

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 15G324	X2) MULTIPLE CONSTRUCTION A. BUILDING <u>00</u> B. WING _____	X3) DATE SURVEY COMPLETED 04/11/2016
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NAME OF PROVIDER OR SUPPLIER VOCA CORPORATION OF INDIANA	STREET ADDRESS, CITY, STATE, ZIP CODE 4516 W WALDEN DR MUNCIE, IN 47304
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W 0000 Bldg. 00	<p>This visit was for a fundamental annual recertification and state licensure survey.</p> <p>Dates of Survey: 4/5, 4/6, 4/7, 4/8, and 4/11/2016.</p> <p>Facility Number: 000842 Provider Number: 15G324 AIMS Number: 100243860</p> <p>These federal deficiencies also reflect state findings in accordance with 460 IAC 9. Quality Review of this report completed by #15068 on 4/18/16.</p>	W 0000		
W 0125 Bldg. 00	<p>483.420(a)(3) PROTECTION OF CLIENTS RIGHTS The facility must ensure the rights of all clients. Therefore, the facility must allow and encourage individual clients to exercise their rights as clients of the facility, and as citizens of the United States, including the right to file complaints, and the right to due process.</p> <p>Based on observation, record review, and interview, for 2 of 4 sampled clients (clients #1 and #2) and 1 additional client (client #5), the facility failed to encourage and teach clients #1, #2, and #5 to carry personal identification and a wallet.</p>	W 0125	W125: The facility must ensure the rights of all clients. All clients who have indicated they want to carry their personal ID have been given a copy of their ID to carry. Clients who wish to have a wallet do have wallets. The CFA does not	05/11/2016

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>Findings include:</p> <p>During observations and interviews on 4/6/16 from 3:20pm until 6:00pm and on 4/7/16 from 5:30am until 7:25am, clients #1, #2, and #5 did not have their personal information and/or a wallet. On 4/6/16 from 3:20pm until 5:50pm, clients #2 and #5 were not present in the group home. At 5:50pm, clients #2 and #5 independently walked into the group home with GHS (Group Home Staff) #1 who had left the group home at 5:30pm to pick up clients #2 and #5 from play rehearsal. At 5:50pm, client #2 stated she "did not have an ID (Identification)" with her personal information and did not carry her wallet with her to play rehearsal. Client #2 indicated she attended play rehearsal in the community without group home staff. At 5:50pm, client #5 indicated she did not have an identification with her personal information and did not carry her wallet to the community play rehearsal. Client #5 indicated group home staff did not accompany her to play rehearsal.</p> <p>On 4/7/16 from 8:15am until 9:25am, clients #1, #2, and #5 were observed at Workshop (WKS) #2. At 8:50am, client #2 indicated she did not have a personal ID to carry and did not carry her wallet.</p>		<p>specifically assess whether a consumer could carry a wallet, however under domain IX, subtitled "responsibility" the consumer is assessed as to whether they are able to take care of personal belongings. If a consumer is assessed as "always" able to take care of personal belongings, they have the skill to carry their identification and/or carry a wallet and will be presented with the opportunity to do so. The QIDP will observe in the home 2 times weekly to assure that those who wish to carry personal IDs/wallets are doing so.</p>		

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	<p>Client #2 indicated she would like to carry her own identification. At 8:55am, client #5 indicated she did not have a personal ID to carry. At 8:55am, client #1 indicated she did not have her personal ID to carry and did not carry a wallet. Client #1 indicated she would like to carry her personal ID.</p> <p>The QIDP (Qualified Intellectual Disabilities Professional) was interviewed on 4/11/16 at 5:14pm. The QIDP indicated there was no evidence the clients had personal identifications and/or wallets. The QIDP stated clients #1, #2, and #5 "now" had their personal identifications.</p> <p>On 4/8/16 at 9:55am, client #1's 5/2015 CFA (Comprehensive Functional Assessment), 5/8/15 Lifestyle Plan, and 5/8/15 ISP (Individual Support Plan) were reviewed and did not indicate whether client #1 had the skill to carry her identification and did not assess whether she could carry a wallet.</p> <p>On 4/8/16 at 10:45am, client #2's 6/2015 CFA (Comprehensive Functional Assessment), 6/2015 Lifestyle Plan, and 6/19/15 ISP (Individual Support Plan) were reviewed and did not indicate whether client #2 had the skill to carry her identification and did not assess</p>			

