few deep breathes (sic) to calm down and reminded [client A] of her coping skills. [Client A] took 10 deep breathes (sic) and asked calmly if she could go to her room. [Client A] was no longer fighting to get up so staff released the hold. [Client A] went to her room and locked her door. Due to the previous self harm staff unlocked the door after knocking and getting no response, to do a visual of [client A] to assure she was not harming herself. [Client A] told staff she did not want her by her she was not working with her today and headed out to the dining room. Staff followed. [Client A] go (sic) to the front door and went out it and took off running down the street. Staff followed, and HM followed also and told other staff to head back and HM stayed with [client A] and walked. [Client A] was responsive to HM and allowed HM to walk with her. [Client A] walked to the front of the neighborhood and turned around after HM prompted and headed home. The QDDP was headed towards the house at the time and [client A] got in the car with staff and QDDP and came home."</p> <p>3. Incident dated 12/15/11 at 2:42 P.M.: "[Client</p>			
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	<p>A] was walking around the house with a hard piece of plastic. [Client A] has been known to break plastic so she can self harm with it. [Client A] was upset that staff was watching her with the plastic. [Client A] went by the front door and then took off outside. Staff followed. [Client A] turned around and tried hitting staff in the face and began to run again. Staff followed. [Client A] turned around grabbed staff by the hair and dropped to the ground. Another staff came to assist and was able to get [client A]'s hands removed from staff's hair. [Client A] continued to try and kick, punch, and bite staff. House Manager was able to calm [client A] down and get her back in the house."</p> <p>4. Incident dated 12/31/11: "[Client A] was upset and aggravated (sic) with her housemate. [Client A] wanted to spend time in her room. Staff continued 15 minute well being checks. [Client A] was sitting on her bed listening to music and drawing. [Client A] came out and gave a note about not having a good day and feeling like she wanted to hurt herself. Staff talked with her about how she was feeling and began making snacks for the events taking place this evening. [Client A] helped set up the snacks and helped clean up and appeared to be in a better mood. Staff asked [client A] if she was ok and she replied yes. Staff asked [client A] of (sic) she felt like harming herself still and [client A] replied no. [Client A] hung out in the dining room with staff and house mates. When shift change took place, [client A] went to her room and shut her door. Staff went to check on [client A] and found her door locked. Staff knocked and got no reply from [client A]. Staff unlocked the door and [client A] was laying in her bed covered up. [Client A] would not respond to staff so staff removed her covers and [client A] looked at staff and tried to pull the blankets back over her face. Staff noticed a brown</p>			
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	<p>cord around [client A]'s neck and immediately asked 2nd staff for the scissors. Staff was able to get a finger in between the cord and her neck so it was not tight enough to cut off air. [Client A] began crying and was still able to breathe without restriction. Staff cut the cord off her neck and did another room sweep. Staff removed the video game that had a cord. Staff called behavior specialist and QDDP. Staff tried to contact psychiatrist but didn't get an answer. Staff transported [client A] to hospital for an evaluation, where they chose to admit her."</p> <p>A review of the facility's "Protection and Affirmation of Rights", no date noted, was conducted on 1/6/12 at 12:52 P.M.. Review of the facility's policy indicated any person receiving services and supports would be assured protection from abuse, neglect, and exploitation.</p> <p>An interview with the QDDP was conducted at the group home on 1/10/12 at 3:45 P.M.. The QDDP indicated client A did attempt to harm herself and eloped out of the group home as documented. The QDDP indicated staff neglected to prevent client A from accessing a piece of hard plastic and a cord in which she wrapped around her neck while unsupervised. The QDDP further indicated the facility's abuse neglect policy should be followed at all times.</p> <p>This federal tag relates to complaints #IN00101868 and #IN00100900.</p> <p>9-3-2(a)</p>			
