

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 15G745	X2) MULTIPLE CONSTRUCTION A. BUILDING 00 B. WING _____	X3) DATE SURVEY COMPLETED 04/05/2013
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NAME OF PROVIDER OR SUPPLIER RES CARE SOUTHEAST INDIANA	STREET ADDRESS, CITY, STATE, ZIP CODE 16611 SIMA GRAY RD HENRYVILLE, IN 47126
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W000000	<p>This visit was for an annual fundamental recertification and state licensure survey.</p> <p>Dates of survey: March 26, 27, 28, April 1, and 5, 2013</p> <p>Facility Number: 011663 Provider Number: 15G745 AIM Number: 200902020</p> <p>Surveyor: Jo Anna Scott, Medical Surveyor III</p> <p>These deficiencies reflect state findings in accordance with 460 IAC 9. Quality Review completed 4/16/13 by Ruth Shackelford, Medical Surveyor III.</p>	W000000		

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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W000111	<p>483.410(c)(1) CLIENT RECORDS The facility must develop and maintain a recordkeeping system that documents the client's health care, active treatment, social information, and protection of the client's rights.</p> <p>Based on observation, record review and interview for 1 of 2 sampled clients (client #1), the facility failed to ensure the client's cataract surgery was documented in the client's medical record.</p> <p>Findings include:</p> <p>During the observation period on 3/26/13 from 4:30 PM to 7:30 PM, client #1 came to the office area for light therapy from 5:30 PM to 6:00 PM. Client #1 rubbed his eyes and looked away from the light throughout the therapy time.</p> <p>The record review for client #1 was conducted on 3/27/13 at 2:17 PM. The Ophthalmologist report dated 7/26/12 indicated client #1 had lens implants in both eyes. There was no documentation in the record indicating client #1 had cataract surgery that required lens implants. The record did not have nursing notes indicating client #1 had cataract surgery.</p> <p>Interview with Staff #5, LPN (Licensed Practical Nurse) on 3/27/13 at 4:00 PM</p>	W000111	<p>W111: Client Records The facility must develop and maintain a record keeping system that documents the client's healthcare, active treatment, social information, and protection of client's rights. Corrective Action(Specific): The residential manager (RM), site nurse (LPN) and all direct care staff will be retrained on the documentation standards according to ICF-MR guidelines and ResCare policies and procedures. All staff will be retrained to document all consumer specific healthcare related information in the individual client's medical record. The RM and LPN will review each client's medical records on a monthly basis to ensure that consumer specific healthcare related information is current and complete in the client's medical record. How Others Will Be Identified (Systemic): The residential manager (RM), site nurse (LPN) and all direct care staff will be retrained on the documentation standards according to ICF-MR guidelines and ResCare policies and procedures. All staff will be retrained to document all consumer specific healthcare</p>	05/05/2013			

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	indicated she was not aware client #1 had lens implants. On 3/27/13 at 4:45 PM, Staff #5, LPN, indicated client #1 had cataract surgery when he first moved to the facility. 9-3-1(a)		related information in the individual client's medical record. The RM and LPN will review each client's medical records on a monthly basis to ensure that consumer specific healthcare related information is current and complete in the client's medical record. Measures to be put in Place: The RM and LPN will review each client's medical records on a monthly basis to ensure that consumer specific healthcare related information is current and complete in the client's medical record. The QMRP will complete random medial record reviews on a monthly basis to ensure that consumer specific healthcare related information is current and complete in the client's medical record. Monitoring of Corrective Action: The QMRP will complete random medial record reviews on a monthly basis to ensure that consumer specific healthcare related information is current and complete in the client's medical record.		

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W000137	<p>483.420(a)(12) PROTECTION OF CLIENTS RIGHTS The facility must ensure the rights of all clients. Therefore, the facility must ensure that clients have the right to retain and use appropriate personal possessions and clothing.</p> <p>Based on observation and interview for 2 of 2 sampled clients (clients #1 and #2), the facility failed to ensure client #1 had access to his eyeglasses and dentures, and client #2 had access to his hearing aid.</p> <p>Findings include:</p> <p>During the morning observation on 3/27/13 from 6:30 AM to 8:30 AM, the medication pass was started at 7:00 AM. Client #2 was asked by staff #6 if he wanted his hearing aid. Client #2 responded with a "no." Client #1 came to the medication room at 7:45 AM and was asked by staff #6 if he wanted his partial plate (false front teeth). Staff #6 took a container from the locked medicine cabinet and held it out to client #1. Client #1 indicated he did not want to wear the partial plate.</p> <p>Interview with staff #6 on 3/27/13 at 8:15 AM indicated the eyeglasses and false teeth were kept in the medicine cabinet.</p> <p>Interview with staff #2, HM (Home Manager), on 3/27/13 at 830 PM</p>	W000137	<p>W137: Protection of Clients Rights The facility must ensure the rights of all clients. Therefore the facility must ensure that clients have the rights to retain and abuse appropriate personal possessions and clothing.</p> <p>Corrective Action: (Specific): The Residential Manager (RM) and all direct care staff will be retrained on Client Rights and Responsibilities and the ResCare Abuse, Neglect and Exploitation policy. Clients shall have access to all personal possessions unless there is HRC approval in place for the client in order to restrict access to items from the client in order to ensure the welfare of the client. The IDT will meet to determine if each individual client should have restrictions to any personal possessions and if so then obtain HRC approval for restrictions.</p> <p>How Others Will Be Identified: (Systemic): The Residential Manager (RM) and all direct care staff will be retrained on Client Rights and Responsibilities and the ResCare Abuse, Neglect and Exploitation policy. Clients shall have access to all personal possessions unless there is HRC approval in place for the client in</p>	05/05/2013			

