

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 15G517	X2) MULTIPLE CONSTRUCTION A. BUILDING 00 B. WING _____	X3) DATE SURVEY COMPLETED 11/19/2012
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NAME OF PROVIDER OR SUPPLIER OCCAIO INC	STREET ADDRESS, CITY, STATE, ZIP CODE 699 GRAHAM ST APTS 2 & 8 FRANKLIN, IN 46131
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W0000	<p>This visit was for a recertification and state licensure survey.</p> <p>Survey Dates: November 13, 14, 15, 16, and 19, 2012.</p> <p>Facility Number: 001031 Provider Number: 15G517 AIM Number: 100245210</p> <p>Surveyor: Steven Schwing, Medical Surveyor III</p> <p>These deficiencies also reflect state findings in accordance with 460 IAC 9. Quality Review completed 11/21/12 by Ruth Shackelford, Medical Surveyor III.</p>	W0000		

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

Any deficiency statement ending with an asterisk (*) denotes a deficiency which the institution may be excused from correcting providing it is determined that other safeguards provide sufficient protection to the patients. (see instructions.) Except for nursing homes, the findings stated above are disclosable 90 days following the date of survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosable 14 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.

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W0454	<p>483.470(l)(1) INFECTION CONTROL The facility must provide a sanitary environment to avoid sources and transmission of infections.</p> <p>Based on observation, record review and interview for 8 of 8 clients living in the group home (#1, #2, #3, #4, #5, #6, #7 and #8), the facility failed to ensure the clients and staff used a bleach water solution when hand washing the dishes.</p> <p>Findings include:</p> <p>Observations were conducted at the group home on 11/13/12 from 5:00 PM to 6:25 PM and 11/14/12 from 5:56 AM to 8:20 AM. On 11/13/12 at 5:41 PM, client #1 was asked if he wanted to wash or dry dishes. Client #1 started hand washing dishes from dinner. Client #1 initially washed the dishes using soap, water and his hands to wash the dirty dishes. Client #1 did not use a dish rag. Client #1 was not prompted to prepare a bleach water solution to rinse the dishes. Client #1 washed the dishes and then placed the dishes into a dish rack. Client #1 was prompted by staff #10 to use a dish rag at 5:45 PM. The client and staff did not fill a sink to rinse the dishes. The client and staff rinsed the dishes under running water. The staff dried the dishes with a towel during the evening observation. On 11/14/12 at 7:41 AM, client #3 was</p>	W0454	<p>W 454 Infection Control</p> <p>The facility must provide a sanitary environment to avoid sources and transmission of infections.</p> <p>1. What corrective action will be accomplished?</p> <ul style="list-style-type: none"> · Staff will be retrained on ensuring active treatment and the dishwashing procedures when hand washing items during their staff meeting on 12-19-12. · The dishwashing procedures are currently posted in the home. · Items to ensure that the dishwashing procedures can be followed have been purchased for the home. <p>2. How will we 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"> · All residents have the 	12/19/2012			

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	<p>observed to hand wash the breakfast dishes. Client #3 did not use a bleach water solution to rinse the dishes. Client #3 rinsed the dishes under running water and then placed them on a drying rack. Some of the dishes in the drying rack still had soap on them. This affected clients #1, #2, #3, #4, #5, #6, #7 and #8.</p> <p>A review of the facility's Emergency Dishwashing Procedure, not dated, was conducted on 11/15/12 at 10:53 AM. The procedure indicated, "When the automatic dishwasher is non-functional, follow the procedure outlined below. Use paper plates, cups and plastic utensils if possible... A. Clean sinks and tub before beginning. B. Fill wash sink with hot water and dish soap. If solution becomes soiled, drain and refill. C. Fill other sink with hot water. If water becomes soiled, drain and refill. D. MEASURE amount of hot water needed to fill tub 1/2 to 3/4 full. Add MEASURED amount of household bleach according to the following table: 1 gallon water and 1 teaspoon household bleach...". The procedure Operation section indicated, "A. Scrape food off items to be washed. B. Wash silverware first, followed by cups, plates, and proceed through remainder of items. C. Rinse items by submerging in rinse sink. D. Remove items and submerge in tub with sanitizing</p>		<p>potential to be affected by the same deficient practice.</p> <ul style="list-style-type: none"> · Staff will be retrained on ensuring active treatment and the dishwashing procedures when hand washing items during their staff meeting on 12-19-12. · The dishwashing procedures are currently posted in the home. · Items to ensure that the dishwashing procedures can be followed have been purchased for the home. <p>3. What measures will be put into place or what systemic changes will be made to ensure that the deficient practice does not recur:</p> <ul style="list-style-type: none"> · Staff will be retrained on ensuring active treatment and the dishwashing procedures when hand washing items during their staff meeting on 12-19-12. · The dishwashing procedures are currently posted in the home. · Items to ensure that the dishwashing procedures can be followed have been purchased for the home. 				

