

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 15G044	X2) MULTIPLE CONSTRUCTION A. BUILDING 00 B. WING _____	X3) DATE SURVEY COMPLETED 01/06/2012
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NAME OF PROVIDER OR SUPPLIER OPPORTUNITY ENTERPRISES INC	STREET ADDRESS, CITY, STATE, ZIP CODE 6381 LUTE RD PORTAGE, IN46368
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W0000	<p>This visit was for the investigation of Complaint #IN00101028.</p> <p>COMPLAINT #IN00101028: SUBSTANTIATED, Federal/state deficiencies related to the allegation are cited at W149 and W186.</p> <p>Dates of Survey: January 5 and 6, 2012.</p> <p>Facility number: 000600 Provider number: 15G044 AIM number: 100233500</p> <p>Surveyor: Kathy Wanner, Medical Surveyor III.</p> <p>The following federal deficiencies also reflect state findings in accordance with 460 IAC 9. Quality Review completed 1/17/12 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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W0149	<p>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, the facility neglected to follow their Abuse and Neglect policy by failing to provide adequate supervision for 1 of 4 sampled clients (client A) who lived in the home.</p> <p>Findings include:</p> <p>Facility records were reviewed on 1/5/12 at 2:40 P.M. including the Bureau of Developmental Disabilities Services (BDDS) reports for the time period between 11/15/11 and 1/5/12. The BDDS records indicated the following:</p> <p>-a BDDS report dated 12/7/11 for an incident on 12/7/11 at 11:15 P.M. indicated "...[Client] A had vomited once because he ate some asparagus which is restricted from his diet...woke up calling out in pain at 1:05 A.M...update of vitals BP (blood pressure) 97/64, P (pulse) 98, Respirations 18, and temp (temperature) 98.6 and new information was...screaming in pain." Client A was taken to the ER (emergency room). Client A began having episodes of diarrhea. "I (Qualified Developmental Disabilities Professional Designee (QDDPD) asked the GH (group home) Manager to question the ER doctor</p>	W0149	As of 1/20/12, all staff have had 1:1 meetings with the VP of Consumer Services, the Group Home Manager, and the Group Home Lead Manager discussing team work, leadership and job duties/resposibilities. The Group Home Manager will identify retraining needs for each staff and will retrain all staff on consistent routine, time management, completing tasks during times that are very busy, ie, when returning home from the workshop. The QDDP-D and Group Home Manager will retrain staff regarding duties to maintaint adequate supervision of all eight consumers. The Group Home Manager or Assistant Manager will be scheduled until 8:00 pm Monday through Friday until the QDDP determines the staff are completing duties consistantly and in a routine manner. The Lead Manager will monitor schedules on an ongoing basis and QDDP-D will monitor at bi-monthly house visits to ensure future compliance. The Lead Manager will monitor schedules on an ongoing basis and the QDDP-D will monitor at bi-monthly house visits to ensure future compliance. Client A was addmitted to Willows Nursing home for a 60 day rehab stay on 1/23/12. We are currently	02/05/2012	

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	<p>if this could have caused the vomiting with diarrhea due to [client A's] dining plan not being followed ([client A] is on a soft bland, low roughage, avoid caffeine, avoid cabbage family, low lactose, and low carbonation diet due to part of his colon being removed). While at the ER the GHM questioned the doctor if this could have caused his symptoms and the physician stated that it was possible." The report indicated when client A vomited there were pieces of asparagus in the emesis.</p> <p>-a follow-up BDDS report dated 12/13/11 for the incident on 12/7/11 indicated the facility had investigated the incident and had determined client A had taken the asparagus from the trash when the staff were not looking. "...[client A] was asked if he got into some asparagus and he stated he did...he was then asked if it was when they were making lunches and he stated 'yeah.'"</p> <p>Client A's record was reviewed on 1/5/12 at 2:48 P.M.. Client A's Individual Support Plan (ISP) dated 7/28/11 indicated he was on a soft, bland, no roughage, low cholesterol, ground meats, no nuts, seeds or popcorn diet. He was to be prompted to slow down when eating, and needed prompts to empty mouth before talking. Client A's record included</p>		<p>determining long term placement to better meet the medical needs of Client A. In addition, the IDT is discussing a possible transfer of a high needs client to another OE Group Home. This transfer would allow this client to live in a home with fewer clients in order to better meet his needs. All staff including the Group Home Manager will be retrained on Abuse and Neglect and the Abuse and Neglect policy. All staff will attend an annual training on Abuse and Neglect and the VP of Consumer Services will monitor reports to ensure appropriate intervention and follow-up are occurring and are in compliance. The QDDP-D will monitor on bi-monthly house visits.</p>		

