

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  15G175		X2) MULTIPLE CONSTRUCTION A. BUILDING 00 B. WING _____		X3) DATE SURVEY COMPLETED 08/10/2012	
NAME OF PROVIDER OR SUPPLIER  RES CARE COMMUNITY ALTERNATIVES SE IN				STREET ADDRESS, CITY, STATE, ZIP CODE 3607 MIDDLE RD JEFFERSONVILLE, IN 47130			
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W0000	<p>This visit was for an extended recertification and state licensure survey.</p> <p>Dates of Survey: July 30, 31, August 1, 3, 7, and 10, 2012.</p> <p>Surveyor: Dotty Walton, Medical Surveyor III</p> <p>Facility Number: 000709 AIM Number: 100243190 Provider Number: 15G175</p> <p>The following deficiencies reflect state findings in accordance with 460 IAC 9. Quality Review completed 8/15/12 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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W0100	<p>440.150(c) ICF SERVICES OTHER THAN IN INSTITUTIONS</p> <p>"Intermediate care facility services" may include services in an institution for the mentally retarded (hereafter referred to as intermediate care facilities for persons with mental retardation) or persons with related conditions if:</p> <p>(1) The primary purpose of the institution is to provide health or rehabilitative services for mentally retarded individuals or persons with related conditions;</p> <p>(2) The institution meets the standards in Subpart E of Part 442 of this Chapter; and</p> <p>(3) The mentally retarded recipient for whom payment is requested is receiving active treatment as specified in §483.440.</p> <p>Based on observation, record review and interview for 1 of 4 sampled clients (#3), the Intermediate Care Facility failed to provide active treatment services for which the facility received payment.</p> <p>Findings include:</p> <p>The facility (Intermediate Care Facility/ICF), failed to ensure client #3 received a continuous and aggressive active treatment program which addressed his training needs. The facility failed to ensure active treatment and behavioral programs were implemented for client #3. The ICF failed to ensure accurate assessments and/or re-assessments were completed as needed for client #3. The ICF failed to ensure needed supports</p>	W0100	<p><b>W100:</b> Intermediate care facilities may include services in an institution for the mentally retarded (hereafter referred to as intermediate care facilities for persons with mental retardation) or persons with related conditions if: (1) The primary purpose of the institution is to provide health or rehabilitative services for mentally retarded individuals or persons with related conditions; (2) The institution meets the standards in Subpart E of Part 442 of this chapter; and (3) The mentally retarded recipient for whom payment is requested is receiving active treatment as specified in 483.440.</p> <p><b>Corrective Action: (Specific):</b> The program coordinator and staff will be trained on the active treatment process and client #3's</p>	09/09/2012			

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	<p>and/or services were part of client #3's program plan, failed to address client #3's identified training needs, and failed to ensure facility staff implemented client #3's behavior and training objectives.</p> <p>Please refer to W195 for the Intermediate Care Facility's failure to meet the Condition of Participation: Active Treatment Services.</p>		<p>program plans. Client #3's assessments will be reviewed to ensure accurate information is obtained and used to revise program plans based on assessment data as indicated.</p> <p><b>How others will be identified (Systemic):</b> The program coordinator will ensure that adequate assessments are obtained upon admission and as changes occur. The assessment data will be used to implement and revise program plans as indicated based on assessment data.</p> <p><b>Measures to be put in place:</b> The program coordinator and staff will be trained on the active treatment process and client #3's program plans. Client #3's assessments will be reviewed to ensure accurate information is obtained and used to revise program plans based on assessment data as indicated</p> <p><b>Monitoring of corrective action:</b> The operations manager for supervised group living will review program plans and observe active treatment at periodic intervals in the home to ensure that all client's program plans and active treatment is being implemented accordingly.</p> <p>Completion Date: 9/9/12</p>		

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W0102	<p><b>483.410 GOVERNING BODY AND MANAGEMENT</b> The facility must ensure that specific governing body and management requirements are met.</p> <p>Based on observation, record review and interview for 4 of 4 sampled clients (#1, #2, #3, and #4), and 3 additional clients (#5, #6, and #7), the facility failed to meet the Condition of Participation: Governing Body.</p> <p>The governing body failed to ensure the facility provided active treatment services to clients, failed to implement policy and procedures to ensure clients' money was safe from theft and the governing body failed to ensure the facility had living room furniture which was clean and in good repair.</p> <p>Findings include:</p> <p>Please refer to W104 for 4 of 4 sampled clients (#1, #2, #3, and #4), and 4 additional clients (#5, #6, #7, and #8), for the Governing Body's failure to exercise general operating direction over the facility by failing to implement policies and procedures to ensure clients' money was safe from theft and the governing body failed to ensure the facility had living room furniture which was clean and in good repair.</p>	W0102	<p><b>W102:</b> The facility must ensure that specific governing body and management requirements are met.</p> <p><b>Corrective Action: (Specific):</b> The program coordinator and staff will be trained on the finance policy and procedure, the active treatment process and client #3's program plans. The living room furniture will be replaced with. Client #3's assessments will be reviewed to ensure accurate information is obtained and used to revise program plans based on assessment data as indicated.</p> <p><b>How others will be identified (Systemic):</b> The program coordinator will ensure that adequate assessments are obtained upon admission and as changes occur. The assessment data will be used to implement and revise program plans as indicated based on assessment data.</p> <p><b>Measures to be put in place:</b> The program coordinator and staff will be trained on the finance policy and procedure, the active treatment process and client #3's program plans. The living room furniture will be replaced with. Client #3's assessments will be</p>	09/09/2012			

