

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 15G275	X2) MULTIPLE CONSTRUCTION A. BUILDING 00 B. WING _____	X3) DATE SURVEY COMPLETED 08/15/2014
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NAME OF PROVIDER OR SUPPLIER CAREY SERVICES INC	STREET ADDRESS, CITY, STATE, ZIP CODE 4716 S ADAMS ST MARION, IN 46953
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W000000	<p>This visit was for the investigation of complaint #IN00152862 which resulted in an Immediate Jeopardy.</p> <p>Complaint #IN00152862: Substantiated, Federal and State deficiencies related to the allegations are cited at W102, W104, W122, W149, W153, W154, W157, W193, and W249.</p> <p>Dates of Survey: 8/4, 8/5, 8/6, 8/7, 8/8, 8/11, 8/12, and 8/15/2014.</p> <p>Provider Number: 15G275 AIM Number: 100234970 Facility Number: 000795</p> <p>Surveyor: Susan Eakright, QIDP</p> <p>These federal deficiencies also reflect state findings in accordance with 460 IAC 9. Quality Review completed 8/26/14 by Ruth Shackelford, QIDP.</p>	W000000		
W000102	<p>483.410 GOVERNING BODY AND MANAGEMENT The facility must ensure that specific governing body and management requirements are met.</p>			

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>Based on observation, record review, and interview, for 3 of 3 sampled clients (clients A, B and C) and 3 additional clients (clients D, E, and F), the facility failed to meet the Condition of Participation: Governing Body. The governing body failed to exercise operating direction over the facility to ensure the facility implemented their policy and procedures to provide safety and protect clients (clients A, B, C, D, E, and F), the clients who attended the facility owned day program, and the residential community in regards to client A's inappropriate sexual behavior.</p> <p>Findings include:</p> <p>1. The governing body failed to exercise general policy and operating direction over the facility to ensure implementation of the agency's policy and procedure to prohibit abuse/neglect/mistreatment and to protect clients B, C, D, E, and F from client A's inappropriate sexual behavior. The governing body failed to ensure allegations were accurately reported, investigated, and sufficient corrective action implemented for clients A, B, C, D, E, F, the residential community, and the clients who attended the facility owned workshop. The governing body failed to develop a policy to ensure clients who were restricted from</p>	W000102	<p>W102 Governing Body and Management</p> <p>Issue 1) This item outlines that the agency failed to prohibit abuse/neglect/mistreatment through failure to ensure allegations were accurately reported, investigated and sufficient corrective actions implemented. Further the facility failed to provide an alternate work opportunity during the facilities bed bug infestation. The plan of correction for these findings is as follows:</p> <p>Correction:</p> <p>Retraining on Policy and Procedures with regard to reporting regulations will occur with all applicable staff by the manager of the home.</p> <p>i. -DDRS Incident Reporting Regulations 460 code</p> <p>ii. -Carey Policy 5.13 on Reporting Abuse, Neglect and Exploitation</p> <p>iii. -Carey Procedure 5.13.1 on</p>	09/14/2014			

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	<p>attending the facility owned workshop/day services had the opportunity for paid work during periods of bed bug infestation at the group home. Please see W104.</p> <p>2. The governing body failed to exercise general policy and operating direction over the facility in regards to meeting the Condition of Participation: Client Protections. The governing body neglected to implement their neglect policy and neglected to ensure the system to prohibit sexual abuse, neglect, and mistreatment was implemented for 3 of 3 sampled clients (clients A, B, and C) and 3 additional clients (clients D, E, and F). The governing body failed to ensure the facility accurately reported client allegations of sexual abuse and mistreatment to the facility's administrator and to BDDS (Bureau of Developmental Disabilities Services) in accordance with State Law, to ensure completion of thorough investigations and to take effective corrective actions to address client A's inappropriate sexual behaviors. The governing body failed to ensure staff were sufficiently trained to supervise client A to prevent his inappropriate sexual behaviors. Please see W122.</p> <p>This federal tag relates to complaint</p>		<p>reporting Abuse, Neglect and other reportable or unusual incidents</p> <p>iv. -Carey Policy 5.14 Staff Conduct Towards Consumers</p> <p>v. -Carey Policy 1.3 Ethical Codes of Conduct</p> <p>Staff training will stress the importance that all staff knows it is the responsibility of each person to report suspected instances of abuse, neglect and exploitation immediately and that the facility Administrator/Administrator On Duty (AOD) and BDDS must also be notified. The manager will be responsible for assuring that the reporting regulations, policies and procedures are followed.</p> <p>Staff will receive training on active treatment, formal and informal active treatment, program implementation and redirection.</p> <p>The manager of the home will provide training to all clients reminding them of their rights to report any abuse, neglect, or</p>				

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	#IN00152862. 9-3-1(a)		<p>exploitation they experience or perceive.</p> <p>Carey Services will develop a written procedure for handling a bed bug infestation which, once written and implemented, will allow consumers who are challenged with bed bugs at their residence to attend workshop and other day services programming. The procedure will minimize the risk of consumer to consumer, consumer to staff, and consumer to community transmission. Procedure will include the following control measures whenever a bed bug infestation is discovered in any programming or residential area:</p> <p>All affected program staff will be notified including Internal Case Manager, Program Manager, Group Home Manager, Day Services Site Manager, and Workshop Director as appropriate.</p> <ul style="list-style-type: none"> · Any infested items will be removed in sealed plastic bags. · All washable items will be laundered in hot wash and dried on highest heat setting for a minimum of 20 minutes. 		

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			<ul style="list-style-type: none"> · All items which cannot be laundered will be removed from the area in sealed plastic bags. · All floors in the infested area will be vacuumed and washed (use sock over crevice tool of vacuum tube prior vacuuming and dispose of sock after vacuuming all crevices). · Disinfect all chairs and tables and check for bed bugs in crevices and joints of furniture. · Empty lockers/cubbies and disinfect as applicable. <p>Consumers in any Carey Services residential setting will need to adhere to the following additional guidelines for all community outings as well as to participate in programming at Carey Services until such time as the infestation has been eliminated.</p> <ul style="list-style-type: none"> · Clothing to be worn for the day will be dried on high heat setting for a minimum of 20 minutes and changed into immediately prior to departure. (Including any spare changes of clothing) · Only those items absolutely necessary will be brought to 	

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			<p>Carey Services facilities. I.E., packed lunch (brown paper bag only), change of clothing as necessary, medications, etc. Plastic bags rather than back packs, blankets, and other cloth type bags should be used for transport.</p> <ul style="list-style-type: none"> All items brought to any Carey Services facility will be stored separately to avoid cross infestation. Care Giver and/or consumer will sign a checklist indicating the above preventative measures have been completed upon entering the facility. <p>Procedure will be implemented and all workshop, day services, and residential staff will be trained on the procedures on or before 9/14/14.</p> <p>Monitoring:</p> <p>During visits at the group home the Residential Manager, the LPN and</p> <p>Director of Group Homes will conduct random questioning of staff to ensure that all staff have a clear understanding and</p>		

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			<p>expectation of Who, What, When, Why and How to report ANE. This information will be documented on the Group Home Observation reports and a copy forwarded to the Director of Group Homes. The Residential Manager will complete 2 weekly observations reports from for the next 3 months. The Residential Nurse/LPN and the Director of Group Homes will complete at least 1 unannounced visit monthly through 12/31/14.</p> <p>All behavior reports will be reviewed by the Residential Manager and QDDP. If a behavior displayed by a consumer violates the rights or is abusive towards others, or if a pattern of increased behaviors is identified, the Residential Manager and/or QDDP will thoroughly investigate the behavior incident documenting on the reverse side of the behavior report and an IDT meeting will be held with the behavior specialist to review the consumer behaviors for an appropriate corrective action. All staff will be promptly in-serviced on any changes to corrective action procedures and applicable plans.</p>		

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			<p>The updated bed bug procedure will be routinely reviewed and updated as needed to assure implementation and compliance continues to offer paid work and meaningful day activities.</p> <p>Issue 2) This item outlines that the agency failed to implement their neglect policy and failed to insure the system to prevent sexual abuse including failure to report accurately to the facility administrator, BDDS, to complete thorough investigations sufficient to take corrective actions, and failed to provide sufficient staff training to prevent further inappropriate consumer behaviors. The plan of correction for these findings is as follows:</p> <p>Correction:</p> <p>Retraining on Policy and Procedures with regard to reporting regulations will occur with all applicable staff by the manager of the home.</p> <p>i. -DDRS Incident Reporting Regulations 460 code</p>		

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			<p>ii. -Carey Policy 5.13 on Reporting Abuse, Neglect and Exploitation</p> <p>iii. -Carey Procedure 5.13.1 on reporting Abuse, Neglect and other reportable or unusual incidents</p> <p>iv. -Carey Policy 5.14 Staff Conduct Towards Consumers</p> <p>v. -Carey Policy 1.3 Ethical Codes of Conduct</p> <p>Staff training will stress the importance that all staff knows it is the responsibility of each person to report suspected instances of abuse, neglect and exploitation immediately and that the facility Administrator/Administrator On Duty (AOD) and BDDS must also be notified. The manager will be responsible for assuring that the reporting regulations, policies and procedures are followed.</p> <p>Staff will receive training on active treatment, formal and informal active treatment, program implementation and redirection.</p>	

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			<p>The manager of the home will provide training to all clients reminding them of their rights to report any abuse, neglect, or exploitation they experience or perceive.</p> <p>Monitoring:</p> <p>During visits at the group home the Residential Manager, the LPN and</p> <p>Director of Group Homes will conduct random questioning of staff to ensure that all staff have a clear understanding and expectation of Who, What, When, Why and How to report ANE. This information will be documented on the Group Home Observation reports and a copy forwarded to the Director of Group Homes. The Residential Manager will complete 2 weekly observations reports from for the next 3 months. The Residential Nurse/LPN and the Director of Group Homes will complete at least 1 unannounced visit monthly till 12/31/14.</p> <p>The Residential Manager and/or</p>		

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W000104	<p>483.410(a)(1) GOVERNING BODY The governing body must exercise general policy, budget, and operating direction over the facility. Based on observation, record review, and interview, for 3 of 3 sampled clients (clients A, B, and C) and 3 additional clients (clients D, E, and F), the governing body failed to exercise operating direction over the facility to ensure implementation of the agency's policy and procedure to prohibit abuse/neglect/mistreatment and to protect clients B, C, D, E, and F from client A's inappropriate sexual behavior.</p> <p>The governing body failed to ensure allegations of inappropriate sexual behavior were accurately reported, investigated, and sufficient corrective action implemented for clients A, B, C, D, E, F, the residential community, and</p>	W000104	<p>QDDP will provide a monthly summary of the Behavior Report review to the COO identifying all Behavior Reports which require further corrective action.</p> <p>All corrective actions related to tag W102 will be implemented on or before 9/14/14</p> <p>W104 Governing Body</p> <p>Issue 1) This item outlines that the agency failed to implement its policy and procedure to prevent abuse/neglect/mistreatment and protect clients from a client's inappropriate sexual behavior abuse including failure to report accurately to the facility administrator, BDDS, and to complete thorough investigations sufficient to take corrective actions, and failed to provide sufficient staff training to prevent further inappropriate consumer behaviors. The plan of correction for these findings is as follows:</p>	09/14/2014	

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	<p>the clients who attended the facility owned workshop.</p> <p>The governing body failed to develop a policy to ensure clients who were restricted from attending the facility owned workshop/day services had the opportunity for paid work during periods of bed bug infestation at the group home for clients A, B, C, D, E, and F.</p> <p>Findings include:</p> <p>1. Please refer to W149. The governing body neglected to ensure implementation of the agency's policy and procedure to prohibit abuse/neglect/mistreatment and to protect clients B, C, D, E, and F from client A's inappropriate sexual behavior. The governing body neglected to ensure allegations were accurately reported to the facility's administrator and to BDDS (Bureau of Developmental Disabilities Services) in accordance with State Law. The governing body neglected to ensure allegations of client A's continued sexual behaviors toward clients B, C, D, E, and F, the residential community, and the clients who attended the facility owned workshop were investigated and sufficient corrective action was implemented. The governing body neglected to provide sufficiently trained staff to supervise client A based on his</p>		<p>Correction:</p> <p>Retraining on Policy and Procedures with regard to reporting regulations will occur with all applicable staff by the manager of the home.</p> <p>i. -DDRS Incident Reporting Regulations 460 code</p> <p>ii. -Carey Policy 5.13 on Reporting Abuse, Neglect and Exploitation</p> <p>iii. -Carey Procedure 5.13.1 on reporting Abuse, Neglect and other reportable or unusual incidents</p> <p>iv. -Carey Policy 5.14 Staff Conduct Towards Consumers</p> <p>v. -Carey Policy 1.3 Ethical Codes of Conduct</p> <p>Staff training will stress the importance that all staff knows it is the responsibility of each person to report suspected instances of abuse, neglect and exploitation immediately and that the facility Administrator/Administrator On Duty (AOD) and BDDS must also</p>	

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	<p>identified behavioral needs at the group home, at the workshop, and in the residential community.</p> <p>2. Please refer to W153. The governing body failed for 3 of 3 sampled clients (clients A, B, and C) and 3 additional clients (clients D, E, and F), to immediately report all allegations of abuse, neglect, and/or mistreatment accurately and immediately to the facility's administrator and to BDDS (Bureau of Developmental Disabilities Services) in accordance with State Law.</p> <p>3. Please refer to W154. The governing body failed for 3 of 3 sampled clients (clients A, B, and C) and 3 additional clients (clients D, E, and F), to ensure allegations of client A's continued sexual misconduct behaviors toward clients B, C, D, E, and F, the residential community, and the clients who attended the facility owned workshop were thoroughly investigated.</p> <p>4. Please refer to W157. The governing body failed for 3 of 3 sampled clients (clients A, B, and C) and 3 additional clients (clients D, E, and F), to ensure allegations of client A's continued sexual misconduct behaviors toward clients B, C, D, E, and F, the residential community, and the clients who attended</p>		<p>be notified. The manager will be responsible for assuring that the reporting regulations, policies and procedures are followed.</p> <p>Staff will receive training on active treatment, formal and informal active treatment, program implementation and redirection.</p> <p>The manager of the home will provide training to all clients reminding them of their rights to report any abuse, neglect, or exploitation they experience or perceive.</p> <p>All behavior reports will be reviewed by the Residential Manager and QDDP. If a behavior displayed by a consumer violates the rights or is abusive towards others, or if an pattern of increased behaviors is identified, the Residential Manager and/or QDDP will thoroughly investigate the behavior incident documenting on the reverse side of the behavior report and an IDT meeting will be held with the behavior specialist to review the consumer behaviors for an appropriate corrective action. All</p>				

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	<p>the facility owned workshop had sufficient effective corrective action implemented to prevent further occurrence.</p> <p>5. On 8/5/14 from 9:30am until 9:55am, clients A, B, C, D, E, and F were not at the facility owned day services. At 9:30am, the agency nurse indicated clients A, B, C, D, E, and F were not at day services. At 9:55am, the COO (Chief Operating Officer) indicated clients A, B, C, D, E, and F had gone to the Zoo in another town because their house had been treated for bed bugs and the clients could not go to work and could not stay at the group home. The COO indicated two staff with six clients went to the community Zoo. The COO stated clients A, B, C, D, E, and F "all" needed to be supervised by staff.</p> <p>On 8/4/14 at 4:04pm, the COO (Chief Operations Officer) provided the agency's undated "Bed Bugs" policy. The policy indicated "Due to the recent increase in outbreaks of bed bugs, Carey Services must ask that anyone who has reason to believe they have bed bugs in their home not attend our day services until an expert can show that their home is clear."</p> <p>On 8/11/14 at 8:30am, the COO indicated the group home found one additional bed</p>		<p>staff will be promptly in serviced on any changes to corrective action procedures and applicable plans.</p> <p>Monitoring:</p> <p>During visits at the group home the Residential Manager, the LPN and</p> <p>Director of Group Homes will conduct random questioning of staff to ensure that all staff have a clear understanding and expectation of Who, What, When, Why and How to report ANE. This information will be documented on the Group Home Observation reports and a copy forwarded to the Director of Group Homes. The Residential Manager will complete 2 weekly observations reports from for the next 3 months. The Residential Nurse/LPN and the Director of Group Homes will complete at least 1 unannounced visit monthly till 12/31/14.</p> <p>The Residential Manager and/or QDDP will provide a monthly summary of the Behavior Report review to the COO identifying all Behavior Reports which require further corrective action.</p>				

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	<p>bug by the pest control specialist on 8/11/14. The COO indicated clients B, C, D, E, and F had not attended the facility owned workshop/day program from 8/4/14 through present date because of bed bugs. The COO stated it was "okay" for the clients to go to the public Zoo attended by the general public on 8/5/14 however, clients B, C, D, E, and F were "not allowed" to attend the facility owned workshop/day services.</p> <p>This federal tag relates to complaint #IN00152862.</p> <p>9-3-1(a)</p>		<p>Issue 2) This item outlines that the agency prevented clients from attending day services while allowing clients to attend other public outings.</p> <p>Correction:</p> <p>Carey Services will develop a written procedure for handling a bed bug infestation which, once written and implemented, will allow consumers who are challenged with bed bugs at their residence to attend workshop and other day services programming. The procedure will minimize the risk of consumer to consumer, consumer to staff, and consumer to community transmission. Procedure will include the following control measures whenever a bed bug infestation is discovered in any programming or residential area:</p> <p>All affected program staff will be notified including Internal Case Manager, Program Manager, Group Home Manager, Day Services Site Manager, and Workshop Director as appropriate.</p>		

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			<ul style="list-style-type: none"> · Any infested items will be removed in sealed plastic bags. · All washable items will be laundered in hot wash and dried on highest heat setting for a minimum of 20 minutes. · All items which cannot be laundered will be removed from the area in sealed plastic bags. · All floors in the infested area will be vacuumed and washed (use sock over crevice tool of vacuum tube prior vacuuming and dispose of sock after vacuuming all crevices). · Disinfect all chairs and tables and check for bed bugs in crevices and joints of furniture. · Empty lockers/cubbies and disinfect as applicable. <p>Consumers in any Carey Services residential setting will need to adhere to the following additional guidelines for all community outings as well as to participate in programming at Carey Services until such time as the infestation has been eliminated.</p> <ul style="list-style-type: none"> · Clothing to be worn for the day will be dried on high heat setting for a minimum of 20 		

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			<p>minutes and changed into immediately prior to departure. (Including any spare changes of clothing)</p> <ul style="list-style-type: none"> Only those items absolutely necessary will be brought to Carey Services facilities. I.E., packed lunch (brown paper bag only), change of clothing as necessary, medications, etc. Plastic bags rather than back packs, blankets, and other cloth type bags should be used for transport. All items brought to any Carey Services facility will be stored separately to avoid cross infestation. Care Giver and/or consumer will sign a checklist indicating the above preventative measures have been completed upon entering the facility. <p>Procedure will be implemented and all workshop, day services, and residential staff will be trained on the procedures on or before 9/14/14.</p> <p>The updated bed bug procedure will be routinely reviewed and updated as needed to assure</p>		

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W000122	<p>483.420 CLIENT PROTECTIONS The facility must ensure that specific client protections requirements are met. Based on observation, record review, and interview, the facility failed to meet the Condition of Participation: Client Protections for 3 of 3 sampled clients (clients A, B, and C) and 3 additional clients (clients D, E, and F). The facility failed to implement its policy and procedures to ensure the system to prohibit abuse, neglect, mistreatment and sexual exploitation of clients was implemented.</p> <p>The facility failed to accurately report client allegations of sexual abuse and mistreatment to the facility's administrator and to BDDS (Bureau of Developmental Disabilities Services) in accordance with State Law, to ensure completion of thorough investigations and take effective corrective action to address client A's inappropriate sexual</p>	W000122	<p>implementation and compliance continues to offer paid work and meaningful day activities.</p> <p>All corrective actions related to tag W104 will be implemented on or before 9/14/14</p> <p>W122 Client Protections</p> <p>This item outlines that the agency failed to implement their policy and procedures to protect the clients and to prevent ANE resulting in Immediate Jeopardy. The Plan of correction for the immediate jeopardy was submitted, approved, and implemented resulting in the removal of the immediate jeopardy on 8/11/14.</p> <p>The Immediate Jeopardy Plan of Correction is as follows:</p>	09/14/2014

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	<p>behaviors.</p> <p>The facility failed to prevent client A's identified inappropriate sexual behaviors and to protect clients B, C, D, E, and F from further sexual abuse and mistreatment as the result of client A's inappropriate sexual behaviors. The facility failed to ensure staff were sufficiently trained to supervise client A to prevent his inappropriate sexual behaviors.</p> <p>This noncompliance resulted in an Immediate Jeopardy. The Immediate Jeopardy began on 7/10/2014. The Immediate Jeopardy was identified on 8/6/14. The President/Chief Executive Officer (CEO), Chief Operations Officer (COO), Chief Compliance Officer (CCO), and Group Home Manager (GHM) were notified of the Immediate Jeopardy on 8/6/14 at 11:42am regarding the facility's systemic failure to ensure implementation of the agency's policy and procedure to prohibit abuse/neglect/mistreatment and to protect clients B, C, D, E, and F from client A's inappropriate sexual behaviors. The facility neglected to accurately report, investigate, and take sufficient corrective action to address client A's inappropriate sexual behaviors. The facility neglected to ensure staff supervised client A based</p>		<p>Issue 1) The Facility failed to ensure implementation of their abuse, neglect and/or exploitation and mistreatment and policy and procedure to protect clients B, C, D, E and F from Client A's own identified inappropriate sexual behaviors.</p> <p>What corrective action(s) will be accomplished for these residents found to have been affected by the deficient practice?</p> <ul style="list-style-type: none"> o To prevent further exposure to sexual inappropriateness to clients B, C, D, E and F from client A, the facility will be removing Client A from others. o Client A will be placed in a local hotel and will receive 1:1 staffing to prevent further sexual inappropriateness and potential exposure to/around others. He will be staffed 1:1 at the hotel (Comfort Suites in Marion, IN). o Carey Services' Day Services staff will provide services during the daytime (per normal Day Services Schedule) on a 1:1 basis away from others. The activities will include community (so long as others are not around – especially children) services and activities in our Capabilities Building whereby Jason will not be around other consumers or community members in order to 		

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	<p>on his identified behavioral needs.</p> <p>On 8/6/14 at 6:30pm, the facility submitted a plan of removal (8/6/14) for the Immediate Jeopardy which indicated the following:</p> <p>-"The Facility has requested Emergency Placement into [name] Waiver due to the Immediate Jeopardy Notification with BDDS and to change Client A's status to a high priority. The Plan of Correction is as follows:</p> <p>Issue 1) The Facility failed to ensure implementation of their abuse, neglect and/or exploitation and mistreatment and policy and procedure to protect clients B, C, D, E and F from Client A's own identified inappropriate sexual behaviors. What corrective action(s) will be accomplished for these residents found to have been affected by the deficient practice. To prevent further exposure to sexual inappropriateness to clients B, C, D, E and F from client A, the facility will be removing Client A from others. Client A will be placed in a local hotel and will receive 1:1 (one on one) staffing to prevent further sexual inappropriateness and potential exposure to/around others. He will be staffed 1:1 at the hotel, Carey Services Day Services staff will provide services during the</p>		<p>prevent exposure of Client A's sexual inappropriateness.</p> <ul style="list-style-type: none"> · How you will identify other residents having the potential to be affected by the same deficient practice and what corrective action will be taken? <ul style="list-style-type: none"> o By removing Client A from all others, this assures that he will not expose himself or his sexual inappropriate behavior to Clients B, C, D, E and F. · What measures will be put into place or what systemic changes you will make to ensure that the deficient practices does not recur? <ul style="list-style-type: none"> o By removing Client A from all others, this assures that he will not expose himself or his sexual inappropriate behavior to Clients B, C, D, E and F. o Additionally, Carey Services has again been in contact with BDDS local office. We have requested that Client A be considered an emergency placement to a CIH Waiver – the process for Client A to transition to CIH Waiver began in May of 2014. The IDT agrees that a smaller setting with higher intensity of staffing whereby Client A does not reside with females or near small children. 				