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W0154	<p>The facility must have evidence that all alleged violations are thoroughly investigated.</p> <p>Based on record review and interview for 4 of 4 incidents of Self Injurious behavior (SIB)/elopement, involving 1 of 4 clients (client A), the facility failed to provide evidence thorough investigations were conducted.</p> <p>Findings include:</p> <p>A review of the facility's records was conducted on 1/4/12 at 1:30 P.M.. Review of the facility's incident reports dated 12/1/11 to 1/4/12 indicated the following:</p> <p>1. Incident report dated 12/4/11: "[Client A] was upset due to being on constant watch status for self harming. [Client A] began to yell and cuss at staff, staff continued attempting to de-escalate [client A]. [Client A] told staff that she did 'not want to be here anymore.' [Client A] stated to staff that she was going to harm them. [Client A] then called QDDP (Qualified Developmental Disabilities Professional) and stated that the staff was 'pissing' her off because she did not need to be on constant watch. QDDP informed [client A] that if she continued to not participate in self harm that she could come off constant watch later in the</p>	W0154	<p>QMRP for group home is also Interim Director of Operations, QMRP has given a self directive to complete an investigation when an episode of SIB with an object occurs. A memo dated 1/16/12 listed the following and will be included in supporting documentation:Due to our recent survey, this memo will serve as an update to our policy on investigations. An investigation will be conducted for any client to client abuse or Self injurious behavior or other incidents that can place our customers in unsafe situation by the following process: -Gather statements from staff (progress notes, internal incident reports, etc). Interview staff based on their observations and facts -Gather information from customers (verbal or written) about the events leading to the potential aubse -After the investigation is conducted, report findinds and take necessarysteps to correct the issue from happening in the future -All investigations are to be concluded within 24 hours</p>	01/16/2012			

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	<p>evening, [client A] ended the call by hanging up. [Client A] then walked out the front door, staff followed. [Client A] ran from staff, staff continued to follow her down the street. [Client A] then picked up a small item on the road and attempted to cut her throat, staff physically restrained [client A] (staff's arms over/under [client A]'s arms-additional staff holding [client A]'s legs to get the item away from [client A]). [Client A] was in this restraint for about five minutes. A neighbor saw the incident and yelled 'I'm calling the police!' After [client A] was let up from the hold and continued to walk, while the incident was going on, QDDP had talked to [client A]'s Psychiatrist office to inform them of the situation and stated if [client A] continued to escalate to call for an ambulance for a transport to the emergency room for evaluation and that they would inform her psychiatrist of the incident. Staff called QDDP with an update and stated that [client A] was continuing to yell and was trying to pick up small items in an attempt to harm herself, staff also informed QDDP that a neighbor had called the police. QDDP instructed staff to followup and request an ambulance transport to the emergency room due to [client A]'s level of self harm and attempts, (sic) Police arrived before an ambulance could be called, staff spoke</p>			
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	<p>to the police and stated that [client A] was having a mental health emergency and needed transport to the emergency room for evaluation. QDDP arrived shortly after, while arriving at the scene, [client A]'s Psychiatrist [Doctor name] called QDDP. QDDP informed her of the chain of events, through the conversation [Doctor name] stated that [client A] should be evaluated, and also stated that if [client A] was no (sic) admitted to have [client A] come to her office for an injection of Deprovera (sic). Police cleared the scene after talking to [client A], (sic) Police did not do anything further. [Client A] was transported to [Hospital name] for evaluation. [Client A] was evaluated by a crisis counselor and it was determined that [client A] was not a threat to herself. [Client A] was given an injection of Haldol, Ativan and Cogentin, [client A] was released. " No written documentation was available for review to indicate a thorough investigation was conducted after this incident.</p> <p>2. Incident dated 12/15/11 at 9:05 A.M.: "[Client A] wanted to talk to the House Manager (HM) about who was working with her today. She did not want to work with the staff that was assigned to work with her. Staff was in the office administering meds and [client A] was</p>			
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	<p>asked to wait a moment until she was available. [Client A] did not want to wait and tried to get in the office, staff was concerned for client that was in the office taking meds and tried to redirect [client A]. [Client A] began pushing staff out of the way and began hitting staff. [Client A] tried to kick, punch, hit and pull staff's hair. Staff placed [client A] in an approved restraint. [Client A] began yelling obscenities at staff. Staff ignored the comments and continued the hold. [Client A] spit in staff's face, calling staff n----- b----- and white honkey b-----, telling them to get their fat a----- away from her. Staff prompted [client A] to take a few deep breathes (sic) to calm down and reminded [client A] of her coping skills. [Client A] took 10 deep breathes (sic) and asked calmly if she could go to her room. [Client A] was no longer fighting to get up so staff released the hold. [Client A] went to her room and locked her door. Due to the previous self harm staff unlocked the door after knocking and getting no response, to do a visual of [client A] to assure she was not harming herself. [Client A] told staff she did not want her by her she was not working with her today and headed out to the dining room. Staff followed. [Client A] go (sic) to the front door and went out it and took off running down the street. Staff followed, and HM followed also and</p>			