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	<p>The governing body failed to ensure the Condition of Participation: Active Treatment Services was met for 1 of 4 sampled clients (#3), for which the facility was being paid. The governing body failed to ensure the client received a continuous, aggressive active treatment program. The governing body failed to ensure facility staff implemented the client's behavior and training programs across all environments/times of the day, failed to ensure accurate assessments and/or re-assessments were performed as needed, to develop programs for identified training needs, and failed to ensure the client's program plans contained the needed supports for staff to assist him. Please see W195.</p> <p>9-3-1(a)</p>		<p>reviewed to ensure accurate information is obtained and used to revise program plans based on assessment data as indicated</p> <p><b>Monitoring of corrective action:</b> The operations manager for supervised group living will review program plans and observe active treatment at periodic intervals in the home to ensure that all client's program plans and active treatment is being implemented accordingly. The operations manager for supervised group living and the maintenance coordinator will periodically check the condition of all furniture in the homes to ensure that it is in good condition. The operations manager for supervised group living will review client finances periodically to ensure that staff are implementing the providers policies and procedures and that all client funds are secure and accounted for.</p> <p>Completion Date: 9/9/12</p>		

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W0104	<p><b>483.410(a)(1) GOVERNING BODY</b> The governing body must exercise general policy, budget, and operating direction over the facility.</p> <p>Based on observation, record review and interview for 4 of 4 sampled clients (#1, #2, #3, and #4), and 3 additional clients (#5, #6, and #7) the facility's Governing Body failed to exercise general policy and operating direction over the facility by failing to keep clients' money safe from theft, failed to maintain the facility's living room furniture in good repair and by failing to ensure all clients received a continuous, aggressive active treatment program (client #3).</p> <p>Findings include:</p> <p>During observations on 7/30/12 from 4:15 PM until 6:30 PM, and on 7/31/12 from 6:05 AM until 2:15 PM clients #1, #2, #3, #4, #5, #6, and #7 were observed to live in the facility.</p> <p>Environmental tours of the facility during the above mentioned observation times indicated the living room couch and love seat were torn with stuffing coming out of them. The two wing chairs in the living room were observed to have dark stains upon their upholstered arms and backs.</p> <p>Interview with staff #3 on 7/31/12 at 10:00 AM indicated the furniture was in need of repair/cleaning.</p>	W0104	<p><b>W104:</b> The facility must ensure that specific governing body and management requirements are met.</p> <p><b>Corrective Action: (Specific):</b> The program coordinator and staff will be trained on the finance policy and procedure, the active treatment process and client #3's program plans. The living room furniture will be replaced with. Client #3's assessments will be reviewed to ensure accurate information is obtained and used to revise program plans based on assessment data as indicated.</p> <p><b>How others will be identified (Systemic):</b> The program coordinator will ensure that adequate assessments are obtained upon admission and as changes occur. The assessment data will be used to implement and revise program plans as indicated based on assessment data.</p> <p><b>Measures to be put in place:</b> The program coordinator and staff will be trained on the finance policy and procedure, the active treatment process and client #3's program plans. The living room furniture will be replaced with. Client #3's assessments will be</p>	09/09/2012			

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	<p>Please refer to W140 for the governing body's failure to maintain a system which ensured an accurate accounting of clients' funds and for failure to safe guard clients' personal funds kept at the facility for 3 of 4 sampled clients (#2, #3, and #4), and two additional clients (#5 and #6).</p> <p>Please refer to W195 Condition of Participation: Active Treatment Services for the Governing Body's failure to exercise general policy and operating direction over the facility by failing to ensure client #3 received a continuous, aggressive active treatment program.</p> <p>9-3-1(a)</p>		<p>reviewed to ensure accurate information is obtained and used to revise program plans based on assessment data as indicated</p> <p><b>Monitoring of corrective action:</b> The operations manager for supervised group living will review program plans and observe active treatment at periodic intervals in the home to ensure that all client's program plans and active treatment is being implemented accordingly. The operations manager for supervised group living and the maintenance coordinator will periodically check the condition of all furniture in the homes to ensure that it is in good condition. The operations manager for supervised group living will review client finances periodically to ensure that staff are implementing the providers policies and procedures and that all client funds are secure and accounted for.</p> <p>Completion Date: 9/9/12</p>		

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W0140	<p><b>483.420(b)(1)(i)</b> <b>CLIENT FINANCES</b> The facility must establish and maintain a system that assures a full and complete accounting of clients' personal funds entrusted to the facility on behalf of clients. Based on observation, record review and interview for 3 of 4 sampled clients (#2, #3, and #4), and two additional clients (#5 and #6), the facility failed to maintain a system which ensured an accurate accounting of clients' funds and failed to safe guard clients' personal funds kept at the facility.</p> <p>Findings include:</p> <p>On July 31, 2012, at 2:00 PM, client financial records were reviewed and staff #3 was observed to count clients' personal cash kept on hand at the facility. The following was found during the record review/observation:</p> <p>Client #2's financial record indicated staff #3 had balanced the cash on hand on 7/17/12 and it was \$45.88. During the 7/31/12 2:00 PM audit, the actual cash on hand was \$5.88; a discrepancy of \$40.00.</p> <p>Client #3's financial record indicated staff #3 had balanced the cash on hand on 7/17/12 and it was \$35.55. During the 7/31/12 2:00 PM audit, the actual cash on hand was \$15.55; a discrepancy of</p>	W0140	<p><b>W140:</b> The facility must establish and maintain a system that assures a full and complete accounting of clients' personal funds entrusted to the facility on behalf of clients.</p> <p><b>Corrective Action: (Specific):</b> The program coordinator and staff will be trained on the finance policy and procedure and complete weekly financial audits of all client finances. The missing money will be reimbursed to clients #2, #3, #4, #5 and #6.</p> <p><b>How others will be identified (Systemic):</b> The program coordinator will ensure that weekly finance audits of all client monies are conducted and purchases are recorded accurately. Any discrepancy will be immediately reported, investigated and appropriate corrective action or reimbursement will occur.</p> <p><b>Measures to be put in place:</b> The program coordinator and staff will be trained on the finance policy and procedure and audit all client finance at least weekly. The missing money will be reimbursed to clients #2, #3, #4, #5 and #6.</p>	09/09/2012			