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	<p>daytime per normal Day Services Schedule on a 1:1 basis away from others. The activities will include community so long as others are not around - especially children services and activities...whereby client A will not be around other consumers or community members in order to prevent exposure of Client A's sexual inappropriateness. How you will identify other residents having the potential to be affected by the same deficient practice and what corrective action will be taken. By removing Client A from all others, this assures that he will not expose himself or his sexual inappropriate behavior to Clients B, C, D, E and F. What measures will be put into place or what systemic changes you will make to ensure that the deficient practices does not recur. By removing Client A from all others, this assures that he will not expose himself or his sexual inappropriate behavior to Clients B, C, D, E and F. Additionally, Carey Services has again been in contact with BDDS local office. We have requested that Client A be considered an emergency placement to a [name] Waiver - the process for Client A to transition to [name] Waiver began in May of 2014. The IDT agrees that a smaller setting with higher intensity of staffing whereby Client A does not reside with females or near small children. As of an update last</p>		<p>As of an update last week (7/30/2014) with BDDS, Client A was considered a non-priority for a transition to CIH Waiver. BDDS has been updated on Immediate Jeopardy Status and the request for emergency placement is pending with the State.</p> <ul style="list-style-type: none"> · How the corrective action(s) will be monitored to ensure the deficient practice will not recur, i.e., what quality assurance program will be put into place? o Client A will be 1:1 with staffing and monitored at that level to assure that others are not exposed to his sexually inappropriate behaviors. · What is the date by which the systemic changes will be completed? o 8/6/2014 – plan is currently in place. <p>Issue 2) The Facility failed to provide sufficient staff to supervise Client A based on his identified behavioral needs.</p> <ul style="list-style-type: none"> · What corrective action(s) will be accomplished for these 				

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	<p>week (7/30/2014) with BDDS, Client A was considered a non-priority for a transition to [name] Waiver. BDDS has been updated on Immediate Jeopardy Status and the request for emergency placement is pending with the State. How the corrective action(s) will be monitored to ensure the deficient practice will not recur, i.e., what quality assurance program will be put into place. Client A will be 1:1 with staffing and monitored at that level to assure that others are not exposed to his sexually inappropriate behaviors. What is the date by which the systemic changes will be completed. 8/6/2014 - plan is currently in place."</p> <p>"Issue 2) The Facility failed to provide sufficient staff to supervise Client A based on his identified behavioral needs. What corrective action(s) will be accomplished for these residents found to have been affected by the deficient practice. To prevent further exposure to sexual inappropriateness to clients B, C, D, E and F from client A, the facility will be removing Client A from others. Client A will be placed in a local hotel and will receive 1:1 staffing to prevent further sexual inappropriateness and potential exposure to/around others. He will be staffed 1:1 at the hotel. Carey Services' Day Services staff will provide services during the daytime per normal</p>		<p>residents found to have been affected by the deficient practice?</p> <ul style="list-style-type: none"> o To prevent further exposure to sexual inappropriateness to clients B, C, D, E and F from client A, the facility will be removing Client A from others. o Client A will be placed in a local hotel and will receive 1:1 staffing to prevent further sexual inappropriateness and potential exposure to/around others. He will be staffed 1:1 at the hotel (Comfort Suites in Marion, IN). o Carey Services' Day Services staff will provide services during the daytime (per normal Day Services Schedule) on a 1:1 basis away from others. The activities will include community (so long as others are not around – especially children) services and activities in our Capabilities Building whereby Jason will not be around other consumers or community members in order to prevent exposure of Client A's sexual inappropriateness. <p>How you will identify other residents having the potential to be affected by the same deficient practice and what corrective action will be taken?</p> <ul style="list-style-type: none"> o By removing Client A from all others, this assures that he will 		

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	Day Services Schedule on a 1:1 basis away from others. The activities will include community so long as others are not around especially children, services and activities whereby client A will not be around other consumers or community members in order to prevent exposure of Client A's sexual inappropriateness. How you will identify other residents having the potential to be affected by the same deficient practice and what corrective action will be taken. By removing Client A from all others, this assures that he will not expose himself or his sexual inappropriate behavior to Clients B, C, D, E and F. What measures will be put into place or what systemic changes you will make to ensure that the deficient practices does not recur. By removing Client A from all others, this assures that he will not expose himself or his sexual inappropriate behavior to Clients B, C, D, E and F. Additionally, Carey Services has again been in contact with BDDS local office. We have requested that Client A be considered an emergency placement to a [name] Waiver - the process for Client A to transition to [name] Waiver began in May of 2014, he was labeled as a non-priority. The IDT agrees that a smaller setting with higher intensity of staffing whereby Client A does not reside with females or near small children. As of an update last week		not expose himself or his sexual inappropriate behavior to Clients B, C, D, E and F. · What measures will be put into place or what systemic changes you will make to ensure that the deficient practices does not recur? o By removing Client A from all others, this assures that he will not expose himself or his sexual inappropriate behavior to Clients B, C, D, E and F. o Additionally, Carey Services has again been in contact with BDDS local office. We have requested that Client A be considered an emergency placement to a CIH Waiver – the process for Client A to transition to CIH Waiver began in May of 2014, he was labeled as a non-priority. The IDT agrees that a smaller setting with higher intensity of staffing whereby Client A does not reside with females or near small children. As of an update last week (7/30/2014) with BDDS, Client A was considered a non-priority for a transition to CIH Waiver. BDDS has been updated on Immediate Jeopardy Status and the request for emergency placement is pending with the State. · How the corrective		

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	<p>(7/30/2014) with BDDS, Client A was considered a non-priority for a transition to [name] Waiver. BDDS has been updated on Immediate Jeopardy Status and the request for emergency placement is pending with the State. How the corrective action(s) will be monitored to ensure the deficient practice will not recur, i.e., what quality assurance program will be put into place. Client A will be 1:1 with staffing and monitored at that level to assure that others are not exposed to his sexually inappropriate behaviors. What is the date by which the systemic changes will be completed? 8/6/2014 - plan is currently in place."</p> <p>-Issue 3) The Facility failed to accurately report, investigation and take effective corrective action for Client A's inappropriate sexual behaviors. What corrective action(s) will be accomplished for these residents found to have been affected by the deficient practice. Retraining on Policy and Procedures with regard to reporting regulations will occur with all applicable staff by the manager of the home. How you will identify other residents having the potential to be affected by the same deficient practice and what corrective action will be taken. All staff will be trained on all applicable reporting policies and procedures. These policies and procedures affect all</p>		<p>action(s) will be monitored to ensure the deficient practice will not recur, i.e., what quality assurance program will be put into place?</p> <ul style="list-style-type: none"> o Client A will be 1:1 with staffing and monitored at that level to assure that others are not exposed to his sexually inappropriate behaviors. · What is the date by which the systemic changes will be completed? o 8/6/2014 – plan is currently in place. <p>Issue 3) The Facility failed to accurately report, investigation and take effective corrective action for Client A's inappropriate sexual behaviors.</p> <ul style="list-style-type: none"> · What corrective action(s) will be accomplished for these residents found to have been affected by the deficient practice? o Retraining on Policy and Procedures with regard to reporting regulations will occur with all applicable staff by the manager of the home. 		

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	consumers. What measures will be put into place or what systemic changes you will make to ensure that the deficient practices does not recur. Retraining will occur on Policy and Procedures with regard to Reporting regulations. The manager will complete this training and the manager will be responsible for assuring that the reporting regulations, policies and procedures are followed. The manager is overseen by QDDP/Director of Group Homes and/or the Chief Operations Officer who will review all reportable incidents to assure compliance per the aforementioned training. How the corrective action(s) will be monitored to ensure the deficient practice will not recur, i.e., what quality assurance program will be put into place. Retraining will occur on Policy and Procedures with regard to Reporting regulations. The manager will complete this training and the manager will be responsible for assuring that the reporting regulations, policies and procedures are followed. The manager is overseen by QDDP/Director of Group Homes and/or the Chief Operations Officer who will review all reportable incidents to assure compliance per the aforementioned training. The Corporate Compliance Officer will investigate all events that occur that require investigation. What is the date by which the systemic changes		<ul style="list-style-type: none"> · How you will identify other residents having the potential to be affected by the same deficient practice and what corrective action will be taken? o All staff will be trained on all applicable reporting policies and procedures – these policies and procedures affect all consumers. · What measures will be put into place or what systemic changes you will make to ensure that the deficient practices does not recur? o Retraining will occur on Policy and Procedures with regard to Reporting regulations. The manager will complete this training and the manager will be responsible for assuring that the reporting regulations, policies and procedures are followed. o The manager is overseen by QDDP/Director of Group Homes and/or the Chief Operations Officer who will review all reportable incidents to assure compliance per the aforementioned training. · How the corrective action(s) will be monitored to ensure the deficient practice will not recur, i.e., what quality assurance program will be put into place? 				

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	<p>will be completed. Complete Training with staff to occur by 8/15/2014 Manager monitoring to begin immediately, QDDP/Director of Group Homes and/or Chief Operations Officer monitoring to begin immediately. Corporate Compliance Officer Investigations to begin immediately as situations arise that require further investigation. [Signed] Chief Operations Officer (COO). "</p> <p>Observations and interviews were conducted at the group home on 8/6/14 from 7:00am until 9:00am. During the observation period on 8/6/14 from 7:00am until 9:00am, client A was present at the group home, followed female clients throughout the group home, and displayed inappropriate behaviors to lick the floor, kiss the floor, touch himself, and touch his groin area. Client A was not provided eye sight staff supervision, client A was not redirected from his behaviors, and client A's Behavior Support Plan and Individual Support Plan were not implemented.</p> <p>Observations and interviews were conducted at the group home on 08/07/14 from 11:00am until 11:40am, and on 8/8/14 from 7:00am until 7:45am, client A was not present in the group home. During the observation and interview</p>		<ul style="list-style-type: none"> o Retraining will occur on Policy and Procedures with regard to Reporting regulations. The manager will complete this training and the manager will be responsible for assuring that the reporting regulations, policies and procedures are followed. o The manager is overseen by QDDP/Director of Group Homes and/or the Chief Operations Officer who will review all reportable incidents to assure compliance per the aforementioned training. o The Corporate Compliance Officer will investigate all events that occur that require investigation. · What is the date by which the systemic changes will be completed? o Complete Training with staff to occur by 8/15/2014 o Manager monitoring to begin immediately o QDDP/Director of Group Homes and/or Chief Operations Officer monitoring to begin immediately. o Corporate Compliance Officer Investigations to begin 				

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	<p>periods Group Home Staff on duty indicated: they had not been re-trained on reporting abuse, neglect, and/or mistreatment, they had not been re-trained to immediately report allegations of abuse, neglect, and/or mistreatment, they had not received training on client A's BSP and/or ISP, and they had not been re-trained to provide staff supervision of the clients. On 8/8/14 at 7:00am, GHS (Group Home Staff) #4 and GHS #5 both indicated they had not been received re-training on client A's plans, to report allegations of abuse, neglect, and/or mistreatment, and client B, C, D, E, and F's staff supervision needs. At 7:00am, GHS #4 and GHS #5 both indicated client A had the same plans in place and client A's plans had not been updated to include one on one staff supervision.</p> <p>Observations and interviews were conducted at the group home on 8/11/14 from 6:50am until 8:15am, client A was not present at the group home with clients B, C, D, E, and F. At 8:05am, GHS #4 and GHS #5 both indicated they had been re-trained to immediately report allegations of abuse, neglect, and/or mistreatment. At 8:05am, GHS #4 indicated he had provided one on one supervision of client A at the hotel where client A was currently staying over the</p>		<p>immediately as situations arise that require further investigation.</p> <p>Note:</p> <p>Immediate Jeopardy was removed on 08/11/2014.</p> <p>Client A moved to a new facility on 9/4/14 into a wavier setting with a different provider.</p> <p>All corrective actions related to tag W122 will be implemented on or before 9/14/14</p>				

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	<p>weekend. GHS #4 indicated client A had an updated plan on 8/9/14 to include client A's one on one staff supervision and to keep client A away from children and other clients when client A demonstrated inappropriate sexual behaviors.</p> <p>The Immediate Jeopardy was removed on 08/11/14 at 9:35am, when through observation, interview, and record reviews, it was determined the facility had implemented the plan of action to remove the Immediate Jeopardy and the steps taken to remove the immediacy of the problem. Even though the facility's corrective actions removed the Immediate Jeopardy, the facility remained out of compliance at a Condition level (Client Protections) because the facility needed to demonstrate ongoing implementation of their system to prevent abuse and neglect to ensure clients B, C, D, E and F would be protected.</p> <p>Findings include:</p> <p>Please refer to W149. The facility neglected to ensure implementation of the agency's policy and procedure to prohibit abuse/neglect/mistreatment and to protect clients B, C, D, E, and F from client A's inappropriate sexual behaviors.</p>			

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	<p>The facility neglected to ensure all allegations were accurately reported to the facility's administrator and to BDDS (Bureau of Developmental Disabilities Services) in accordance with State Law. The facility neglected to ensure allegations of client A's continued inappropriate sexual behaviors toward clients B, C, D, E, and F, the residential community, and the clients who attended the facility owned workshop were investigated and sufficient corrective action was implemented. The facility neglected to provide sufficiently trained staff to supervise client A based on his identified behavioral needs at the group home, at the workshop, and in the residential community.</p> <p>Please refer to W153. The facility failed to immediately report all allegations of abuse, neglect, and/or mistreatment accurately and immediately to the facility's administrator and to BDDS (Bureau of Developmental Disabilities Services) in accordance with State Law for 3 of 3 sampled clients (clients A, B, and C) and 3 additional clients (clients D, E, and F).</p> <p>Please refer to W154. The facility failed to ensure allegations of client A's continued sexual misconduct behaviors toward clients B, C, D, E, and F, the</p>			

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W000149	<p>residential community, and the clients who attended the facility owned workshop were thoroughly investigated.</p> <p>Please refer to W157. The facility failed to take sufficient corrective action to address client A's continued sexual misconduct behaviors toward clients B, C, D, E, and F, the residential community, and the clients who attended the facility owned workshop.</p> <p>This federal tag relates to complaint #IN00152862.</p> <p>9-3-2(a)</p> <p>483.420(d)(1) STAFF TREATMENT OF CLIENTS The facility must develop and implement written policies and procedures that prohibit mistreatment, neglect or abuse of the client. Based on observation, record review, and interview, for 3 of 3 sampled clients (clients A, B, and C) and 3 additional clients (clients D, E, and F), the facility neglected to ensure implementation of the agency's policy and procedure to prohibit abuse/neglect/mistreatment and to protect clients B, C, D, E, and F from client A's inappropriate sexual behavior.</p>	W000149	<p>W149 Staff Treatment of Clients</p> <p>This item outlines that the facility failed to implement its ANE policy. The plan of correction for these findings is as follows:</p>	09/14/2014

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	<p>The facility neglected to ensure allegations were accurately reported to the facility's administrator and to BDDS (Bureau of Developmental Disabilities Services) in accordance with State Law.</p> <p>The facility neglected to ensure allegations of client A's continued sexual behaviors toward clients B, C, D, E, and F, the residential community, and the clients who attended the facility owned workshop were investigated and sufficient corrective action was implemented.</p> <p>The facility neglected to provide sufficiently trained staff to supervise client A based on his identified behavioral needs at the group home, at the workshop, and in the residential community.</p> <p>Findings include:</p> <p>On 8/4/14 from 3:20pm until 5:30pm, clients A, B, C, D, E, and F and Group Home Staff (GHS) #1, GHS #2, GHS #3, and the Group Home Manager (GHM) were observed at the group home. At 3:35pm, client F left the group home to go with her family. During the observation period, client A walked independently from room to room inside</p>		<p>Issue 1) This item outlines that the agency failed to implement its policy and procedure to prevent abuse/neglect/mistreatment and protect clients from a client's inappropriate sexual behavior.</p> <p>Correction:</p> <p>Retraining on Policy and Procedures with regard to reporting regulations will occur with all applicable staff by the manager of the home.</p> <p>i. -DDRS Incident Reporting Regulations 460 code</p> <p>ii. -Carey Policy 5.13 on Reporting Abuse, Neglect and Exploitation</p> <p>iii. -Carey Procedure 5.13.1 on reporting Abuse, Neglect and other reportable or unusual incidents</p> <p>iv. -Carey Policy 5.14 Staff Conduct Towards Consumers</p>		

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	<p>the group home, upstairs, downstairs, and outside into the back yard. From 3:20pm until 5:30pm, client A grabbed his groin area of his dark red sweat pants, manipulated the white string on his sweat pants, put his right/left hands inside his pants in the groin and buttock areas, smelled his fingers when removed, and pulled his groin without redirection from the facility staff. From 3:20pm until 5:30pm, client A hit himself in his groin area of his sweat pants with his hand and fist continuously without redirection from the facility staff.</p> <p>At 3:30pm, client A showed his shared bedroom upstairs across from the upstairs bathroom. Client A began to talk to the surveyor, then began to grab his genital area of his pants. When client A was asked if he wanted private time, Client A responded "No, I can touch myself now." The surveyor left the room. At 3:50pm, client A sat on the living room floor, selected a DVD to watch, and loaded the DVD into the Television set. From 4:00pm until 4:47pm, client A joined clients B, E, F, GHS #2, the GHM, and GHS #3 playing Uno (a card game) at the dining room table. Client A sat across from the GHM at the table. Client A positioned his chair to allow the dining room table leg to rest between his legs, and each time client A would play a card</p>		<p>v. -Carey Policy 1.3 Ethical Codes of Conduct</p> <p>Staff training will stress the importance that all staff knows it is the responsibility of each person to report suspected instances of abuse, neglect and exploitation immediately and that the facility Administrator/Administrator On Duty (AOD) and BDDS must also be notified. The manager will be responsible for assuring that the reporting regulations, policies and procedures are followed.</p> <p>Staff will receive training on active treatment, formal and informal active treatment, program implementation and redirection.</p> <p>The manager of the home will provide training to all clients reminding them of their rights to report any abuse, neglect, or exploitation they experience or perceive.</p> <p>All behavior reports will be reviewed by the Residential Manager and QDDP. If a</p>				

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	<p>on the stack of cards in the middle of the table, client A would rub his groin area against the table without redirection from the facility staff. At 4:47pm, client A left the table, came back to the table, put his hands inside his pants front and back, removed his hands, smelled his fingers each time, and was not redirected from the behavior or to wash his hands by the facility staff. From 4:55pm until 5:00pm, client A went to his upstairs bedroom with GHS #3. At 5:00pm, client A returned to the living room with his white sweat pants string out the back of his sweat pants and the pockets of his sweat pants were backwards. No redirection was observed. From 3:20pm until 5:30pm, client A was not observed to stay within eye sight of the facility staff.</p> <p>On 8/5/14 from 9:30am until 9:55am, clients A, B, C, D, E, and F were not at the facility owned day services. At 9:30am, the agency nurse indicated clients A, B, C, D, E, and F were not at day services. At 9:55am, the COO (Chief Operating Officer) indicated clients A, B, C, D, E, and F had gone to the Zoo in another town because their house had been treated for bed bugs and the clients could not go to work and could not stay at the group home. The COO indicated two staff with six clients went to the community Zoo. The COO stated clients</p>		<p>behavior displayed by a consumer violates the rights or is abusive towards others, or if an pattern of increased behaviors is identified, the Residential Manager and/or QDDP will thoroughly investigate the behavior incident documenting on the reverse side of the behavior report and an IDT meeting will be held with the behavior specialist to review the consumer behaviors for an appropriate corrective action. All staff will be promptly in serviced on any changes to corrective action procedures and applicable plans.</p> <p>Monitoring:</p> <p>During visits at the group home the Residential Manager, the LPN and</p> <p>Director of Group Homes will conduct random questioning of staff to ensure that all staff have a clear understanding and expectation of Who, What, When, Why and How to report ANE. This information will be documented on the Group Home Observation reports and a copy forwarded to the Director of Group Homes. The Residential Manager will complete 2 weekly observations reports from for the next 3 months. The Residential</p>		

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	<p>A, B, C, D, E, and F "all" needed to be supervised by staff.</p> <p>On 8/6/14 from 7:00am until 9:00am, clients A, B, C, D, E, and F were observed at the group home with two facility staff, GHS #4 and GHS #5. From 7:00am until 9:00am, client A walked independently upstairs, downstairs, from room to room without staff within eye sight of his person. From 8:00am until 9:00am, client A walked into and out of the kitchen continuously, pulled used paper towels from the trash can continuously, smelled them, threw them across the kitchen in a basketball motion, then picked up the used paper towels from the floor, got on his hands and knees on the floor, licked the floor, kissed the floor, and threw the paper towels back into the trash can. Client A was not redirected by the facility staff. At 8:00am, client E walked from the kitchen and told GHS #5 she needed to use the rest room, client E walked by client A, client A followed client E through the living room, up the stairs, down the hall, and when client E turned to go into the upstairs bathroom, client A saw the surveyor enter the upstairs landing, and client A turned and entered his bedroom. At 8:05am, client E went back downstairs with client A following her back into the kitchen. At 8:10am,</p>		<p>Nurse/LPN and the Director of Group Homes will complete at least 1 unannounced visit monthly till 12/31/14.</p> <p>The Residential Manager and/or QDDP will provide a monthly summary of the Behavior Report review to the COO identifying all Behavior Reports which require further corrective action.</p> <p>Issue 2) This item outlines that the agency failed to immediately report allegations of abuse/neglect/mistreatment to the facility administrator and to BDDS.</p> <p>Correction:</p> <p>Retraining on Policy and Procedures with regard to reporting regulations will occur with all applicable staff by the manager of the home.</p> <p style="text-align: center;">i.</p> <p>-DDRS Incident Reporting Regulations 460 code</p> <p style="text-align: center;">ii.</p> <p>-Carey Policy 5.13 on Reporting Abuse, Neglect and Exploitation</p>	

