

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 15G336	X2) MULTIPLE CONSTRUCTION A. BUILDING 00 B. WING _____	X3) DATE SURVEY COMPLETED 06/05/2013
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NAME OF PROVIDER OR SUPPLIER VOCA CORPORATION OF INDIANA	STREET ADDRESS, CITY, STATE, ZIP CODE 3814 WALDEN RUN FORT WAYNE, IN 46815
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W000000	<p>This visit was for a fundamental recertification and state licensure survey.</p> <p>Dates of Survey: June 3, 4 and 5, 2013.</p> <p>Facility number: 000854 Provider number: 15G336 AIM number: 100243900</p> <p>Surveyor: Susan Reichert, QIDP</p> <p>This deficiency also reflects a state finding in accordance with 460 IAC 9.</p> <p>Quality review completed June 10, 2013 by Dotty Walton, QIDP.</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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W000286	<p>483.450(b)(3) MGMT OF INAPPROPRIATE CLIENT BEHAVIOR Techniques to manage inappropriate client behavior must never be used for disciplinary purposes. Based upon record review and interview, the facility failed to ensure for 1 of 4 sampled clients (client #4), techniques to address her physical aggression were not used as retaliation.</p> <p>Findings include:</p> <p>Client #4's record was reviewed on 6/4/13 at 3:58 PM. Her Behavior Interventions plan dated 12/4/12 included target behaviors of physical aggression, elopement, seeking unneeded attention, lying/embellishment, threatening to harm self or others, and suicidal attempts. The plan included a section which indicated in part, "Additions to the BAT (Behavior Assessment Tool) after meeting on 6/22/12 with guardian on conference call; all of the following additions were requested and approved by the guardian: "If [client #4] states she is going to leave then staff are not to physically intervene, but to instead stand in front of the door and verbally intervene. Remind [client #4] of the consequences of her behaviors and provide her with an alternative way to work through her frustration, i.e., coping skills, relaxation, activities, TAKING A</p>	W000286	The facility will ensure that techniques used to address client's physical behavior are not used as retaliation. Disciplinary techniques to manage inappropriate client behavior will never be used. Client #4's behavior support plan was reviewed and revised on 6/11/13. The BSP removed any punitive action and revised to include therapeutic assistance. The plan was also revised to clarify when the police may be called. All staff will be retrained on the revised BSP on 6/21/13. The BSP will continue to be reviewed and revised as needed by the QMRP and the Director of Supported Group Living. All other client BSP's have been reviewed and are in compliance with all standards.	06/21/2013	

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	<p>WALK OR DRIVE, etc. The guardian fully understands that the staff will press charges against [client #4] if she injures a staff to the point he or she requires medical attention." The section included a schedule for client #4 to use the house phone to call her guardian.</p> <p>The Director of Supported Group Living and the QIDP (Qualified Intellectual Disabilities Professional) were interviewed on 6/5/13 at 12:55 PM. The QIDP indicated the section which indicated staff will press charges if injured to the point of needing medical intervention was not intended to be part of the behavior plan, but a summary of the BAT. The Director of Supported Group Living indicated client #4 had become physically aggressive to the point staff were concerned for their safety and client #4 was able to understand the consequences of her actions. The Residential Director indicated the section regarding staff pressing charges would be deleted from the behavior plan and had not been implemented.</p> <p>9-3-5(a)</p>						

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