

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 15G266	X2) MULTIPLE CONSTRUCTION A. BUILDING 00 B. WING _____	X3) DATE SURVEY COMPLETED 10/20/2011
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NAME OF PROVIDER OR SUPPLIER TRANSITIONAL SERVICES SUB LLC	STREET ADDRESS, CITY, STATE, ZIP CODE 2840 JOHN ST NEW HARMONY, IN47631
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W0000	<p>This visit was for a recertification and state licensure survey. This visit was included the investigation of complaint #IN00098253 and complaint #IN00096235.</p> <p>Complaint #IN00098253: Substantiated, federal/state deficiency related to the allegation(s) is cited at W198.</p> <p>Complaint # IN00096235- Substantiated, federal/state deficiencies related to the allegation(s) are cited at W122, W149 and W157.</p> <p>Dates of Survey: 10/5, 10/6, 10/11, 10/12, 10/13 and 10/20/11</p> <p>Facility Number: 000786 Provider Number: 15G266 AIM Number: 100248990</p> <p>Surveyor: Jenny Ridaao, Medical Surveyor III</p> <p>These deficiencies also reflect state findings in accordance with 460 IAC 9. Quality Review completed 11/7/11 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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W0122	<p>The facility must ensure that specific client protections requirements are met.</p> <p>Based on observation, interview, and record review for 1 of 4 sampled clients (A), the facility failed to meet the Condition of Participation: Client Protections. The facility failed to implement written policy and procedures to prevent neglect of the client in regards to his elopement.</p> <p>Findings include:</p> <p>The facility neglected to implement written policy/procedures to prevent the neglect of the client in regards to client A's elopement. Please see W149.</p> <p>The facility neglected to ensure sufficient corrective action was put in place to address the client A's elopement incidents. Please see W157.</p> <p>9-3-2(a)</p> <p>This federal tag relates to complaint #IN00096235.</p>	W0122	<p>Indiana Mentor/ TSI will ensure appropriate interventions are in place for the elopement behavior of Client A. We have been providing extra staffing in the home to keep client in line of sight since the beginning of October to ensure Client A's safety. An Annual/ IDT meeting was held on 11/14/11 with Client A to put in place 1 on 1 line of sight staffing during certain hours/ locations and to develop programming to assist Client A with his elopement behavior. The Behavior Specialist developed a new BDP on 11/15/11 to include all behavior interventions added by the IDT team. The Program Director completed new annual assessments and developed a new ISP and RMAP to also include these IDT interventions. All plans were approved by the HRC committee on 11/15/11. Staff were trained on the team recommendations including the new goal, BDP, ISP and Risk Management Assessment Plan (RMAP) on 11/15/11. Any recommendations for behavior modification will be reported to the Behavior Specialist to be</p>	11/21/2011

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W0149	The facility must develop and implement written policies and procedures that prohibit mistreatment, neglect or abuse of the client. Based on record review and interview for 1 of 4 sampled clients (A), the facility neglected to implement written policy/procedures to prevent the neglect of the client in regards to client A eloping	W0149	added to Client A's plans as needed. At the Annual/ IDT meeting on 11/14/11, it was also decided that alternate placement would be sought for Client A to further ensure his safety. Client A will be visiting a group home with Indiana Mentor in Lafayette starting the afternoon of 11/21/11. The family also tentatively has a visit set up with another provider at one of their group homes starting on 11/28/11. Program Director will train QMRP from the other locations on the revised plans so they can ensure proper training of their direct care staff. After these visits, Client A and his family will decide which group home they feel can best ensure Client A's safety in regards to his elopement behavior. Home Manager or Program Director will review behavior data tracking weekly. An administrative staff will complete various observations during various shifts to ensure current plans are being followed. Responsible Party: Home Manager, Program Director, Area Director Indiana Mentor/ TSI will ensure appropriate interventions are in place for the elopement behavior of Client A. We have been providing extra staffing in the home to keep client in line of sight since the beginning of October to	11/21/2011

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	<p>from the home.</p> <p>Findings include:</p> <p>The facility records were reviewed on 10/5/11 at 1:00 PM. The facility's Bureau of Developmental Disabilities Services (BDDS) records indicated:</p> <p>__On 12/30/10 "Staff on duty attending to another individual in the home. [Client A] left the home and went outside. Staff coming on duty was driving to the home and saw [client A] on the road beside the group home. They stopped the car and [Client A] got in and went back to the home with staff. Staff asked [client A] where he was going. [Client A] replied that he was just walking."</p> <p>Follow up to the 12/30/10 incident " IDT met (Interdisciplinary Team) on 12/30/10. [Client A] was only gone from the home for 1-2 minutes. Team agrees that the recent issue with elopement are (sic) not something that needs to be added to his behavior plan as of yet, we feel it is linked more with boredom from staying home all day. [Client A] should be starting at the workshop within the next week. Team also agrees that [client A] will not be in line of sight. We will continue to keep him on 15 minute checks at all times."</p>		<p>ensure Client A's safety. An Annual/ IDT meeting was held on 11/14/11 with Client A to put in place 1 on 1 line of sight staffing during certain hours/ locations and to develop programming to assist Client A with his elopement behavior. The Behavior Specialist developed a new BDP on 11/15/11 to include all behavior interventions added by the IDT team. The Program Director completed new annual assessments and developed a new ISP and RMAP to also include these IDT interventions. All plans were approved by the HRC committee on 11/15/11. Staff were trained on the team recommendations including the new goal, BDP, ISP and Risk Management Assessment Plan (RMAP) on 11/15/11. Any recommendations for behavior modification will be reported to the Behavior Specialist to be added to Client A's plans as needed. At the Annual/ IDT meeting on 11/14/11, it was also decided that alternate placement would be sought for Client A to further ensure his safety. Client A will be visiting a group home with Indiana Mentor in Lafayette starting the afternoon of 11/21/11. The family also tentatively has a visit set up with another provider at one of their group homes starting on 11/28/11. Program Director will train QMRP from the other locations on the revised plans so</p>				