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	<p>\$20.00.</p> <p>Client #4's financial record indicated staff #3 had balanced the cash on hand on 7/17/12 and it was \$35.16. During the 7/31/12 2:00 PM audit, the actual cash on hand was \$15.16; a discrepancy of \$20.00.</p> <p>Client #5's financial record indicated staff #3 had balanced the cash on hand on 7/17/12 and it was \$45.50. During the 7/31/12 2:00 PM audit, the actual cash on hand was \$25.50; a discrepancy of \$20.00.</p> <p>Client #6's financial record indicated staff #3 had balanced the cash on hand on 7/17/12 and it was \$48.52. During the 7/31/12 2:00 PM audit, the actual cash on hand was \$28.52; a discrepancy of \$20.00.</p> <p>Interview with staff #3 and Qualified Intellectual Disabilities Professional designee/QIDPd #1 on 7/31/12 at 2:15 PM indicated the client funds should be securely locked and counted weekly according to agency policy to assure security of the clients' money. The staff could not find documentation/receipts to explain the discrepancies in accounting and the actual cash on hand.</p>		<p><b>Monitoring of corrective action:</b> The operations manager for supervised group living will review all client finances at periodic intervals while in the home to ensure that weekly finance audits are being completed, verify that all client's monies are documented appropriately and accounted for.</p> <p>Completion Date: 9/9/12</p>				

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	<p>Interview with Operations Director #4 on 8/01/12 at 1:00 PM indicated the discrepancies in the clients' money would be investigated and appropriate corrective action (reimbursement) would be implemented.</p> <p>9-3-2(a)</p>			

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W0195	<p><b>483.440</b> <b>ACTIVE TREATMENT SERVICES</b> The facility must ensure that specific active treatment services requirements are met. Based on observation, interview and record review, the facility failed to meet the Condition of Participation: Active Treatment Services for 1 of 4 sampled clients (#3). The facility failed to ensure the client received a continuous, aggressive active treatment program. The facility failed to ensure facility staff implemented client #3's program plans across all environments/times of the day, to ensure accurate assessments and/or re-assessments were performed as needed, to develop programs for identified training needs, and failed to ensure the client's program plans contained the needed supports for staff to assist the client.</p> <p>Findings include:</p> <ol style="list-style-type: none"> <li>1. The facility failed to ensure each client received a continuous and aggressive active treatment program which addressed the training (formal and informal) needs of client #3. Please see W196.</li> <li>2. The facility failed to assess client #3's behavior of non-compliance with tasks and active treatment programs that resulted in an escalation of behaviors (physical aggression, combativeness)</li> </ol>	W0195	<p><b>W195:</b> The facility must ensure that specific active treatment service requirements are met.</p> <p><b>Corrective Action: (Specific):</b> The program coordinator and staff will be trained on the active treatment process and client #3's program plans. Client #3's assessments will be reviewed to ensure accurate information is obtained and used to revise program plans based on assessment data as indicated.</p> <p><b>How others will be identified (Systemic):</b> The program coordinator will ensure that adequate assessments are obtained upon admission and as changes occur. The assessment data will be used to implement and revise program plans as indicated based on assessment data.</p> <p><b>Measures to be put in place:</b> The program coordinator and staff will be trained on the active treatment process and client #3's program plans. Client #3's assessments will be reviewed to ensure accurate information is obtained and used to revise program plans based on assessment data as indicated</p>	09/09/2012			

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	<p>which resulted in his not participating in active treatment had been assessed. Please see W214.</p> <p>3. The facility failed to ensure client's identified needs in regards to medication and meal refusals and the need for a day service program were addressed for client #3. Please see W227.</p> <p>4. The facility failed to ensure clients #3's program plan contained methodology to support him in toileting skills and wrapping himself in layers of blankets while in bed. Please refer to W240.</p> <p>5. The facility failed to ensure direct care staff implemented client behavior and program plans when formal and informal training opportunities existed for client #3. Please see W249.</p> <p>9-3-4(a)</p>		<p><b>Monitoring of corrective action:</b> The operations manager for supervised group living will review program plans and observe active treatment at periodic intervals in the home to ensure that all client's program plans and active treatment is being implemented accordingly.</p> <p>Completion Date: 9/9/12</p>		

