

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 15G098	X2) MULTIPLE CONSTRUCTION A. BUILDING 00 B. WING _____	X3) DATE SURVEY COMPLETED 09/23/2011
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NAME OF PROVIDER OR SUPPLIER COMMUNITY ALTERNATIVES SW IN	STREET ADDRESS, CITY, STATE, ZIP CODE 10707 BERNADETTE DRIVE EVANSVILLE, IN47725
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W0000	<p>This visit was for an annual fundamental recertification and state licensure survey.</p> <p>Survey Dates: September 12, 13, 14, 16 and 23, 2011</p> <p>Facility Number: 000637 Provider Number: 15G098 Aim Number: 100234000</p> <p>Surveyor: Jo Anna Scott, Medical Surveyor III</p> <p>This deficiency also reflects state findings in accordance with 460 IAC 9. Quality Review completed 10/5/11 by Ruth Shackelford, Medical Surveyor III.</p>	W0000		
W0227	<p>The individual program plan states the specific objectives necessary to meet the client's needs, as identified by the comprehensive assessment required by paragraph (c)(3) of this section.</p> <p>Based on record review and interview for 2 of 4 sampled clients (clients #2 and #3), the facility failed to incorporate recommendations made in the Speech and Language Evaluation into the clients' Individual Support Plans.</p>	W0227	<p>Plan of Corrections Community Alternatives Southwest-IN 10707 Bernadette Dr. Evansville, IN 47725</p> <p>Facility Number: 000637 Provider Number: 15G098</p>	10/28/2011

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> <ol style="list-style-type: none"> 1. The record review for client #2 was conducted on 9/14/11 at 12:43 PM. The Individual Support Plan (ISP) dated 5/16/11 indicated client #2 had the following formal training goals: <ol style="list-style-type: none"> 1. Participate in a group activity for 15 minutes. 2. Will Pass her PM medication independently. 3. Will go for a walk around the neighborhood with her peers and staff. 4. Will load the dishwasher one time per week independently. 5. Will make a purchase of needed items 2 times a month independently. 6. Will discuss concerns independently. 7. Will make a phone call to a family member independently. 8. Will brush her teeth 2 times daily independently. 9. Will wash thoroughly independently. 10. Will state the importance of wiping after using the bathroom independently. 11. Will state what to do if someone touches her inappropriately at work, home, or while in the community. <p>The Speech and Language Evaluation for client #2 was dated 3/21/11 and indicated</p>		<p>AIMS Number: 100234000</p> <p>W227 – The individual program plan states the specific needs, as identified by the comprehensive assessment required by paragraph (c) (3) of this section.</p> <p>In order to correct the deficiency with W227:</p> <ul style="list-style-type: none"> - Program Coordinator will be retrained regarding job responsibilities and duties specifically addressing appropriate training areas. - For Client's #2 & #3, the Program Coordinator will update the clients Individual Support Plan (ISP) to include goals related to speech & language recommendations. - Staff responsible for implementation of Client's #2 & #3 individual support plan will be trained regarding this objective. - The Program Coordinator shall monitor through daily observations in the home to assure that program plans for all clients in the home are being implemented as written. <p>Persons Responsible: Program Coordinator</p> <p>Completion Date: 10/28/2011</p>		

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	<p>the following recommendations: "It is recommended that [client #2] receive assistance in the following areas so that she might become a more effective communicator in her environment:</p> <ol style="list-style-type: none"> 1. "[Client #2] needs to work on articulating polysyllabic words. 2. She needs to talk about pictures, her day, etc., deliberately speaking slowly and clearly. 3. She needs to practice greeting others. 4. She needs to learn her address. 5. She can help with grocery shopping while using pictures. 6. She can use a picture menu to order in restaurants. 7. She could learn the months of the year." <p>2. The record review for client #3 was conducted on 9/14/11 at 11:23 AM. The ISP dated 7/26/11 indicated client #3 had the following formal training goals:</p> <ol style="list-style-type: none"> 1. States the reason she takes Paxil. 2. Makes a list of needed items to purchase 2 times a month. 3. Will fill out a request for money. 4. Will state 3 positive things that happened during the day. 5. Will prepare a side dish. 6. Will complete her daily chore. 7. Will brush her teeth 2 times daily. 8. Will choose a healthy snack to eat. 			

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	<p>9. Will exercise for 10 minutes.</p> <p>10. Will take her hearing aids out and put them away.</p> <p>11. Will participate in group activity.</p> <p>12. Will inform staff she is in pain and will request a PRN (as needed) pain medication prescribed by her family doctor.</p> <p>The Speech and Language Evaluation for client #3 was dated 8/1/11 and indicated the following: "It is recommended that [client #3] receive assistance in the following areas so that she might become a more effective communicator.</p> <p>1. She asked to go to the library so that she could borrow movies and magazines.</p> <p>2. Because of her difficulties with hearing, [client #3] needs to make maximum use of visual cues. As often as possible, she needs to be able to see the speakers' lips.</p> <p>3. [Client #3] could help construct a grocery list.</p> <p>4. She needs to learn her own phone number.</p> <p>5. She could use more practice with money skills."</p> <p>Interview with staff #1, Program Coordinator, on 9/16/11 at 1:30 PM indicated the recommendations made for clients #2 and #3 should have been</p>			

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	addressed in their ISP training goals. 9-3-4(a)				