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	<p>_on 1/29/11 "[Client A] is on 15 minute checks. Staff checked on [client A] at 9:25 AM and he was in his room. Staff checked on [client A] again at 9:30 AM and he was no longer in his room. Staff checked the home and did not locate him. Staff went out the front door and saw him walking down the gravel road in front of the house. Staff called out to [client A] and he acknowledged her. He continued walking. The only time [client A] was out of sight of staff is when he walked past a house and staff's view was blocked by the house. Staff called for [client A] again and he turned around and came back to the group home. [Client A] was only out of staff's sight for about 1 minute when staff's view was blocked by another house."</p> <p>Follow up to the 1/29/11 incident "IDT met on 1/31/11 to discuss this incident and it was determined that [client A] left the home through his bedroom window. [Client A] was put on line of sight when in common areas and alarms were installed on his window so that staff are aware if he attempts to elope through the window again. Team will continue to monitor."</p> <p>_on 2/13/11 "[Client A] left the group home without telling staff. Staff checked on [client A] at 11 AM and he was in his</p>		<p>they can ensure proper training of their direct care staff. After these visits, Client A and his family will decide which group home they feel can best ensure Client A's safety in regards to his elopement behavior. Home Manager or Program Director will review behavior data tracking weekly. An administrative staff will complete various observations during various shifts to ensure current plans are being followed. Responsible Party: Home Manager, Program Director, Area Director</p>	

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	<p>room. At 11:15 AM staff checked on him again and he was not in his room. Staff searched the house and did not find him. Staff went outside and saw [client A] talking with the neighbor. Staff called for [client A] and he came back home and went inside. Staff asked [client A] why he left and he said he just wanted to talk to the neighbor. [Client A] is on 15 minute checks and there are alarms on all the door (sic) in the home. After investigation, it appears as if [client A] left out the front door at the same time another housemate was going out the door to smoke; therefore the alarm went off simultaneously. Team will meet discuss (sic) this incident further."</p> <p>_ Follow up to the 2/13/11 incident "IDT met on 2/15/11. [Client A] already has a skill to have the option to participate in walk periodically throughout the week, which he refuses to do. Team believes that once the weather gets warmer, he will participate in this since he does not like cold weather. [Client A] also has met with his psychiatrist and team is working on a medication regimen to help [client A] with his behaviors. Though [client A] is on 15 minute checks, team has also agreed that any time a door alarm sounds; even if he was just checked on in his room, he is to be immediately checked on again."</p>				

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	<p>_on 3/8/11 "[Client A] left the group home without notifying staff. Staff saw him walk out the front door and followed him. Once outside, staff could not see [client A] because it was dark. Staff got in the van and found [client A] at the neighbor's house. Staff asked [client A] to come back to the home and he did. Investigation underway."</p> <p>_Follow up to the 3/8/11 incident on 3/10/11 indicated "Through the investigation, it was determined that [client A] was only out of staff supervision for 2 minutes at the most because it was dark; however, they could still hear him laughing. While one staff kept him in sight, another got in the van to get him since he was heading towards an apartment complex near the home. [Client A] got in the van and came back home with staff without a problem. [Client A's] behavior plan addresses elopement and staff will continue to follow his plan and monitor. A review of his plan will be done by his behavior specialist next week." "[Client A's] behavior specialist came for a visit on 3/22/11. She reviewed [client A's] current behavior plan and spoke with [client A] regarding his elopement. His plan remains appropriate in addressing his target behaviors. [Client A] is also in line</p>			

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	<p>of sight when in the common areas and on 15 minute checks when in his bedroom and bathroom. Staff will continue to monitor and follow the behavior plan accordingly."</p> <p>_[Client A] left the group home on 4/12/11. When staff followed him out the door he began running. Staff got in their vehicle to follow [client A]. While [client A] was running from the house, he crossed over into a neighbor's yard. This neighbor called the police. The police showed up at the group home. Staff explained what happened to the officer and the officer left. Staff will continue to follow [client A's] behavior plan which addresses elopement."</p> <p>_ Follow up to the 4/12/11 incident on 4/22/11 indicated "[Client A] seems to elope when he hasn't been on a home visit to see his mother for awhile. A home visit is being scheduled for [client A] to go visit his mother. [Client A] has elopement in his plan. The alarms on all doors at the group home remain and he will remain on 15 minute checks."</p> <p>_[Client A] eloped from the group home at 4:45 PM on 4/20/11. Staff had checked on him and he was in the shower. Within 10 minutes of checking on him, staff heard the door alarm sound. One staff</p>				

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	<p>went to the front door and one staff went to the back door and did not see [client A] anywhere. They then searched the house and did not find him. After 5 minutes of not finding him staff were instructed by the PD to contact 911. Staff checked with the neighbor that [client A] knows and this neighbor had not seen him. Another neighbor said they had seen [client A] and told the staff what direction they had seen him walking towards. Staff found [client A] and he got in the car without incident and went back to the group home. Door alarms are in place to alert staff if someone leaves the group home. [Client A] has elopement in his behavior plan and he is on 15 minute checks."</p> <p>_ Follow up to the 4/20/11 incident on 5/2/11 indicated "[Client A] has elopement in his plan and the door alarms will remain in place if he leaves the home unattended. [Client A] is also on 15 minute checks. Team will meet to discuss this incident with [client A's] Behavior specialist for further review."</p> <p>_6/23/11 [Client A] was on an outing with the group to pick up another client. While they were leading the other clients from the car to the van [client A] took off without telling anyone. They immediately began to search the area for [client A] and then he appeared coming out of [Name of</p>			