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W0196	<p><b>483.440(a)(1)</b> <b>ACTIVE TREATMENT</b> Each client must receive a continuous active treatment program, which includes aggressive, consistent implementation of a program of specialized and generic training, treatment, health services and related services described in this subpart, that is directed toward:</p> <p>(i) The acquisition of the behaviors necessary for the client to function with as much self determination and independence as possible; and</p> <p>(ii) The prevention or deceleration of regression or loss of current optimal functional status.</p> <p>Based on observation, record review and interview for 1 of 4 sampled clients (#3), the facility failed to ensure client #3 received continuous, aggressive active treatment to increase the behaviors necessary for him to function with as much self determination and independence as possible.</p> <p>Findings include:</p> <p>During observations at the facility on 7/30/12 from 4:15 PM until 6:30 PM clients returned from day services and went about their evening routine of medications, leisure pursuits and mealtime. Client #3 walked about the kitchen area and took a frozen pizza from the refrigerator/freezer. The client was verbally redirected by staff #3 and the pizza was placed back into the freezer by</p>	W0196	<p><b>W196:</b> Each client must receive a continuous active treatment program, which includes aggressive, consistent implementation of a program of specialized and generic training, treatment, health services and related services described in this subpart, that is directed toward:</p> <p>(i) The acquisition of the behaviors necessary for the client to function with as much self determination and independence as possible and (ii) the prevention or deceleration of regression or loss of current optimal functional status.</p> <p><b>Corrective Action: (Specific):</b> The program coordinator and staff will be trained on the active treatment process and client #3's program plans. Client #3's assessments will be reviewed to ensure accurate information is obtained and used to revise</p>	09/09/2012			

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	<p>staff. Staff indicated spaghetti was the evening meal main dish. Clients #1, #2, #4, #5, #6 and #7 came to the dinner table at 5:50 PM with the guidance of staff #4 and #5. Client #3 was not prompted to come to the dining table. Client #3 came to the table at 6:15 PM while his peers were finishing their meal. He ate two bananas and refused the spaghetti with meat sauce, garlic bread and salad.</p> <p>During observations at the facility on 7/31/12 from 6:05 AM until 2:15 PM clients' medications were readied and administered, personal hygiene and dressing were conducted and the breakfast meal was cooked and consumed. Client #3 was observed to be in bed during the entire observation period except briefly at 8:00 AM when he was directed to take his pill form medications under the direct supervision of staff #3 and #6 in the facility's medication area. Staff #3 periodically checked on client #3 as he lay sleeping in his bedroom. Client #3 was observed on 7/31/12 at 11:00 AM and 1:30 PM to have his body rolled in his bedding with his face/head covered. Client #3 did not participate in morning hygiene (handwashing, bathing, toothbrushing), mealtime, dressing or going to day program. Client #3 took medications at 8:00 AM (pill/capsule form medications without water) but did</p>		<p>program plans based on assessment data as indicated. The program coordinator and staff will re trained on the medication administration policy and procedure</p> <p><b>How others will be identified (Systemic):</b> The program coordinator will ensure that adequate assessments are obtained upon admission and as changes occur. The assessment data will be used to implement and revise program plans as indicated based on assessment data. The program coordinator will complete random medication administration observations to ensure that medications are being administered per physician's orders.</p> <p><b>Measures to be put in place:</b> The program coordinator and staff will be trained on the active treatment process and client #3's program plans. Client #3's assessments will be reviewed to ensure accurate information is obtained and used to revise program plans based on assessment data as indicated. The program coordinator and staff will re trained on the medication administration policy and procedure</p> <p><b>Monitoring of corrective action:</b> The operations manager for supervised group living will review program plans and</p>				

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	<p>not take a powder form medication (Miralax for constipation) which required mixing into a liquid.</p> <p>Review of client #3's record on 7/31/12 at 9:00 AM indicated client #3 had an Individual Support Plan dated 10/12/11 with the following training objectives:</p> <ol style="list-style-type: none"> <li>1. Identify difference between paper dollar and coins (by pointing to the dollar) with 2 verbal prompts.</li> <li>2. Will participate in taking his medications/meds (verbal prompt/vp time for meds, vp wash hands, vp get cup for his water, vp take his meds) with one verbal prompt.</li> <li>3. Will "properly" brush his teeth in the AM and PM. With 3 physical prompts/pp client #3 will get his toothbrush, with 3 pp apply toothpaste to toothbrush, with 3 pp will brush his upper, lower, and sides of teeth, staff will monitor to see he is correctly brushing his teeth.</li> <li>4. Will use pedestrian safety skills with 3 vp (with 3 vp client #3 will look both ways before stepping out of the van, with 3 vp client #3 will exit the van to the desired location if no cars or other vehicles are approaching the van.)</li> <li>5. Will wash dirty clothes with 2 vp. With 2 vp staff will remind client #3 it is time to do his laundry. With 2 vp, client #3 will place his dirty clothes into his hamper, with 2 vp, client #3 will take his</li> </ol>		<p>observe active treatment at periodic intervals in the home to ensure that all client's program plans and active treatment is being implemented accordingly.</p> <p>The operations manager for supervised group living will complete random medication observations to ensure that medications are being administered per physician's orders.</p> <p>Completion Date: 9/9/12</p>				

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	<p>hamper to the laundry room and with 2 vp client #3 will place his dirty laundry into the washer.</p> <p>6. Will wash hands before meals with 2 verbal prompts. With 2 vp staff will notify client #3 it is time for dinner, with 2 vp staff will have client #3 go to the nearest sink, with 2 vp client #3 will wash his hands before coming to the table.</p> <p>7. Will with 2 vp, communicate to staff where he would like to go for a recreational outing. Staff will with 2 vp tell client #3 that it is time to participate in a local recreational outing. With 2 vp, client #3 will state to staff where he wants to go. With 2 vp, staff will have client #3 choose from a list of options. Staff will with 2 vp, ask client #3 to participate in the chosen activity for at least 30 minutes. With 2 vp, staff will have client #3 state what he did or did not enjoy about the outing.</p> <p>The record review indicated client #3 had a 4/12/12 Behavior Action Plan which indicated client #3 had the targeted behaviors of physical aggression (hitting, grabbing, head butting, scratching others); throwing objects at staff, other clients or in general; and self-injurious behavior, anytime the client hits himself or objects with the potential to leave a red mark or bruise on his person.</p>						

