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| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 15G596 | X2) MULTIPLE CONSTRUCTION A. BUILDING <u>00</u> B. WING _____ | X3) DATE SURVEY COMPLETED 02/13/2015 |
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| NAME OF PROVIDER OR SUPPLIER REHABILITATION CENTER DEVELOPMENTAL SERVICES | STREET ADDRESS, CITY, STATE, ZIP CODE 1426 S ALVORD LN EVANSVILLE, IN 47714 |
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| W 000 Bldg. 00 | <p>This visit was for a fundamental recertification and state licensure survey,</p> <p>Survey dates: February 9, 10, 11, 12 and 13, 2015.</p> <p>Facility Number: 001110 Provider Number: 15G596 AIM Numbers: 100240090</p> <p>Surveyor: Glenn David, RN</p> <p>These deficiencies also reflect state findings in accordance with 460 IAC 9.</p> <p>Quality review completed February 23, 2015 by Dotty Walton, QIDP.</p> | W 000 | | |
| W 383 | 483.460(1)(2) | | | |

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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| Bldg. 00 | <p>DRUG STORAGE AND RECORDKEEPING Only authorized persons may have access to the keys to the drug storage area. Based on observation and interview for 4 of 4 sampled clients (clients #1, #2, #3, and #4), and 4 additional clients (clients #5, #6, #7, and #8), the facility failed to keep the keys to the medication cabinet secured.</p> <p>Findings include:</p> <p>During observation at the group home on the morning of 2/10/15 between 5:10 AM and 7:30 AM, staff #3 was observed passing medications to clients in their bedrooms while leaving the lanyard containing the keys to the medication cabinet on the counter in the medication room on 2 separate occasions. Staff #3 was observed leaving the keys to the medication cabinet on the counter in the medication room while passing medications to client #1 at 5:35 AM in his bedroom and again at 5:40 AM while passing medications to client #4 in his bedroom.</p> <p>Interview with the Qualified Intellectual Disabilities Professional (Staff #1) took place on 2/11/15 at 9:30 AM. She stated "staff should keep the keys in their pocket and/or in their possession and not</p> | W 383 | <p>The staff responsible for securing the keys to the medication cabinet will be retrained on medication protocol which is to ensure the keys are always placed in a secured location or kept with the staff member passing meds. Additionally, all staff at Alvord Group Home will be retrained on the medication protocol to ensure the keys are never left on the medication counter. Staff will be instructed on safe areas the keys can be left or that they should remain with the med passer at all times.</p> <p>To prevent future occurrence, the Group Home Manager and Group Home Coordinator will conduct observations several times per week for at least four weeks. The observations will focus on medication administration times with varying staff to ensure the keys are always being secured or kept with the person passing medications. Additionally, management completes routine monthly observations to ensure numerous areas of care/safety related to clients are being completed. This form will be updated to include medication observation and ensuring the medication keys are being handled according to policy. The update to this form will ensure consistent observation and monitoring of</p> | 03/06/2015 | |

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| W 455 | <p>leave the keys on the counter in the medication room while unattended."</p> <p>9-3-6(a)</p> <p>483.470(l)(1) INFECTION CONTROL</p> | | <p>howthe medication keys are handled moving forward. Systemically, all professional staff will be retrained onmedication policy and ensuring the medication keys are kept secured. Professional staff will also be trained onthe revisions to the monthly observation forms and ensuring they are monitoringtheir staff during medication passes to ensure the keys are kept secured at alltimes. All group homes will retraintheir Residential Assistants at their next staff meetings.</p> <p>The Med Training Checklist which is used formedication training already states that the keys should be kept in a safelocation. This form will be updated toinclude more specific details related to keeping the medication keys securedand/or on the medication passer. Theadditional detail will ensure more awareness for staff to ensurecompletion. As an additionalpreventative/systemic measure, the RCDS nurses will be made aware to monitorstaff related to the safe handling of the keys. The RCDS nurses are in the homes on a routine basis (at least two tothree days per week) and can monitor securement of the med keys while they arethere observing medication passes, completing paperwork, etc.</p> | |

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| Bldg. 00 | <p>There must be an active program for the prevention, control, and investigation of infection and communicable diseases.</p> <p>Based on observation and interview for 4 of 4 sampled clients (clients #1, #2, #3, and #4), and 4 additional clients (clients #5, #6, #7, and #8), the facility failed to implement a systemic program for all clients in the group home to wash their hands prior to the dinner meal.</p> <p>Findings include:</p> <p>During evening observation at the group home on 2/10/15 between 3:50 PM and 5:45 PM, staff did not prompt or direct any of the clients to wash their hands prior to the evening meal.</p> <p>Clients were observed helping staff prepare the dinner meal, setting the table, as well as passing food to each other in a family style serving fashion.</p> <p>Staff #4, who was interviewed after the completion of the dinner meal and the only person who was observed having washed his hands prior to eating, stated "all the clients should wash their hands prior to eating. Sometimes I make my clients wash their hands before and after eating."</p> <p>During interview with the</p> | W 455 | <p>All staff at Alvord Group Home will be retrained on Infection Control, namely to ensure client's hands are always washed prior to meals and/or the handling of food.</p> <p>Additionally, staff will be retrained to ensure client's hands are washed throughout the day as needed. Staff will be retrained on how quickly illness can spread if the client's hands, as well as their hands, are not properly washed throughout the day.</p> <p>To ensure correction, the Group Home Manager and Group Home Coordinator will observe staff and clients during meal preparation and the serving of the food to ensure proper hand washing is occurring. These observations will be completed several times per week for at least four weeks. Additionally, management completes routine monthly observations to ensure numerous areas of care/safety related to clients are being completed. This form will be updated to include hand washing and ensuring that infection control is handled according to policy. The update to this form will ensure consistent observation and monitoring of infection control moving forward.</p> <p>Systemically, all professional staff and Residential Assistants will be</p> | 03/06/2015 |

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| | <p>QIDP/Qualified Intellectual Disabilities Professional (staff #1) on 2/11/15 at 12:30 PM, she stated "staff should direct all clients to wash their hands or use the alcohol based hand sanitizer prior to all meals."</p> <p>9-3-7(a)</p> | | <p>retrained on the importance of hand washing to prevent the spread of infection. In general, RCDS staff are diligent about infection control. Infection control is covered thoroughly in an annual mandatory in-service which is conducted by our nurses. Professional staff, as well as the Residential Assistants, must complete the in-service annually. Additionally, new staff complete a twenty-four hour training checklist. Infection control is covered very thoroughly with new hires as well. The trainings are generally effective and will continue.</p> | | |