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	<p>store] with peanuts and beef jerky and a receipt for his purchase. It was explained to [client A] that he should tell staff before doing this. An IDT meeting will be held to discuss community access and alone time for [client A] since he likes to go into stores."</p> <p>_ Follow up for the 6/23/11 incident on 6/26/11 indicated "Up till now [client A] hasn't had any alone time in the community due to his stealing and elopement issues. The IDT decided that since [client A] was so used to being able to do whatever he wanted at home that it is time to slowly start introducing his community access. We plan to do this by giving him more freedom inside smaller stores such as [names of stores]. This way staff can still closely monitor him and if stealing isn't an issue then he can have more freedom down the road. It was also discussed that it probably isn't a good idea to take him shopping to those places unless he has money to spend because that is when he is most likely to steal. The team will continue to monitor this and will request changes to his behavior plan if needed."</p> <p>_ "[Client A] eloped from the group home on 8/9/11. Staff immediately began a search of the home and property. [Client A] was not in sight. Staff got in the van</p>				

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	<p>and drove around near the group home and located [client A] standing by the side of the road. He got in the car and returned back home without further incident. [Client A] is back home and is doing well."</p> <p>_ Follow up to the 8/9/11 incident on 8/18/11 indicated "Elopement is addressed in [client A's] behavior plan. [Client A] was not at risk for harm to himself or others while he was gone. There are alarms on all the doors in the home and [client A's] bedroom window has been adapted to where he cannot fit through it. [Client A] is also documented on 15 minute checks."</p> <p>_ "Area director came across a behavior note today regarding [client A] eloping at 8 AM on the 22nd. [Client A] was on the deck with a housemate when 2 of his peers started having behaviors. While staff were intervening with the 2 other clients [client A] evidently left the deck and took off walking. Staff found [client A] walking up the road to the [name] grounds. When asked to get in the van to go to workshop, [client A] did so. An IDT will be held to discuss [client A's] elopement. When he lived at home he was used to just getting up and taking off and going wherever he wanted to go. [Client A] is never resistive to going with</p>				

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	<p>staff so it is believed he just likes to walk and when he gets it in his mind to go somewhere, he goes. Staff have been trying to prompt him and remind him that if he ever wants to walk staff will go with him."</p> <p>_On 8/25/11 "[Client A] was noticed missing from his workstation at 1:35 PM. Day program staff searched the building and grounds and then assigned staff members to search for [client A] by vehicles. At approximately 1:41 PM, [client A] was located walking south on Main street approximately .7 miles from the day program. [Client A] offered no resistance, got in the vehicle and returned to the Day Program. Day Program will continue to keep two doors in the Production Area secured by locking them. Staff will observe other exits which cannot be locked due to panic bars. Day Program will implement the elopement policy and procedure if a consumer does elope."</p> <p>_Follow up to the 8/25/11 incident on 9/2/11 indicated "day program staff will continue to implement they elopement procedure if he elopes. The case manager at the Day Program will also contact the home manager and PD to inform them immediatly of the incident. Workshop will keep the 2 doors in the production</p>				

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	<p>area secured as clients are not permitted use of this door if at all possible. [Client A] reports that he is doing well at this time."</p> <p>_"At approximately 7:50 PM on 10/7/11, staff saw [client A] in the living room sitting on the couch. At 8 PM, staff discovered that [client A] was missing. Staff searched the home and property and could not locate [client A]. Staff got in personal vehicle to search near the home and staff still could not locate [client A]. Another staff got into the van to search the opposite direction of the other staff. [Client A] was located by staff searching in his vehicle at 9 PM walking down a gravel road across the street from the group home. When asked, [client A] stated that he was just out walking, getting exercise. [Client A] got in the car with staff and returned to the home without issue. [Client A] is safe and doing well at this time. There are alarms on all doors in the home and [client A's] bedroom window was adapted and will not open enough for him to fit through it. [Client A] is currently on documented 15 minute checks. [Client A] will be in line of sight of staff at all times unless in private areas. If at any time staff are unable to locate [client A], they are to initiate the following procedure listed in his behavior plan: 1. search the home and</p>				

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	<p>property for 5 minutes while calling his name. 2. If after 5 minutes he is not located, contact on-call pager and report. 3. If after 5 more minutes he is not located, call 911 to report missing and then contact on-call back. 4. available staff get in vehicle and search near home. 5. await further instruction from on-call or PD."</p> <p>Review of the facility's Procedures, Protocol and Information to follow for Incident Reporting dated April 2011 on 10/11/11 at 9:45 AM indicated "Inadequate staff support for an individual including inadequate supervision, with potential for significant harm or injury to an individual."</p> <p>Review of [client A's] 4/1/11 Behavior Management Plan (BMP) on 10/12/11 at 12:05 PM indicated "[Client A] has difficulty making good choices in social settings. [Client A] needs training to help him discuss appropriate matters with others in social settings and to educate him on how to interact with different groups of people and stay safe."</p> <p>Interview with the QMRP (Qualified Mental Retardation Professional) on 10/6/11 at 7:20 AM indicated client A elopes often. The QMRP indicated client A is on 15 minute checks and in line of</p>				

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W0157	<p>sight in common areas. The QMRP stated "He is fast, even with the alarms on he still gets out the door quickly." When asked if client A's Behavior Plan and monitoring was working the QMRP stated, "It worked for awhile, but no. Not anymore, he is just that fast. We have had him on line of sight and then taken him off, but then he elopes again and we have to put him back on...I don't know what else to do for him." When asked if she felt the facility was providing sufficient staffing for the behaviors, the QMRP stated, "No, due to the behaviors and the restrictions that are necessary to make things go the way they should no, not at all."</p> <p>This federal tag relates to complaint #IN00096235.</p> <p>9-3-2(a)</p> <p>If the alleged violation is verified, appropriate corrective action must be taken.</p> <p>Based on record review and interview for 1 of 4 sampled clients (A), the facility neglected to ensure sufficient corrective</p>	W0157	Indiana Mentor/ TSI will ensure appropriate interventions are in place for the elopement behavior of Client A. We have been	11/21/2011	