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	<p>A confidential interview indicated the surveyor should refrain from saying "no" to client #3 during observations at the facility so as not to provoke client #3 to become physically aggressive.</p> <p>Interview with staff #3 on 7/30/12 at 9:45 AM indicated client #3 would not take medications in the traditional way of dispensing them from their containers or mixing medications in water while he witnessed the proceedings. Client #3 would take the polyethylene glycol/Miralax if it was pre-mixed into chocolate milk but only when he was ready to get up and eat and if he did not know the milk contained the medication. The interview indicated client #3 would wrap himself in blankets and comforters as he slept. The staff had placed some bedding in storage in the facility's basement to deal with the behavior.</p> <p>Interview with Qualified Intellectual Disabilities Professional/QIDP #1 on 8/01/12 at 12:45 PM indicated attempts to engage client #3 in the traditional active treatment routine (prompting client #3 to participate in activities, change his clothes after a bowel movement, or get up to eat breakfast or lunch with his peers) could lead to client #3 becoming combative toward peers and staff.</p>				

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	<p>A second confidential interview indicated direct contact staff were "afraid" of being attacked/hurt (head butted and/or scratched) by client #3 so they did not attempt to engage him in activities. Due to fear of provoking client #3 into physical aggression he was allowed to follow his own schedule which involved staying in bed or his room instead of attending a day program or participating in training activities.</p> <p>9-3-4(a)</p>				

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W0214	<p>483.440(c)(3)(iii) INDIVIDUAL PROGRAM PLAN The comprehensive functional assessment must identify the client's specific developmental and behavioral management needs.</p> <p>Based on observation, record review and interview for 1 of 4 sampled clients (#3), the facility failed to ensure the client's behavior of non-compliance with tasks and active treatment programs resulted in an escalation of behaviors (physical aggression, combativeness) which resulted in his not participating in active treatment had been assessed.</p> <p>Findings include:</p> <p>During observations at the facility on 7/30/12 from 4:15 PM until 6:30 PM clients returned from day services and went about their evening routine of medications, leisure pursuits and mealtime. Client #3 walked about the kitchen area and took a frozen pizza from the refrigerator/freezer. The client was verbally redirected by staff #3 and the pizza was placed back into the freezer by staff. Staff indicated spaghetti was the evening meal main dish. Clients #1, #2, #4, #5, #6 and #7 came to the dinner table at 5:50 PM with the guidance of staff #4 and #5. Client #3 was not prompted to come to the dining table. Client #3 came to the table at 6:15 PM while his peers</p>	W0214	<p><b>W214:</b> The comprehensive functional assessment must identify the clients specific developmental and behavioral management needs.</p> <p><b>Corrective Action: (Specific):</b> The program coordinator and staff will be trained on the active treatment process and client #3's program plans. Client #3's assessments will be reviewed to ensure accurate information is obtained and used to revise program plans based on assessment data as indicated. The agency's behavior clinician will review all assessment information and provide input on client #3's programs plans to address behavioral concerns.</p> <p><b>How others will be identified (Systemic):</b> The program coordinator will ensure that adequate assessments are obtained upon admission and as changes occur. The assessment data will be used to implement and revise program plans as indicated based on assessment data.</p> <p><b>Measures to be put in place:</b> The program coordinator and</p>	09/09/2012
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	<p>were finishing their meal. He ate two bananas and refused the spaghetti with meat sauce, garlic bread and salad.</p> <p>During observations at the facility on 7/31/12 from 6:05 AM until 2:15 PM clients' medications were readied and administered, personal hygiene and dressing were conducted and the breakfast meal was cooked and consumed. Client #3 was observed to be in bed during the entire observation period except briefly at 8:00 AM when he was directed to take his pill form medications under the direct supervision of staff #3 and #6 in the facility's medication area. Staff #3 periodically checked on client #3 as he lay sleeping in his bedroom. Client #3 was observed on 7/31/12 at 11:00 AM and 1:30 PM to have his body rolled in his bedding with his face/head covered. Client #3 did not participate in morning hygiene (handwashing, bathing, toothbrushing), mealtime, dressing or going to day program. Client #3 took medications at 8:00 AM (pill/capsule form medications without water) but did not take a powder form medication (Miralax for constipation) which required mixing into a liquid.</p> <p>Review of client #3's record on 7/31/12 at 9:00 AM indicated client #3 had a 4/12/12 Behavior Action Plan and an ISP/</p>		<p>staff will be trained on the active treatment process and client #3's program plans. Client #3's assessments will be reviewed to ensure accurate information is obtained and used to revise program plans based on assessment data as indicated. The agency's behavior clinician will review all assessment information and provide input on client #3's programs plans to address behavioral concerns.</p> <p><b>Monitoring of corrective action:</b> The operations manager for supervised group living will review program plans and observe active treatment at periodic intervals in the home to ensure that all client's program plans and active treatment is being implemented accordingly. The operations manager for supervised group living will review assessment data at admission and at random intervals to ensure that accurate assessments are completed and each client's program plan is written based off the assessment results.</p> <p>Completion Date: 9/9/12</p>				

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	<p>Individual Support Plan with accompanying comprehensive functional assessment/CFA. The BAP indicated client #3 had the targeted behaviors of physical aggression (hitting, grabbing, head butting, scratching others); throwing objects at staff, other clients or in general; and self-injurious behavior, anytime the client hits himself or objects with the potential to leave a red mark or bruise on his person. The review of the BAP/CFA indicated no assessment of the client's behaviors by a skilled professional in behavior management techniques which could be used to address client #3's non-compliance with training activities before his behaviors escalated to aggression and self injury.</p> <p>Interview with Qualified Intellectual Disabilities Professional/QIDP #1 on 8/01/12 at 12:45 PM indicated attempts to engage client #3 in the traditional active treatment routine (prompting client #3 to participate in activities, change his clothes after a bowel movement, or get up to eat breakfast or lunch with his peers) could lead to client #3 becoming combative toward peers and staff. The QIDP could not provide evidence these behaviors had been assessed by the agency's behaviorist.</p> <p>A confidential interview stated direct contact staff were "afraid" of being</p>				