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	<p>told other staff to head back and HM stayed with [client A] and walked. [Client A] was responsive to HM and allowed HM to walk with her. [Client A] walked to the front of the neighborhood and turned around after HM prompted and headed home. The QDDP was headed towards the house at the time and [client A] got in the car with staff and QDDP and came home." No written documentation was available for review to indicate a thorough investigation was conducted after this incident.</p> <p>3. Incident dated 12/15/11 at 2:42 P.M.: "[Client A] was walking around the house with a hard piece of plastic. [Client A] has been known to break plastic so she can self harm with it. [Client A] was upset that staff was watching her with the plastic. [Client A] went by the front door and then took off outside. Staff followed. [Client A] turned around and tried hitting staff in the face and began to run again. Staff followed [Client A] turned around grabbed staff by the hair and dropped to the ground. Another staff came to assist and was able to get [client A]'s hands removed from staff's hair. [Client A] continued to try and kick, punch, and bite staff. House Manager was able to calm [client A] down and get her back in the house." No written documentation was available for review to indicate a</p>			
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	<p>thorough investigation was conducted after this incident.</p> <p>4. Incident dated 12/31/11: "[Client A] was upset and aggravated (sic) with her housemate. [Client A] wanted to spend time in her room. Staff continued 15 minute well being checks. [Client A] was sitting on her bed listening to music and drawing. [Client A] came out and gave a note about not having a good day and feeling like she wanted to hurt herself. Staff talked with her about how she was feeling and began making snacks for the events taking place this evening. [Client A] helped set up the snacks and helped clean up and appeared to be in a better mood. Staff asked [client A] if she was ok and she replied yes. Staff asked [client A] of (sic) she felt like harming herself still and [client A] replied no. [Client A] hung out in the dining room with staff and house mates. When shift change took place, [client A] went to her room and shut her door. Staff went to check on [client A] and found her door locked. Staff knocked and got no reply from [client A]. Staff unlocked the door and [client A] was laying in her bed covered up. [Client A] would not respond to staff so staff removed her covers and [client A] looked at staff and tried to pull the blankets back over her face. Staff noticed a brown cord around [client A]'s neck and</p>			
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	<p>immediately asked 2nd staff for the scissors. Staff was able to get a finger in between the cord and her neck so it was not tight enough to cut off air. [Client A] began crying and was still able to breathe without restriction. Staff cut the cord off her neck and did another room sweep. Staff removed the video game that had a cord. Staff called behavior specialist and QDDP. Staff tried to contact psychiatrist but didn't get an answer. Staff transported [client A] to hospital for an evaluation, where they chose to admit her." No written documentation was available for review to indicate a thorough investigation was conducted after this incident.</p> <p>An interview with the QDDP was conducted at the facility's administrative office on 1/5/12 at 12:45 P.M.. The QDDP indicated there was no written documentation to show these incidents were investigated to rule out neglect/abuse. The QDDP further indicated he was not sure where client A got the cord from.</p> <p>This federal tag relates to complaints #IN00101868 and #IN00100900.</p> <p>9-3-2(a)</p>			

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W0157	<p>If the alleged violation is verified, appropriate corrective action must be taken.</p> <p>Based on record review, observation and interview, the facility failed for 1 of 4 clients residing at the group home (client A) to take effective corrective action for 4 of 4 reported incidents of elopement/self injurious behavior.