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	<p>action was put in place to address the client's elopement incidents.</p> <p>Findings include:</p> <p>The facility records were reviewed on 10/5/11 at 1:00 PM. The facility's Bureau of Developmental Disabilities Services (BDDS) records indicated:</p> <p>___ On 12/30/10 "Staff on duty attending to another individual in the home. [Client A] left the home and went outside. Staff coming on duty was driving to the home and saw [client A] on the road beside the group home. They stopped the car and [Client A] got in and went back to the home with staff. Staff asked [client A] where he was going. [Client A] replied that he was just walking."</p> <p>Follow up to the 12/30/10 incident " IDT met (Interdisciplinary Team) on 12/30/10. [Client A] was only gone from the home for 1-2 minutes. Team agrees that the recent issue with elopement are (sic) not something that needs to be added to his behavior plan as of yet, we feel it is linked more with boredom from staying home all day. [Client A] should be starting at the workshop within the next week. Team also agrees that [client A] will not be in line of sight. We will continue to keep him on 15 minute checks at all times."</p>		<p>providing extra staffing in the home to keep client in line of sight since the beginning of October to ensure Client A's safety. An Annual/ IDT meeting was held on 11/14/11 with Client A to put in place 1 on 1 line of sight staffing during certain hours/ locations and to develop programming to assist Client A with his elopement behavior. The Behavior Specialist developed a new BDP on 11/15/11 to include all behavior interventions added by the IDT team. The Program Director completed new annual assessments and developed a new ISP and RMAP to also include these IDT interventions. All plans were approved by the HRC committee on 11/15/11. Staff were trained on the team recommendations including the new goal, BDP, ISP and Risk Management Assessment Plan (RMAP) on 11/15/11. Any recommendations for behavior modification will be reported to the Behavior Specialist to be added to Client A's plans as needed. At the Annual/ IDT meeting on 11/14/11, it was also decided that alternate placement would be sought for Client A to further ensure his safety. Client A will be visiting a group home with Indiana Mentor in Lafayette starting the afternoon of 11/21/11. The family also tentatively has a visit set up with another provider at one of their group homes starting on</p>		

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	<p>_on 1/29/11 "[Client A] is on 15 minute checks. Staff checked on [client A] at 9:25 AM and he was in his room. Staff checked on [client A] again at 9:30 AM and he was no longer in his room. Staff checked the home and did not locate him. Staff went out the front door and saw him walking down the gravel road in front of the house. Staff called out to [client A] and he acknowledged her. He continued walking. The only time [client A] was out of sight of staff is when he walked past a house and staff's view was blocked by the house. Staff called for [client A] again and he turned around and came back to the group home. [Client A] was only out of staff's sight for about 1 minute when staff's view was blocked by another house."</p> <p>Follow up to the 1/29/11 incident "IDT met on 1/31/11 to discuss this incident and it was determined that [client A] left the home through his bedroom window. [Client A] was put on line of sight when in common areas and alarms were installed on his window so that staff are aware if he attempts to elope through the window again. Team will continue to monitor."</p> <p>_on 2/13/11 "[Client A] left the group home without telling staff. Staff checked</p>		<p>11/28/11. Program Director will train QMRP from the other locations on the revised plans so they can ensure proper training of their direct care staff. After these visits, Client A and his family will decide which group home they feel can best ensure Client A's safety in regards to his elopement behavior. Home Manager or Program Director will review behavior data tracking weekly. An administrative staff will complete various observations during various shifts to ensure current plans are being followed. Responsible Party: Home Manager, Program Director, Area Director</p>		

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	<p>on [client A] at 11 AM and he was in his room. At 11:15 AM staff checked on him again and he was not in his room. Staff searched the house and did not find him. Staff went outside and saw [client A] talking with the neighbor. Staff called for [client A] and he came back home and went inside. Staff asked [client A] why he left and he said he just wanted to talk to the neighbor. [Client A] is on 15 minute checks and there are alarms on all the door (sic) in the home. After investigation, it appears as if [client A] left out the front door at the same time another housemate was going out the door to smoke; therefore the alarm went off simultaneously. Team will meet discuss (sic) this incident further."</p> <p>_Follow up to the 2/13/11 incident "IDT met on 2/15/11. [Client A] already has a skill to have the option to participate in walk periodically throughout the week, which he refuses to do. Team believes that once the weather gets warmer, he will participate in this since he does not like cold weather. [Client A] also has met with his psychiatrist and team is working on a medication regimen to help [client A] with his behaviors. Though [client A] is on 15 minute checks, team has also agreed that any time a door alarm sounds; even if he was just checked on in his room, he is to be immediately checked on</p>			

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	<p>again."</p> <p>_on 3/8/11 "[Client A] left the group home without notifying staff. Staff saw him walk out the front door and followed him. Once outside, staff could not see [client A] because it was dark. Staff got in the van and found [client A] at the neighbor's house. Staff asked [client A] to come back to the home and he did. Investigation underway."</p> <p>_Follow up to the 3/8/11 incident on 3/10/11 indicated "Through the investigation, it was determined that [client A] was only out of staff supervision for 2 minutes at the most because it was dark; however, they could still hear him laughing. While one staff kept him in sight, another got in the van to get him since he was heading towards an apartment complex near the home. [Client A] got in the van and came back home with staff without a problem. [Client A's] behavior plan addresses elopement and staff will continue to follow his plan and monitor. A review of his plan will be done by his behavior specialist next week." "[Client A's] behavior specialist came for a visit on 3/22/11. She reviewed [client A's] current behavior plan and spoke with [client A] regarding his elopement. His plan remains appropriate in addressing his</p>			

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	<p>target behaviors. [Client A] is also in line of sight when in the common areas and on 15 minute checks when in his bedroom and bathroom. Staff will continue to monitor and follow the behavior plan accordingly."</p> <p>_"[Client A] left the group home on 4/12/11. When staff followed him out the door he began running. Staff got in their vehicle to follow [client A]. While [client A] was running from the house, he crossed over into a neighbor's yard. This neighbor called the police. The police showed up at the group home. Staff explained what happened to the officer and the officer left. Staff will continue to follow [client A's] behavior plan which addresses elopement."</p> <p>_ Follow up to the 4/12/11 incident on 4/22/11 indicated "[Client A] seems to elope when he hasn't been on a home visit to see his mother for awhile. A home visit is being scheduled for [client A] to go visit his mother. [Client A] has elopement in his plan. The alarms on all doors at the group home remain and he will remain on 15 minute checks."</p> <p>_"[Client A] eloped from the group home at 4:45 PM on 4/20/11. Staff had checked on him and he was in the shower. Within 10 minutes of checking on him, staff</p>				