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W 0210 Bldg. 00	<p>whether she could carry a wallet.</p> <p>9-3-2(a)</p> <p>483.440(c)(3) INDIVIDUAL PROGRAM PLAN Within 30 days after admission, the interdisciplinary team must perform accurate assessments or reassessments as needed to supplement the preliminary evaluation conducted prior to admission. Based on observation, record review, and interview, for 1 of 4 sampled clients (client #4), the facility failed to ensure client #4's Speech Therapy assessment was completed.</p> <p>Findings include:</p> <p>During observations and interviews at the group home on 4/6/16 from 3:20pm until 6:00pm and on 4/7/16 from 5:30am until 7:25am, client #4 was not taught and/or encouraged to use a communication book and/or system to make his wants/needs clear to staff/others. During both observation periods client #4 was asked by the group home staff to repeat his requests until staff were able to figure out what client #4 was requesting. During the observation period client #4 became frustrated with the staff failing to identify his request and walked away from staff.</p>	W 0210	<p>W210: Within 30 days after admission the interdisciplinary team must perform accurate assessments or reassessments as needed to supplement the preliminary evaluation conducted prior to admission. A speech therapy assessment has been scheduled for Client 4. Recommendations from the speech therapy assessment will be included in Client 4's plan. A communication system will be developed for client 4 and staff will be trained on utilizing that system. The QIDP will do Active Treatment observations in the home 2 times per week that will include assuring that communication systems are in use. The QIDP will visit the workshop weekly to assure that the communication system is being utilized. The RM will be in the home at least 5 days per week and will document observations 3 times per week assuring that communication systems are in use.</p>	05/11/2016

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	<p>On 4/7/16 from 8:15am until 9:25am, client #4 was not taught and/or encouraged to use a communication book and/or system to make clear his wants/needs. During the observation period staff made requests of client #4 who completed what was requested. Client #4 verbalized in partial unidentified words and staff requested client #4 repeat his request until staff figured out what client #4 wanted. During the observation period client #4 became frustrated with the staff failing to identify his request and walked away from staff.</p> <p>Client #4's record was reviewed on 4/8/16 at 9:00am. Client #4's 2/5/16 ISP (Individual Support Plan) and 2/5/16 Lifestyle Plan both indicated client #4 "has a limited amount of verbal skills and is hard to understand when he speaks. He will sometimes communicate inappropriately by using physical aggression, verbal aggression, self injurious behavior, being non compliant, and talking to himself." Client #4's plans indicated goals/objectives to sign the reason of his targeted medication and sign the last four numbers of his phone number. Client #4's plans indicated "What are the barriers for [client #4]... [Client #4's] inability to express his frustration more socially appropriately.</p>			

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W 0436 Bldg. 00	<p>Learning to use his communication book thoroughly. Learning more independence (sic)." No Speech Therapy assessment was available for review.</p> <p>The QIDP (Qualified Intellectual Disabilities Professional) was interviewed on 4/11/16 at 5:14pm. The QIDP indicated client #4 did not have a Speech Therapy assessment available for use. The QIDP stated client #4 had a speech deficit and was "hard to understand." The QIDP indicated client #4 had behaviors related to his limited speech and communication needs after client #4 becomes frustrated.</p> <p>9-3-4(a)</p> <p>483.470(g)(2) SPACE AND EQUIPMENT The facility must furnish, maintain in good repair, and teach clients to use and to make informed choices about the use of dentures, eyeglasses, hearing and other communications aids, braces, and other devices identified by the interdisciplinary team as needed by the client. Based on observation, record review, and interview, for 2 of 4 sampled clients (clients #3 and #4) with adaptive equipment, the facility failed to teach and encourage client #3 to wear his prescribed orthopedic shoes and leg brace and failed to teach and have available</p>	W 0436	W436: The facility must furnish, maintain in good repair, and teach clients to use and to make informed choices about the use of dentures, eyeglasses, hearing and other communications aids, braces, and other devices identified by the	05/11/2016