</p> <p>Findings include:</p> <p>1. Incident report dated 12/4/11: "[Client A] was upset due to being on constant watch status for self harming. [Client A] began (sic) to yell and cuss at staff, staff continued attempting to de-escalate [client A]. [Client A] told staff that she did 'not want to be here anymore. [Client A] stated to staff that she was going to harm them. [Client A] then called QDDP (Qualified Developmental Disabilities Professional) and stated that the staff was 'pissing' her off because she did not need to be on constant watch. QDDP informed [client A] that if she continued to not participate in self harm that she could come off constant watch later in the evening, [client A] ended the call by hanging up. [Client A] then walked out the front door, staff followed. [Client A] ran from staff, staff continued to follow her down the street. [Client A] then picked up a small item on the road and attempted to cut her throat, staff</p>	W0157	<p>Client A's behavior support plan has been updated and all staff working with Client A have been retrained to execute the plan as written. During visits, Behaviorist will monitor tracking and room sweeps to verify staff are utilizing plan. Client A's behavior plan areas updated include - elopement and SIB. Client A's behavior plan now includes early interventions in elopement, if Client A attempts to leave the property, she will be escorted back inside the home away from the road. Weekly the behaviorist will review ABC data forms to determine if the plan is remaining effective and to also show that staff are implementing the plan correctly - showing competency. Due to recent events, staff have demonstrated their competency with the plan, additionally Behaviorist has pulled staff aside asking them to recite certain parts of the behavior plan to measure competency.</p>	01/18/2012			

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	<p>physically restrained [client A] (staff's arms over/under [client A]'s arms-additional staff holding [client A]'s legs to get the item away from [client A]. [Client A] was in this restraint for about five minutes. A neighbor saw the incident and yelled 'I'm calling the police!' After [client A] was let up from the hold and continued to walk, while the incident was going on, QDDP had talked to [client A]'s Psychiatrist office to inform them of the situation and stated if [client A] continued to escalate to call for an ambulance for a transport to the emergency room for evaluation and that they would inform her psychiatrist of the incident. Staff called QDDP with an update and stated that [client A] was continuing to yell and was trying to pick up small items in an attempt to harm herself, staff also informed QDDP that a neighbor had called the police. QDDP instructed staff to followup and request an ambulance transport to the emergency room due to [client A]'s level of self harm and attempts, (sic) Police arrived before an ambulance could be called, staff spoke to the police and stated that [client A] was having a mental health emergency and needed transport to the emergency room for evaluation. QDDP arrived shortly after, while arriving at the scene, [client A]'s Psychiatrist [Doctor name] called QDDP. QDDP informed her of the chain</p>			
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	<p>of events, through the conversation [Doctor name] stated that [client A] should be evaluated, and also stated that if [client A] was no (sic) admitted to have [client A] come to her office for an injection of Deprovera (sic). Police cleared the scene after talking to [client A], (sic) Police did not do anything further. [Client A] was transported to [Hospital name] for evaluation. [Client A] was evaluated by a crisis counselor and it was determined that [client A] was not a threat to herself. [Client A] was given an injection of Haldol, Ativan and Cogentin, [client A] was released. " Further review of the report failed to indicate the facility took effective/sufficient corrective action to prevent recurrence.</p> <p>2. Incident dated 12/15/11 at 9:05 A.M.: "[Client A] wanted to talk to the House Manager (HM) about who was working with her today. She did not want to work with the staff that was assigned to work with her. Staff was in the office administering meds and [client A] was asked to wait a moment until she was available. [Client A] did not want to wait and tried to get in the office, staff was concerned for client that was in the office taking meds and tried to redirect [client A]. [Client A] began pushing staff out of the way and began hitting staff. [Client</p>			
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	<p>A] tried to kick, punch, hit and pull staff's hair. Staff placed [client A] in an approved restraint. [Client A] began yelling obscenities at staff. Staff ignored the comments and continued the hold. [Client A] spit in staff's face, calling staff n----- b----- and white honkey b-----, telling them to get their fat a---- away from her. Staff prompted [client A] to take a few deep breathes (sic) to calm down and reminded [client A] of her coping skills. [Client A] took 10 deep breathes (sic) and asked calmly if she could go to her room. [Client A] was no longer fighting to get up so staff released the hold. [Client A] went to her room and locked her door. Due to the previous self harm staff unlocked the door after knocking and getting no response, to do a visual of [client A] to assure she was not harming herself. [Client A] told staff she did not want her by her she was not working with her today and headed out to the dining room. Staff followed. [Client A] go (sic) to the front door and went out it and took off running down the street. Staff followed, and HM followed also and told other staff to head back and HM stayed with [client A] and walked. [Client A] was responsive to HM and allowed HM to walk with her. [Client A] walked to the front of the neighborhood and turned around after HM prompted and headed home. The QDDP was</p>			