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	a diet plan, undated, indicating the following foods to avoid: buttermilk, sharp cheese, raw vegetables plus broccoli, Brussels sprouts, cabbage, onions, cauliflower, cucumber, green pepper, celery, sauerkraut, fried potatoes, potato salad, chips, peas, corn, dried beans, berries, figs, dried fruit, prunes, raisins, pineapple, all other fresh fruit, highly seasoned dressing, pickles, garlic, barbecue, chili pepper, coconut, olives, popcorn, nuts, whole grain breads and cereals, bran cereals, wild rice, brown rice, breads with dried fruits, smoked meats, poultry, smoked fish, corned beef, sausages, lunch meat, all fried meats, limit caffeine, limit carbonation, limit lactose, avoid cabbage family. Client A's Behavior Support Plan (BSP) dated 10/11/2010 indicated he had a targeted behavior of taking things from the trash can and hiding them in his clothing or hoarding them in his room. Staff were to remind (client A) he would be assisted in cleaning his room that evening if they observed him removing items from the trash. Client A's BSP indicated "...stealing and hoarding behaviors have become a concern though as he is taking things that can be dangerous to his health and safety such as used tampons, tampon applicators, food, used medication cups, used bandages, pop cans, etc...."				

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	<p>The RM was interviewed on 1/5/12 at 5:18 P.M.. When asked how many staff had been working the evening of 12/7/11 when client A had eaten the asparagus, the RM stated "There were three staff working that evening." The RM indicated the home had been short by one staff the night client A had eaten the asparagus from the trash can.</p> <p>The staff schedules for the group home for 12/7/11 were reviewed on 1/6/12 at 3:16 P.M.. The schedule for 12/7/11 indicated four DCS had been scheduled to work with the RM scheduled to work until 5:00 P.M..</p> <p>The facility policy for Abuse and Neglect dated 1/13/2011 was reviewed on 1/5/12 at 1:55 P.M.. The policy indicated "Opportunity Enterprises, Inc. does not condone and will not tolerate physical, verbal, or sexual abuse, neglect or exploitation of individuals served...b. Neglect: Includes the refusal or failure to provide appropriate care, food, medical care, or supervision...."</p> <p>The Qualified Developmental Disabilities Professional Designee (QDDPD) was interviewed on 1/6/12 at 3:06 P.M.. The QDDPD indicated client A's BSP had not been updated since 10/11/10. The QDDPD indicated there had been four</p>				

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W0186	<p>DCS scheduled for 12/7/11 and only three staff had worked. The QDDP did not explain why four staff were scheduled and only three had worked. The QDDPD indicated there had recently been some issues with the staff at the home, and she (QDDPD) had been working at the home several nights a week to work through some staffing and training issues.</p> <p>9-3-2(a)</p> <p>This federal tag relates to complaint #IN0010128.</p> <p>The facility must provide sufficient direct care staff to manage and supervise clients in accordance with their individual program plans.</p> <p>Direct care staff are defined as the present on-duty staff calculated over all shifts in a 24-hour period for each defined residential living unit.</p>				

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	<p>Based on record review, observation and interview, the facility failed to provide sufficient staffing deployment to supervise and meet client needs for 3 of 4 sampled clients who lived in the home (clients A, C, and D).</p> <p>Findings include:</p> <p>Facility records were reviewed on 1/5/12 at 2:40 P.M. including the Bureau of Developmental Disabilities Services (BDDS) reports for the time period between 11/15/11 and 1/5/12. The BDDS records indicated the following:</p> <p>-a BDDS report dated 12/7/11 for an incident on 12/7/11 at 11:15 P.M. indicated "...[Client] A had vomited once because he ate some asparagus which is restricted from his diet...woke up calling out in pain at 1:05 A.M...update of vitals BP (blood pressure) 97/64, P (pulse) 98, Respirations 18, and temp (temperature) 98.6 and new information was...screaming in pain." Client A was taken to the ER (emergency room). Client A began having episodes of diarrhea. "I (Qualified Developmental Disabilities Professional Designee (QDDPD) asked the GH (group home) Manager to question the ER doctor if this could have caused the vomiting with diarrhea due to [client A's] dining plan not being followed ([client A] is on a</p>	W0186	See W 0149	02/05/2012	