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	<p>attacked/hurt (head butted and/or scratched) by client #3 so they did not attempt to engage him in activities. Due to fear of provoking client #3 into physical aggression, he was allowed to follow his own schedule which involved staying in bed or his room instead of attending a day program or participating in training activities. The interview stated the agency's behaviorist had not "set foot" into the facility to assess/witness client #3's extreme non-compliance and aggressive behaviors.</p> <p>9-3-4(a)</p>			

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W0227	<p><b>483.440(c)(4)</b> <b>INDIVIDUAL PROGRAM PLAN</b> The individual program plan states the specific objectives necessary to meet the client's needs, as identified by the comprehensive assessment required by paragraph (c)(3) of this section.</p> <p>Based on observation, record review and interview for 1 of 4 sampled clients (#3), the facility failed to ensure the client's need for a day service provider, and his medication and meal refusals had been addressed.</p> <p>Findings include:</p> <p>During observations at the facility on 7/30/12 from 4:15 PM until 6:30 PM clients returned from day services and went about their evening routine of medications, leisure pursuits and mealtime. Client #3 walked about the kitchen area and took a frozen pizza from the refrigerator/freezer. The client was verbally redirected by staff #3 and the pizza was placed back into the freezer by staff. Staff indicated spaghetti was the evening meal main dish. Clients #1, #2, #4, #5, #6 and #7 came to the dinner table at 5:50 PM with the guidance of staff #4 and #5. Client #3 was not prompted to come to the dining table. Client #3 came to the table at 6:15 PM while his peers were finishing their meal. He ate two bananas and refused the spaghetti with</p>	W0227	<p><b>W227:</b> The individual program plan states the specific objectives necessary to meet the clients needs, as identified by the comprehensive functional assessment required by paragraph (3) of this section.</p> <p><b>Corrective Action: (Specific):</b> The program coordinator and staff will be trained on the active treatment process and client #3's program plans. Client #3's assessments will be reviewed to ensure accurate information is obtained and used to revise program plans based on assessment data as indicated. The agency's behavior clinician will review all assessment information and provide input on client #3's programs plans to address behavioral concerns. The program coordinator and staff will re trained on the medication administration policy and procedure</p> <p><b>How others will be identified (Systemic):</b> The program coordinator will ensure that adequate assessments are obtained upon admission and as changes occur. The assessment</p>	09/09/2012			

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	<p>meat sauce, garlic bread and salad.</p> <p>During observations at the facility on 7/31/12 from 6:05 AM until 2:15 PM clients' medications were readied and administered, personal hygiene and dressing were conducted and the breakfast meal was cooked and consumed. Client #3 was observed to be in bed during the entire observation period except briefly at 8:00 AM when he was directed to take his pill form medications under the direct supervision of staff #3 and #6 in the facility's medication area. Staff #3 periodically checked on client #3 as he lay sleeping in his bedroom. Client #3 was observed on 7/31/12 at 11:00 AM and 1:30 PM to have his body rolled in his bedding with his face/head covered. Client #3 did not participate in morning hygiene (handwashing, bathing, toothbrushing), mealtime, dressing or going to day program. Client #3 took medications at 8:00 AM (pill/capsule form medications without water) but did not take a powder form medication (Miralax for constipation) which required mixing into a liquid.</p> <p>Review of client #3's record on 7/31/12 at 9:00 AM indicated client #3 had a 4/12/12 Behavior Action Plan and an ISP/ Individual Support Plan with accompanying comprehensive functional</p>		<p>data will be used to implement and revise program plans as indicated based on assessment data. The program coordinator will complete random medication administration observations to ensure that medications are being administered per physician's orders.</p> <p><b>Measures to be put in place:</b> The program coordinator and staff will be trained on the active treatment process and client #3's program plans. Client #3's assessments will be reviewed to ensure accurate information is obtained and used to revise program plans based on assessment data as indicated. The agency's behavior clinician will review all assessment information and provide input on client #3's programs plans to address behavioral concerns. The program coordinator and staff will re trained on the medication administration policy and procedure</p> <p><b>Monitoring of corrective action:</b> The operations manager for supervised group living will review program plans and observe active treatment at periodic intervals in the home to ensure that all client's program plans and active treatment is being implemented accordingly. The operations manager for supervised group living will review assessment data at admission</p>		

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	<p>assessment/CFA. The BAP indicated client #3 had the targeted behaviors of physical aggression (hitting, grabbing, head butting, scratching others); throwing objects at staff, other clients or in general; and self-injurious behavior, anytime the client hits himself or objects with the potential to leave a red mark or bruise on his person. The review of the BAP/CFA indicated the client's refusals to participate in mealtime had not been addressed, his non-compliance with taking liquid medications nor his lack of a outside services participation (habilitation or workshop program) had been addressed.</p> <p>Interview with staff #3 on 7/30/12 at 9:45 AM indicated client #3 would not take medications in the traditional way of dispensing them from their containers or mixing medications in water while he witnessed the proceedings. Client #3 would take the polyethylene glycol/Miralax if it was pre-mixed into chocolate milk but only when he was ready to get up and eat and if he did not know the milk contained the medication.</p> <p>Interview with Qualified Intellectual Disabilities Professional/QIDP #1 on 8/01/12 at 12:45 PM indicated attempts to engage client #3 in the traditional active treatment routine could lead to client #3</p>		<p>and at random intervals to ensure that accurate assessments are completed and each client's program plan is written based off the assessment results. The operations manager for supervised group living will complete random medication observations to ensure that medications are being administered per physician's orders</p> <p>Completion Date: 9/9/12</p>		