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	<p>headed towards the house at the time and [client A] got in the car with staff and QDDP and came home." Further review of the report failed to indicate the facility took effective/sufficient corrective action to prevent recurrence.</p> <p>3. Incident dated 12/15/11 at 2:42 P.M.: "[Client A] was walking around the house with a hard piece of plastic. [Client A] has been known to break plastic so she can self harm with it. [Client A] was upset that staff was watching her with the plastic. [Client A] went by the front door and then took off outside. Staff followed. [Client A] turned around and tried hitting staff in the face and began to run again. Staff followed [Client A] turned around grabbed staff by the hair and dropped to the ground. Another staff came to assist and was able to get [client A]'s hands removed from staff's hair. [Client A] continued to try and kick, punch, and bite staff. House Manager was able to calm [client A] down and get her back in the house." Further review of the report failed to indicate the facility took effective/sufficient corrective action to prevent recurrence.</p> <p>4. Incident dated 12/31/11: "[Client A] was upset and aggravated (sic) with her housemate. [Client A] wanted to spend time in her room. Staff continued 15</p>						

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	<p>minute well being checks. [Client A] was sitting on her bed listening to music and drawing. [Client A] came out and gave a note about not having a good day and feeling like she wanted to hurt herself. Staff talked with her about how she was feeling and began making snacks for the events taking place this evening. [Client A] helped set up the snacks and helped clean up and appeared to be in a better mood. Staff asked [client A] if she was ok and she replied yes. Staff asked [client A] of (sic) she felt like harming herself still and [client A] replied no. [Client A] hung out in the dining room with staff and house mates. When shift change took place, [client A] went to her room and shut her door. Staff went to check on [client A] and found her door locked. Staff knocked and got no reply from [client A]. Staff unlocked the door and [client A] was laying in her bed covered up. [Client A] would not respond to staff so staff removed her covers and [client A] looked at staff and tried to pull the blankets back over her face. Staff noticed a brown cord around [client A]'s neck and immediately asked 2nd staff for the scissors. Staff was able to get a finger in between the cord and her neck so it was not tight enough to cut off air. [Client A] began crying and was still able to breathe without restriction. Staff cut the cord off her neck and did another room sweep.</p>			
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	<p>Staff removed the video game that had a cord. Staff called behavior specialist and QDDP. Staff tried to contact psychiatrist but didn't get an answer. Staff transported [client A] to hospital for an evaluation, where they chose to admit her." Further review of the report failed to indicate the facility took effective/sufficient corrective action to prevent recurrence.</p> <p>An interview with the Qualified Developmental Disabilities Professional (QDDP) was conducted on 1/10/12 at 3:45 P.M.. The QDDP indicated there was no documentation available for review to indicate the facility took effective/sufficient corrective action to address each of these incidents involving client A and to prevent recurrence.</p> <p>This federal tag relates to complaints #IN00101868 and #IN00100900.</p> <p>9-3-2(a)</p>						

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W0249	<p>As soon as the interdisciplinary team has formulated a client's individual program plan, each client must receive a continuous active treatment program consisting of needed interventions and services in sufficient number and frequency to support the achievement of the objectives identified in the individual program plan.</p> <p>Based on record review and interview, the facility failed to assure staff implemented 1 of 4 clients (client A)'s Behavior Support Plan (BSP) as written.</p> <p>Findings include:</p> <p>A review of the facility's records was conducted on 1/4/12 at 1:30 P.M.. Review of the facility's incident reports dated 12/1/11 to 1/4/12 indicated the following:</p> <p>1. Incident report dated 12/4/11: "[Client A] was upset due to being on constant watch status for self harming. [Client A] began (sic) to yell and cuss at staff, staff continued attempting to de-escalate [client A]. [Client A] told staff that she did 'not want to be here anymore.' [Client A] stated to staff that she was going to harm them. [Client A] then called QDDP (Qualified Developmental Disabilities Professional) and stated that the staff was "pissing" her off because she did not need to be on constant watch. QDDP informed [client A] that if she continued to not</p>	W0249	A retraining on Client A's behavior plan was completed to reflect the updates and to retrain on information currently in the plan. Behaviorist's weekly visit will include monitoring of ABC data sheets, room sweep logs, and progress notes. Behaviorist will also inquire to parts of the behavior plan to measure if the DSP has internalized the principles and reactive measures of the behavior plan. Additionally, incident reports will be reviewed to measure the effectiveness of the changes in the behavior support plan.	01/18/2012			