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	<p>client #4's communication book/system when opportunities existed.</p> <p>Findings include:</p> <p>1. On 4/6/16 from 3:25pm until 6:00pm, client #3 wore a leg brace the length of his leg on his left leg to walk independently.</p> <p>On 4/7/16 from 5:30am until 7:20am, client #3 walked throughout the group home dressed in his pajamas, wore house shoes, and did not wear his prescribed full length leg brace to walk. During the observation period client #3 walked throughout the group home, up/down ramps and steps inside the home to access the laundry/bathroom areas, helped to prepare breakfast in the kitchen, poured and drank tea, walked outside on the gravel driveway and cement porch to smoke twice, pulled/dragged his right leg behind him a half step as he walked, and did not wear his orthopedic prescribed shoes or his left leg brace. During the observation period client #3 was not taught or encouraged to wear his prescribed shoes and left full length leg brace.</p> <p>Client #3's record was reviewed on 4/8/16 at 11:15am. Client #3's 8/14/15 Lifestyle Plan and 8/14/15 ISP</p>		<p>interdisciplinary team as needed by the client. All staff have been retrained on encouraging/prompting client 3 to put on his brace and prescribed shoes when he gets up in the morning. A speech therapy assessment has been scheduled for Client 4. Recommendations from the speech therapy assessment will be included in Client 4's plan. A communication system will be developed for client 4 and staff will be trained on utilizing that system. The QIDP will do Active Treatment observations in the home 2 times per week that will include assuring that communication systems are in use and staff are encouraging client 3 to wear his brace and shoes. The QIDP will visit the workshop weekly to assure that the communication system is being utilized. The RM will be in the home at least 5 days per week and will document observations 3 times per week assuring that communication systems are in use and that client 3 is encouraged wear his brace and prescribed shoes as soon as he gets up in the morning.</p>	

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	<p>(Individual Support Plan) indicated client #3's diagnosis included, but was not limited to: CP (Cerebral Palsy). Client #3's plans indicated a goal/objective to "improve adaptive equipment skills" and "will walk with his right foot in the proper position independently...wears a new type of brace on his left foot." Client #3's plans and 8/18/15 "Physician's Visit" indicated client #3 wore a full length left leg brace to walk during waking hours.</p> <p>The QIDP (Qualified Intellectual Disabilities Professional) was interviewed on 4/11/16 at 5:14pm. The QIDP indicated client #3 did not wear his left leg brace and orthopedic shoes the morning of 4/7/16 when he walked throughout the group home and walked outside to smoke. The QIDP indicated the facility staff should have taught and encouraged client #3 to wear his equipment before walking.</p> <p>2. During observations and interviews at the group home on 4/6/16 from 3:20pm until 6:00pm and on 4/7/16 from 5:30am until 7:25am, client #4 was not taught and/or encouraged to use a communication book and/or system to make his wants/needs clear to staff/others. During both observation periods client #4 was asked by the group</p>			

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	<p>home staff to repeat his requests until staff were able to figure out what client #4 was requesting. During the observation period client #4 became frustrated with the staff failing to identify his request and walked away from staff.</p> <p>On 4/7/16 from 8:15am until 9:25am, client #4 was not taught and/or encouraged to use a communication book and/or system to make his want/needs clear to staff/others. During the observation period staff made requests of client #4 who completed what was requested. Client #4 verbalized in partial unidentified words and staff requested client #4 to repeat his request until staff figured out what client #4 wanted. During the observation period client #4 became frustrated with the staff failing to identify his request and walked away from staff.</p> <p>Client #4's record was reviewed on 4/8/16 at 9:00am. Client #4's 2/5/16 ISP (Individual Support Plan) and 2/5/16 Lifestyle Plan both indicated client #4 "has a limited amount of verbal skills and is hard to understand when he speaks. He will sometimes communicate inappropriately by using physical aggression, verbal aggression, self injurious behavior, being non compliant, and talking to himself." Client #4's plans</p>			

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	<p>indicated goals/objectives to sign the reason of his targeted medication and sign the last four numbers of his phone number. Client #4's plans indicated "What are the barriers for [client #4]... [Client #4's] inability to express his frustration more socially appropriately. Learning to use his communication book thoroughly. Learning more independence (sic)."</p> <p>The QIDP (Qualified Intellectual Disabilities Professional) was interviewed on 4/11/16 at 5:14pm. The QIDP indicated client #4 did not use a communication book and/or system to communicate his wants/needs and should have had it available for use.</p> <p>9-3-7(a)</p>				