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	<p>client E went back upstairs with client A following her, the GHM following client A, and the surveyor following the GHM. Client E went into the bathroom and the GHM and client A entered client A's upstairs bedroom.</p> <p>At 8:20am, client A reached into the trash can and pulled out trash, smelled it, and put it back into the trash can without redirection from the facility staff. From 8:20am until 9:00am, client A stood in the living room and dining room, grabbed his groin area of his pants, moved the front of his pants back and forth, and no redirection was taught or encouraged. From 7:00am until 9:00am, client A was not observed to stay within eye sight of the facility staff.</p> <p>On 8/4/14 at 8:00pm, the facility's BDDS (Bureau of Developmental Disabilities Services) reports, investigations, and behavioral reports (BRs) from 5/1/14 through 8/4/14 were reviewed.</p> <p>Client A's BDDS reports which were reported included the following:</p> <p>-The 7/25/14 BDDS report for an incident on 7/24/14 at 6:40pm, indicated after client A arrived home from day services, staff "attempted to redirect"</p>		<p>iii. -Carey Procedure 5.13.1 on reporting Abuse, Neglect and other reportable or unusual incidents</p> <p>iv. -Carey Policy 5.14 Staff Conduct Towards Consumers</p> <p>v. -Carey Policy 1.3 Ethical Codes of Conduct</p> <p>Staff training will stress the importance that all staff knows it is the responsibility of each person to report suspected instances of abuse, neglect and exploitation immediately and that the facility Administrator/Administrator On Duty (AOD) and BDDS must also be notified. The manager will be responsible for assuring that the reporting regulations, policies and procedures are followed.</p> <p>Monitoring:</p> <p>During visits at the group home the Residential Manager, the LPN and</p> <p>Director of Group Homes will conduct random questioning of staff to ensure that all staff have a clear understanding and</p>				

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	<p>client A, client A pushed one staff in the chest and shoved the other staff. Staff backed away and client A "proceeded to scream foul names and then kicked a hole in the drywall," hit his stereo, and "staff then proceeded to call the police for assistance as [client A] was not able to be redirected." The police came to the house and spoke with client A about his behavior and client A calmed.</p> <p>-The 7/16/14 BDDS report for an incident on 7/15/14 at 5:40pm, indicated when client A returned home from workshop, client A "began to yell and call names towards his housemates," client A "flipped vehicles off on the way home in the (facility) van (on the roadway). When getting off the van [client A] pulled his pants down in the drive way and made gestures towards the cars driving down the road." The report indicated staff attempted to redirect him to go into the home, client A "attempted to headbutt staff," went into the house and "began eating his feces out of his anus...continued to expose his genitals to everyone," and damaged his personal computer into "pieces." The report</p>		<p>expectation of Who, What, When, Why and How to report ANE. This information will be documented on the Group Home Observation reports and a copy forwarded to the Director of Group Homes. The Residential Manager will complete 2 weekly observations reports from for the next 3 months. The Residential Nurse/LPN and the Director of Group Homes will complete at least 1 unannounced visit monthly till 12/31/14.</p> <p>Issue 3) This item outlines that the agency failed to take sufficient effective corrective action implemented to prevent further occurrence of client sexual misconduct.</p> <p style="text-align: center;">Immediate Jeopardy Correction:</p> <p style="text-align: center;">The Immediate Jeopardy Plan of Correction is as follows:</p> <p>Issue 1) The Facility failed to ensure implementation of their abuse, neglect and/or exploitation and mistreatment and policy and procedure to</p>				

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	<p>indicated client A "danced around the living room spanking his butt cheeks and gyrated toward the living room window." Client A "punched a staff in her chest and attempted to headbutt [staff] as well." Client A refused redirection from staff and "staff then decided that the police must be involved to try to restore order. Police came to the house to talk with [client A] about his choices." The report indicated client A said he was sorry and apologized.</p> <p>-The 7/11/14 BDDS report for an incident on 7/10/14 at 12:50pm, indicated "Staff walked in the restroom to find both [client A] and [workshop client Z] coming out of the same stall. When questioned by his residential staff who had come to pick up [male workshop client Z], [male workshop client Z] had reported that [client A] had licked his penis." The report indicated "neglect was found to be unsubstantiated related to the specific staff" and the workshop staff will be retrained on client A's Behavior Support Plan (BSP). The report indicated both clients A and workshop client Z were "not upset" regarding the incident.</p>		<p>protect clients B, C, D, E and F from Client A's own identified inappropriate sexual behaviors.</p> <ul style="list-style-type: none"> · What corrective action(s) will be accomplished for these residents found to have been affected by the deficient practice? <ul style="list-style-type: none"> o To prevent further exposure to sexual inappropriateness to clients B, C, D, E and F from client A, the facility will be removing Client A from others. o Client A will be placed in a local hotel and will receive 1:1 staffing to prevent further sexual inappropriateness and potential exposure to/around others. He will be staffed 1:1 at the hotel (Comfort Suites in Marion, IN). o Carey Services' Day Services staff will provide services during the daytime (per normal Day Services Schedule) on a 1:1 basis away from others. The activities will include community (so long as others are not around – especially children) services and activities in our Capabilities Building whereby Jason will not be around other consumers or community members in order to prevent exposure of Client A's sexual inappropriateness. · How you will identify other residents having the potential to 		

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	The 7/10/14 Investigation into the incident was reviewed on 8/5/14 at 11:33am. The investigation indicated "Inadequate staff support resulting in a disruption of services...Alleged or suspected abuse, neglect, or exploitation of consumer...It was reported that [client A] went into the restroom unsupervised and that while in there he went into the same staff with [workshop client Z] and engaged in sexually inappropriate touching toward [workshop client Z]... (workshop staff) was suspended pending the outcome of the investigation... [Workshop staff] stated she was not trained on both (clients') BSP or ISP (Individual Support Plan) directly but was informed by staff that he had to be monitored when in the restroom. She stated that she was not aware that she had to remain in the restroom with him the entire time and if she had done so she would have neglected the consumers who were eating and a potential choking risk...The allegation of neglect is substantiated, however it is the conclusion of this investigator that the root cause and responsibility for the		be affected by the same deficient practice and what corrective action will be taken? o By removing Client A from all others, this assures that he will not expose himself or his sexual inappropriate behavior to Clients B, C, D, E and F. · What measures will be put into place or what systemic changes you will make to ensure that the deficient practices does not recur? o By removing Client A from all others, this assures that he will not expose himself or his sexual inappropriate behavior to Clients B, C, D, E and F. o Additionally, Carey Services has again been in contact with BDDS local office. We have requested that Client A be considered an emergency placement to a CIH Waiver – the process for Client A to transition to CIH Waiver began in May of 2014. The IDT agrees that a smaller setting with higher intensity of staffing whereby Client A does not reside with females or near small children. As of an update last week (7/30/2014) with BDDS, Client A was considered a non-priority for a transition to CIH Waiver. BDDS has been updated on Immediate				

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	<p>neglect lies with a breakdown in procedural controls and training rather than with [name of workshop staff]...."</p> <p>-The 7/11/14 BDDS report for an incident on 7/10/14 at 2:55pm, indicated client A had been "having behaviors through the day. Staff called to report that [client A] was exposing himself to others in the [Workshop Classroom] area. Since many of [client A's] behaviors are attention seeking and his behavior plan recommends that they be ignored, he was taken to [into a private office] where he would have less of an audience. While there he began exposing himself, hitting himself in the groin, and putting his hand in the back of his pants. He began tearing at his flesh, head, rectum, groin, and biting his knee." The report indicated "[client A] was drawing blood, licking his hands, and smearing blood on his hands, legs, face, and clothes. [Client A] did this continually for 30-40 minutes." Client A was taken to [the name of Hospital] for an evaluation. "At [the hospital] it was determined that [client A] was not in imminent danger of causing harm to himself or others. He</p>		<p>Jeopardy Status and the request for emergency placement is pending with the State.</p> <ul style="list-style-type: none"> · How the corrective action(s) will be monitored to ensure the deficient practice will not recur, i.e., what quality assurance program will be put into place? <ul style="list-style-type: none"> o Client A will be 1:1 with staffing and monitored at that level to assure that others are not exposed to his sexually inappropriate behaviors. · What is the date by which the systemic changes will be completed? <ul style="list-style-type: none"> o 8/6/2014 – plan is currently in place. <p>Issue 2) The Facility failed to provide sufficient staff to supervise Client A based on his identified behavioral needs.</p> <ul style="list-style-type: none"> · What corrective action(s) will be accomplished for these residents found to have been affected by the deficient practice? <ul style="list-style-type: none"> o To prevent further exposure to sexual inappropriateness to 				

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	<p>was released to his home with a recommendation for follow up with his psychiatric nurse practitioner."</p> <p>-The 7/10/14 BDDS report for an incident on 7/10/14 at 9:10am, indicated at the facility owned day service "staff was playing a card game with a [different client], [clients A and female workshop client Y] were sitting at a different table together. When staff looked up from the game, she saw that [client A] had his hand down the front part of [female workshop client Y's] pants. Staff reported that [female workshop client Y] was not saying anything nor complaining about what [client A] was doing. Staff reported this lasted no more than 30 (thirty) seconds and that when [client A] was prompted to stop, he did so." The report indicated the clients were separated, spoken to individually, both guardians were notified, and both behavior consultants were notified.</p> <p>-The 7/4/14 BDDS report for an incident on 7/3/14 at 8:00pm, indicated client A "had been sitting on the couch at the group home after returning home from an</p>		<p>clients B, C, D, E and F from client A, the facility will be removing Client A from others.</p> <p>o Client A will be placed in a local hotel and will receive 1:1 staffing to prevent further sexual inappropriateness and potential exposure to/around others. He will be staffed 1:1 at the hotel (Comfort Suites in Marion, IN).</p> <p>o Carey Services' Day Services staff will provide services during the daytime (per normal Day Services Schedule) on a 1:1 basis away from others. The activities will include community (so long as others are not around – especially children) services and activities in our Capabilities Building whereby Jason will not be around other consumers or community members in order to prevent exposure of Client A's sexual inappropriateness.</p> <p>· How you will identify other residents having the potential to be affected by the same deficient practice and what corrective action will be taken?</p> <p>o By removing Client A from all others, this assures that he will not expose himself or his sexual inappropriate behavior to Clients B, C, D, E and F.</p> <p>· What measures will be put</p>				

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	<p>outing. [Client A] began to pinch himself in the groin and flip people off... [Client A] got up and stood in front of a male consumer and exposed himself. [Client A] then took off his glasses and broke them." The report indicated client A began "walking" toward a female client, staff stepped between clients, client A began to elbow staff in the stomach and push through to get to the female client. Staff called for another staff while client A "continued" to try and punch staff. Staff physically restrained client A, client A attempted to "grab staffs' genitals", and the staff with client A "fell to the ground." After the incident client A apologized, cried, and was "sorry." No injuries were noted.</p> <p>-The 5/10/14 BDDS report for an incident on 5/10/14 at 7:20am, indicated "Staff was in restroom when she heard arguing starting to occur. Upon coming out of the restroom she discovered that [client E] had about a 2 inch scratch on her belly into her belly button. [Client A] had a purple bite mark next to his right nipple and a quarter size blood blister on the palm side base of thumb on left side.</p>		<p>into place or what systemic changes you will make to ensure that the deficient practices does not recur?</p> <ul style="list-style-type: none"> o By removing Client A from all others, this assures that he will not expose himself or his sexual inappropriate behavior to Clients B, C, D, E and F. o Additionally, Carey Services has again been in contact with BDDS local office. We have requested that Client A be considered an emergency placement to a CIH Waiver – the process for Client A to transition to CIH Waiver began in May of 2014, he was labeled as a non-priority. The IDT agrees that a smaller setting with higher intensity of staffing whereby Client A does not reside with females or near small children. As of an update last week (7/30/2014) with BDDS, Client A was considered a non-priority for a transition to CIH Waiver. BDDS has been updated on Immediate Jeopardy Status and the request for emergency placement is pending with the State. <p>· How the corrective action(s) will be monitored to ensure the deficient practice will not recur, i.e., what quality assurance program will be put into place?</p>		

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	<p>[Client E] stated that [client A] scratched her and that she had bitten him because she was mad." The report indicated both clients were talked to by staff about the "importance of keeping ones hand to themselves."</p> <p>Client A's Behavior Reports (BR) which were not reported to BDDS indicated the following:</p> <p>-The 7/29/14 BR at 11:40am until 12:05pm, indicated client A "continuously exposed his privates to staff and housemates. [Client A] went out back and refused to come in, he was exposing himself to the neighbors. He flipped staff off, called her a c--t, n-----, m----- f----, then yelled your mama. [Client A] pulled his pants down to his ankles and was shaking his privates at the neighbor. He finally went in the house when staff called house manager. While on the phone [client A] continuously kicked the front of the washing machine caving (in) the front panel. [Client A] sat and ripped his pants off of himself. [Client A] went upstairs to change his pants."</p>		<ul style="list-style-type: none"> o Client A will be 1:1 with staffing and monitored at that level to assure that others are not exposed to his sexually inappropriate behaviors. · What is the date by which the systemic changes will be completed? o 8/6/2014 – plan is currently in place. <p>Issue 3) The Facility failed to accurately report, investigation and take effective corrective action for Client A's inappropriate sexual behaviors.</p> <ul style="list-style-type: none"> · What corrective action(s) will be accomplished for these residents found to have been affected by the deficient practice? o Retraining on Policy and Procedures with regard to reporting regulations will occur with all applicable staff by the manager of the home. · How you will identify other residents having the potential to be affected by the same deficient practice and what corrective action will be taken? 		

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	<p>-The 7/25/14 BR at 9:05-10:15 no am/pm, indicated client A was "digging his bottom and smelling his fingers." Client A washed his hands in the restroom, "started kissing the cabinet door, side of the refrigerator, and kicking himself in the bottom as he was walking. [Client A] kissed the counter top while listening to his music, grabbing himself when anyone walked thru the room, digging in his ear then popping finger in (his) mouth then look at [staff name] did several times (sic)." The report indicated when client A walked by another client and "broke a CD in his pocket, went to the trash can, put a broken piece in his mouth and pulled back out and threw in trash (sic)."</p> <p>-The 7/24/14 BR at 12:05pm, indicated client A was "at the trash can, he stood there and kissed it (the trash can), walked over to (the) table and grabbed groin area. He also broke his CD."</p> <p>-The 7/24/14 BR from 9:00am-11:00am, client A "...kept putting DVD in front of [staffs] face, then grabbed his crotch" twice and kissed the wall walking inside</p>		<ul style="list-style-type: none"> o All staff will be trained on all applicable reporting policies and procedures – these policies and procedures affect all consumers. · What measures will be put into place or what systemic changes you will make to ensure that the deficient practices does not recur? o Retraining will occur on Policy and Procedures with regard to Reporting regulations. The manager will complete this training and the manager will be responsible for assuring that the reporting regulations, policies and procedures are followed. o The manager is overseen by QDDP/Director of Group Homes and/or the Chief Operations Officer who will review all reportable incidents to assure compliance per the aforementioned training. · How the corrective action(s) will be monitored to ensure the deficient practice will not recur, i.e., what quality assurance program will be put into place? o Retraining will occur on Policy and Procedures with regard to Reporting regulations. The manager will complete this 	

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	<p>the classroom.</p> <p>-The 7/15/14 BR from 9:05am-9:40am, indicated client A "came in hitting himself in private parts, exposing himself to others, (and) licking the floor."</p> <p>-The 7/14/14 BR at 8:25am, indicated client A "followed" client E to her bedroom. Client D "told staff. Staff went to check on [clients A and E], [Client E] walked to the living room. Staff asked [client A] to come out of [client E's] bedroom. [Client A] started showing his privates and humping the air. [Client A] walked up to staff and tried to headbutt staff. Staff backed up. Staff asked [client A] to back up." The report indicated client A backed up and "exposed self and humped." Client A sat down at computer desk, client A slammed fist into keyboard, client D was in chair next to client A, and client A "scared her and she chose to change her seat." The report indicated client A got up and then got on the floor on his belly and licked the floor." The report indicated "about 2 minutes later" client A apologized.</p>		<p>training and the manager will be responsible for assuring that the reporting regulations, policies and procedures are followed.</p> <ul style="list-style-type: none"> o The manager is overseen by QDDP/Director of Group Homes and/or the Chief Operations Officer who will review all reportable incidents to assure compliance per the aforementioned training. o The Corporate Compliance Officer will investigate all events that occur that require investigation. <p>· What is the date by which the systemic changes will be completed?</p> <ul style="list-style-type: none"> o Complete Training with staff to occur by 8/15/2014 o Manager monitoring to begin immediately o QDDP/Director of Group Homes and/or Chief Operations Officer monitoring to begin immediately. o Corporate Compliance Officer Investigations to begin immediately as situations arise that require further investigation. 				

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	<p>-The 7/11/14 BR from 3:50pm-4:15pm, indicated client A "was out with peers waiting for his group home staff to come." The report indicated client A began to pick the scabs on his head open, staff redirected client A, client A continued to pick his scabs, ate his scabs, and got up and went inside "5 mins (minutes) he yelled and exposed self. Another staff came and asked for a DVD back, [client A] yelled and exposed self again, got on (the) floor and humped it. He did this several times. [Client A] got into the trash, tried eating it (the trash) several times. [Client A] dumped it (the trash) on the floor (and) tried eating it again."</p> <p>-The 7/11/14 BR from 9:30am-2:00pm, indicated client A licked table, punched himself in private area-genitals. The report indicated "Staff redirected [client A] by taking him to a carpet area, [client A] licked tables, poles several times today."</p> <p>-The 7/10/14 BR from 11:30am-2:56pm, indicated client A "throughout the day</p>		<p>Note:</p> <p>Immediate Jeopardy was removed on 08/11/2014.</p> <p>Client A moved to a new facility on 9/4/14 into a wavier setting with a different provider.</p> <p>Ongoing Correction:</p> <p>Staff will receive training on active treatment, formal and informal active treatment, program implementation and redirection.</p> <p>All behavior reports will be reviewed by the Residential Manager and QDDP. If a behavior displayed by a consumer violates the rights or is abusive towards others, or if an pattern of increased behaviors is identified, the Residential Manager and/or QDDP will thoroughly investigate the behavior incident documenting on the reverse side of the behavior report and an IDT meeting will be held with the behavior specialist to review the consumer behaviors for an appropriate corrective action. All staff will be promptly in serviced on any changes to corrective</p>				

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	<p>[client A] has been disruptive, attention seeking, sexual advances towards others, exposing himself in his private area. He then exposed himself to [workshop maintenance man] by taking pants down exposing his penis and was humping in front of him."</p> <p>-The 7/10/14 BR at 9:30am, indicated client A was "having trouble staying on task. He slid out of his chair, laid down and licked the floor." Staff at workshop redirected him and client A "stood up quickly exposed his genitals and rubbed them with his hand. Staff redirected him."</p> <p>-The 7/10/14 BR at 9:10am, indicated during a group activity client A with three other clients and staff "observing [client A] pulling out [workshop client Y's] pants with right hand while left hand was in [workshop client Y's] pants. No more than 30 seconds went by" and staff redirected client A. This BR was reported to BDDS and to the administrator.</p> <p>-The 6/24/14 BR at 2:00pm, indicated</p>		<p>action procedures.</p> <p>Monitoring:</p> <p>The Residential Manager and/or QDDP will provide a monthly summary of the Behavior Report review to the COO identifying all Behavior Reports which require further corrective action.</p> <p>Issue 4) This item outlines that the agency failed to provide sufficient staff training to prevent further inappropriate consumer behaviors.</p> <p>Correction:</p> <p>Retraining on Policy and Procedures with regard to reporting regulations will occur with all applicable staff by the manager of the home.</p> <p>i. -DDRS Incident Reporting Regulations 460 code</p> <p>ii. -Carey Policy 5.13 on Reporting Abuse, Neglect and Exploitation</p> <p>iii. -Carey Procedure 5.13.1 on reporting</p>				

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	<p>client A "was sitting by female client" and staff observed client A trying to make the client hold his hand under the table. The female client was moving away from client A, staff called client A's name and he stopped. Client A was asked to move away from her and he moved seats. Client A then "placed hand in pants to grab himself staff said his name again he took hand out of pants and smelled hand (sic)."</p> <p>-The 6/16/14 BR from 9:15am-10:15am, indicated client A "started licking the table staff asked him to stop (sic)." Client A stopped, dropped to the floor, licked the floor then stood up and hit his genital area "several times." The report indicated he was verbally aggressive and started "pulling his pants down several times sexually acting out."</p> <p>-The 6/14/14 BR at 3:40pm, indicated client A was told by staff that because he had acted out he could not go to the gas station with the rest of the clients. Client A became upset, begged to go, and "began pulling out his penis and testicles and showing them to staff and other</p>		<p>Abuse, Neglect and other reportable or unusual incidents</p> <p>iv. -Carey Policy 5.14 Staff Conduct Towards Consumers</p> <p>v. -Carey Policy 1.3 Ethical Codes of Conduct</p>				

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	<p>consumers. [Client A] then sat back down and then began exposing himself again but scratching and pulling at his scrotum and causing himself to bleed while yelling 'Kunter Kentay.'"</p> <p>-The 6/10/14 BR at 1:30pm, indicated client A was at workshop for group behavioral session and began to lick the tables and walls. BC (Behavior Clinician) redirected with verbal prompts however client A began to hit himself in the groin and flip off the BC and other group members. Client A also broke his CD and proceeded to try and eat the broken parts. BC asked client A to leave the area and client A dropped to his stomach to lick the floor and exposed his genitals to group members twice.</p> <p>-The 6/9/14 BR at 10:05am, indicated client A was seated at a table and "started showing 2 female clients his private area," staff noticed and brought him to managers office where he broke his glasses and hit himself between the legs. Manager notified.</p> <p>-The 5/16/14 BR at 4:00 (no am/pm),</p>				