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	<p>participate in self harm that she could come off constant watch later in the evening, [client A] ended the call by hanging up. [Client A] then walked out the front door, staff followed. [Client A] ran from staff, staff continued to follow her down the street. [Client A] then picked up a small item on the road and attempted to cut her throat, staff physically restrained [client A] (staff's arms over/under [client A]'s arms-additional staff holding [client A]'s legs to get the item away from [client A]. [Client A] was in this restraint for about five minutes. A neighbor saw the incident and yelled 'I'm calling the police!' After [client A] was let up from the hold and continued to walk, while the incident was going on, QDDP had talked to [client A]'s Psychiatrist office to inform them of the situation and stated if [client A] continued to escalate to call for an ambulance for a transport to the emergency room for evaluation and that they would inform her psychiatrist of the incident. Staff called QDDP with an update and stated that [client A] was continuing to yell and was trying to pick up small items in an attempt to harm herself, staff also informed QDDP that a neighbor had called the police. QDDP instructed staff to followup and request an ambulance transport to the emergency room due to [client A]'s level of self harm</p>			
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	<p>and attempts, (sic) Police arrived before an ambulance could be called, staff spoke to the police and stated that [client A] was having a mental health emergency and needed transport to the emergency room for evaluation. QDDP arrived shortly after, while arriving at the scene, [client A]'s Psychiatrist [Doctor name] called QDDP. QDDP informed her of the chain of events, through the conversation [Doctor name] stated that [client A] should be evaluated, and also stated that if [client A] was no (sic) admitted to have [client A] come to her office for an injection of Deproevera (sic). Police cleared the scene after talking to [client A], (sic) Police did not do anything further. [Client A] was transported to [Hospital name] for evaluation. [Client A] was evaluated by a crisis counselor and it was determined that [client A] was not a threat to herself. [Client A] was given an injection of Haldol, Ativan and Cogentin, [client A] was released. "</p> <p>2. Incident dated 12/15/11 at 9:05 A.M.: "[Client A] wanted to talk to the House Manager (HM) about who was working with her today. She did not want to work with the staff that was assigned to work with her. Staff was in the office administering meds and [client A] was asked to wait a moment until she was available. [Client A] did not want to wait</p>			
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	<p>and tried to get in the office, staff was concerned for client that was in the office taking meds and tried to redirect [client A]. [Client A] began pushing staff out of the way and began hitting staff. [Client A] tried to kick, punch, hit and pull staff's hair. Staff placed [client A] in an approved restraint. [Client A] began yelling obscenities at staff. Staff ignored the comments and continued the hold. [Client A] spit in staff's face, calling staff n----- b----- and white honkey b-----, telling them to get their fat a---- away from her. Staff prompted [client A] to take a few deep breathes (sic) to calm down and reminded [client A] of her coping skills. [Client A] took 10 deep breathes (sic) and asked calmly if she could go to her room. [Client A] was no longer fighting to get up so staff released the hold. [Client A] went to her room and locked her door. Due to the previous self harm staff unlocked the door after knocking and getting no response, to do a visual of [client A] to assure she was not harming herself. [Client A] told staff she did not want her by her she was not working with her today and headed out to the dining room. Staff followed. [client A] go (sic) to the front door and went out it and took off running down the street. Staff followed, and HM followed also and told other staff to head back and HM stayed with [client A] and walked.</p>			