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	<p>becoming combative toward peers and staff. The interview indicated client #3 was in need of a day service program suited to his individual needs. The interview indicated client #3's medication and meal refusals had not been addressed.</p> <p>A confidential interview stated direct contact staff were "afraid" of being attacked/hurt (head butted and/or scratched) by client #3 so they did not attempt to engage him in activities. Due to fear of provoking client #3 into physical aggression he was allowed to follow his own schedule which involved staying in bed or his room instead of attending a day program or participating in training activities.</p> <p>9-3-4(a)</p>				

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W0240	<p><b>483.440(c)(6)(i)</b> <b>INDIVIDUAL PROGRAM PLAN</b> The individual program plan must describe relevant interventions to support the individual toward independence.</p> <p>Based on observation, record review and interview for 1 of 4 sampled clients (#3), the facility failed to ensure client #3's program plan contained methodology to support him in toileting skills and wrapping himself in layers of blankets while in bed.</p> <p>Findings include:</p> <p>During observations at the facility on 7/30/12 from 4:15 PM until 6:30 PM clients returned from day services and went about their evening routine of medications, leisure pursuits and mealtime. Client #3 walked about the kitchen area and took a frozen pizza from the refrigerator/freezer. The client was verbally redirected by staff #3 and the pizza was placed back into the freezer by staff. Staff indicated spaghetti was the evening meal main dish. Clients #1, #2, #4, #5, #6 and #7 came to the dinner table at 5:50 PM with the guidance of staff #4 and #5. Client #3 was not prompted to come to the dining table. Client #3 came to the table at 6:15 PM while his peers were finishing their meal. He ate two bananas and refused the spaghetti with meat sauce, garlic bread and salad.</p>	W0240	<p><b>W240:</b> The individual program plan must describe relevant interventions to support the individual toward independence.</p> <p><b>Corrective Action: (Specific):</b> The program coordinator and staff will be trained on the active treatment process and client #3's program plans. Client #3's assessments will be reviewed to ensure accurate information is obtained and used to revise program plans based on assessment data as indicated. The agency's behavior clinician will review all assessment information and provide input on client #3's programs plans to address behavioral concerns. The program coordinator and staff will re trained on the medication administration policy and procedure</p> <p><b>How others will be identified (Systemic):</b> The program coordinator will ensure that adequate assessments are obtained upon admission and as changes occur. The assessment data will be used to implement and revise program plans as indicated based on assessment data. The program coordinator will complete random medication administration observations to</p>	09/09/2012			

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	<p>During observations at the facility on 7/31/12 from 6:05 AM until 2:15 PM clients' medications were readied and administered, personal hygiene and dressing were conducted and the breakfast meal was cooked and consumed. Client #3 was observed to be in bed during the entire observation period except briefly at 8:00 AM when he was directed to take his pill form medications under the direct supervision of staff #3 and #6 in the facility's medication area. Staff #3 periodically checked on client #3 as he lay sleeping in his bedroom. Client #3 was observed on 7/31/12 at 11:00 AM and 1:30 PM to have his body rolled in his bedding with his face/head covered. Client #3 did not participate in morning hygiene (handwashing, bathing, toothbrushing), mealtime, dressing or going to day program. Client #3 took medications at 8:00 AM (pill/capsule form medications without water) but did not take a powder form medication (Miralax for constipation) which required mixing into a liquid.</p> <p>Review of client #3's record on 7/31/12 at 9:00 AM indicated the client's 10/12/11 Individual Support Plan and the 4/12/12 Behavior Action Plan contained no methods to address client #3's unwillingness to have bowel movements</p>		<p>ensure that medications are being administered per physician's orders.</p> <p><b>Measures to be put in place:</b> The program coordinator and staff will be trained on the active treatment process and client #3's program plans. Client #3's assessments will be reviewed to ensure accurate information is obtained and used to revise program plans based on assessment data as indicated. The agency's behavior clinician will review all assessment information and provide input on client #3's programs plans to address behavioral concerns. The program coordinator and staff will re trained on the medication administration policy and procedure</p> <p><b>Monitoring of corrective action:</b> The operations manager for supervised group living will review program plans and observe active treatment at periodic intervals in the home to ensure that all client's program plans and active treatment is being implemented accordingly. The operations manager for supervised group living will review assessment data at admission and at random intervals to ensure that accurate assessments are completed and each client's program plan is written based off the assessment results. The operations manager for</p>				

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	<p>in the toilet instead of his clothing while lying in bed. There was no methodology to address the client's habit of wrapping himself in bedding while in bed.</p> <p>Interview with staff #3 on 7/30/12 at 9:45 AM indicated client #3 would wrap himself in blankets and comforters as he slept. The staff had placed some bedding in storage in the facility's basement to deal with the behavior.</p> <p>Interview with Qualified Intellectual Disabilities Professional/QIDP #1 on 8/01/12 at 12:45 PM indicated no methodology to deal with client #3's refusal to change his clothes after a bowel movement while lying in bed.</p> <p>9-3-4(a)</p>		<p>supervised group living will complete random medication observations to ensure that medications are being administered per physician's orders</p> <p>Completion Date: 9/9/12</p>		