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	<p>solution for 1 minute. E. Remove from sanitizing solution and allow to air dry on counter top. DO NOT TOWEL DRY...".</p> <p>An interview with Direct Care Staff #11 was conducted on 11/13/12 at 6:20 PM. Staff #11 indicated the dishwasher was still full and running from earlier today. Staff #11 indicated the group home usually washed some dishes by hand after every meal.</p> <p>An interview with the nurse was conducted on 11/14/12 at 10:51 AM. The nurse indicated the dishes should be put through a bleach water solution when hand washed.</p> <p>An interview with the Residential Coordinator (RC) was conducted on 11/15/12 at 12:32 PM. The RC indicated the clients and staff should have used a bleach water solution when hand washing the dishes. The RC indicated there was a procedure in place and it should have been implemented. The RC indicated she was not aware of the procedure until 11/14/12.</p> <p>9-3-7(a)</p>		<p>4. How will the corrective action be monitored to ensure the deficient practice will not recur?</p> <ul style="list-style-type: none"> · The RC will monitor on a daily basis when they are in the home. · The Program Specialist will monitor as they complete their audits. <p>5. What is the date by which the systemic changes will be completed?</p> <p>December 19th, 2012</p>		

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W0488	<p>483.480(d)(4) DINING AREAS AND SERVICE</p> <p>The facility must assure that each client eats in a manner consistent with his or her developmental level.</p> <p>Based on observation and interview for 8 of 8 clients living in the group home (#1, #2, #3, #4, #5, #6, #7 and #8), the facility failed to ensure the clients were involved in serving themselves and clean up after meals.</p> <p>Findings include:</p> <p>An observation was conducted at the group home on 11/13/12 from 5:00 PM to 6:25 PM. At 5:09 PM, staff #10 poured client #8's milk after client #8 indicated he did not want to spill it. At 5:31 PM, staff #10 served client #2 a second serving of chili. At 5:35 PM, client #6 was served Carnation Instant Breakfast by staff #10. At 5:41 PM, client #2 was given Carnation Instant Breakfast by staff #10. At 6:02 PM, client #1 stopped washing dishes. Staff #9 and #11 then washed the remainder of the dishes while clients #2 and #4 were in the same area. The staff did not prompt the clients to assist; this affected clients #1, #2, #3, #4, #5, #6, #7 and #8.</p> <p>An observation was conducted at the group home on 11/14/12 from 5:56 AM to 8:20 AM. At 7:15 AM, staff #10</p>	W0488	<p>W 488 Dining Areas and Service</p> <p>The facility must assure that each client eats in a manner consistent with his or her developmental level.</p> <p>1. What corrective action will be accomplished?</p> <ul style="list-style-type: none"> · Staff will be retrained on ensuring active treatment and the family style dining process during meals during their team meeting on 12-19-12. · Programming will be put in place for Clients #1, #2, #3, #4, #5, #6, #7, and #8 to increase their independence in serving themselves. · Programming will be put in place for Clients #2, #6 and #8 to increase their independence in preparing their own drinks. · Programming will be put in place for Clients #1, #2, #3, #4, #5, #6, #7 and #8 to increase their participating in household responsibilities such as the dinner clean-up process. 	12/19/2012			

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	<p>served client #3 eggs and beans. At 7:19 AM, client #3 asked staff #10 to cut up her burrito. Staff #10 cut up client #3's burrito without providing training to client #3 on how to do it herself. At 7:43 AM, client #2 was given a spoon to stir his drink by staff #1. Client #2 was not prompted to get his own spoon. At 8:01 AM, staff #5 poured client #6 a cup of coffee without prompting client #6 to assist. At 8:03 AM, staff #5 prepared instant hot chocolate for client #2. Client #2 was standing next to her while she prepared the hot chocolate and was not prompted to assist her. Staff #5 stated to client #2, "I'm getting your hot chocolate." Staff #5 then stirred the hot chocolate and poured it into client #2's cup.</p> <p>An interview was conducted with staff #1 on 11/14/12 at 10:35 AM. Staff #1 indicated the staff should not be washing dishes while the clients were in the home and able to assist. Staff #1 indicated all clients except client #4 should be serving themselves. Staff #1 indicated client #4 had a plan to not serve herself due to non-compliance with her diabetic diet. Staff #1 indicated client #4 was excluded from family style dining due to hoarding and stealing food.</p> <p>9-3-8(a)</p>		<p>2. How will we 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"> · All residents have the potential to be affected by the same deficient practice. · Staff will be retrained on ensuring active treatment and the family style dining process during meals during their team meeting on 12-19-12. · The residents IPOP assessments will be reviewed and updated as their needs change. · Programming will be implemented based on the residents assessments and as their needs change. <p>1.What measures will be put into place or what systemic changes will be made to ensure that the deficient practice does not recur:</p> <ul style="list-style-type: none"> · Staff will be retrained on ensuring active treatment and the family style dining process during meals during their team meeting on 12-19-12. 		

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