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	<p>indicated they kept the eyeglasses and false teeth in the medicine cabinet to ensure they didn't get broken or lost.</p> <p>Interview with Staff #1, Operations Manager, on 4/1/13 at 10:00 AM indicated the eyeglasses, hearing aid, and false teeth should not be locked in the medicine cabinet.</p> <p>9-3-2(a)</p>		<p>order to restrict access to items from the client in order to ensure the welfare of the client.</p> <p>Measures to be Put in Place: The Residential Manager will complete monthly observations to ensure that clients have access to personal belongings. The RM will review the HRC approved rights restrictions for each individual client to ensure that rights are as least restrictive as possible. The RM will participate in quarterly HRC meetings to review each clients individual restrictive measures. Monitoring of Corrective Action: The Residential Manager will complete monthly observations to ensure that clients have access to personal belongings. The RM will review the HRC approved rights restrictions for each individual client to ensure that rights are as least restrictive as possible. The RM will participate in quarterly HRC meetings to review each clients individual restrictive measures. The QMRP will monitor on a monthly basis to ensure that clients have access to personal items, HRC documentation and IDT's will be reviewed to ensure that there are plans in place to remove restriction of rights as client meets criteria.</p>		

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W000331	<p>483.460(c) NURSING SERVICES</p> <p>The facility must provide clients with nursing services in accordance with their needs. Based on observation, record review and interview for 2 of 2 sampled clients (clients #1 and #2), the facility's nursing services failed to ensure the physician orders and nutritional assessments matched and client #1's health history was current.</p> <p>Findings include:</p> <p>1. The record review for client #1 was conducted on 3/27/13 at 2:17 PM. The Nutritional Assessment dated 2/14/13 indicated client #1 was on a regular diet. The Physicians Orders dated 3/1/13 through 3/31/13 indicated client #1 should be on a Mechanical Soft Diet, Double Meat.</p> <p>The record review for client #2 was conducted on 3/27/13 at 3:08 PM. The Nutritional Assessment dated 2/14/13 indicated client #2 had a Regular, NCS (No Concentrated Sweets) with portion control diet. The Physicians Orders dated 3/1/13 through 3/31/13 indicated client #2 should be on a Regular Diet, double carbohydrates at breakfast, double vegetables.</p> <p>Interview with Staff #5, LPN (Licensed</p>	W000331	<p>W331: Nursing Services The facility must provide clients with nursing services in accordance with their needs. Corrective Action- (Specific): The site nurse will be retrained that all individual client's physician's orders, nutritional assessments, and medication administration record contain the correct client information and all information matches in order to provide continuity of care for each individual client. The site nurse and RM will complete medical record reviews to ensure that all individual client's physician's orders, nutritional assessments, and medication administration records contain coinciding information and is an accurate reflection of the clients current medical needs. How others will be identified: (Systemic): The site nurse will be retrained that all individual client's physician's orders, nutritional assessments, and medication administration record contain the correct client information and all information matches in order to provide continuity of care for each individual client. The site nurse and RM will complete medical record reviews to ensure that all individual client's physician's orders, nutritional assessments, and medication administration</p>	05/05/2013			

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	<p>Practical Nurse) on 3/28/13 at 3:30 PM indicated the Physician Orders should have been changed. Staff #5, LPN, indicated client #1 and client #2 had the wrong information on the physician orders.</p> <p>2. During the observation period on 3/26/13 from 4:30 PM to 7:30 PM, client #1 came to the office area for light therapy from 5:30 PM to 6:00 PM. Client #1 rubbed his eyes and looked away from the light throughout the therapy time.</p> <p>The record review for client #1 was conducted on 3/27/13 at 2:17 PM. The Ophthalmologist report dated 7/26/12 indicated client #1 had lens implants in both eyes. There was no health care plan to address the client's lens implants.</p> <p>Interview with Staff #5, LPN (Licensed Practical Nurse) on 3/27/13 at 4:00 PM indicated she was not aware client #1 had lens implants. On 3/27/13 at 4:45 PM, Staff #5, LPN, indicated client #1 had cataract surgery when he first moved to the facility. Staff #5, LPN, indicated client #1 should have a care plan for the lens implants.</p> <p>9-3-6(a)</p>		<p>records contain coinciding information and is an accurate reflection of the client's current medical needs. Measures to be put in place: The Program Manager of Supervised Group Living, Residential Manager and Nurse will complete medical record reviews to ensure that all individual client's physician's orders, nutritional assessments, and medication administration records contain coinciding information and is an accurate reflection of the client's current medical needs and all program plans are updated to reflect changes. Monitoring of Corrective Action: The Program Manager of Supervised Group Living, Residential Manager and Nurse will complete medical record reviews to ensure that all individual client's physician's orders, nutritional assessments, and medication administration records contain coinciding information and is an accurate reflection of the client's current medical needs and all program plans are updated to reflect changes.</p>		