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	<p>heard the door alarm sound. One staff went to the front door and one staff went to the back door and did not see [client A] anywhere. They then searched the house and did not find him. After 5 minutes of not finding him staff were instructed by the PD to contact 911. Staff checked with the neighbor that [client A] knows and this neighbor had not seen him. Another neighbor said they had seen [client A] and told the staff what direction they had seen him walking towards. Staff found [client A] and he got in the car without incident and went back to the group home. Door alarms are in place to alert staff if someone leaves the group home. [Client A] has elopement in his behavior plan and he is on 15 minute checks."</p> <p>_ Follow up to the 4/20/11 incident on 5/2/11 indicated "[Client A] has elopement in his plan and the door alarms will remain in place if he leaves the home unattended. [Client A] is also on 15 minute checks. Team will meet to discuss this incident with [client A's] Behavior specialist for further review."</p> <p>_6/23/11 [Client A] was on an outing with the group to pick up another client. While they were leading the other clients from the car to the van [client A] took off without telling anyone. They immediately began to search the area for [client A] and</p>			

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	<p>then he appeared coming out of [Name of store] with peanuts and beef jerky and a receipt for his purchase. It was explained to [client A] that he should tell staff before doing this. An IDT meeting will be held to discuss community access and alone time for [client A] since he likes to go into stores."</p> <p>_Follow up for the 6/23/11 incident on 6/26/11 indicated "Up till now [client A] hasn't had any alone time in the community due to his stealing and elopement issues. The IDT decided that since [client A] was so used to being able to do whatever he wanted at home that it is time to slowly start introducing his community access. We plan to do this by giving him more freedom inside smaller stores such as [names of stores]. This way staff can still closely monitor him and if stealing isn't an issue then he can have more freedom down the road. It was also discussed that it probably isn't a good idea to take him shopping to those places unless he has money to spend because that is when he is most likely to steal. The team will continue to monitor this and will request changes to his behavior plan if needed."</p> <p>_"[Client A] eloped from the group home on 8/9/11. Staff immediately began a search of the home and property. [Client</p>			

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	<p>A] was not in sight. Staff got in the van and drove around near the group home and located [client A] standing by the side of the road. He got in the car and returned back home without further incident. [Client A] is back home and is doing well."</p> <p>_ Follow up to the 8/9/11 incident on 8/18/11 indicated "Elopement is addressed in [client A's] behavior plan. [Client A] was not at risk for harm to himself or others while he was gone. There are alarms on all the doors in the home and [client A's] bedroom window has been adapted to where he cannot fit through it. [Client A] is also documented on 15 minute checks."</p> <p>_ "Area director came across a behavior note today regarding [client A] eloping at 8 AM on the 22nd. [Client A] was on the deck with a housemate when 2 of his peers started having behaviors. While staff were intervening with the 2 other clients [client A] evidently left the deck and took off walking. Staff found [client A] walking up the road to the 4-H grounds. When asked to get in the van to go to workshop, [client A] did so. An IDT will be held to discuss [client A's] elopement. When he lived at home he was used to just getting up and taking off and going wherever he wanted to go.</p>			

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	<p>[Client A] is never resistive to going with staff so it is believed he just likes to walk and when he gets it in his mind to go somewhere, he goes. Staff have been trying to prompt him and remind him that if he ever wants to walk staff will go with him."</p> <p>_On 8/25/11 "[Client A] was noticed missing from his workstation at 1:35 PM. Day program staff searched the building and grounds and then assigned staff members to search for [client A] by vehicles. At approximately 1:41 PM, [client A] was located walking south on Main street approximately .7 miles from the day program. [Client A] offered no resistance, got in the vehicle and returned to the Day Program. Day Program will continue to keep two doors in the Production Area secured by locking them. Staff will observe other exits which cannot be locked due to panic bars. Day Program will implement the elopement policy and procedure if a consumer does elope."</p> <p>_Follow up to the 8/25/11 incident on 9/2/11 indicated "day program staff will continue to implement they elopement procedure if he elopes. The case manager at the Day Program will also contact the home manager and PD to inform them immediately of the incident. Workshop</p>			

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	<p>will keep the 2 doors in the production area secured as clients are not permitted use of this door if at all possible. [Client A] reports that he is doing well at this time."</p> <p>"At approximately 7:50 PM on 10/7/11, staff saw [client A] in the living room sitting on the couch. At 8 PM, staff discovered that [client A] was missing. Staff searched the home and property and could not locate [client A]. Staff got in personal vehicle to search near the home and staff still could not locate [client A]. Another staff got into the van to search the opposite direction of the other staff. [Client A] was located by staff searching in his vehicle at 9 PM. walking down a gravel road across the street from the group home. When asked, [client A] stated that he was just out walking, getting exercise. [Client A] got in the car with staff and returned to the home without issue. [Client A] is safe and doing well at this time. There are alarms on all doors in the home and [client A's] bedroom window was adapted and will not open enough for him to fit through it. [Client A] is currently on documented 15 minute checks. [Client A] will be in line of sight of staff at all times unless in private areas. If at any time staff are unable to locate [client A], they are to initiate the following procedure listed in</p>				

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	<p>his behavior plan: 1. search the home and property for 5 minutes while calling his name. 2. If after 5 minutes he is not located, contact on-call pager and report. 3. If after 5 more minutes he is not located, call 911 to report missing and then contact on-call back. 4. available staff get in vehicle and search near home. 5. await further instruction from on-call or PD."</p> <p>Review of client A's 4/1/11 Behavior Management Plan (BMP) on 10/12/11 at 12:05 PM indicated "[Client A] has difficulty making good choices in social settings. [Client A] needs training to help him discuss appropriate matters with others in social settings and to educate him on how to interact with different groups of people and stay safe."</p> <p>Interview with the QMRP (Qualified Mental Retardation Professional) on 10/6/11 at 7:20 AM indicated client A elopes often. The QMRP indicated client A is on 15 minute checks and in line of sight in common areas. The QMRP stated "He is fast, even with the alarms on he still gets out the door quickly." When asked if client A's Behavior Plan and monitoring were working, the QMRP stated, "It worked for awhile, but no. Not anymore, he is just that fast. We have had him on line of sight and then taken him</p>			