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	<p>indicated client A came into the multipurpose room to wait for group home staff to pick up. Client A sat down and began asking about going to see the QIDP for a reward or dollar. Staff redirected client A that he received one earlier that day, and client A "started licking the table, punching himself in his privates, pulling strands of hair out, his behavior was systematically ignored when he stopped."</p> <p>Confidential Interview (CI) #1 indicated CI #1 was present on 7/29/14 when the incident occurred and stated the "neighbor was outside (and) there were kids in the yard playing."</p> <p>CI #2 stated client A was "inappropriate sexually with other clients (and) the other clients are afraid of [client A]." CI #2 stated client A "was not appropriately placed" at the group home. CI #2 stated client A "has a continued pattern of behaviors toward male and female" clients and targeted clients for sexual exploitation. CI #2 stated client A had a "history of exposing himself" and masturbation in public. CI #2 indicated client A exposed himself and</p>						

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	<p>masturbated inside the group home, outside the group home, to passing motorists on the highway, to the neighbors in the back and side yards, and at the workshop.</p> <p>CI #3 stated the neighbor "also was a child care center with young kids ages four to six years old." CI #3 indicated CI #3 was present when the incident occurred at the group home. CI #3 stated client A had "exposed himself multiple times that day and just about every day" and masturbated. CI #3 stated "I could shield him from view (from the neighbors) the best I could so the kids would not see, but I don't know, they could have seen. It happens often." CI #3 indicated client A had exposed himself while in the back yard multiple times on 7/29/14 and one time the neighbor was not outside in the yard. CI #3 stated client A "exposes his genitals, masturbates, and yells [profanities]" at the neighbors, passing cars [on name of road], and other clients." CI #3 indicated a behavior report was filed and the house manager was notified. CI #3 stated client E "cries because of [client A's]</p>						

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	<p>behaviors." CI #3 stated client A "chases her" into and out of the bathroom and bedroom "several times" a week.</p> <p>CI #4 stated "the girls (the female clients) are scared to sleep. The girls sleep downstairs." CI #4 stated the female clients D and E had "slept downstairs within the past week." CI #4 indicated the female clients had been sleeping downstairs on the sofas when they are afraid or have bad dreams regarding client A. CI #4 stated client A's behaviors had increased over the past year and "really worse lately like the past six to eight (6 to 8) weeks." CI #4 indicated CI #4 had seen client A masturbate and expose himself towards the day care across the back yard whether other people were outside or not. CI #4 indicated the neighbors were outside in the morning of 7/29/14 when client A demonstrated the behavior. CI #4 stated "I'm not sure if they noticed when [client A] did it." CI #4 indicated the staff tried to shield with the staffs' bodies to prevent direct sight exposure and stated "It's hard to cover. [Client A] is quick and determined."</p>			

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	<p>CI #5 indicated CI #5 was present when the incident occurred on 7/29/14, stated client A "exposed himself in the backyard more than once (on 7/29/14)" in the evening and stated "the kids were outside playing" in their yard.</p> <p>CI #6 stated CI #6 was "afraid" of client A. CI #6 indicated client A had asked to smell CI #6 when she used the bathroom. CI #6 indicated CI #6 had slept on the sofa at the group home because of fear of client A at night.</p> <p>CI #8 indicated client A follows the female clients into the bathroom, bedrooms, around the house, and stated "he tries to watch them" dress and undress. CI #8 stated CI #8 had removed client A within the "past month or so" from client E's bedroom. CI #8 stated CI #8 had "removed client A from the bathroom within the "past one to three months several times" when the female clients were trying to bathe or in the shower and client A wanted to watch. CI #8 indicated a behavior report was filed and the house manager notified each</p>				

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	<p>time. CI #8 indicated client A will pull his scrotum until it bleeds and had caused injuries to his penis from pulling, scratching, hitting, pinching, and rubbing it on objects.</p> <p>CI #9 stated clients D and E had complained "of missing dirty underwear within the past three months" after the clients had taken off their underwear to shower and when the clients exited the shower [clients D and E] stated to (CI #9) "my dirty underwear was gone." CI #9 stated clients D and E told CI #9 that client A had "either tried to get into the bathroom with them before the shower or [client A] was outside the bathroom door" when the clients were in the bathroom to bathe. CI #9 stated "we looked everywhere" including client A's room. CI #9 stated "the (clients' missing) dirty underwear was either concealed on his person or in his person." CI #9 stated client D and E's missing underwear was not "ever" located.</p> <p>On 8/4/14 at 3:30pm, an interview with client A was conducted. Client A indicated he had behaviors of hitting himself and pointed to his groin area of</p>						

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	<p>his sweat pants. Client A pulled the string at the top of his sweat pants out and stated "I can wrap this around it. It makes it tight." Client A stated he "liked to touch" and pointed to his penis, then smiled. Client A stated he "sometimes" touched other clients at home and at the facility owned day program "on their legs, breast, chest." Client A stated he "sometimes got upset when he does not get his way and waiting to see [his family]." Client A indicated he was not afraid and liked living in the group home.</p> <p>On 8/4/14 at 3:40pm, an interview with client C was conducted. Client C stated he was "afraid all the time" of client A. Client C stated he "was afraid" client A would "come in [client C's] bedroom and touch my penis, he calls me bad names. [Client A] calls bad names and shows his penis at workshop and home. [Client A] does it everywhere." Client C stated client A had exposed himself, "put his private parts, and penis near my face at least twice" in the past "two months" and stood over client C when client C was seated in a chair in the living room. Client C indicated he told the group home staff and called his family to report client A. Client C indicated group home staff were present when client A put his exposed private body parts in client C's face. Client C stated "I may hurt [client</p>			

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	<p>A] if he touches me again."</p> <p>On 8/6/14 at 7:00am, an interview with client D was conducted. Client D stated "My dirty underwear comes up missing from the bathroom after I take them off to get in the shower." Client D stated "I know [client A] took them." Client D indicated her clean clothing remained untouched inside the bathroom. Client D indicated her dirty underwear did not show up in the laundry later or returned to her. Client D stated her dirty underwear "comes up missing several times" in the past two months. Client D indicated she told the group home staff about it and the staff help her to look for her missing dirty underwear. Client D stated "I know it's him (client A) doing it, but I can't prove it." Client D stated she was present at the group home on 7/29/14 when client A exposed himself to the neighbor children in the back yard. Client D indicated client A had exposed himself multiple times and stated "it happens" more than once a week. Client D indicated client A exposed himself and masturbated at cars passing by the group home on the highway in front of the group home. Client D stated "He tries to get me to let him watch me on the toilet to (empty her bowel and bladder). I won't let him." Client D stated "I have nightmares at times. (I dream) [client A]</p>			

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	<p>is chasing me down the road, he gets me down on the ground, and sticks his penis in me." Client D's eyes teared and she stated "I go downstairs to sleep" because she did not feel "safe." Client D stated she slept on the sofa downstairs with group home staff "several" times a week. Client D indicated client A had attempted to watch her dress and undress multiple times inside her bedroom. Client D indicated she tells the group home staff each time client A made requests of her, tried to get into the bathroom, and when she had nightmares.</p> <p>On 8/6/14 at 8:50am, an interview with client E was conducted. Client E stated she had "missing" dirty underwear which was missing after she had taken her dirty underwear off to get into the shower "at least one time" in the past two months. Client E stated she was not afraid of client A "as long as staff" were with her.</p> <p>On 8/4/14 at 8:00pm, a documented behavioral clinician note was reviewed and indicated on "7/16/14 Interviewed [male Client C] regarding morning incident of genitals being grabbed two times. [Client C] reported he did not like being grabbed there and that he felt mad when it happened. He reported that he</p>				

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	<p>was not still angry but he did not want it to happen again and he does not like having the certain individual in the house. [Client C] mostly wanted to discuss frustration and hurt feelings regarding a phone conversation with his aunt. Before and after the interview [Client C] was calmly walking around the home and yard as is his typical routine. He was attempting to joke with staff and consumers both appropriately and inappropriately."</p> <p>Client A's record was reviewed on 8/4/14 at 10:00am, on 8/5/14 at 8:00am, and on 8/6/14 at 10:15am. Client A's 7/2014 BSP and 10/2013 ISP did not include client A's level of supervision, how staff were to supervise client A at the home, or how staff were to supervise client A in the community. Client A's record indicated he was a 34 year old male and had a guardian. Client A's diagnoses included, but were not limited to: Moderate Mental Retardation, Explosive Disorder, Autism, Borderline Diabetes, and Hypertension. Client A's 7/2014 BSP indicated his behavior plan had been updated because of increased behaviors</p>			

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	<p>by the behavior consultant on 6/2013, 3/2014, and 7/2014. Client A's 7/2014 BSP included the targeted behaviors of physical aggression, verbal aggression, non compliance, sexually inappropriate behavior, wet/soils inappropriately, and eating inedibles. Client A's behavior totals for "sexual inappropriate " behaviors for 2012 was 5, 2013 was 79, and 2014 was 54. Client A's 7/2014 BSP indicated "...Inappropriate Sexual Behavior and Social Misconduct: [client A] will benefit from being involved in community activities and day programming that encourage and promote healthy relationships...staff are to see [client A's] hands at all times in any program area, van, outings, etc...the restrooms will be monitored each time [client A] enters. When being transported in the van, [client A] will sit in the front seat where he is easily monitored. [Client A] will continue to use pass system when going from building to building with the time noted on pass as to when he leaves and when he is to be returning...[Client A] is not to be unsupervised around minor children or in bathrooms at any time. Remind [client A] to imagine jail bars when he senses the urge to expose himself..."</p>			

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	<p>An interview with the agency's COO was conducted on 8/5/14 at 2:20pm. The COO stated "You asked if we filed a BDDS Report for the incident (on 7/29/14) whereby [client A] had attempted to expose himself in the direction of the neighbors. In discussing this with [Group Home Manager (GHM)], she states that [client A] made the attempt, however the neighbors were not home to witness anything and the report should have indicated that the near-exposure was in the direction of the neighbors as opposed to literally at the neighbors (the people). She reports that staff blocked any potential exposure with their own body while redirecting [client A] back into the home. [The GHM] reports that no neighbor saw anything inappropriate. We all agree that this was a near-miss situation. Due to no actual exposure taking place, there was no BDDS report." When asked if the facility staff were interviewed, the COO stated "no" and indicated no investigation was completed.</p> <p>On 8/5/14 at 9:45am, an interview with the COO was conducted. The COO</p>			

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	<p>stated client A should have been "one on one supervision" by staff at the workshop and "eye sight" supervision by staff at home. When asked why client A was not on the same supervision at both the workshop and at the group home, the COO stated "We are not funded at the group home for one on one" staff supervision. The COO indicated the agency could provide one on one supervision at the workshop. When asked if the agency was meeting client A's needs, she stated "We are doing the best we can." When asked if the agency was protecting the other clients from abuse, neglect, and/or mistreatment, she stated "We are doing the best we can." When asked if client A was a "risk" toward the other clients, the COO stated "Yes, that is why we sent him to be evaluated on 7/10/14 at [the hospital] and they said he was not a risk." When asked if the agency was meeting client A's identified behavioral and supervision needs, the COO stated "We are doing the best we can." The COO indicated client A's staff supervision level in his 10/2013 ISP and BSP was not documented. The COO stated the agency did not report</p>			

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	<p>client A "exposing himself," causing injuries to his penis, or behavioral patterns "because these were known behaviors" and client A had a plan in place to address these issues of exposing himself, SIB, verbal aggression, and physical aggression. The COO stated client A has had these behaviors "over a year" and had been "becoming more intense" in the past "three to six months."</p> <p>On 08/06/14 at 10:45am, an interview with the COO was conducted. The COO stated "all" allegations of abuse, neglect, and/or mistreatment should be reported to the administrator, to BDDS in accordance with State Law, investigated, and effective corrective action implemented. The COO indicated clients C, D, and E's allegations of sleeping on the sofa because of fear of client A and client A's behaviors of attempting to watch clients dress/undress, attempting to access private bedrooms, attempting to access bathrooms when female clients were bathing, missing female underwear, and patterns of client A masturbating and exposing himself inside and outside the group home to clients, passing motorists,</p>			

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	<p>and neighbors were not reported immediately to the administrator or to BDDS in accordance with State Law.</p> <p>The COO indicated the facility followed the BDDS reporting policy and procedure for abuse, neglect, and/or mistreatment allegations. The COO stated "I was not aware" of "all" of these incidents and/or allegations. The COO indicated the agency had taken corrective action for client A's behaviors and incidents. When asked if the corrective measures taken were effective to protect clients A, B, C, D, E, and F from client A's known and demonstrated behaviors, the COO stated "No, apparently not."</p> <p>On 8/6/14 at 10:45am, an interview with the COO was conducted. The COO indicated the agency had met with client A's behavior clinician, held an IDT (Interdisciplinary Team Meeting) on 7/15/14, had the behavior clinician speak with the clients who were targets of client A's behaviors, the behavior clinician had visited the group home last on 7/16/14, and held a staff retraining on 8/1/14 regarding client A. The COO indicated there was no additional corrective action, no monitoring to ensure compliance, and no documented indication of what steps</p>			

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	<p>staff were to take to prevent future occurrence. When asked if the agency's corrective measures were effective based on the observations on 8/4/14 and 8/6/14, the COO stated "We are doing the best that we can."</p> <p>On 8/4/14 at 1:50pm, a review of the facility's records indicated the facility's 6/15/11 "Abuse, Neglect, and Exploitation" policy which indicated, "It is the policy of Carey Services to respect the rights of consumers served and protect them from possible abusive treatment, negligence, or exploitation on the part of staff, volunteers, or other consumers. Abusive treatment and/or negligence of responsibilities with respect to the welfare and safety of consumers are incompatible with the purpose of the agency....Definition: Neglect: includes, but is not limited to, failure to provide appropriate supervision, care, training, a safe/clean/sanitary environment, food, medical care, medical supplies and equipment (as indicated in the ISP (Individual Support Plan))."</p> <p>On 8/4/14 at 1:50pm, a review of the facility's 10/22/12 "PROCEDURES FOR REPORTING ABUSE AND NEGLECT AND OTHER REPORTABLE OR UNUSUAL INCIDENTS. As required by law, it is the responsibility of each</p>			

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	<p>person to report suspected instances of abuse, neglect, and exploitation...responsibilities in reporting such incidents to authorities as well as to agency administrators immediately upon learning of the suspected abuse/neglect/exploitation. Agency staff and volunteers must immediately report incidents to the President/CEO, Human Resources Manager, or designee, who will assign responsibility for investigation and follow-up. The Corporate Compliance Officer will be notified of the allegation and may or may not be asked to assist with the investigation. A. <u>REPORTABLE INCIDENTS</u>: Carey Services shall meet all the conditions specified in any applicable article of 460 IAC. Carey Services shall report the following circumstances to DDRS/BDDS/DA (Department of Aging) no later than 24 hours after the occurrence of the reportable incident...The following incidents are considered reportable to the appropriate entity as outlined in section B: 1. Any alleged, suspected, or actual abuse, neglect or exploitation of a consumer...."</p> <p>On 8/4/14 at 1:50pm, a review of the BDDS 6/11/2002 policy and procedure for "Incident Reporting" indicated "...Reportable incidents to the Bureau of Developmental Disabilities Services are</p>						

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	<p>any event or occurrence characterized by risk or uncertainty, resulting in or having the potential to result in significant harm or injury to an individual...Standards: A. Services and supports shall provide necessary safeguards to protect the health, safety, and welfare of individuals. B. Anyone with knowledge of an issue or concern that effects the individual's potential health and safety may submit a BDDS Incident Report form...Reportable Incidents...1) Incident of suspected abuse or neglect of an adult or child who is residing in a community residential setting...a) Physical, sexual, verbal, or mental abuse...ii) sexual-includes all allegations of rape, sexual misconduct, or sexual exploitation...b) Neglect-includes failure to provide appropriate care, food, medical care, or supervision. 2) Exploitation...b) any other type of exploitation, including but not limited to sexual exploitation...14) Inadequate staff support resulting in or having the potential to result in significant harm or injury to an individual or death of an individual. This includes inadequate supervision by staff, even when staffing levels are appropriate...."</p> <p>This federal tag relates to complaint #IN00152862.</p> <p>9-3-2(a)</p>			

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W000153	<p>483.420(d)(2) STAFF TREATMENT OF CLIENTS The facility must ensure that all allegations of mistreatment, neglect or abuse, as well as injuries of unknown source, are reported immediately to the administrator or to other officials in accordance with State law through established procedures. Based on record review and interview for 3 of 3 sampled clients (clients A, B, and C) and 3 additional clients (clients D, E, and F), the facility failed to immediately report all allegations of abuse, neglect, and/or mistreatment accurately and immediately to the facility's administrator and to BDDS (Bureau of Developmental Disabilities Services) in accordance with State Law.</p> <p>Findings include:</p> <p>On 8/4/14 at 8:00pm, the facility's BDDS reports, investigations, and behavioral reports (BRs) from 5/1/14 through 8/4/14 were reviewed for clients A, B, C, D, E and F.</p> <p>Client A's BDDS reports which were reported included the following:</p> <p>-The 7/16/14 BDDS report for an</p>	W000153	<p>W153 Staff Treatment of Clients</p> <p>This item outlines that the facility failed to immediately report allegations of ANE. The plan of correction for these findings is as follows:</p> <p>Correction:</p> <p>Retraining on Policy and Procedures with regard to reporting regulations will occur with all applicable staff by the manager of the home.</p> <p>i. -DDRS Incident Reporting Regulations 460 code</p> <p>ii. -Carey Policy 5.13 on Reporting Abuse, Neglect and Exploitation</p>	09/14/2014

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NAME OF PROVIDER OR SUPPLIER CAREY SERVICES INC	STREET ADDRESS, CITY, STATE, ZIP CODE 4716 S ADAMS ST MARION, IN 46953
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	<p>incident on 7/15/14 at 5:40pm, indicated when client A returned home from workshop, client A "began to yell and call names towards his housemates," client A "flipped vehicles off on the way home in the (facility) van (on the roadway). When getting off the van [client A] pulled his pants down in the drive way and made gestures towards the cars driving down the road." The report indicated staff attempted to redirect him to go into the home, client A "attempted to headbutt staff," went into the house and "began eating his feces out of his anus...continued to expose his genitals to everyone," and damaged his personal computer into "pieces." The report indicated client A "danced around the living room spanking his butt cheeks and gyrated toward the living room window." Client A "punched a staff in her chest and attempted to headbutt [staff] as well." Client A refused redirection from staff and "staff then decided that the police must be involved to try to restore order. Police came to the house to talk with [client A] about his choices." The report indicated client A said he was sorry and apologized. The BDDS report was not</p>		<p>iii. -Carey Procedure 5.13.1 on reporting Abuse, Neglect and other reportable or unusual incidents</p> <p>iv. -Carey Policy 5.14 Staff Conduct Towards Consumers</p> <p>v. -Carey Policy 1.3 Ethical Codes of Conduct</p> <p>Staff training will stress the importance that all staff knows it is the responsibility of each person to report suspected instances of abuse, neglect and exploitation immediately and that the facility Administrator/Administrator On Duty (AOD) and BDDS must also be notified. The manager will be responsible for assuring that the reporting regulations, policies and procedures are followed.</p> <p>The manager of the home will provide training to all clients reminding them of their rights to report any abuse, neglect, or exploitation they experience or perceive.</p> <p>Monitoring:</p>	

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	<p>accurate in that the report did not indicate the specific clients living in the group home who were the targets of client A's behaviors.</p> <p>-The 7/11/14 BDDS report for an incident on 7/10/14 at 12:50pm, indicated "Staff walked in the restroom to find both [client A] and [workshop client Z] coming out of the same stall. When questioned by his residential staff who had come to pick up [male workshop client Z], [male workshop client Z] had reported that [client A] had licked his penis." The report indicated "neglect was found to be unsubstantiated related to the specific staff" and the workshop staff will be retrained on client A's Behavior Support Plan (BSP). The report indicated both clients A and workshop client Z were "not upset" regarding the incident.</p> <p>The 7/10/14 Investigation into the incident was reviewed on 8/5/14 at 11:33am. The investigation indicated "Inadequate staff support resulting in a disruption of services...Alleged or suspected abuse, neglect, or exploitation of consumer...It was reported that [client</p>		<p>During visits at the group home the Residential Manager, the LPN and</p> <p>Director of Group Homes will conduct random questioning of staff to ensure that all staff have a clear understanding and expectation of Who, What, When, Why and How to report ANE. This information will be documented on the Group Home Observation reports and a copy forwarded to the Director of Group Homes. The Residential Manager will complete 2 weekly observations reports from for the next 3 months. The Residential Nurse/LPN and the Director of Group Homes will complete at least 1 unannounced visit monthly till 12/31/14.</p> <p>All corrective actions related to tag W153 will be implemented on or before 9/14/14</p>		

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	<p>A] went into the restroom unsupervised and that while in there he went into the same staff with [workshop client Z] and engaged in sexually inappropriate touching toward [workshop client Z].... (workshop staff) was suspended pending the outcome of the investigation... [Workshop staff] stated she was not trained on both (clients') BSP or ISP (Individual Support Plan) directly but was informed by staff that he had to be monitored when in the restroom. She stated that she was not aware that she had to remain in the restroom with him the entire time and if she had done so she would have neglected the consumers who were eating and a potential choking risk...The allegation of neglect is substantiated, however it is the conclusion of this investigator that the root cause and responsibility for the neglect lies with a breakdown in procedural controls and training rather than with [name of workshop staff]...." The BDDS report was not accurate in that the report did not indicate neglect was "substantiated" and the investigation did.</p>				

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	-The 7/11/14 BDDS report for an incident on 7/10/14 at 2:55pm, indicated client A had been "having behaviors through the day. Staff called to report that [client A] was exposing himself to others in the [Workshop Classroom] area. Since many of [client A's] behaviors are attention seeking and his behavior plan recommends that they be ignored, he was taken to [into a private office] where he would have less of an audience. While there he began exposing himself, hitting himself in the groin, and putting his hand in the back of his pants. He began tearing at his flesh, head, rectum, groin, and biting his knee." The report indicated "[client A] was drawing blood, licking his hands, and smearing blood on his hands, legs, face, and clothes. [Client A] did this continually for 30-40 minutes." Client A was taken to [the name of Hospital] for an evaluation. "At [the hospital] it was determined that [client A] was not in imminent danger of causing harm to himself or others. He was released to his home with a recommendation for follow up with his psychiatric nurse practitioner." The BDDS report did not indicate the specific				

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	<p>clients affected by client A's behavior incidents and/or client A's specific number of behaviors.</p> <p>-The 7/4/14 BDDS report for an incident on 7/3/14 at 8:00pm, indicated client A "had been sitting on the couch at the group home after returning home from an outing. [Client A] began to pinch himself in the groin and flip people off... [Client A] got up and stood in front of a male consumer and exposed himself. [Client A] then took off his glasses and broke them." The report indicated client A began "walking" toward a female client, staff stepped between clients, client A began to elbow staff in the stomach and push through to get to the female client. Staff called for another staff while client A "continued" to try and punch staff. Staff physically restrained client A, client A attempted to "grab staffs' genitals", and the staff with client A "fell to the ground." After the incident client A apologized, cried, and was "sorry." No injuries were noted. The BDDS report did not identify the specific clients affected by client A's behaviors and/or the number of times client A had</p>						