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	<p>[Client A] was responsive to HM and allowed HM to walk with her. [Client A] walked to the front of the neighborhood and turned around after HM prompted and headed home. The QDDP was headed towards the house at the time and [client A] got in the car with staff and QDDP and came home."</p> <p>3. Incident dated 12/15/11 at 2:42 P.M.: "[Client A] was walking around the house with a hard piece of plastic. [Client A] has been known to break plastic so she can self harm with it. [Client A] was upset that staff was watching her with the plastic. [Client A] went by the front door and then took off outside. Staff followed. [Client A] turned around and tried hitting staff in the face and began to run again. Staff followed [Client A] turned around grabbed staff by the hair and dropped to the ground. Another staff came to assist and was able to get [client A]'s hands removed from staff's hair. [Client A] continued to try and kick, punch, and bite staff. House Manager was able to calm [client A] down and get her back in the house."</p> <p>4. Incident dated 12/31/11: "[Client A] was upset and aggravated (sic) with her housemate. [Client A] wanted to spend time in her room. Staff continued 15 minute well being checks. [Client A] was</p>						

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	<p>sitting on her bed listening to music and drawing. [Client A] came out and gave a note about not having a good day and feeling like she wanted to hurt herself. Staff talked with her about how she was feeling and began making snacks for the events taking place this evening. [Client A] helped set up the snacks and helped clean up and appeared to be in a better mood. Staff asked [client A] if she was ok and she replied yes. Staff asked [client A] of (sic) she felt like harming herself still and [client A] replied no. [Client A] hung out in the dining room with staff and house mates. When shift change took place, [client A] went to her room and shut her door. Staff went to check on [client A] and found her door locked. Staff knocked and got no reply from [client A]. Staff unlocked the door and [client A] was laying in her bed covered up. [Client A] would not respond to staff so staff removed her covers and [client A] looked at staff and tried to pull the blankets back over her face. Staff noticed a brown cord around [client A]'s neck and immediately asked 2nd staff for the scissors. Staff was able to get a finger in between the cord and her neck so it was not tight enough to cut off air. [Client A] began crying and was still able to breathe without restriction. Staff cut the cord off her neck and did another room sweep. Staff removed the video game that had a</p>			
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	<p>cord. Staff called behavior specialist and QDDP. Staff tried to contact psychiatrist but didn't get an answer. Staff transported [client A] to hospital for an evaluation, where they chose to admit her."</p> <p>A review of client A's record was conducted on 1/5/12 at 10:35 A.M.. Client A's BSP dated 12/8/11 indicated: "Elopement: Leaving the home without staff present or staff approval of destination and purpose...Self Injurious Behavior: Purposeful physical act toward oneself that causes harm, specifically "banging head" onto a hard surface...Constant View Status: [Client A] will be on a standard 15 minute visual check 24 hours a day. The staff assigned to her will visually have her in sight every 15 minutes for the 24 hour day...However, if she attempts to harm herself, cuts arm, puts something around her neck to choke herself etc., the staff will initiate constant view status...The staff will call the Program Coordinator and Behavior Specialist and notify them [client A] is on Constant view status due to suicidal gesture...she will remain at arms length of the staff assigned to her during each shift...during sleep. while awake and when in the bathroom...Daily Room Sweeps: [Client A]'s room will be physically and visually scanned for potential harmful objects such as cords,</p>				

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	<p>large items that can cause self harm, glass etc unless supervised." Further review of the BSP indicated staff should document room sweeps at 8 A.M., 4 P.M. and 12 A.M.</p> <p>A review of client A's group home records was conducted on 1/9/12 at 4:05 P.M.. A review of client A's "Daily Tracking form for Room Sweeping" dated December 2011 indicated room sweeps were completed on:</p> <p>12/3/11: 8 A.M.-6 P.M. 12/4/11: 12 A.M.-8 A.M. 12/14/11: 4 P.M.-12 A.M. 12/17/11: 4 P.M.-12 A.M. 12/18/11 8 A.M.-4 P.M. 12/19/11 12 A.M.-8 A.M. 12/25/11: 12A.M.-8 A.M., 8 A.M.-4 P.M., 4 P.M.-12 A.M. 12/26/11: 8 A.M.-4 P.M., 4 P.M.-12 A.M. 12/27/11: 12A.M.-8 A.M., 8 A.M.-4 P.M., 4 P.M.-12 A.M. 12/28/11: 8 A.M.-4 P.M., 4 P.M.-12 A.M. 12/29/11: 12A.M.-8 A.M., 8 A.M.-4 P.M., 4 P.M.-12 A.M. 12/30/11: 12A.M.-8 A.M., 8 A.M.-4 P.M.</p> <p>Further review of the record failed to indicate room sweeps were conducted</p>						

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	<p>every day for each shift.</p> <p>An interview with the Qualified Developmental Disabilities Professional (QDDP) was conducted on 1/10/12 at 3:45 P.M.. The QDDP indicated group home staff should implement client BSP as written at all times and further indicated room sweeps are to be conducted and documented everyday at 8 A.M., 4 P.M. and 12 A.M..</p> <p>This federal tag relates to complaints #IN00101868 and #IN00100900.</p> <p>9-3-4(a)</p>						