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	<p>soft bland, low roughage, avoid caffeine, avoid cabbage family, low lactose, and low carbonation diet due to part of his colon being removed). While at the ER the GHM questioned the doctor if this could have caused his symptoms and the physician stated that it was possible." The report indicated when client A vomited there were pieces of asparagus in the emesis.</p> <p>-a follow-up BDDS report dated 12/13/11 for the incident on 12/7/11 indicated the facility had investigated the incident and had determined client A had taken the asparagus from the trash when the staff were not looking. "...[client A] was asked if he got into some asparagus and he stated he did...he was then asked if it was when they were making lunches and he stated 'yeah.'"</p> <p>Client A's record was reviewed on 1/5/12 at 2:48 P.M.. Client A's Individual Support Plan (ISP) dated 7/28/11 indicated he was on a soft, bland, no roughage, low cholesterol, ground meats, no nuts, seeds or popcorn diet. He was to be prompted to slow down when eating and needed prompts to empty mouth before talking. Client A's record included a diet plan, undated indicating the following foods to avoid: buttermilk, sharp cheese, raw vegetables plus</p>				

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	broccoli, Brussels sprouts, cabbage, onions, cauliflower, cucumber, green pepper, celery, sauerkraut, fried potato, potato salad, chips, peas, corn, dried beans, berries, figs, dried fruit, prunes, raisins, pineapple, all other fresh fruit, highly seasoned dressing, pickles, garlic, barbecue, chili pepper, coconut, olives, popcorn, nuts, whole grain breads and cereals, bran cereals, wild rice, brown rice, breads with dried fruits, smoked meats, poultry, smoked fish, corned beef, sausages, lunch meat, all fried meats, limit caffeine, limit carbonation, limit lactose, avoid cabbage family. Client A's Behavior Support Plan (BSP) dated 10/11/2010 indicated he had a targeted behavior of taking things from the trash can and hiding them in his clothing or hoarding them in his room. Staff were to remind (client A) he would be assisted in cleaning his room that evening if they observed him removing items from the trash. Client A's BSP indicated "...stealing and hoarding behaviors have become a concern though as he is taking things that can be dangerous to his health and safety such as used tampons, tampon applicators, food, used medication cups, used bandages, pop cans, etc...." Client A's BSP did not indicate client A had a history of eating things from the trash. Observations were conducted at the group				

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	<p>home on 1/5/12 from 4:27 P.M. until 5:29 P.M.. The home was observed to be staffed with two direct care staff (DCS) and the residential manager (RM) working direct care. When the clients arrived home from their day program, they entered the home and began to quickly empty their lunch boxes, begin their usual activities and prepare snacks for themselves. Client D walked into the home, picked up a banana, peeled it, put the peel in the kitchen trash can and walked to the back of the home eating the banana. Client C entered the home and asked the RM about his reward for having had a good day. Client C showed the RM his book. DCS #1 was passing medication in the office and client C was informed he would need to wait a bit to get his reward. The RM indicated a staff needed to be in the common area at all times to monitor the clients for any possible peer to peer aggression. Client C asked about his reward and orange crackers 3 additional times, increasing his tone and volume with each request. Client D poured himself an 8 ounce glass of milk, and walked around the home drinking it. When DCS #1 was done with the medication pass, RM began to assist some of the clients with their showers. Client G prepared his snack and sat at a chair at the table eating a pudding cup, string cheese, and drinking a beverage in a coffee cup.</p>				