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	<p>demonstrated his behaviors.</p> <p>Client A's Behavior Reports (BR) which were not reported to BDDS indicated the following:</p> <p>-The 7/29/14 BR at 11:40am until 12:05pm, indicated client A "continuously exposed his privates to staff and housemates. [Client A] went out back and refused to come in, he was exposing himself to the neighbors. He flipped staff off, called her a c--t, n-----, m----- f----, then yelled your mama. [Client A] pulled his pants down to his ankles and was shaking his privates at the neighbor. He finally went in the house when staff called house manager. While on the phone [client A] continuously kicked the front of the washing machine caving (in) the front panel. [Client A] sat and ripped his pants off of himself. [Client A] went upstairs to change his pants."</p> <p>-The 7/25/14 BR at 9:05-10:15 no am/pm, indicated client A was "digging his bottom and smelling his fingers." Client A washed his hands in the restroom, "started kissing the cabinet</p>						

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	<p>door, side of the refrigerator, and kicking himself in the bottom as he was walking. [Client A] kissed the counter top while listening to his music, grabbing himself when anyone walked thru the room, digging in his ear then popping finger in (his) mouth then look at [staff name] did several times (sic)." The report indicated when client A walked by another client and "broke a CD in his pocket, went to the trash can, put a broken piece in his mouth and pulled back out and threw in trash (sic)."</p> <p>-The 7/15/14 BR from 9:05am-9:40am, indicated client A "came in hitting himself in private parts, exposing himself to others, (and) licking the floor."</p> <p>-The 7/14/14 BR at 8:25am, indicated client A "followed" client E to her bedroom. Client D "told staff. Staff went to check on [clients A and E], [Client E] walked to the living room. Staff asked [client A] to come out of [client E's] bedroom. [Client A] started showing his privates and humping the air. [Client A] walked up to staff and tried to headbutt staff. Staff backed up. Staff</p>						

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	<p>asked [client A] to back up." The report indicated client A backed up and "exposed self and humped." Client A sat down at computer desk, client A slammed fist into keyboard, client D was in chair next to client A, and client A "scared her and she chose to change her seat." The report indicated client A got up" and then got on the floor on his belly and licked the floor." The report indicated "about 2 minutes later" client A apologized.</p> <p>-The 7/11/14 BR from 3:50pm-4:15pm, indicated client A "was out with peers waiting for his group home staff to come." The report indicated client A began to pick the scabs on his head open, staff redirected client A, client A continued to pick his scabs, ate his scabs, and got up and went inside "5 mins (minutes) he yelled and exposed self. Another staff came and asked for a DVD back, [client A] yelled and exposed self again, got on (the) floor and humped it. He did this several times. [Client A] got into the trash, tried eating it (the trash) several times. [Client A] dumped it (the trash) on the floor (and) tried eating it</p>			

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	<p>again."</p> <p>-The 7/10/14 BR from 11:30am-2:56pm, indicated client A "throughout the day [client A] has been disruptive, attention seeking, sexual advances towards others, exposing himself in his private area. He then exposed himself to [workshop maintenance man] by taking pants down exposing his penis and was humping in front of him."</p> <p>-The 7/10/14 BR at 9:30am, indicated client A was "having trouble staying on task. He slid out of his chair, laid down and licked the floor." Staff at workshop redirected him and client A "stood up quickly exposed his genitals and rubbed them with his hand. Staff redirected him."</p> <p>-The 7/10/14 BR at 9:10am, indicated during a group activity client A with three other clients and staff "observing [client A] pulling out [workshop client Y's] pants with right hand while left hand was in [workshop client Y's] pants. No more than 30 seconds went by" and staff redirected client A. This BR was</p>			

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	<p>reported to BDDS and to the administrator.</p> <p>-The 6/24/14 BR at 2:00pm, indicated client A "was sitting by female client" and staff observed client A trying to make the client hold his hand under the table. The female client was moving away from client A, staff called client A's name and he stopped. Client A was asked to move away from her and he moved seats. Client A then "placed hand in pants to grab himself staff said his name again he took hand out of pants and smelled hand (sic)."</p> <p>-The 6/16/14 BR from 9:15am-10:15am, indicated client A "started licking the table staff asked him to stop (sic)." Client A stopped, dropped to the floor, licked the floor then stood up and hit his genital area "several times." The report indicated he was verbally aggressive and started "pulling his pants down several times sexually acting out."</p> <p>-The 6/14/14 BR at 3:40pm, indicated client A was told by staff that because he had acted out he could not go to the gas</p>						

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	<p>station with the rest of the clients. Client A became upset, begged to go, and "began pulling out his penis and testicles and showing them to staff and other consumers. [Client A] then sat back down and then began exposing himself again but scratching and pulling at his scrotum and causing himself to bleed while yelling 'Kunter Kentay.'"</p> <p>-The 6/10/14 BR at 1:30pm, indicated client A was at workshop for group behavioral session and began to lick the tables and walls. BC (Behavior Clinician) redirected with verbal prompts however client A began to hit himself in the groin and flip off the BC and other group members. Client A also broke his CD and proceeded to try and eat the broken parts. BC asked client A to leave the area and client A dropped to his stomach to lick the floor and exposed his genitals to group members twice.</p> <p>-The 6/9/14 BR at 10:05am, indicated client A was seated at a table and "started showing 2 female clients his private area," staff noticed and brought him to managers office where he broke his</p>						

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	<p>glasses and hit himself between the legs. Manager notified.</p> <p>-The 5/16/14 BR at 4:00 (no am/pm), indicated client A came into the multipurpose room to wait for group home staff to pick up. Client A sat down and began asking about going to see the QIDP for a reward or dollar. Staff redirected client A that he received one earlier that day, and client A "started licking the table, punching himself in his privates, pulling strands of hair out, his behavior was systematically ignored when he stopped."</p> <p>An interview with the agency's COO was conducted on 8/5/14 at 2:20pm. The COO stated "You asked if we filed a BDDS Report for the incident (on 7/29/14) whereby [client A] had attempted to expose himself in the direction of the neighbors. In discussing this with [Group Home Manager (GHM)], she states that [client A] made the attempt, however the neighbors were not home to witness anything and the report should have indicated that the near-exposure was in the direction of the</p>						

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	<p>neighbors as opposed to literally at the neighbors (the people). She reports that staff blocked any potential exposure with their own body while redirecting [client A] back into the home. [The GHM] reports that no neighbor saw anything inappropriate. We all agree that this was a near-miss situation. Due to no actual exposure taking place, there was no BDDS report."</p> <p>On 8/5/14 at 9:45am, an interview with the COO was conducted. The COO stated the agency did not report client A "exposing himself," causing injuries to his penis, or behavioral patterns "because these were known behaviors" and client A had a plan in place to address these issues of exposing himself, SIB, verbal aggression, and physical aggression. The COO stated client A has had these behaviors "over a year" and had been "becoming more intense" in the past "three to six months."</p> <p>On 08/06/14 at 10:45am, an interview with the COO was conducted. The COO stated "all" allegations of abuse, neglect, and/or mistreatment should be reported to</p>						

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W000154	<p>the administrator and reported to BDDS in accordance with State Law. The COO indicated the facility followed the BDDS reporting policy and procedure for abuse, neglect, and/or mistreatment allegations. The COO stated "I was not aware" of "all" of these incidents and/or allegations.</p> <p>This federal tag relates to complaint #IN00152862.</p> <p>9-3-2(a)</p> <p>483.420(d)(3) STAFF TREATMENT OF CLIENTS The facility must have evidence that all alleged violations are thoroughly investigated.</p> <p>Based on record review and interview for 3 of 3 sampled clients (clients A, B, and C) and 3 additional clients (clients D, E, and F), the facility failed to ensure allegations of client A's continued sexual misconduct behaviors toward clients B, C, D, E, and F, the residential community, and the clients who attended the facility owned workshop were thoroughly investigated.</p> <p>Findings include:</p>	W000154	<p>W154 Staff Treatment of Clients</p> <p>This item outlines that the facility failed to provide evidence that all allegations of violations are investigated. The plan of correction for these findings is as follows:</p> <p>Correction:</p> <p>Retraining on Policy and</p>	09/14/2014			

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	<p>On 8/4/14 at 8:00pm, the facility's BDDS (Bureau of Developmental Disabilities Services) reports, investigations, and behavioral reports (BRs) from 5/1/14 to 8/4/14 were reviewed for clients A, B, C, D, E and F.</p> <p>Client A's BDDS reports which were reported included the following:</p> <p>-The 7/25/14 BDDS report for an incident on 7/24/14 at 6:40pm indicated after client A arrived home from day services, staff "attempted to redirect" client A, client A pushed one staff in the chest and shoved the other staff. Staff backed away and client A "proceeded to scream foul names and then kicked a hole in the drywall," hit his stereo, and "staff then proceeded to call the police for assistance as [client A] was not able to be redirected." The police came to the house and spoke with client A about his behavior and client A calmed. No investigation was available for review.</p> <p>-The 7/16/14 BDDS report for an incident on 7/15/14 at 5:40pm, indicated when client A returned home from workshop, client A "began to yell and call names towards his housemates," client A "flipped vehicles off on the way home in the (facility) van (on the roadway). When getting off the van</p>		<p>Procedures with regard to reporting regulations will occur with all applicable staff by the manager of the home.</p> <p>i. -DDRS Incident Reporting Regulations 460 code</p> <p>ii. -Carey Policy 5.13 on Reporting Abuse, Neglect and Exploitation</p> <p>iii. -Carey Procedure 5.13.1 on reporting Abuse, Neglect and other reportable or unusual incidents</p> <p>iv. -Carey Policy 5.14 Staff Conduct Towards Consumers</p> <p>v. -Carey Policy 1.3 Ethical Codes of Conduct</p> <p>Staff training will stress the importance that all staff knows it is the responsibility of each person to report suspected instances of abuse, neglect and exploitation immediately and that the facility Administrator/Administrator On Duty (AOD) and BDDS must also be notified. The manager will be responsible for assuring that the reporting regulations, policies and procedures are followed.</p>		

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	<p>[client A] pulled his pants down in the drive way and made gestures towards the cars driving down the road." The report indicated staff attempted to redirect him to go into the home, client A "attempted to headbutt staff," went into the house and "began eating his feces out of his anus...continued to expose his genitals to everyone," and damaged his personal computer into "pieces." The report indicated client A "danced around the living room spanking his butt cheeks and gyrated toward the living room window." Client A "punched a staff in her chest and attempted to headbutt [staff] as well." Client A refused redirection from staff and "staff then decided that the police must be involved to try to restore order. Police came to the house to talk with [client A] about his choices." The report indicated client A said he was sorry and apologized. No investigation was available for review.</p> <p>-The 7/4/14 BDDS report for an incident on 7/3/14 at 8:00pm, indicated client A "had been sitting on the couch at the group home after returning home from an outing. [Client A] began to pinch himself in the groin and flip people off... [Client A] got up and stood in front of a male consumer and exposed himself. [Client A] then took off his glasses and broke them." The report indicated client</p>		<p>The manager of the home will provide training to all clients reminding them of their rights to report any abuse, neglect, or exploitation they experience or perceive.</p> <p>The Corporate Compliance Officer or designee will investigate all events that occur that require investigation.</p> <p>Monitoring:</p> <p>During visits at the group home the Residential Manager, the LPN and</p> <p>Director of Group Homes will conduct random questioning of staff to ensure that all staff have a clear understanding and expectation of Who, What, When, Why and How to report ANE. This information will be documented on the Group Home Observation reports and a copy forwarded to the Director of Group Homes. The Residential Manager will complete 2 weekly observations reports from for the next 3 months. The Residential Nurse/LPN and the Director of Group Homes will complete at</p>				

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	<p>A began "walking" toward a female client, staff stepped between clients, client A began to elbow staff in the stomach and push through to get to the female client. Staff called for another staff while client A "continued" to try and punch staff. Staff physically restrained client A, client A attempted to "grab staffs' genitals", and the staff with client A "fell to the ground." After the incident client A apologized, cried, and was "sorry." No injuries were noted. No investigation was available for review.</p> <p>-The 5/10/14 BDDS report for an incident on 5/10/14 at 7:20am, indicated "Staff was in restroom when she heard arguing starting to occur. Upon coming out of the restroom she discovered that [client E] had about a 2 inch scratch on her belly into her belly button. [Client A] had a purple bite mark next to his right nipple and a quarter size blood blister on the palm side base of thumb on left side. [Client E] stated that [client A] scratched her and that she had bitten him because she was mad." The report indicated both clients were talked to by staff about the "importance of keeping ones hand to themselves." No investigation was available for review.</p> <p>Client A's Behavior Reports (BR) which had no investigations available for review</p>		<p>least 1 unannounced visit monthly till 12/31/14.</p> <p>All corrective actions related to tag W154 will be implemented on or before 9/14/14</p>				

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	<p>and indicated the following:</p> <p>-The 7/29/14 BR at 11:40am until 12:05pm, indicated client A "continuously exposed his privates to staff and housemates. [Client A] went out back and refused to come in, he was exposing himself to the neighbors. He flipped staff off, called her a c--t, n-----, m----- f----, then yelled your mama. [Client A] pulled his pants down to his ankles and was shaking his privates at the neighbor. He finally went in the house when staff called house manager. While on the phone [client A] continuously kicked the front of the washing machine caving (in) the front panel. [Client A] sat and ripped his pants off of himself. [Client A] went upstairs to change his pants."</p> <p>-The 7/25/14 BR at 9:05-10:15 no am/pm, indicated client A was "digging his bottom and smelling his fingers." Client A washed his hands in the restroom, "started kissing the cabinet door, side of the refrigerator, and kicking himself in the bottom as he was walking. [Client A] kissed the counter top while listening to his music, grabbing himself</p>				

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	<p>when anyone walked thru the room, digging in his ear then popping finger in (his) mouth then look at [staff name] did several times (sic)." The report indicated when client A walked by another client and "broke a CD in his pocket, went to the trash can, put a broken piece in his mouth and pulled back out and threw in trash (sic)."</p> <p>-The 7/15/14 BR from 9:05am-9:40am, indicated client A "came in hitting himself in private parts, exposing himself to others, (and) licking the floor."</p> <p>-The 7/14/14 BR at 8:25am, indicated client A "followed" client E to her bedroom. Client D "told staff. Staff went to check on [clients A and E], [Client E] walked to the living room. Staff asked [client A] to come out of [client E's] bedroom. [Client A] started showing his privates and humping the air. [Client A] walked up to staff and tried to headbutt staff. Staff backed up. Staff asked [client A] to back up." The report indicated client A backed up and "exposed self and humped." Client A sat down at computer desk, client A</p>			

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	<p>slammed fist into keyboard, client D was in chair next to client A, and client A "scared her and she chose to change her seat." The report indicated client A got up" and then got on the floor on his belly and licked the floor." The report indicated "about 2 minutes later" client A apologized.</p> <p>-The 7/11/14 BR from 3:50pm-4:15pm, indicated client A "was out with peers waiting for his group home staff to come." The report indicated client A began to pick the scabs on his head open, staff redirected client A, client A continued to pick his scabs, ate his scabs, and got up and went inside "5 mins (minutes) he yelled and exposed self. Another staff came and asked for a DVD back, [client A] yelled and exposed self again, got on (the) floor and humped it. He did this several times. [Client A] got into the trash, tried eating it (the trash) several times. [Client A] dumped it (the trash) on the floor (and) tried eating it again."</p> <p>-The 7/10/14 BR from 11:30am-2:56pm, indicated client A "throughout the day</p>						

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	<p>[client A] has been disruptive, attention seeking, sexual advances towards others, exposing himself in his private area. He then exposed himself to [workshop maintenance man] by taking pants down exposing his penis and was humping in front of him."</p> <p>-The 7/10/14 BR at 9:30am, indicated client A was "having trouble staying on task. He slid out of his chair, laid down and licked the floor." Staff at workshop redirected him and client A "stood up quickly exposed his genitals and rubbed them with his hand. Staff redirected him."</p> <p>-The 6/24/14 BR at 2:00pm, indicated client A "was sitting by female client" and staff observed client A trying to make the client hold his hand under the table. The female client was moving away from client A, staff called client A's name and he stopped. Client A was asked to move away from her and he moved seats. Client A then "placed hand in pants to grab himself staff said his name again he took hand out of pants and smelled hand (sic)."</p>			

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	<p>-The 6/16/14 BR from 9:15am-10:15am, indicated client A "started licking the table staff asked him to stop (sic)." Client A stopped, dropped to the floor, licked the floor then stood up and hit his genital area "several times." The report indicated he was verbally aggressive and started "pulling his pants down several times sexually acting out."</p> <p>-The 6/14/14 BR at 3:40pm, indicated client A was told by staff that because he had acted out he could not go to the gas station with the rest of the clients. Client A became upset, begged to go, and "began pulling out his penis and testicles and showing them to staff and other consumers. [Client A] then sat back down and then began exposing himself again but scratching and pulling at his scrotum and causing himself to bleed while yelling 'Kunter Kentay.'"</p> <p>-The 6/10/14 BR at 1:30pm, indicated client A was at workshop for group behavioral session and began to lick the tables and walls. BC (Behavior Clinician) redirected with verbal prompts</p>			

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	<p>however client A began to hit himself in the groin and flip off the BC and other group members. Client A also broke his CD and proceeded to try and eat the broken parts. BC asked client A to leave the area and client A dropped to his stomach to lick the floor and exposed his genitals to group members twice.</p> <p>-The 6/9/14 BR at 10:05am, indicated client A was seated at a table and "started showing 2 female clients his private area," staff noticed and brought him to managers office where he broke his glasses and hit himself between the legs. Manager notified.</p> <p>Confidential Interview (CI) #1 indicated CI #1 was present on 7/29/14 when the incident occurred and stated the "neighbor was outside (and) there were kids in the yard playing."</p> <p>CI #2 stated client A was "inappropriate sexually with other clients (and) the other clients are afraid of [client A]." CI #2 stated client A "has a continued pattern of behaviors toward male and female" clients and targeted clients for sexual</p>			

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	<p>exploitation. CI #2 stated client A had a "history of exposing himself" and masturbation in public. CI #2 indicated client A exposed himself and masturbated inside the group home, outside the group home, to passing motorists on the highway, to the neighbors in the back and side yards, and at the workshop.</p> <p>CI #3 stated the neighbor "also was a child care center with young kids ages four to six years old." CI #3 indicated CI #3 was present when the incident occurred at the group home. CI #3 stated client A had "exposed himself multiple times that day and just about every day" and masturbated. CI #3 stated "I could shield him from view (from the neighbors) the best I could so the kids would not see, but I don't know, they could have seen. It happens often." CI #3 indicated client A had exposed himself while in the back yard multiple times on 7/29/14 and one time the neighbor was not outside in the yard. CI #3 stated client A "exposes his genitals, masturbates, and yells [profanities]" at the neighbors, passing cars [on name of</p>			

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	<p>road], and other clients."</p> <p>CI #4 indicated CI #4 had seen client A masturbate and expose himself towards the day care across the back yard whether other people were outside or not. CI #4 indicated the neighbors were outside in the morning of 7/29/14 when client A demonstrated the behavior. CI #4 stated "I'm not sure if they noticed when [client A] did it." CI #4 indicated the staff tied to shield with the staffs' bodies to prevent direct sight exposure and stated "It's hard to cover. [Client A] is quick and determined."</p> <p>CI #5 indicated CI #5 was present when the incident occurred on 7/29/14, stated client A "exposed himself in the backyard more than once (on 7/29/14)" in the evening and stated "the kids were outside playing" in their yard.</p> <p>On 8/6/14 at 7:00am, an interview with client D was conducted. Client D stated she was present at the group home on 7/29/14 when client A exposed himself to the neighbor children in the back yard. Client D indicated client A had exposed himself multiple times and stated "it happens" more than once a week. Client</p>						

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	<p>D indicated client A exposed himself and masturbated at cars passing by the group home on the highway in front of the group home.</p> <p>An interview with the agency's COO was conducted on 8/5/14 at 2:20pm. The COO stated "...for the incident (on 7/29/14) whereby [client A] had attempted to expose himself in the direction of the neighbors. In discussing this with [Group Home Manager (GHM)], she states that [client A] made the attempt, however the neighbors were not home to witness anything and the report should have indicated that the near-exposure was in the direction of the neighbors as opposed to literally at the neighbors (the people). She reports that staff blocked any potential exposure with their own body while redirecting [client A] back into the home. [The GHM] reports that no neighbor saw anything inappropriate. We all agree that this was a near-miss situation. Due to no actual exposure taking place, there was no BDDS report." When asked if the facility staff were interviewed, the COO stated "no" and indicated no investigation was completed.</p>			

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W000157	<p>On 8/5/14 at 9:45am, an interview with the COO was conducted. The COO stated the agency did not report or investigate client A "exposing himself," causing injuries to his penis, or behavioral patterns "because these were known behaviors" and client A had a plan in place to address these issues of exposing himself, SIB, verbal aggression, and physical aggression. The COO stated client A has had these behaviors "over a year" and had been "becoming more intense" in the past "three to six months."</p> <p>On 08/06/14 at 10:45am, an interview with the COO was conducted. The COO stated "all" allegations of abuse, neglect, and/or mistreatment should be investigated.</p> <p>This federal tag relates to complaint #IN00152862.</p> <p>9-3-2(a)</p> <p>483.420(d)(4) STAFF TREATMENT OF CLIENTS</p>			

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	<p>If the alleged violation is verified, appropriate corrective action must be taken.</p> <p>Based on observation, record review, and interview, for 3 of 3 sampled clients (clients A, B, and C) and 3 additional clients (clients D, E, and F), the facility failed to take sufficient corrective action to address client A's pattern of inappropriate sexual behavior towards clients B, C, D, E and F at the group home, at the workshop and in the community.</p> <p>Findings include:</p> <p>On 8/4/14 at 3:50pm, client A sat on the living room floor, selected a DVD to watch, and loaded the DVD into the Television set. From 4:00pm until 4:47pm, client A joined clients B, E, F, GHS #2, the GHM, and GHS #3 playing Uno (a card game) at the dining room table. Client A sat across from the GHM at the table. Client A positioned his chair to allow the dining room table leg to rest between his legs, and each time client A would play a card on the stack of cards in the middle of the table, client A would rub his groin area against the table without redirection from the facility staff. At 4:47pm, client A left the table, came back to the table, put his hands inside his pants front and back, removed his hands, smelled his fingers each time, and was</p>	W000157	<p>W157 Staff Treatment of Clients</p> <p>This item outlines that the facility failed to take and/or document appropriate corrective action upon verification of violations.</p> <p>Immediate Jeopardy Correction:</p> <p>The Immediate Jeopardy Plan of Correction is as follows:</p> <p>Issue 1) The Facility failed to ensure implementation of their abuse, neglect and/or exploitation and mistreatment and policy and procedure to protect clients B, C, D, E and F from Client A's own identified inappropriate sexual behaviors.</p> <p>What corrective action(s) will be accomplished for these residents found to have been affected by the deficient practice?</p> <p>o To prevent further exposure to sexual inappropriateness to clients B, C, D, E and F from client A, the facility will be removing Client A from others.</p>	09/14/2014			