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W000436	<p>483.470(g)(2) SPACE AND EQUIPMENT</p> <p>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.</p> <p>Based on observation, record review, and interview for 2 of 2 sampled clients (clients #1 and #2), the facility failed to ensure programs were in place for clients #1 and #2 to use their adaptive equipment.</p> <p>Findings include:</p> <p>During the morning observation on 3/27/13 from 6:30 AM to 8:30 AM, the medication pass was started at 7:00 AM. Client #2 was asked by staff #6 if he wanted his hearing aid and eyeglasses. Client #2 responded with a "no." Client #1 came to the medication room at 7:45 AM and was asked by staff #6 if he wanted his partial plate (false front teeth). Staff #6 took a container from the locked medicine cabinet and held it out to client #1. Client #1 indicated he did not want to wear the partial plate.</p> <p>The record review for client #1 was conducted on 3/27/13 at 2:17 PM. The ISP (Individualized Support Plan) dated 6/1/12 indicated the objectives being</p>	W000436	<p>W436: Space and Equipment</p> <p>The facility must furnish, maintain in good repair, andteach clients to use and make informed choices about the use of dentures,eyeglasses, hearing and othercommunications aids, braces and other devices identified by theinterdisciplinary team as needed by the client.</p> <p>Corrective Action: (Specific): The Residential Manager anddirect care staff will be retrained on the proper prompting techniques for eachindividual client to use and make informed choices about the use of dentures,eyeglasses, hearing and othercommunications aids, braces and other devices identified by the interdisciplinaryteam as needed by the client. The RMwill ensure that all individual clients have access to their adaptive equipmentat all times. The RM will review client's individual assessments to ensure thateach client has all necessary adaptive equipment. The Residential Manager anddirect care staff will be retrained to teach clients on the proper care oftheir adaptive</p>	05/05/2013			

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	<p>addressed were meal time, communication, increase money skills, improve personal hygiene, improve self-medication skills, medication management, dining skills, personal hygiene, and safety. The ISP did not have a goal for client #1 to use his partial plate.</p> <p>The record review for client #2 was conducted on 3/27/13 at 3:08 PM. The ISP dated 1/17/13 indicated the objectives being addressed were money skills, self-medication, domestic skills, communication skills, improve oral care, community safety, and community integration. The ISP did not have a goal for client #2 to use his adaptive equipment.</p> <p>Interview with staff #6 on 3/27/13 at 8:15 AM indicated the eyeglasses and false teeth were kept in the medicine cabinet.</p> <p>Interview with staff #2, HM (Home Manager), on 3/27/13 at 8:30 PM, indicated the clients kept their eyeglasses, false teeth, and hearing aids in the medicine cabinet to ensure they didn't get broken or lost.</p> <p>Interview with Staff #1, Operations Manager, on 4/1/13 at 10:00 AM indicated the eyeglasses, hearing aid, and false teeth should not be locked in the</p>		<p>equipment. How others will be identified: (Systemic): The RM will review client's individual assessments to ensure that each client has all necessary adaptive equipment. The Residential Manager and direct care staff will be retrained on the proper prompting techniques for each individual client to use and 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. The Residential Manager and direct care staff will be retrained to teach clients on the proper care of their adaptive equipment. Measures to be put in place: The RM will review client's individual assessments to ensure that each client has all necessary adaptive equipment. The Residential Manager and direct care staff will be retrained on the proper prompting techniques for each individual client to use and 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. The Residential Manager and direct care staff will be retrained to teach clients on the proper care of their adaptive equipment. The direct care staff will on a daily basis inspect all individual client adaptive</p>				

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	<p>medicine cabinet.</p> <p>9-3-7(a)</p>		<p>equipment and document that equipment is clean and in good repair this will be tracked on the Daily progress notes and monthly on the adaptive equipment form. Monitoring of Corrective Action: The RM and PM will review monthly adaptive equipment forms for each individual client to ensure that all adaptative equipment is in good repair. The RM will complete observations to ensure that direct care staff using the proper prompting techniques for each individual client to use and make informed choices about the use of dentures,eyeglasses, hearing and other communication aids, braces and other devices identified by the interdisciplinary team as needed by the client.</p>	