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W0198	<p>off, but then he elopes again and we have to put him back on...I don't know what else to do for him." When asked if she felt the facility was providing sufficient staffing for the behaviors, the QMRP stated, "No, due to the behaviors and the restrictions that are necessary to make things go the way they should no, not at all."</p> <p>This federal tag relates to complaint #IN00096235.</p> <p>9-3-2(a)</p> <p>Clients who are admitted by the facility must be in need of and receiving active treatment services.</p> <p>Based on observation, record review and interview for 1 additional client (H), the facility failed to ensure the client was in need of active treatment services.</p> <p>Findings include:</p> <p>During the 10/6/11 observation period between 3:45 PM and 6:35 PM, at the</p>	W0198	An IDT meeting was held on 11/14/11 to discuss a plan for placement regarding Client H. BDDS Service Coordinator (SC) requested new diagnostic evaluation and a new 450B to determine current LOC for the Client H. Client H saw his PCP on 11/18/11 to complete the 450B and this was sent to BDDS SC on 11/18/11. IDEC will be meeting Client H on 11/21/11 to complete	11/21/2011	

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	<p>group home, client H did not require training in regards to active treatment. Client H independently read the dinner menu and washed his hands without prompting from staff. Client H was neatly dressed and groomed for the day. Client H spoke clearly using complete sentences and did not require any redirection and/or instruction from staff. Client H got the bag of frozen chicken out of the freezer. Client H independently prepared the dinner of chicken, mixed vegetables, pasta salad and pineapple. At 5:30 PM dinner was served. Client H sat at the table and served himself food and ate independently. Client H finished eating dinner and independently took his dishes to the kitchen, rinsed them and placed them in the dishwasher.</p> <p>Interview with client H on 10/6/11 at 6:00 PM indicated client H wanted to move. Client H indicated he had good pedestrian safety skills and knew how to get around. Client H indicated he knew what to do in case of an emergency, could cook, clean his room, was independent in bathing, grooming, toothbrushing and knew what medications to take and when to take them. Client H stated "I am higher functioning than the others here."</p> <p>Client H's record was reviewed on 10/20/11 at 10:50 AM. Client H's 6/30/11</p>		<p>the new diagnostic evaluation and will submit this to BDDS SC upon completion. BDDS SC will submit the 450B and the new evaluation to the LOC unit to determine the new LOC for Client H. Once the new LOC is determined, an IDT meeting will be held with BDDS to discuss placement options. An IDT meeting will be held to review his ISP on 12/2/11. Responsible Party: Program Director, Area Director, Social Service Specialist</p>		

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	<p>Individual Program Plan (IPP) indicated client H's diagnosis included, but was not limited to, Mood Disorder, no other symptoms.</p> <p>Client H's 8/24/11 CFA (Comprehensive Functional Assessment) indicated client H was independently able to: use a table knife for cutting or spreading, eat in public, order a complete meal, drink without spilling-holding glass in one hand. Client H's 8/24/11 CFA indicated client H was independent in toileting, washing hands/face with soap and water with no prompting, prepare and complete bathing unaided, applies toothpaste and brushes teeth with up and down motion. Client H's 8/24/11 CFA indicated client H was independent in caring for clothing, wipes/cleans shoes when needed, uses laundromat/washer/dryer without assistance, completely dresses self unaided, completely undresses self unaided, puts on shoes without assistance. Client H's 8/24/11 CFA indicated client H was independent in riding safely in private cars, crossing the street by self, shows awareness of possible dangers (i.e. avoids deep water in pools, uses handrails, does not accept rides from stranger, uses seatbelt). Client H's 8/24/11 CFA indicated client H was independent in using a telephone directory, make telephone call from private telephone,</p>			

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	answer telephone appropriately, takes telephone messages. Client H's 8/24/11 CFA indicated client H was independently able to eat moderately, looks after personal health, deal with simple injuries, knows how/where to obtain a doctors/dentists help, knows own address, asks whether an unfamiliar object is safe to touch or consume. Client H's 8/24/11 CFA indicated client H was independently able to walk alone, walk up/down stairs alone, walk down stairs alternating feet, runs without falling often, hop, skips and jump, catch a ball, throw a ball overhanded, lift cup/glass, grasp with thumb/finger, has effective use of right arm, left arm, right leg and left leg. Client H's 8/24/11 CFA indicated client H was independently able to maintain account with assistance, fill out a deposit and withdrawal slip, save money for a particular purpose, budget meals and spend money with some planning. Client H's 8/24/11 CFA indicated client H was independently able to go to several shops and specify different items, buy own clothing, carry appropriate ID and endorse a check. Client H's 8/24/11 CFA indicated client H was independently able to write understandably and complete letters, uses complex sentences containing "because" or "but", talk about action when describing pictures, understands complex instructions			

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	involving a decision, uses phrases such as "please" and "thank you", be sociable during meal time, talk to others about sports, family, or activities, responds when talked to, reads books/newspapers/ magazines for enjoyment, repeat a story with little or no difficulty. Client H's 8/24/11 CFA indicated client H was independently able to do simple addition, name the days of the week, refer correctly to "morning" and "night", understand difference between day-week, minute-hour, month-year. Client H's 8/24/11 CFA indicated client H was independently able to clean living area well, wash clothing, dry clothing, fold clothing, use washer/dryer correctly, place all eating utensils, as well as napkins, salt, pepper, sugar, in places learned, use microwave correctly to prepare a meal, clear table of breakable dishes/glassware, wash dishes well, makes need neatly, help with household chores, does household tasks routinely, can load/use dishwasher correctly. Client H's 8/24/11 CFA indicated client H was independently able to identify body parts, remain dressed at appropriate times, identify anatomical sexual differences between male and female, afford others personal space, greet others in a socially acceptable manner, understand puberty and body changes, identify emotions associated with sexual behavior, show			