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	<p>not redirected from the behavior or to wash his hands by the facility staff. From 3:20pm until 5:30pm, client A was not observed to stay within eye sight of the facility staff.</p> <p>On 8/6/14 from 7:00am until 9:00am, clients A, B, C, D, E, and F were observed at the group home with two facility staff, GHS #4 and GHS #5. At 8:00am, client E walked from the kitchen and told GHS #5 she needed to use the rest room, client E walked by client A, client A followed client E through the living room, up the stairs, down the hall, and when client E turned to go into the upstairs bathroom, client A saw the surveyor enter the upstairs landing, and client A turned and entered his bedroom. At 8:05am, client E went back downstairs with client A following her back into the kitchen. From 7:00am until 9:00am, client A was not observed to stay within eye sight of the facility staff.</p> <p>On 8/4/14 at 8:00pm, the facility's BDDS (Bureau of Developmental Disabilities Services) reports, investigations, and behavioral reports (BRs) from 5/1/14 through 8/4/14 were reviewed.</p> <p>Client A's BDDS reports which were reported included the following:</p>		<ul style="list-style-type: none"> o Client A will be placed in a local hotel and will receive 1:1 staffing to prevent further sexual inappropriateness and potential exposure to/around others. He will be staffed 1:1 at the hotel (Comfort Suites in Marion, IN). o Carey Services' Day Services staff will provide services during the daytime (per normal Day Services Schedule) on a 1:1 basis away from others. The activities will include community (so long as others are not around – especially children) services and activities in our Capabilities Building whereby Jason will not be around other consumers or community members in order to prevent exposure of Client A's sexual inappropriateness. · How you will identify other residents having the potential to be affected by the same deficient practice and what corrective action will be taken? o By removing Client A from all others, this assures that he will not expose himself or his sexual inappropriate behavior to Clients B, C, D, E and F. · What measures will be put into place or what systemic changes you will make to ensure that the deficient practices does 				

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	<p>-The 7/25/14 BDDS report for an incident on 7/24/14 at 6:40pm, indicated after client A arrived home from day services, staff "attempted to redirect" client A, client A pushed one staff in the chest and shoved the other staff. Staff backed away and client A "proceeded to scream foul names and then kicked a hole in the drywall," hit his stereo, and "staff then proceeded to call the police for assistance as [client A] was not able to be redirected." The police came to the house and spoke with client A about his behavior and client A calmed. No corrective action was available for review.</p> <p>-The 7/16/14 BDDS report for an incident on 7/15/14 at 5:40pm, indicated when client A returned home from workshop, client A "began to yell and call names towards his housemates," client A "flipped vehicles off on the way home in the (facility) van (on the roadway). When getting off the van [client A] pulled his pants down in the drive way and made gestures towards the cars driving down the road." The report indicated staff attempted to redirect him to go into the home, client A "attempted to headbutt staff," went into the house</p>		<p>not recur?</p> <ul style="list-style-type: none"> o By removing Client A from all others, this assures that he will not expose himself or his sexual inappropriate behavior to Clients B, C, D, E and F. o Additionally, Carey Services has again been in contact with BDDS local office. We have requested that Client A be considered an emergency placement to a CIH Waiver – the process for Client A to transition to CIH Waiver began in May of 2014. The IDT agrees that a smaller setting with higher intensity of staffing whereby Client A does not reside with females or near small children. As of an update last week (7/30/2014) with BDDS, Client A was considered a non-priority for a transition to CIH Waiver. BDDS has been updated on Immediate Jeopardy Status and the request for emergency placement is pending with the State. <p>· How the corrective action(s) will be monitored to ensure the deficient practice will not recur, i.e., what quality assurance program will be put into place?</p> <ul style="list-style-type: none"> o Client A will be 1:1 with staffing and monitored at that level to assure that others are not 				

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	<p>and "began eating his feces out of his anus...continued to expose his genitals to everyone," and damaged his personal computer into "pieces." The report indicated client A "danced around the living room spanking his butt cheeks and gyrated toward the living room window." Client A "punched a staff in her chest and attempted to headbutt [staff] as well." Client A refused redirection from staff and "staff then decided that the police must be involved to try to restore order. Police came to the house to talk with [client A] about his choices." The report indicated client A said he was sorry and apologized. No corrective action was available for review.</p> <p>-The 7/11/14 BDDS report for an incident on 7/10/14 at 12:50pm, indicated "Staff walked in the restroom to find both [client A] and [workshop client Z] coming out of the same stall. When questioned by his residential staff who had come to pick up [male workshop client Z], [male workshop client Z] had reported that [client A] had licked his penis." The report indicated "neglect was found to be unsubstantiated related to the</p>		<p>exposed to his sexually inappropriate behaviors.</p> <ul style="list-style-type: none"> · What is the date by which the systemic changes will be completed? <ul style="list-style-type: none"> o 8/6/2014 – plan is currently in place. <p>Issue 2) The Facility failed to provide sufficient staff to supervise Client A based on his identified behavioral needs.</p> <ul style="list-style-type: none"> · What corrective action(s) will be accomplished for these residents found to have been affected by the deficient practice? <ul style="list-style-type: none"> o To prevent further exposure to sexual inappropriateness to clients B, C, D, E and F from client A, the facility will be removing Client A from others. o Client A will be placed in a local hotel and will receive 1:1 staffing to prevent further sexual inappropriateness and potential exposure to/around others. He will be staffed 1:1 at the hotel (Comfort Suites in Marion, IN). o Carey Services' Day Services staff will provide services during 				

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	<p>specific staff" and the workshop staff will be retrained on client A's Behavior Support Plan (BSP). The report indicated both clients A and workshop client Z were "not upset" regarding the incident. No corrective action was available for review.</p> <p>The 7/10/14 Investigation into the incident was reviewed on 8/5/14 at 11:33am. The investigation indicated "Inadequate staff support resulting in a disruption of services...Alleged or suspected abuse, neglect, or exploitation of consumer...It was reported that [client A] went into the restroom unsupervised and that while in there he went into the same staff with [workshop client Z] and engaged in sexually inappropriate touching toward [workshop client Z].... (workshop staff) was suspended pending the outcome of the investigation... [Workshop staff] stated she was not trained on both (clients') BSP or ISP (Individual Support Plan) directly but was informed by staff that he had to be monitored when in the restroom. She stated that she was not aware that she had to remain in the restroom with him the</p>		<p>the daytime (per normal Day Services Schedule) on a 1:1 basis away from others. The activities will include community (so long as others are not around – especially children) services and activities in our Capabilities Building whereby Jason will not be around other consumers or community members in order to prevent exposure of Client A's sexual inappropriateness.</p> <ul style="list-style-type: none"> · How you will identify other residents having the potential to be affected by the same deficient practice and what corrective action will be taken? o By removing Client A from all others, this assures that he will not expose himself or his sexual inappropriate behavior to Clients B, C, D, E and F. · What measures will be put into place or what systemic changes you will make to ensure that the deficient practices does not recur? o By removing Client A from all others, this assures that he will not expose himself or his sexual inappropriate behavior to Clients B, C, D, E and F. o Additionally, Carey Services has again been in contact with BDDS local office. We have 				

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	<p>entire time and if she had done so she would have neglected the consumers who were eating and a potential choking risk...The allegation of neglect is substantiated, however it is the conclusion of this investigator that the root cause and responsibility for the neglect lies with a breakdown in procedural controls and training rather than with [name of workshop staff]...." Staff retraining for workshop staff was completed after the incident.</p> <p>-The 7/11/14 BDDS report for an incident on 7/10/14 at 2:55pm, indicated client A had been "having behaviors through the day. Staff called to report that [client A] was exposing himself to others in the [Workshop Classroom] area. Since many of [client A's] behaviors are attention seeking and his behavior plan recommends that they be ignored, he was taken to [into a private office] where he would have less of an audience. While there he began exposing himself, hitting himself in the groin, and putting his hand in the back of his pants. He began tearing at his flesh, head, rectum, groin, and biting his knee." The report</p>		<p>requested that Client A be considered an emergency placement to a CIH Waiver – the process for Client A to transition to CIH Waiver began in May of 2014, he was labeled as a non-priority. The IDT agrees that a smaller setting with higher intensity of staffing whereby Client A does not reside with females or near small children. As of an update last week (7/30/2014) with BDDS, Client A was considered a non-priority for a transition to CIH Waiver. BDDS has been updated on Immediate Jeopardy Status and the request for emergency placement is pending with the State.</p> <ul style="list-style-type: none"> · How the corrective action(s) will be monitored to ensure the deficient practice will not recur, i.e., what quality assurance program will be put into place? o Client A will be 1:1 with staffing and monitored at that level to assure that others are not exposed to his sexually inappropriate behaviors. · What is the date by which the systemic changes will be completed? o 8/6/2014 – plan is currently in place. 				

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	<p>indicated "[client A] was drawing blood, licking his hands, and smearing blood on his hands, legs, face, and clothes. [Client A] did this continually for 30-40 minutes." Client A was taken to [the name of Hospital] for an evaluation. "At [the hospital] it was determined that [client A] was not in imminent danger of causing harm to himself or others. He was released to his home with a recommendation for follow up with his psychiatric nurse practitioner." No corrective action was available for review.</p> <p>-The 7/10/14 BDDS report for an incident on 7/10/14 at 9:10am, indicated at the facility owned day service "staff was playing a card game with a [different client], [clients A and female workshop client Y] were sitting at a different table together. When staff looked up from the game, she saw that [client A] had his hand down the front part of [female workshop client Y's] pants. Staff reported that [female workshop client Y] was not saying anything nor complaining about what [client A] was doing. Staff reported this lasted no more than 30</p>		<p>Issue 3) The Facility failed to accurately report, investigation and take effective corrective action for Client A's inappropriate sexual behaviors.</p> <ul style="list-style-type: none"> · What corrective action(s) will be accomplished for these residents found to have been affected by the deficient practice? <ul style="list-style-type: none"> o Retraining on Policy and Procedures with regard to reporting regulations will occur with all applicable staff by the manager of the home. · How you will identify other residents having the potential to be affected by the same deficient practice and what corrective action will be taken? <ul style="list-style-type: none"> o All staff will be trained on all applicable reporting policies and procedures – these policies and procedures affect all consumers. · What measures will be put into place or what systemic changes you will make to ensure that the deficient practices does not recur? <ul style="list-style-type: none"> o Retraining will occur on Policy and Procedures with regard to 				

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	<p>(thirty) seconds and that when [client A] was prompted to stop, he did so." The report indicated the clients were separated, spoken to individually, both guardians were notified, and both behavior consultants were notified. No immediate corrective action was available for review and client A had additional sexual misconduct behaviors the same day.</p> <p>-The 7/4/14 BDDS report for an incident on 7/3/14 at 8:00pm, indicated client A "had been sitting on the couch at the group home after returning home from an outing. [Client A] began to pinch himself in the groin and flip people off... [Client A] got up and stood in front of a male consumer and exposed himself. [Client A] then took off his glasses and broke them." The report indicated client A began "walking" toward a female client, staff stepped between clients, client A began to elbow staff in the stomach and push through to get to the female client. Staff called for another staff while client A "continued" to try and punch staff. Staff physically restrained client A, client A attempted to "grab</p>		<p>Reporting regulations. The manager will complete this training and the manager will be responsible for assuring that the reporting regulations, policies and procedures are followed.</p> <p>o The manager is overseen by QDDP/Director of Group Homes and/or the Chief Operations Officer who will review all reportable incidents to assure compliance per the aforementioned training.</p> <p>· How the corrective action(s) will be monitored to ensure the deficient practice will not recur, i.e., what quality assurance program will be put into place?</p> <p>o Retraining will occur on Policy and Procedures with regard to Reporting regulations. The manager will complete this training and the manager will be responsible for assuring that the reporting regulations, policies and procedures are followed.</p> <p>o The manager is overseen by QDDP/Director of Group Homes and/or the Chief Operations Officer who will review all reportable incidents to assure compliance per the aforementioned training.</p> <p>o The Corporate Compliance</p>				

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	<p>staffs' genitals", and the staff with client A "fell to the ground." After the incident client A apologized, cried, and was "sorry." No injuries were noted. No corrective action was available for review.</p> <p>-The 5/10/14 BDDS report for an incident on 5/10/14 at 7:20am, indicated "Staff was in restroom when she heard arguing starting to occur. Upon coming out of the restroom she discovered that [client E] had about a 2 inch scratch on her belly into her belly button. [Client A] had a purple bite mark next to his right nipple and a quarter size blood blister on the palm side base of thumb on left side. [Client E] stated that [client A] scratched her and that she had bitten him because she was mad." The report indicated both clients were talked to by staff about the "importance of keeping ones hand to themselves." No corrective action was available for review.</p> <p>Client A's Behavior Reports (BR) which had no effective corrective action documented and indicated the following:</p> <p>-The 7/29/14 BR at 11:40am until</p>		<p>Officer will investigate all events that occur that require investigation.</p> <ul style="list-style-type: none"> · What is the date by which the systemic changes will be completed? o Complete Training with staff to occur by 8/15/2014 o Manager monitoring to begin immediately o QDDP/Director of Group Homes and/or Chief Operations Officer monitoring to begin immediately. o Corporate Compliance Officer Investigations to begin immediately as situations arise that require further investigation. <p>Note:</p> <p>Immediate Jeopardy was removed on 08/11/2014.</p> <p>Client A moved to a new facility on 9/4/14 into a wavier setting with a different provider.</p> <p>Ongoing Correction:</p> <p>Staff will receive training on active treatment, formal and</p>				

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	<p>12:05pm, indicated client A "continuously exposed his privates to staff and housemates. [Client A] went out back and refused to come in, he was exposing himself to the neighbors. He flipped staff off, called her a c--t, n-----, m----- f---, then yelled your mama. [Client A] pulled his pants down to his ankles and was shaking his privates at the neighbor. He finally went in the house when staff called house manager. While on the phone [client A] continuously kicked the front of the washing machine caving (in) the front panel. [Client A] sat and ripped his pants off of himself. [Client A] went upstairs to change his pants."</p> <p>-The 7/25/14 BR at 9:05-10:15 no am/pm, indicated client A was "digging his bottom and smelling his fingers." Client A washed his hands in the restroom, "started kissing the cabinet door, side of the refrigerator, and kicking himself in the bottom as he was walking. [Client A] kissed the counter top while listening to his music, grabbing himself when anyone walked thru the room, digging in his ear then popping finger in</p>		<p>informal active treatment, program implementation and redirection.</p> <p>All behavior reports will be reviewed by the Residential Manager and QDDP. If a behavior displayed by a consumer violates the rights or is abusive towards others, or if an pattern of increased behaviors is identified, the Residential Manager and/or QDDP will thoroughly investigate the behavior incident documenting on the reverse side of the behavior report and an IDT meeting will be held with the behavior specialist to review the consumer behaviors for an appropriate corrective action. All staff will be promptly in serviced on any changes to corrective action procedures and applicable plans.</p> <p>Monitoring:</p> <p>The Residential Manager and/or QDDP will provide a monthly summary of the Behavior Report review to the COO identifying all Behavior Reports which require further corrective action.</p>				

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	<p>(his) mouth then look at [staff name] did several times (sic)." The report indicated when client A walked by another client and "broke a CD in his pocket, went to the trash can, put a broken piece in his mouth and pulled back out and threw in trash (sic)."</p> <p>-The 7/24/14 BR at 12:05pm, indicated client A was "at the trash can, he stood there and kissed it (the trash can), walked over to (the) table and grabbed groin area. He also broke his CD."</p> <p>-The 7/24/14 BR from 9:00am-11:00am, client A "...kept putting DVD in front of [staffs] face, then grabbed his crotch" twice and kissed the wall walking inside the classroom.</p> <p>-The 7/15/14 BR from 9:05am-9:40am, indicated client A "came in hitting himself in private parts, exposing himself to others, (and) licking the floor."</p> <p>-The 7/14/14 BR at 8:25am, indicated client A "followed" client E to her bedroom. Client D "told staff. Staff went to check on [clients A and E],</p>		<p>All corrective actions related to tag W157 will be implemented on or before 9/14/14</p>				

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	<p>[Client E] walked to the living room. Staff asked [client A] to come out of [client E's] bedroom. [Client A] started showing his privates and humping the air. [Client A] walked up to staff and tried to headbutt staff. Staff backed up. Staff asked [client A] to back up. The report indicated client A backed up and "exposed self and humped." Client A sat down at computer desk, client A slammed fist into keyboard, client D was in chair next to client A, and client A "scared her and she chose to change her seat." The report indicated client A got up" and then got on the floor on his belly and licked the floor." The report indicated "about 2 minutes later" client A apologized.</p> <p>-The 7/11/14 BR from 3:50pm-4:15pm, indicated client A "was out with peers waiting for his group home staff to come." The report indicated client A began to pick the scabs on his head open, staff redirected client A, client A continued to pick his scabs, ate his scabs, and got up and went inside "5 mins (minutes) he yelled and exposed self. Another staff came and asked for a DVD</p>						

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	<p>back, [client A] yelled and exposed self again, got on (the) floor and humped it. He did this several times. [Client A] got into the trash, tried eating it (the trash) several times. [Client A] dumped it (the trash) on the floor (and) tried eating it again."</p> <p>-The 7/11/14 BR from 9:30am-2:00pm, indicated client A licked table, punched himself in private area-genitals. The report indicated "Staff redirected [client A] by taking him to a carpet area, [client A] licked tables, poles several times today."</p> <p>-The 7/10/14 BR from 11:30am-2:56pm, indicated client A "throughout the day [client A] has been disruptive, attention seeking, sexual advances towards others, exposing himself in his private area. He then exposed himself to [workshop maintenance man] by taking pants down exposing his penis and was humping in front of him."</p> <p>-The 7/10/14 BR at 9:30am, indicated client A was "having trouble staying on task. He slid out of his chair, laid down</p>						

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	<p>and licked the floor." Staff at workshop redirected him and client A "stood up quickly exposed his genitals and rubbed them with his hand. Staff redirected him."</p> <p>-The 7/10/14 BR at 9:10am, indicated during a group activity client A with three other clients and staff "observing [client A] pulling out [workshop client Y's] pants with right hand while left hand was in [workshop client Y's] pants. No more than 30 seconds went by" and staff redirected client A. This BR was reported to BDDS and to the administrator.</p> <p>-The 6/24/14 BR at 2:00pm, indicated client A "was sitting by female client" and staff observed client A trying to make the client hold his hand under the table. The female client was moving away from client A, staff called client A's name and he stopped. Client A was asked to move away from her and he moved seats. Client A then "placed hand in pants to grab himself staff said his name again he took hand out of pants and smelled hand (sic)."</p>						

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	<p>-The 6/16/14 BR from 9:15am-10:15am, indicated client A "started licking the table staff asked him to stop (sic)." Client A stopped, dropped to the floor, licked the floor then stood up and hit his genital area "several times." The report indicated he was verbally aggressive and started "pulling his pants down several times sexually acting out."</p> <p>-The 6/14/14 BR at 3:40pm, indicated client A was told by staff that because he had acted out he could not go to the gas station with the rest of the clients. Client A became upset, begged to go, and "began pulling out his penis and testicles and showing them to staff and other consumers. [Client A] then sat back down and then began exposing himself again but scratching and pulling at his scrotum and causing himself to bleed while yelling 'Kunter Kentay.'"</p> <p>-The 6/10/14 BR at 1:30pm, indicated client A was at workshop for group behavioral session and began to lick the tables and walls. BC (Behavior Clinician) redirected with verbal prompts</p>						

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	<p>however client A began to hit himself in the groin and flip off the BC and other group members. Client A also broke his CD and proceeded to try and eat the broken parts. BC asked client A to leave the area and client A dropped to his stomach to lick the floor and exposed his genitals to group members twice.</p> <p>-The 6/9/14 BR at 10:05am, indicated client A was seated at a table and "started showing 2 female clients his private area," staff noticed and brought him to managers office where he broke his glasses and hit himself between the legs. Manager notified.</p> <p>-The 5/16/14 BR at 4:00 (no am/pm), indicated client A came into the multipurpose room to wait for group home staff to pick up. Client A sat down and began asking about going to see the QIDP for a reward or dollar. Staff redirected client A that he received one earlier that day, and client A "started licking the table, punching himself in his privates, pulling strands of hair out, his behavior was systematically ignored when he stopped."</p>			

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	<p>Confidential Interview (CI) #1 indicated CI #1 was present on 7/29/14 when the incident occurred and stated the "neighbor was outside (and) there were kids in the yard playing."</p> <p>CI #2 stated client A was "inappropriate sexually with other clients (and) the other clients are afraid of [client A]." CI #2 stated client A "was not appropriately placed" at the group home. CI #2 stated client A "has a continued pattern of behaviors toward male and female" clients and targeted clients for sexual exploitation. CI #2 stated client A had a "history of exposing himself" and masturbation in public. CI #2 indicated client A exposed himself and masturbated inside the group home, outside the group home, to passing motorists on the highway, to the neighbors in the back and side yards, and at the workshop.</p> <p>CI #3 stated the neighbor "also was a child care center with young kids ages four to six years old." CI #3 indicated CI #3 was present when the incident occurred at the group home. CI #3 stated</p>						

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	<p>client A had "exposed himself multiple times that day and just about every day" and masturbated. CI #3 stated "I could shield him from view (from the neighbors) the best I could so the kids would not see, but I don't know, they could have seen. It happens often." CI #3 indicated client A had exposed himself while in the back yard multiple times on 7/29/14 and one time the neighbor was not outside in the yard. CI #3 stated client A "exposes his genitals, masturbates, and yells [profanities]" at the neighbors, passing cars [on name of road], and other clients." CI #3 indicated a behavior report was filed and the house manager was notified. CI #3 stated client E "cries because of [client A's] behaviors." CI #3 stated client A "chases her" into and out of the bathroom and bedroom "several times" a week.</p> <p>CI #4 stated "the girls (the female clients) are scared to sleep. The girls sleep downstairs." CI #4 stated the female clients D and E had "slept downstairs within the past week." CI #4 indicated the female clients had been sleeping downstairs on the sofas when they are</p>						