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	<p>Client D poured himself a second 8 ounce glass of milk, and walked around the home drinking it. Client H was the last individual to enter the home. He ambulated with a walker, and required staff assistance in getting off the van and entering the home. DCS #2 assisted client H. When he entered the home, client H became upset because client G was sitting in his (client H's) chair at the table and pushed against client G's back as he walked behind him. DCS #1 redirected client H. Client C began to complain of toothache and asked repeatedly when he was going to the dentist and naming staff/people who would take him. Client C was insistent with each staff having them look at the schedule in the office and tell him when he was going to the dentist and who was going to be taking him. Client C at one point grabbed DCS #2's arm forcing her to enter the office. At this point there were no staff in the common area. DCS #2 then began to cook the evening meal at the stove with client F assisting her. DCS #2's back was turned away from the refrigerator, trash can and sink while she was assisting client F at the stove. Client D poured himself a third 8 ounce glass of milk, and carried it drinking it while walking through the home. Client H prepared his ice water, got a plastic spoon and straw with staff assistance. Client D poured himself a</p>			

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	<p>fourth 8 ounce glass of milk. Client D picked up ice out of the kitchen sink and ate it. Client D then got a second piece of ice from the sink and ate it. DCS #2 saw the second incident of client D eating ice, and asked DCS #1 to rinse the sink as she could not leave client F alone at the stove. DCS #1 asked "Why?" DCS #1 then rinsed the sink. DCS #1 then retrieved a large box of Goldfish crackers (orange crackers) from the garage and passed some out for clients C, G, and D. DCS #1 gave client H a pudding cup and a flavor packet to add to his ice water. There was no redirection or training with client D regarding his drinking 32 ounces of milk right before dinner or walking around while eating/drinking.</p> <p>At 5:01 P.M. on 1/5/12, DCS #1 was asked how many snacks/drinks the clients are to have before dinner. DCS #1 stated, "It is really difficult to watch everyone at this time, they are encouraged to have only one glass of milk (beverage) with snack, but he (client D) is very quick. He drinks it or water from the faucet almost constantly. He has ICD (Impulse Control Disorder)."</p> <p>At 5:03 P.M. on 1/5/12 DCS #2 was informed client D had had four glasses of milk and had eaten ice from the sink twice. DCS #2 stated, "Oh, did he get four</p>				

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	<p>glasses of milk?" and "I thought I saw him get some ice the one time, did he do it twice?"</p> <p>The RM was interviewed on 1/5/12 at 5:18 P.M.. When asked how many staff were to be working, the RM stated, "Actually there is to be a third staff (DCS) on duty at this time." The RM indicated the group home was working short staffed at the time. When asked how many staff had been working the evening of 12/7/11 when client A had eaten the asparagus, the RM stated "There were three staff working that evening." The RM indicated the home had been short by one staff the night client A had eaten the asparagus from the trash can. The RM indicated client A was doing better since a new trash can with a non-removable lid had been purchased.</p> <p>The staff schedules for the group home for 12/7/11 and 1/5/12 were reviewed on 1/6/12 at 3:16 P.M.. The schedule for 12/7/11 indicated four DCS had been scheduled to work with the RM scheduled to work until 5:00 P.M.. The schedule for 1/5/12 indicated two DCS had been scheduled to work with the RM working direct care.</p> <p>The QDDPD was interviewed on 1/6/12 at 3:06 P.M.. The QDDPD stated "As far</p>						

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	<p>as I know [client A] did not have a history of eating items from the trash can, just taking the items and hoarding the items." The QDDPD indicated client A's BSP had not been updated since 10/11/10. The QDDPD indicated there had been four DCS scheduled for 12/7/11 and only three staff had worked. The QDDPD indicated she did not see this as being short staffed, but did not explain why four staff were scheduled and only three had worked. The QDDPD indicated there had recently been some issues with the staff at the home, and she (QDDPD) had been working at the home several nights a week to work through some staffing and training issues.</p> <p>9-3-3(a)</p> <p>This federal tag relates to complaint #IN0010128.</p>				

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

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FORM APPROVED

OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	<input checked="" type="checkbox"/> X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 15G044	<input checked="" type="checkbox"/> X2) MULTIPLE CONSTRUCTION A. BUILDING 00 _____ B. WING _____	<input checked="" type="checkbox"/> X3) DATE SURVEY COMPLETED 01/06/2012
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NAME OF PROVIDER OR SUPPLIER OPPORTUNITY ENTERPRISES INC	STREET ADDRESS, CITY, STATE, ZIP CODE 6381 LUTE RD PORTAGE, IN46368
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(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PERCEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETION DATE