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	<p>respect for others feelings even if different from their own, say "no" to unwanted sex, understand when others say "no" and call for help when bothered.</p> <p>Client H's 6/30/11 Individual Program Plan (IPP) indicated he had the following training objectives:</p> <ul style="list-style-type: none"> -Independently participate in work center outings -Independently count nickels, dimes, quarters, pennies and dollars -Independently bathe himself daily -Independently schedule his own doctor's appointment -independently identify his medication before he takes it -Independently participate in a leisure activity. <p>Interview with the Home Manager (HM) on 10/12/11 at 12:15 PM stated client H is "more high functioning than the others in this home." The HM indicated client H is independent in completing his own laundry, taking out trash, cooking, cleaning up after meals. The HM stated "he likes to help the others, he could do a</p>			

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W0208	<p>lot more things than the rest of them."</p> <p>Interview with staff #2 on 10/13/11 at 11:57 AM indicated client H wanted to move out of the group home. Staff #2 indicated client H was able to cook independently. Staff #2 indicated client H is aware if he has enough money to purchase an item. Staff #2 indicated client H is independently able to read and the phone. Staff #2 stated "[Client H] doesn't belong here, he has been well educated and can do more things independently than the others who live here."</p> <p>Interview with Program Director (PD) on 10/13/11 at 1 PM indicated client H is above the functioning level of the other consumers in the home. The PD indicated client H would be better in a less restrictive environment because he does not require continuous active treatment.</p> <p>This federal tag relates to complaint #IN00098253.</p> <p>9-3-4(a)</p> <p>Participation by other agencies serving the client is encouraged.</p>			

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	<p>Based on observation, interview and record review for 1 of 4 sample clients (A), the facility failed to ensure the day program staff was included in the development of the client's plan.</p> <p>Findings include:</p> <p>Client A's record was reviewed on 10/12/11 at 10 AM. Client A's record indicated a BSP dated 4/1/11. The client's record did not indicate staff from the day program had participated in the development of the client's BSP.</p> <p>Interview with DP (day program) staff #1 on 10/11/11 at 11:20 stated the DP staff had "never" been invited to attend any of client A's program meetings "that I'm aware of." DP staff #1 indicated the day program staff was not included in the development and/or revisions of client A's support plans and/or behavior plans. The DP indicated client A's elopement was an issue. The DP stated client A is "fast and and we must keep an eye on him at all times."</p> <p>Interview with the Qualified Mental Retardation Professional (QMRP) on 10/12/11 at 2 PM indicated the day program should participate in the development of all client's program plans.</p>	W0208	<p>Program Director met with the day program on 11/15/2011 to address issues and concerns for Client A. Client A's Individualized Support Plan and Behavior Development Program were reviewed and updated on 11/15/2011 to reflect the necessary changes. The day program decided on 11/16/11 that they could not provide one on one line of sight for Client A on an on-going basis. Addendum: Therefore, Indiana Mentor/ TSI will send staff to day program with Client A when he is not on therapeutic leave from the group home. The new plans have been provided to the day program provider's QMRP . The Home Manager or Program Director will have monthly meetings with the day program to ensure plans are available, programming is taking place and to address any issues or concerns. Area Director retrained the Program Directors on 11/14/2011 regarding ISP process for annual meetings regarding client/guardian and team participation and distributing copies of new plans to the day program provider once they are updated. Responsible Party: Home Manager, Program Director, Area Director</p>	11/21/2011	

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W0227	<p>9-3-4(a)</p> <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. Based on observation, interview and record review for 1 of 4 sample clients (B), the facility failed to initiate a goal in the ISP (Individual Support Plan) to address recommendations by the Physical Therapist (PT).</p> <p>Findings include:</p> <p>Record review for client B on 10/12/11 at 1 PM indicated client B was to complete PT stretches daily as per recommendations from her physical therapist on 6/15/11. Client B was to complete trunk rotation stretching, trunk flexion-double knee to chest, trunk flexion-posterior pelvic tilt, trunk flexion-partial sit-up, trunk flexion- Cat and Camel, trunk extension-stretching and hip flexion-stretching.</p> <p>Review of Client B's 3/31/11 ISP indicated she had the following goals: -participate in leisure activity 1 time a week -participate in a community outing 3 times a month</p>	W0227	<p>Client B left our group home on 10/25/11 to go visit another Indiana Mentor group home because her family desired Client B live in a group home closer to them. Client B was discharged from our facility on 11/9/11 and admitted to the other group home. Our Program Director trained the QMRP for the other group home on 11/3/11 in regards to the new physical therapy exercise goals so that QMRP could then train her direct care staff. Area Director retrained the Program Directors on 11/14/2011 regarding ISP process for annual meetings and necessary revisions needed throughout the year. Program Directors know to follow up with doctor recommendations and to implement training goals as needed. Discharge summary completed on 11/9/11 discharge. Responsible Party: Program Director</p>	11/21/2011

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W0248	<p>-Identify her Risperdal .5 mg before she takes it -Bathe in the evening -Count money. Client B's 3/31/11 ISP did not contain a goal addressing her recommendations from her PT.</p> <p>Interview with the QMRP (Qualified Mental Retardation Professional) on 10/13/11 at 1:00 PM stated client B's recommended stretches from the physical therapist "should have been add to [client B's] MAR (Medication Administration Record) and a formal goal for her IPP should have been implemented and data collected accordingly."</p> <p>9-3-4(a)</p> <p>A copy of each client's individual plan must be made available to all relevant staff, including staff of other agencies who work with the client, and to the client, parents (if the client is a minor) or legal guardian.</p> <p>Based on observation, interview and record review for 1 of 4 sample clients (A), the facility failed to ensure the day program was provided with the client's updated Behavior Support Plan (BSP).</p> <p>Findings include: Client A's record was reviewed on</p>	W0248	<p>Program Director met with the day program on 11/15/2011 to address issues and concerns for Client A. Client A's Individualized Support Plan and Behavior Development Program were reviewed and updated on 11/15/2011 to reflect the necessary changes. The day program decided on 11/16/11 that they could not provide one on one</p>	11/21/2011