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	<p>afraid or have bad dreams regarding client A. CI #4 stated client A's behaviors had increased over the past year and "really worse lately like the past six to eight (6 to 8) weeks." CI #4 indicated CI #4 had seen client A masturbate and expose himself towards the day care across the back yard whether other people were outside or not. CI #4 indicated the neighbors were outside in the morning of 7/29/14 when client A demonstrated the behavior. CI #4 stated "I'm not sure if they noticed when [client A] did it." CI #4 indicated the staff tried to shield with the staffs' bodies to prevent direct sight exposure and stated "It's hard to cover. [Client A] is quick and determined."</p> <p>CI #5 indicated CI #5 was present when the incident occurred on 7/29/14, stated client A "exposed himself in the backyard more than once (on 7/29/14)" in the evening and stated "the kids were outside playing" in their yard.</p> <p>CI #6 stated CI #6 was "afraid" of client A. CI #6 indicated client A had asked to smell CI #6 when she used the bathroom.</p>						

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	<p>CI #6 indicated CI #6 had slept on the sofa at the group home because of fear of client A at night.</p> <p>CI #8 indicated client A follows the female clients into the bathroom, bedrooms, around the house, and stated "he tries to watch them" dress and undress. CI #8 stated CI #8 had removed client A within the "past month or so" from client E's bedroom. CI #8 stated CI #8 had "removed client A from the bathroom within the "past one to three months several times" when the female clients were trying to bathe or in the shower and client A wanted to watch. CI #8 indicated a behavior report was filed and the house manager notified each time. CI #8 indicated client A will pull his scrotum until it bleeds and had caused injuries to his penis from pulling, scratching, hitting, pinching, and rubbing it on objects.</p> <p>CI #9 stated clients D and E had complained "of missing dirty underwear within the past three months" after the clients had taken off their underwear to shower and when the clients exited the</p>						

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	<p>shower [clients D and E] stated to (CI #9) "my dirty underwear was gone." CI #9 stated clients D and E told CI #9 that client A had "either tried to get into the bathroom with them before the shower or [client A] was outside the bathroom door" when the clients were in the bathroom to bathe. CI #9 stated "we looked everywhere" including client A's room. CI #9 stated "the (clients' missing) dirty underwear was either concealed on his person or in his person." CI #9 stated client D and E's missing underwear was not "ever" located.</p> <p>On 8/4/14 at 3:30pm, an interview with client A was conducted. Client A indicated he had behaviors of hitting himself and pointed to his groin area of his sweat pants. Client A pulled the string at the top of his sweat pants out and stated "I can wrap this around it. It makes it tight." Client A stated he "liked to touch" and pointed to his penis, then smiled. Client A stated he "sometimes" touched other clients at home and at the facility owned day program "on their legs, breast, chest." Client A stated he "sometimes got upset when he does not get his way and waiting to see [his family]." Client A indicated he was not afraid and liked living in the group home.</p>			

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	<p>On 8/4/14 at 3:40pm, an interview with client C was conducted. Client C stated he was "afraid all the time" of client A. Client C stated he "was afraid" client A would "come in [client C's] bedroom and touch my penis, he calls me bad names. [Client A] calls bad names and shows his penis at workshop and home. [Client A] does it everywhere." Client C stated client A had exposed himself, "put his private parts, and penis near my face at least twice" in the past "two months" and stood over client C when client C was seated in a chair in the living room. Client C indicated he told the group home staff and called his family to report client A. Client C indicated group home staff were present when client A put his exposed private body parts in client C's face. Client C stated "I may hurt [client A] if he touches me again."</p> <p>On 8/6/14 at 7:00am, an interview with client D was conducted. Client D stated "My dirty underwear comes up missing from the bathroom after I take them off to get in the shower." Client D stated "I know [client A] took them." Client D indicated her clean clothing remained untouched inside the bathroom. Client D indicated her dirty underwear did not show up in the laundry later or returned to her. Client D stated her dirty</p>			

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	<p>underwear "comes up missing several times" in the past two months. Client D indicated she told the group home staff about it and the staff help her to look for her missing dirty underwear. Client D stated "I know it's him (client A) doing it, but I can't prove it." Client D stated she was present at the group home on 7/29/14 when client A exposed himself to the neighbor children in the back yard. Client D indicated client A had exposed himself multiple times and stated "it happens" more than once a week. Client D indicated client A exposed himself and masturbated at cars passing by the group home on the highway in front of the group home. Client D stated "He tries to get me to let him watch me on the toilet to (empty her bowel and bladder). I won't let him." Client D stated "I have nightmares at times. (I dream) [client A] is chasing me down the road, he gets me down on the ground, and sticks his penis in me." Client D's eyes teared and she stated "I go downstairs to sleep" because she did not feel "safe." Client D stated she slept on the sofa downstairs with group home staff "several" times a week. Client D indicated client A had attempted to watch her dress and undress multiple times inside her bedroom. Client D indicated she tells the group home staff each time client A made requests of her, tried to get into the bathroom, and when</p>			

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	<p>she had nightmares.</p> <p>On 8/6/14 at 8:50am, an interview with client E was conducted. Client E stated she had "missing" dirty underwear which was missing after she had taken her dirty underwear off to get into the shower "at least one time" in the past two months. Client E stated she was not afraid of client A "as long as staff" were with her.</p> <p>On 8/4/14 at 8:00pm, a documented behavioral clinician note was reviewed and indicated on "7/16/14 Interviewed [male Client C] regarding morning incident of genitals being grabbed two times. [Client C] reported he did not like being grabbed there and that he felt mad when it happened. He reported that he was not still angry but he did not want it to happen again and he does not like having the certain individual in the house. [Client C] mostly wanted to discuss frustration and hurt feelings regarding a phone conversation with his aunt. Before and after the interview [Client C] was calmly walking around the home and yard as is his typical routine. He was attempting to joke with staff and consumers both appropriately and inappropriately."</p>						

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	<p>An interview with the agency's COO was conducted on 8/5/14 at 2:20pm. The COO stated "...for the incident (on 7/29/14) whereby [client A] had attempted to expose himself in the direction of the neighbors. In discussing this with [Group Home Manager (GHM)], she states that [client A] made the attempt, however the neighbors were not home to witness anything and the report should have indicated that the near-exposure was in the direction of the neighbors as opposed to literally at the neighbors (the people). She reports that staff blocked any potential exposure with their own body while redirecting [client A] back into the home. [The GHM] reports that no neighbor saw anything inappropriate. We all agree that this was a near-miss situation. Due to no actual exposure taking place, there was no BDDS report." No corrective action was available for review.</p> <p>On 8/5/14 at 9:45am, an interview with the COO was conducted. The COO stated client A should have been "one on one supervision" by staff at the workshop</p>						

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	and "eye sight" supervision by staff at home. When asked why client A was not on the same supervision at both the workshop and at the group home, the COO stated "We are not funded at the group home for one on one" staff supervision. When asked if the agency was meeting client A's needs, she stated "We are doing the best we can." When asked if the agency was protecting the other clients from abuse, neglect, and/or mistreatment, she stated "We are doing the best we can." When asked if client A was a "risk" toward the other clients, the COO stated "Yes, that is why we sent him to be evaluated on 7/10/14 at [the hospital] and they said he was not a risk." When asked if the agency was meeting client A's identified behavioral and supervision needs, the COO stated "We are doing the best we can." The COO indicated client A's staff supervision level in his 10/2013 ISP and BSP was not documented. The COO stated the agency did not report client A "exposing himself," causing injuries to his penis, or behavioral patterns "because these were known behaviors" and client A had a plan in place to address these issues of			

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	<p>exposing himself, SIB, verbal aggression, and physical aggression. The COO stated client A has had these behaviors "over a year" and had been "becoming more intense" in the past "three to six months."</p> <p>On 08/06/14 at 10:45am, an interview with the COO was conducted. The COO stated "all" allegations of abuse, neglect, and/or mistreatment should have effective corrective action implemented. The COO indicated clients C, D, and E's allegations of sleeping on the sofa because of fear of client A and client A's behaviors of attempting to watch clients dress/undress, attempting to access private bedrooms, attempting to access bathrooms when female clients were bathing, missing female underwear, and patterns of client A masturbating and exposing himself inside and outside the group home to clients, passing motorists, and neighbors were not investigated and did not have effective corrective action implemented. The COO indicated the agency had taken corrective action for client A's behaviors and incidents. When asked if the corrective measures taken were effective to protect clients A, B, C,</p>			

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W000193	<p>D, E, and F from client A's known and demonstrated behaviors, the COO stated "No, apparently not."</p> <p>On 8/6/14 at 10:45am, an interview with the COO was conducted. The COO indicated the agency had met with client A's behavior clinician, held an IDT (Interdisciplinary Team Meeting) on 7/15/14, had the behavior clinician speak with the clients who were targets of client A's behaviors, the behavior clinician had visited the group home last on 7/16/14, and held a staff retraining on 8/1/14 regarding client A. The COO indicated there was no additional corrective action, no monitoring to ensure compliance, and no documented indication of what steps staff were to take to prevent future occurrence. When asked if the agency's corrective measures were effective based on the observations on 8/4/14 and 8/6/14, the COO stated "We are doing the best that we can."</p> <p>This federal tag relates to complaint #IN00152862.</p> <p>9-3-2(a)</p> <p>483.430(e)(3)</p>						

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	<p>STAFF TRAINING PROGRAM Staff must be able to demonstrate the skills and techniques necessary to administer interventions to manage the inappropriate behavior of clients.</p> <p>Based on observation, record review, and interview, for 1 of 3 sampled clients (client A), the facility staff failed to demonstrate knowledge and skills to consistently implement interventions and techniques to address client A's continued inappropriate sexual behavior.</p> <p>Findings include:</p> <p>On 8/4/14 from 3:20pm until 5:30pm, clients A, B, C, D, E, and F and Group Home Staff (GHS) #1, GHS #2, GHS #3, and the Group Home Manager (GHM) were observed at the group home. At 3:35pm, client F left the group home to go with her family. During the observation period, client A walked independently from room to room inside the group home, upstairs, downstairs, and outside into the back yard. From 3:20pm until 5:30pm, client A grabbed his groin area of his dark red sweat pants, manipulated the white string on his sweat pants, put his right/left hands inside his pants in the groin and buttock areas, smelled his fingers when removed, and pulled his groin without redirection from the facility staff. From 3:20pm until 5:30pm, client A hit himself in his groin</p>	W000193	<p>W193 Staff training Program</p> <p>This item outlines that the facility failed to provide staff training sufficient for staff to demonstrate knowledge and skills to implement interventions and techniques to address client continued inappropriate sexual behavior.</p> <p>Immediate Jeopardy Correction:</p> <p>The Immediate Jeopardy Plan of Correction is as follows:</p> <p>Issue 1) The Facility failed to ensure implementation of their abuse, neglect and/or exploitation and mistreatment and policy and procedure to protect clients B, C, D, E and F from Client A's own identified inappropriate sexual behaviors.</p> <p>What corrective action(s) will be accomplished for these residents found to have been affected by the deficient practice?</p>	09/14/2014			

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	<p>area of his sweat pants with his hand and fist continuously without redirection from the facility staff.</p> <p>At 3:30pm, client A showed his shared bedroom upstairs across from the upstairs bathroom. Client A began to talk to the surveyor, then began to grab his genital area of his pants. When client A was asked if he wanted private time, Client A responded "No, I can touch myself now." The surveyor left the room. At 3:50pm, client A sat on the living room floor, selected a DVD to watch, and loaded the DVD into the Television set. From 4:00pm until 4:47pm, client A joined clients B, E, F, GHS #2, the GHM, and GHS #3 playing Uno (a card game) at the dining room table. Client A sat across from the GHM at the table. Client A positioned his chair to allow the dining room table leg to rest between his legs, and each time client A would play a card on the stack of cards in the middle of the table, client A would rub his groin area against the table without redirection from the facility staff. At 4:47pm, client A left the table, came back to the table, put his hands inside his pants front and back, removed his hands, smelled his fingers each time, and was not redirected from the behavior or to wash his hands by the facility staff. From 4:55pm until 5:00pm, client A went to his upstairs bedroom</p>		<ul style="list-style-type: none"> o To prevent further exposure to sexual inappropriateness to clients B, C, D, E and F from client A, the facility will be removing Client A from others. o Client A will be placed in a local hotel and will receive 1:1 staffing to prevent further sexual inappropriateness and potential exposure to/around others. He will be staffed 1:1 at the hotel (Comfort Suites in Marion, IN). o Carey Services' Day Services staff will provide services during the daytime (per normal Day Services Schedule) on a 1:1 basis away from others. The activities will include community (so long as others are not around – especially children) services and activities in our Capabilities Building whereby Jason will not be around other consumers or community members in order to prevent exposure of Client A's sexual inappropriateness. · How you will identify other residents having the potential to be affected by the same deficient practice and what corrective action will be taken? o By removing Client A from all others, this assures that he will not expose himself or his sexual inappropriate behavior to Clients 				

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	<p>with GHS #3. At 5:00pm, client A returned to the living room with his white sweat pants string out the back of his sweat pants and the pockets of his sweat pants were backwards. No redirection was observed. From 3:20pm until 5:30pm, client A was not observed to stay within eye sight of the facility staff.</p> <p>On 8/6/14 from 7:00am until 9:00am, clients A, B, C, D, E, and F were observed at the group home with two facility staff, GHS #4 and GHS #5. From 7:00am until 9:00am, client A walked independently upstairs, downstairs, from room to room without staff within eye sight of his person. From 8:00am until 9:00am, client A walked into and out of the kitchen continuously, pulled used paper towels from the trash can continuously, smelled them, threw them across the kitchen in a basketball motion, then picked up the used paper towels from the floor, got on his hands and knees on the floor, licked the floor, kissed the floor, and threw the paper towels back into the trash can. Client A was not redirected by the facility staff. At 8:00am, client E walked from the kitchen and told GHS #5 she needed to use the rest room, client E walked by client A, client A followed client E through the living room, up the stairs, down the hall, and when client E turned</p>		<p>B, C, D, E and F.</p> <ul style="list-style-type: none"> · What measures will be put into place or what systemic changes you will make to ensure that the deficient practices does not recur? o By removing Client A from all others, this assures that he will not expose himself or his sexual inappropriate behavior to Clients B, C, D, E and F. o Additionally, Carey Services has again been in contact with BDDS local office. We have requested that Client A be considered an emergency placement to a CIH Waiver – the process for Client A to transition to CIH Waiver began in May of 2014. The IDT agrees that a smaller setting with higher intensity of staffing whereby Client A does not reside with females or near small children. As of an update last week (7/30/2014) with BDDS, Client A was considered a non-priority for a transition to CIH Waiver. BDDS has been updated on Immediate Jeopardy Status and the request for emergency placement is pending with the State. · How the corrective action(s) will be monitored to ensure the deficient practice will not recur, i.e., what quality 				

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	<p>to go into the upstairs bathroom, client A saw the surveyor enter the upstairs landing, and client A turned and entered his bedroom. At 8:05am, client E went back downstairs with client A following her back into the kitchen. At 8:10am, client E went back upstairs with client A following her, the GHM following client A, and the surveyor following the GHM. Client E went into the bathroom and the GHM and client A entered client A's upstairs bedroom.</p> <p>At 8:20am, client A reached into the trash can and pulled out trash, smelled it, and put it back into the trash can without redirection from the facility staff. From 8:20am until 9:00am, client A stood in the living room and dining room, grabbed his groin area of his pants, moved the front of his pants back and forth, and no redirection was taught or encouraged. From 7:00am until 9:00am, client A was not observed to stay within eye sight of the facility staff.</p> <p>On 8/4/14 at 8:00pm, the facility's BDDS (Bureau of Developmental Disabilities Services) reports, investigations, and behavioral reports (BRs) from 5/1/14 through 8/4/14 were reviewed.</p> <p>Client A's BDDS reports which were reported included the following:</p>		<p>assurance program will be put into place?</p> <ul style="list-style-type: none"> o Client A will be 1:1 with staffing and monitored at that level to assure that others are not exposed to his sexually inappropriate behaviors. · What is the date by which the systemic changes will be completed? o 8/6/2014 – plan is currently in place. <p>Issue 2) The Facility failed to provide sufficient staff to supervise Client A based on his identified behavioral needs.</p> <ul style="list-style-type: none"> · What corrective action(s) will be accomplished for these residents found to have been affected by the deficient practice? o To prevent further exposure to sexual inappropriateness to clients B, C, D, E and F from client A, the facility will be removing Client A from others. o Client A will be placed in a local hotel and will receive 1:1 staffing to prevent further sexual inappropriateness and potential 				

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	<p>-The 7/25/14 BDDS report for an incident on 7/24/14 at 6:40pm, indicated after client A arrived home from day services, staff "attempted to redirect" client A, client A pushed one staff in the chest and shoved the other staff. Staff backed away and client A "proceeded to scream foul names and then kicked a hole in the drywall," hit his stereo, and "staff then proceeded to call the police for assistance as [client A] was not able to be redirected." The police came to the house and spoke with client A about his behavior and client A calmed.</p> <p>-The 7/16/14 BDDS report for an incident on 7/15/14 at 5:40pm, indicated when client A returned home from workshop, client A "began to yell and call names towards his housemates," client A "flipped vehicles off on the way home in the (facility) van (on the roadway). When getting off the van [client A] pulled his pants down in the drive way and made gestures towards the cars driving down the road." The report indicated staff attempted to redirect him to go into the home, client A "attempted</p>		<p>exposure to/around others. He will be staffed 1:1 at the hotel (Comfort Suites in Marion, IN).</p> <ul style="list-style-type: none"> o Carey Services' Day Services staff will provide services during the daytime (per normal Day Services Schedule) on a 1:1 basis away from others. The activities will include community (so long as others are not around – especially children) services and activities in our Capabilities Building whereby Jason will not be around other consumers or community members in order to prevent exposure of Client A's sexual inappropriateness. · How you will identify other residents having the potential to be affected by the same deficient practice and what corrective action will be taken? o By removing Client A from all others, this assures that he will not expose himself or his sexual inappropriate behavior to Clients B, C, D, E and F. · What measures will be put into place or what systemic changes you will make to ensure that the deficient practices does not recur? o By removing Client A from all others, this assures that he will not expose himself or his sexual 				

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	<p>to headbutt staff," went into the house and "began eating his feces out of his anus...continued to expose his genitals to everyone," and damaged his personal computer into "pieces." The report indicated client A "danced around the living room spanking his butt cheeks and gyrated toward the living room window." Client A "punched a staff in her chest and attempted to headbutt [staff] as well." Client A refused redirection from staff and "staff then decided that the police must be involved to try to restore order. Police came to the house to talk with [client A] about his choices." The report indicated client A said he was sorry and apologized.</p> <p>-The 7/11/14 BDDS report for an incident on 7/10/14 at 12:50pm, indicated "Staff walked in the restroom to find both [client A] and [workshop client Z] coming out of the same stall. When questioned by his residential staff who had come to pick up [male workshop client Z], [male workshop client Z] had reported that [client A] had licked his penis." The report indicated "neglect was found to be unsubstantiated related to the</p>		<p>inappropriate behavior to Clients B, C, D, E and F.</p> <p>o Additionally, Carey Services has again been in contact with BDDS local office. We have requested that Client A be considered an emergency placement to a CIH Waiver – the process for Client A to transition to CIH Waiver began in May of 2014, he was labeled as a non-priority. The IDT agrees that a smaller setting with higher intensity of staffing whereby Client A does not reside with females or near small children. As of an update last week (7/30/2014) with BDDS, Client A was considered a non-priority for a transition to CIH Waiver. BDDS has been updated on Immediate Jeopardy Status and the request for emergency placement is pending with the State.</p> <p>· How the corrective action(s) will be monitored to ensure the deficient practice will not recur, i.e., what quality assurance program will be put into place?</p> <p>o Client A will be 1:1 with staffing and monitored at that level to assure that others are not exposed to his sexually inappropriate behaviors.</p> <p>· What is the date by which</p>				

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	<p>specific staff" and the workshop staff will be retrained on client A's Behavior Support Plan (BSP). The report indicated both clients A and workshop client Z were "not upset" regarding the incident.</p> <p>The 7/10/14 Investigation into the incident was reviewed on 8/5/14 at 11:33am. The investigation indicated "Inadequate staff support resulting in a disruption of services...Alleged or suspected abuse, neglect, or exploitation of consumer...It was reported that [client A] went into the restroom unsupervised and that while in there he went into the same staff with [workshop client Z] and engaged in sexually inappropriate touching toward [workshop client Z].... (workshop staff) was suspended pending the outcome of the investigation... [Workshop staff] stated she was not trained on both (clients') BSP or ISP (Individual Support Plan) directly but was informed by staff that he had to be monitored when in the restroom. She stated that she was not aware that she had to remain in the restroom with him the entire time and if she had done so she would have neglected the consumers who</p>		<p>the systemic changes will be completed?</p> <p>o 8/6/2014 – plan is currently in place.</p> <p>Issue 3) The Facility failed to accurately report, investigation and take effective corrective action for Client A's inappropriate sexual behaviors.</p> <ul style="list-style-type: none"> · What corrective action(s) will be accomplished for these residents found to have been affected by the deficient practice? o Retraining on Policy and Procedures with regard to reporting regulations will occur with all applicable staff by the manager of the home. · How you will identify other residents having the potential to be affected by the same deficient practice and what corrective action will be taken? o All staff will be trained on all applicable reporting policies and procedures – these policies and procedures affect all consumers. · What measures will be put into place or what systemic 		

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	<p>were eating and a potential choking risk...The allegation of neglect is substantiated, however it is the conclusion of this investigator that the root cause and responsibility for the neglect lies with a breakdown in procedural controls and training rather than with [name of workshop staff]...."</p> <p>-The 7/11/14 BDDS report for an incident on 7/10/14 at 2:55pm, indicated client A had been "having behaviors through the day. Staff called to report that [client A] was exposing himself to others in the [Workshop Classroom] area. Since many of [client A's] behaviors are attention seeking and his behavior plan recommends that they be ignored, he was taken to [into a private office] where he would have less of an audience. While there he began exposing himself, hitting himself in the groin, and putting his hand in the back of his pants. He began tearing at his flesh, head, rectum, groin, and biting his knee." The report indicated "[client A] was drawing blood, licking his hands, and smearing blood on his hands, legs, face, and clothes. [Client A] did this continually for 30-40</p>		<p>changes you will make to ensure that the deficient practices does not recur?</p> <ul style="list-style-type: none"> o Retraining will occur on Policy and Procedures with regard to Reporting regulations. The manager will complete this training and the manager will be responsible for assuring that the reporting regulations, policies and procedures are followed. o The manager is overseen by QDDP/Director of Group Homes and/or the Chief Operations Officer who will review all reportable incidents to assure compliance per the aforementioned training. · How the corrective action(s) will be monitored to ensure the deficient practice will not recur, i.e., what quality assurance program will be put into place? o Retraining will occur on Policy and Procedures with regard to Reporting regulations. The manager will complete this training and the manager will be responsible for assuring that the reporting regulations, policies and procedures are followed. o The manager is overseen by QDDP/Director of Group Homes and/or the Chief Operations 				

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	<p>minutes." Client A was taken to [the name of Hospital] for an evaluation. "At [the hospital] it was determined that [client A] was not in imminent danger of causing harm to himself or others. He was released to his home with a recommendation for follow up with his psychiatric nurse practitioner."</p> <p>-The 7/10/14 BDDS report for an incident on 7/10/14 at 9:10am, indicated at the facility owned day service "staff was playing a card game with a [different client], [clients A and female workshop client Y] were sitting at a different table together. When staff looked up from the game, she saw that [client A] had his hand down the front part of [female workshop client Y's] pants. Staff reported that [female workshop client Y] was not saying anything nor complaining about what [client A] was doing. Staff reported this lasted no more than 30 (thirty) seconds and that when [client A] was prompted to stop, he did so." The report indicated the clients were separated, spoken to individually, both guardians were notified, and both behavior consultants were notified.</p>		<p>Officer who will review all reportable incidents to assure compliance per the aforementioned training.</p> <ul style="list-style-type: none"> o The Corporate Compliance Officer will investigate all events that occur that require investigation. · What is the date by which the systemic changes will be completed? o Complete Training with staff to occur by 8/15/2014 o Manager monitoring to begin immediately o QDDP/Director of Group Homes and/or Chief Operations Officer monitoring to begin immediately. o Corporate Compliance Officer Investigations to begin immediately as situations arise that require further investigation. <p>Note:</p> <p>Immediate Jeopardy was removed on 08/11/2014.</p> <p>Client A moved to a new facility on 9/4/14 into a wavier setting with a different provider.</p>				

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	<p>-The 7/4/14 BDDS report for an incident on 7/3/14 at 8:00pm, indicated client A "had been sitting on the couch at the group home after returning home from an outing. [Client A] began to pinch himself in the groin and flip people off... [Client A] got up and stood in front of a male consumer and exposed himself. [Client A] then took off his glasses and broke them." The report indicated client A began "walking" toward a female client, staff stepped between clients, client A began to elbow staff in the stomach and push through to get to the female client. Staff called for another staff while client A "continued" to try and punch staff. Staff physically restrained client A, client A attempted to "grab staffs' genitals", and the staff with client A "fell to the ground." After the incident client A apologized, cried, and was "sorry."</p> <p>-The 5/10/14 BDDS report for an incident on 5/10/14 at 7:20am, indicated "Staff was in restroom when she heard arguing starting to occur. Upon coming out of the restroom she discovered that</p>		<p>Ongoing Correction:</p> <p>Staff will receive training on active treatment, formal and informal active treatment, program implementation and redirection.</p> <p>All behavior reports will be reviewed by the Residential Manager and QDDP. If a behavior displayed by a consumer violates the rights or is abusive towards others, or if a pattern of increased behaviors is identified, the Residential Manager and/or QDDP will thoroughly investigate the behavior incident documenting on the reverse side of the behavior report and an IDT meeting will be held with the behavior specialist to review the consumer behaviors for an appropriate corrective action. All staff will be promptly in serviced on any changes to corrective action procedures and applicable plans.</p> <p>Monitoring:</p> <p>The Residential Manager and/or QDDP will provide a monthly</p>				

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	<p>[client E] had about a 2 inch scratch on her belly into her belly button. [Client A] had a purple bite mark next to his right nipple and a quarter size blood blister on the palm side base of thumb on left side. [Client E] stated that [client A] scratched her and that she had bitten him because she was mad." The report indicated both clients were talked to by staff about the "importance of keeping ones hand to themselves."</p> <p>Client A's Behavior Reports (BR) indicated the following:</p> <p>-The 7/29/14 BR at 11:40am until 12:05pm, indicated client A "continuously exposed his privates to staff and housemates. [Client A] went out back and refused to come in, he was exposing himself to the neighbors. He flipped staff off, called her a c--t, n-----, m----- f---, then yelled your mama. [Client A] pulled his pants down to his ankles and was shaking his privates at the neighbor. He finally went in the house when staff called house manager. While on the phone [client A] continuously kicked the front of the washing machine caving (in) the front panel. [Client A] sat</p>		<p>summary of the Behavior Report review to the COO identifying all Behavior Reports which require further corrective action.</p> <p>All corrective actions related to tag W193 will be implemented on or before 9/14/14</p>		

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	<p>and ripped his pants off of himself. [Client A] went upstairs to change his pants."</p> <p>-The 7/25/14 BR at 9:05-10:15 no am/pm, indicated client A was "digging his bottom and smelling his fingers." Client A washed his hands in the restroom, "started kissing the cabinet door, side of the refrigerator, and kicking himself in the bottom as he was walking. [Client A] kissed the counter top while listening to his music, grabbing himself when anyone walked thru the room, digging in his ear then popping finger in (his) mouth then look at [staff name] did several times (sic)." The report indicated when client A walked by another client and "broke a CD in his pocket, went to the trash can, put a broken piece in his mouth and pulled back out and threw in trash (sic)."</p> <p>-The 7/24/14 BR at 12:05pm, indicated client A was "at the trash can, he stood there and kissed it (the trash can), walked over to (the) table and grabbed groin area. He also broke his CD."</p>			

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	<p>-The 7/24/14 BR from 9:00am-11:00am, client A "...kept putting DVD in front of [staffs] face, then grabbed his crotch" twice and kissed the wall walking inside the classroom.</p> <p>-The 7/15/14 BR from 9:05am-9:40am, indicated client A "came in hitting himself in private parts, exposing himself to others, (and) licking the floor."</p> <p>-The 7/14/14 BR at 8:25am, indicated client A "followed" client E to her bedroom. Client D "told staff. Staff went to check on [clients A and E], [Client E] walked to the living room. Staff asked [client A] to come out of [client E's] bedroom. [Client A] started showing his privates and humping the air. [Client A] walked up to staff and tried to headbutt staff. Staff backed up. Staff asked [client A] to back up." The report indicated client A backed up and "exposed self and humped." Client A sat down at computer desk, client A slammed fist into keyboard, client D was in chair next to client A, and client A "scared her and she chose to change her seat." The report indicated client A got</p>			

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	<p>up" and then got on the floor on his belly and licked the floor." The report indicated "about 2 minutes later" client A apologized.</p> <p>-The 7/11/14 BR from 3:50pm-4:15pm, indicated client A "was out with peers waiting for his group home staff to come." The report indicated client A began to pick the scabs on his head open, staff redirected client A, client A continued to pick his scabs, ate his scabs, and got up and went inside "5 mins (minutes) he yelled and exposed self. Another staff came and asked for a DVD back, [client A] yelled and exposed self again, got on (the) floor and humped it. He did this several times. [Client A] got into the trash, tried eating it (the trash) several times. [Client A] dumped it (the trash) on the floor (and) tried eating it again."</p> <p>-The 7/11/14 BR from 9:30am-2:00pm, indicated client A licked table, punched himself in private area-genitals. The report indicated "Staff redirected [client A] by taking him to a carpet area, [client A] licked tables, poles several times</p>						

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	<p>today."</p> <p>-The 7/10/14 BR from 11:30am-2:56pm, indicated client A "throughout the day [client A] has been disruptive, attention seeking, sexual advances towards others, exposing himself in his private area. He then exposed himself to [workshop maintenance man] by taking pants down exposing his penis and was humping in front of him."</p> <p>-The 7/10/14 BR at 9:30am, indicated client A was "having trouble staying on task. He slid out of his chair, laid down and licked the floor." Staff at workshop redirected him and client A "stood up quickly exposed his genitals and rubbed them with his hand. Staff redirected him."</p> <p>-The 7/10/14 BR at 9:10am, indicated during a group activity client A with three other clients and staff "observing [client A] pulling out [workshop client Y's] pants with right hand while left hand was in [workshop client Y's] pants. No more than 30 seconds went by" and staff redirected client A.</p>			

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	<p>-The 6/24/14 BR at 2:00pm, indicated client A "was sitting by female client" and staff observed client A trying to make the client hold his hand under the table. The female client was moving away from client A, staff called client A's name and he stopped. Client A was asked to move away from her and he moved seats. Client A then "placed hand in pants to grab himself staff said his name again he took hand out of pants and smelled hand (sic)."</p> <p>-The 6/16/14 BR from 9:15am-10:15am, indicated client A "started licking the table staff asked him to stop (sic)." Client A stopped, dropped to the floor, licked the floor then stood up and hit his genital area "several times." The report indicated he was verbally aggressive and started "pulling his pants down several times sexually acting out."</p> <p>-The 6/14/14 BR at 3:40pm, indicated client A was told by staff that because he had acted out he could not go to the gas station with the rest of the clients. Client A became upset, begged to go, and</p>						

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	<p>"began pulling out his penis and testicles and showing them to staff and other consumers. [Client A] then sat back down and then began exposing himself again but scratching and pulling at his scrotum and causing himself to bleed while yelling 'Kunter Kentay.'"</p> <p>-The 6/10/14 BR at 1:30pm, indicated client A was at workshop for group behavioral session and began to lick the tables and walls. BC (Behavior Clinician) redirected with verbal prompts however client A began to hit himself in the groin and flip off the BC and other group members. Client A also broke his CD and proceeded to try and eat the broken parts. BC asked client A to leave the area and client A dropped to his stomach to lick the floor and exposed his genitals to group members twice.</p> <p>-The 6/9/14 BR at 10:05am, indicated client A was seated at a table and "started showing 2 female clients his private area," staff noticed and brought him to managers office where he broke his glasses and hit himself between the legs.</p>						

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	<p>-The 5/16/14 BR at 4:00 (no am/pm), indicated client A came into the multipurpose room to wait for group home staff to pick up. Client A sat down and began asking about going to see the QIDP for a reward or dollar. Staff redirected client A that he received one earlier that day, and client A "started licking the table, punching himself in his privates, pulling strands of hair out, his behavior was systematically ignored when he stopped."</p> <p>Client A's record was reviewed on 8/4/14 at 10:00am, on 8/5/14 at 8:00am, and on 8/6/14 at 10:15am. Client A's record 7/2014 BSP and 10/2013 ISP did not include client A's level of supervision, how staff were to supervise client A at the home, or how staff were to supervise client A in the community. Client A's record indicated he was a 34 year old male and had a guardian. Client A's diagnoses included, but were not limited to: Moderate Mental Retardation, Explosive Disorder, Autism, Borderline Diabetes, and Hypertension. Client A's 7/2014 BSP indicated his behavior plan had been updated because of increased behaviors by the behavior consultant on</p>						

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	6/2013, 3/2014, and 7/2014. Client A's 7/2014 BSP included the targeted behaviors of physical aggression, verbal aggression, non compliance, sexually inappropriate behavior, wet/soils inappropriately, and eating inedibles. Client A's behavior totals for "sexual inappropriate " behaviors for 2012 was 5, 2013 was 79, and 2014 was 54. Client A's 7/2014 BSP indicated "...Inappropriate Sexual Behavior and Social Misconduct: [client A] will benefit from being involved in community activities and day programming that encourage and promote healthy relationships...staff are to see [client A's] hands at all times in any program area, van, outings, etc...the restrooms will be monitored each time [client A] enters. When being transported in the van, [client A] will sit in the front seat where he is easily monitored. [Client A] will continue to use pass system when going from building to building with the time noted on pass as to when he leaves and when he is to be returning...[Client A] is not to be unsupervised around minor children or in bathrooms at any time. Remind [client				

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	<p>A] to imagine jail bars when he senses the urge to expose himself..."</p> <p>An interview with the agency's COO was conducted on 8/5/14 at 2:20pm. The COO indicated the facility staff should have implemented client A's ISP and BSP when opportunities existed. Staff training was requested from the COO. The COO indicated the staff had been trained initially on client A's plans and no evidence of training was available for review.</p> <p>On 8/5/14 at 9:45am, an interview with the COO was conducted. The COO stated client A should have been "one on one supervision" by staff at the workshop and "eye sight" supervision by staff at home. When asked why client A was not on the same supervision at both the workshop and at the group home, the COO stated "We are not funded at the group home for one on one" staff supervision. When asked if the agency was meeting client A's needs, she stated "We are doing the best we can." When asked what the facility staff should have implemented to prevent further behaviors, injuries, and exposures, the</p>						

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	<p>COO did not respond. When asked if the facility staff implemented client A's plans correctly, the COO indicated the facility staff should implement client A's ISP and BSP to redirect his sexual misconduct behaviors. No staff training was available for review.</p> <p>On 8/6/14 at 10:45am, an interview with the COO was conducted. The COO indicated the agency had met with client A's behavior clinician, held an IDT (Interdisciplinary Team Meeting) on 7/15/14, had the behavior clinician speak with the clients who were targets of client A's behaviors, the behavior clinician had visited the group home last on 7/16/14, and held a staff retraining on 8/1/14 regarding client A. The COO indicated there was no additional corrective action were available for review; there was no monitoring to ensure compliance, no monitoring to ensure staff knowledge/skills, and no documented indication of what steps staff were to take to prevent future occurrence. The COO provided no evidence of staff training before 8/1/14.</p> <p>This federal tag relates to complaint #IN00152862.</p> <p>9-3-3(a)</p>						

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W000249	<p>483.440(d)(1) PROGRAM IMPLEMENTATION</p> <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 observation, record review, and interview, for 1 of 3 sampled clients (client A), the facility failed to implement client A's ISP (Individual Support Plan) and BSP (Behavior Support Plan) during formal and informal opportunities when opportunities existed.</p> <p>Findings include:</p> <p>On 8/4/14 from 3:20pm until 5:30pm, clients A, B, C, D, E, and F and Group Home Staff (GHS) #1, GHS #2, GHS #3, and the Group Home Manager (GHM) were observed at the group home. At 3:35pm, client F left the group home to go with her family. During the observation period, client A walked independently from room to room inside the group home, upstairs, downstairs, and outside into the back yard. From 3:20pm until 5:30pm, client A grabbed his groin area of his dark red sweat pants,</p>	W000249	<p>W249 Program Implementation</p> <p>This item outlines that the facility failed to implement client's ISP and BSP during formal and informal opportunities when opportunities existed. The plan of correction for these findings is as follows:</p> <p>Correction:</p> <p>Staff will receive training on active treatment, formal and informal active treatment, program implementation and redirection.</p> <p>Client A was moved from the group home on 8/6/14 to a location with one on one staff supervision.</p>	09/14/2014			

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	<p>manipulated the white string on his sweat pants, put his right/left hands inside his pants in the groin and buttock areas, smelled his fingers when removed, and pulled his groin without redirection from the facility staff. From 3:20pm until 5:30pm, client A hit himself in his groin area of his sweat pants with his hand and fist continuously without redirection from the facility staff. Client A was not within eye sight of the facility staff.</p> <p>At 3:30pm, client A showed his shared bedroom upstairs across from the upstairs bathroom. Client A began to talk to the surveyor, then began to grab his genital area of his pants. When client A was asked if he wanted private time, Client A responded "No, I can touch myself now." The surveyor left the room. At 3:50pm, client A sat on the living room floor, selected a DVD to watch, and loaded the DVD into the Television set. From 4:00pm until 4:47pm, client A joined clients B, E, F, GHS #2, the GHM, and GHS #3 playing Uno (a card game) at the dining room table. Client A sat across from the GHM at the table. Client A positioned his chair to allow the dining room table leg to rest between his legs, and each time client A would play a card on the stack of cards in the middle of the table, client A would rub his groin area against the table without redirection from</p>		<p>Client A moved to a new facility on 9/4/14 into a wavier setting with a different provider.</p> <p>All corrective actions related to tag W249 will be implemented on or before 9/14/14</p>				

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	<p>the facility staff. At 4:47pm, client A left the table, came back to the table, put his hands inside his pants front and back, removed his hands, smelled his fingers each time, and was not redirected from the behavior or to wash his hands by the facility staff. From 4:55pm until 5:00pm, client A went to his upstairs bedroom with GHS #3. At 5:00pm, client A returned to the living room with his white sweat pants string out the back of his sweat pants and the pockets of his sweat pants were backwards. No redirection was observed. From 3:20pm until 5:30pm, client A was not observed to stay within eye sight of the facility staff.</p> <p>On 8/5/14 from 9:30am until 9:55am, clients A, B, C, D, E, and F were not at the facility owned day services. At 9:30am, the agency nurse indicated clients A, B, C, D, E, and F were not at day services. At 9:55am, the COO (Chief Operating Officer) indicated clients A, B, C, D, E, and F had gone to the Zoo in another town because their house had been treated for bed bugs and the clients could not go to work and could not stay at the group home. The COO indicated two staff with six clients went to the community Zoo. The COO stated clients A, B, C, D, E, and F "all" needed to be supervised by staff.</p>			

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	<p>On 8/6/14 from 7:00am until 9:00am, clients A, B, C, D, E, and F were observed at the group home with two facility staff, GHS #4 and GHS #5. From 7:00am until 9:00am, client A walked independently upstairs, downstairs, from room to room without staff within eye sight of his person. From 8:00am until 9:00am, client A walked into and out of the kitchen continuously, pulled used paper towels from the trash can continuously, smelled them, threw them across the kitchen in a basketball motion, then picked up the used paper towels from the floor, got on his hands and knees on the floor, licked the floor, kissed the floor, and threw the paper towels back into the trash can. Client A was not redirected by the facility staff. At 8:00am, client E walked from the kitchen and told GHS #5 she needed to use the rest room, client E walked by client A, client A followed client E through the living room, up the stairs, down the hall, and when client E turned to go into the upstairs bathroom, client A saw the surveyor enter the upstairs landing, and client A turned and entered his bedroom. At 8:05am, client E went back downstairs with client A following her back into the kitchen. At 8:10am, client E went back upstairs with client A following her, the GHM following client A, and the surveyor following the GHM.</p>				

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	<p>Client E went into the bathroom and the GHM and client A entered client A's upstairs bedroom.</p> <p>At 8:20am, client A reached into the trash can and pulled out trash, smelled it, and put it back into the trash can without redirection from the facility staff. From 8:20am until 9:00am, client A stood in the living room and dining room, grabbed his groin area of his pants, moved the front of his pants back and forth, and no redirection was taught or encouraged. From 7:00am until 9:00am, client A was not observed to stay within eye sight of the facility staff.</p> <p>On 8/4/14 at 8:00pm, the facility's BDDS (Bureau of Developmental Disabilities Services) reports, investigations, and behavioral reports (BRs) from 5/1/14 through 8/4/14 were reviewed.</p> <p>Client A's BDDS reports which were reported included the following:</p> <p>-The 7/11/14 BDDS report for an incident on 7/10/14 at 12:50pm, indicated "Staff walked in the restroom to find both [client A] and [workshop client Z] coming out of the same stall. When questioned by his residential staff who had come to pick up [male workshop</p>						

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	<p>client Z], [male workshop client Z] had reported that [client A] had licked his penis." The report indicated "neglect was found to be unsubstantiated related to the specific staff" and the workshop staff will be retrained on client A's Behavior Support Plan (BSP). The report indicated both clients A and workshop client Z were "not upset" regarding the incident.</p> <p>The 7/10/14 Investigation into the incident was reviewed on 8/5/14 at 11:33am. The investigation indicated "Inadequate staff support resulting in a disruption of services...Alleged or suspected abuse, neglect, or exploitation of consumer...It was reported that [client A] went into the restroom unsupervised and that while in there he went into the same staff with [workshop client Z] and engaged in sexually inappropriate touching toward [workshop client Z].... (workshop staff) was suspended pending the outcome of the investigation... [Workshop staff] stated she was not trained on both (clients') BSP or ISP (Individual Support Plan) directly but was informed by staff that he had to be monitored when in the restroom. She</p>						

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	<p>stated that she was not aware that she had to remain in the restroom with him the entire time and if she had done so she would have neglected the consumers who were eating and a potential choking risk...The allegation of neglect is substantiated, however it is the conclusion of this investigator that the root cause and responsibility for the neglect lies with a breakdown in procedural controls and training rather than with [name of workshop staff]...."</p> <p>Client A's record was reviewed on 8/4/14 at 10:00am, on 8/5/14 at 8:00am, and on 8/6/14 at 10:15am. Client A's record 7/2014 BSP and 10/2013 ISP did not include client A's level of supervision, how staff were to supervise client A at the home, or how staff were to supervise client A in the community. Client A's record indicated he was a 34 year old male and had a guardian. Client A's diagnoses included, but were not limited to: Moderate Mental Retardation, Explosive Disorder, Autism, Borderline Diabetes, and Hypertension. Client A's 7/2014 BSP indicated his behavior plan had been updated because of increased</p>						

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	<p>behaviors by the behavior consultant on 6/2013, 3/2014, and 7/2014. Client A's 7/2014 BSP included the targeted behaviors of physical aggression, verbal aggression, non compliance, sexually inappropriate behavior, wet/soils inappropriately, and eating inedibles. Client A's behavior totals for "sexual inappropriate " behaviors for 2012 was 5, 2013 was 79, and 2014 was 54. Client A's 7/2014 BSP indicated "...Inappropriate Sexual Behavior and Social Misconduct: [client A] will benefit from being involved in community activities and day programming that encourage and promote healthy relationships...staff are to see [client A's] hands at all times in any program area, van, outings, etc...the restrooms will be monitored each time [client A] enters. When being transported in the van, [client A] will sit in the front seat where he is easily monitored. [Client A] will continue to use pass system when going from building to building with the time noted on pass as to when he leaves and when he is to be returning...[Client A] is not to be unsupervised around minor children or in</p>						

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	<p>bathrooms at any time. Remind [client A] to imagine jail bars when he senses the urge to expose himself..."</p> <p>On 8/5/14 at 9:45am, an interview with the COO was conducted. The COO stated client A should have been "one on one supervision" by staff at the workshop and "eye sight" supervision by staff at home. When asked why client A was not the same supervision at both the workshop and at the group home, the COO stated "We are not funded at the group home for one on one" staff supervision. The COO indicated the agency could provide one on one supervision at the workshop. When asked if the agency was meeting client A's needs, she stated "We are doing the best we can." When asked if the agency was protecting the other clients from abuse, neglect, and/or mistreatment, she stated "We are doing the best we can." When asked if the agency was meeting client A's identified behavioral and supervision needs, the COO stated "We are doing the best we can." The COO indicated client A's staff supervision level in his 10/2013 ISP and BSP was not documented.</p>			

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

PRINTED: 09/16/2014
FORM APPROVED
OMB NO. 0938-0391

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	This federal tag relates to complaint #IN00152862. 9-3-4(a)				