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W0249	<p>10/12/11 at 10 AM. Client A's record indicated a BSP dated 4/1/11.</p> <p>Interview with DP (day program) staff #1 on 10/11/11 at 11:20 AM stated the DP staff had "never" been invited to attend any of client A's program meetings "that I'm aware of." When asked to see client A's BSP, the DP produced a BSP dated 1/31/11. The DP stated "I know he has a more up to date BSP, but have not been provided it...also, we never get the entire BSP, we never get the information on how to help [client A] relax and calm down."</p> <p>Interview with the Qualified Mental Retardation Professional (QMRP) on 10/12/11 at 2 PM indicated she was not aware the client's current BSP had not been shared with the day program.</p> <p>9-3-4(a)</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, interview, and record review for 1 of 4 sampled clients (C), the facility failed to implement a</p>	W0249	<p>line of sight for Client A on an on-going basis therefore Client A has been placed on hold from day program. The new plans have been provided to the day program provider's QMRP . The Home Manager or Program Director will have monthly meetings with the day program to ensure plans are available, programming is taking place and to address any issues or concerns. Area Director retrained the Program Directors on 11/14/2011 regarding ISP process for annual meetings regarding client/guardian and team participation and distributing copies of new plans to the day program provider once they are updated. Responsible Party: Home Manager, Program Director, Area Director</p> <p>The Home Manager received corrective action on 10/10/11 and was required to retake Core A training on 10/11/11 and passed</p>	11/21/2011	

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	<p>client's IPP (Individual Program Plan) regarding medication administration.</p> <p>Findings include:</p> <p>During the 10/6/11 medication administration observation period between 6:15 AM and 7:05 AM, at the group home, client C went to the medication administration room at 6:55 AM. Client C waited as the home manager (HM) popped her medications into a cup. The HM handed the pills to client C and she took them with a glass of orange juice.</p> <p>The HM did not prompt client C to name any of her medications or the dosages.</p> <p>Record review for client C on 10/12/11 at 12:30 PM indicated a goal from her 6/15/11 ISP was to name a medication and the dosage before it was administered.</p> <p>Interview with the Nurse on 10/6/11 at 8 AM indicated client C had a goal to name a medication and the dosage before it was administered. The nurse indicated the goal should be implemented at every medication administration.</p> <p>9-3-4(a)</p>		<p>with a 100%. She was observed by the nurse for proper medication administration during medication pass on 10/13/11. All staff in the home were retrained on 10/20/2011 on proper medication administration procedures and reviewing training objectives with clients during medication passes. Administrative staff completed medication pass observations at various times and with various staff from 10/10/11 to 10/19/11 to ensure staff were following proper medication administration procedures. Responsible Party: Nurse, Home Manager, Program Director</p>		

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W0259	<p>At least annually, the comprehensive functional assessment of each client must be reviewed by the interdisciplinary team for relevancy and updated as needed.</p> <p>Based on record review and interview for 1 of 4 sampled clients (B), the facility failed to complete an annual Comprehensive Functional Assessment (CFA).</p> <p>Findings include:</p> <p>Client B's record was reviewed on 10/12/11 at 1 PM. A CFA could not be located in client B's record.</p> <p>Interview with QMRP (Qualified Mental Retardation Professional) on 10/13/11 at 1 PM indicated a CFA may have been completed by the previous home manager, but it has not been located.</p> <p>9-3-4(a)</p>	W0259	<p>A comprehensive functional assessment was completed within the first 30 days of Client B's admission. Program Director has been unable to locate this assessment. The Program Director was retrained on 11/14/11 regarding completing assessments and ensuring the assessments are available for review anytime they are requested. Program Director was also retrained on keeping a copy of assessments in the office file in case the assessment is not found in the home. Client B was discharged from our facility on 11/9/11 and admitted to the other group home. A discharge summary has been completed for Client B's discharge on 11/9/11. Responsible Staff: Program Director and Area Director</p>	11/21/2011
W0369	<p>The system for drug administration must assure that all drugs, including those that are self-administered, are administered without error.</p> <p>Based on observation, record review and interview for 1 of 27 doses of medication administered, the facility failed to ensure staff administered client H's medication as ordered.</p>	W0369	<p>The Home Manager received corrective action on 10/10/11 and was required to retake Core A training on 10/11/11 and passed with a 100%. She was observed by the nurse for proper medication administration during</p>	11/21/2011

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	<p>Findings include:</p> <p>During the 10/6/11 6 AM medication pass at 6:40 AM, the HM (Home Manager) called client H to the medication administration room. The HM handed client H a bottle of Fluticasone nasal spray. Client H stated "This is not my nose spray; this is [name of client] nose spray. The HM stated, "This is what was in your cubby, please take your nose spray." Client H again stated "This is not my nose spray." The HM stated "[Client H] please take your nose spray." Client H shrugged his shoulders and administered Fluticasone into his left nostril and inhaled. At 6:43 AM the nurse walked into the medication administration room and stated "Why is [client H] using [client C's] nasal spray?"</p> <p>Client H's 10/11 physician's orders were reviewed on 10/6/11 at 8 AM. Client H's 10/11 physician's order indicated client H was to receive Nasonex 50 mcg one spray in each nostril for allergies.</p> <p>Interview with the Nurse on 10/6/11 at 8:05 AM indicated the HM should have checked the medication to the MAR three separate times before administering the medication. The nurse stated "[Client H] knows his medications, she should have listened to him."</p>		<p>medication pass on 10/13/11.All staff in the home were retrained on 10/20/2011 on proper medication administration procedures and reviewing training objectives with clients during medication passes.Administrative staff completed medication pass observations at various times and with various staff from 10/10/11 to 10/19/11 to ensure staff were following proper medication administration procedures. Responsible Party: Nurse, Home Manager, Program Director</p>		

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

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	9-3-6(a)				