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W0249	<p><b>483.440(d)(1) PROGRAM IMPLEMENTATION</b></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, record review and interview for 1 of 4 sampled clients (client #3), the facility failed to implement client #3's training objectives during formal and informal opportunities.</p> <p>Findings include:</p> <p>During observations at the facility on 7/30/12 from 4:15 PM until 6:30 PM clients returned from day services and went about their evening routine of medications, leisure pursuits and mealtime. Client #3 walked about the kitchen area and took a frozen pizza from the refrigerator/freezer. The client was verbally redirected by staff #3 and the pizza was placed back into the freezer by staff. Staff stated "No, we are having something else for supper." Clients #1, #2, #4, #5, #6 and #7 came to the dinner table at 5:50 PM with the guidance of staff #4 and #5. Client #3 was not prompted to come to the dining table. Client #3 came to the table at 6:15 PM while his peers were finishing their meal.</p>	W0249	<p><b>W249:</b> 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><b>Corrective Action: (Specific):</b> The program coordinator and staff will be trained on the active treatment process and client #3's program plans. Client #3's assessments will be reviewed to ensure accurate information is obtained and used to revise program plans based on assessment data as indicated. The agency's behavior clinician will review all assessment information and provide input on client #3's programs plans to address behavioral concerns. The program coordinator and staff will re trained on the medication administration policy and procedure</p>	09/09/2012

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	<p>He ate two bananas and refused to partake of the spaghetti with meat sauce, garlic bread or salad.</p> <p>During observations at the facility on 7/31/12 from 6:05 AM until 2:15 PM clients' medications were readied and administered, personal hygiene and dressing were conducted and the breakfast meal was cooked and consumed. Client #3 was observed to be in bed during the entire observation period except briefly at 8:00 AM when he was directed to take his pill form medications under the direct supervision of staff #3 and #6 in the facility's medication area. Staff #3 periodically checked on client #3 as he lay sleeping in his bedroom. Client #3 was observed on 7/31/12 at 11:00 AM and 1:30 PM to have his body rolled in his bedding with his face/head covered. Client #3 did not participate in morning hygiene (handwashing, bathing, toothbrushing), mealtime, dressing or going to day program. Client #3 took medications at 8:00 AM (pill/capsule form medications without water) but did not take a powder form medication (Miralax for constipation) which required mixing into a liquid. During the two observation periods, staff did not engage client #3 in any of his training objectives. Staff #3 incorrectly redirected client #3 by</p>		<p><b>How others will be identified (Systemic):</b> The program coordinator will ensure that adequate assessments are obtained upon admission and as changes occur. The assessment data will be used to implement and revise program plans as indicated based on assessment data. The program coordinator will complete random medication administration observations to ensure that medications are being administered per physician's orders.</p> <p><b>Measures to be put in place:</b> The program coordinator and staff will be trained on the active treatment process and client #3's program plans. Client #3's assessments will be reviewed to ensure accurate information is obtained and used to revise program plans based on assessment data as indicated. The agency's behavior clinician will review all assessment information and provide input on client #3's programs plans to address behavioral concerns. The program coordinator and staff will re trained on the medication administration policy and procedure</p> <p><b>Monitoring of corrective action:</b> The operations manager for supervised group living will review program plans and observe active treatment at</p>				

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	<p>telling him "no" during the evening observation.</p> <p>Review of client #3's record on 7/31/12 at 9:00 AM indicated client #3 had an Individual Support Plan dated 10/12/11 with the following training objectives:</p> <ol style="list-style-type: none"> <li>1. Identify difference between paper dollar and coins (by pointing to the dollar) with 2 verbal prompts.</li> <li>2. Will participate in taking his medications/meds (verbal prompt/vp time for meds, vp wash hands, vp get cup for his water, vp take his meds) with one verbal prompt.</li> <li>3. Will "properly" brush his teeth in the AM and PM. With 3 physical prompts/pp client #3 will get his toothbrush, with 3 pp apply toothpaste to toothbrush, with 3 pp will brush his upper, lower, and sides of teeth, staff will monitor to see he is correctly brushing his teeth.</li> <li>4. Will use pedestrian safety skills with 3 vp (with 3 vp client #3 will look both ways before stepping out of the van, with 3 vp client #3 will exit the van to the desired location if no cars or other vehicles are approaching the van.)</li> <li>5. Will wash dirty clothes with 2 vp. With 2 vp staff will remind client #3 it is time to do his laundry. With 2 vp, client #3 will place his dirty clothes into his hamper, with 2 vp, client #3 will take his hamper to the laundry room and with 2 vp</li> </ol>		<p>periodic intervals in the home to ensure that all client's program plans and active treatment is being implemented accordingly. The operations manager for supervised group living will review assessment data at admission and at random intervals to ensure that accurate assessments are completed and each client's program plan is written based off the assessment results. The operations manager for supervised group living will complete random medication observations to ensure that medications are being administered per physician's orders</p> <p>Completion Date: 9/9/12</p>	

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	<p>client #3 will place his dirty laundry into the washer.</p> <p>6. Will wash hands before meals with 2 verbal prompts. With 2 vp staff will notify client #3 it is time for dinner, with 2 vp staff will have client #3 go to the nearest sink, with 2 vp client #3 will wash his hands before coming to the table.</p> <p>7. Will with 2 vp, communicate to staff where he would like to go for a recreational outing. Staff will with 2 vp tell client #3 that it is time to participate in a local recreational outing. With 2 vp, client #3 will state to staff where he wants to go. With 2 vp, staff will have client #3 choose from a list of options. Staff will with 2 vp, ask client #3 to participate in the chosen activity for at least 30 minutes. With 2 vp, staff will have client #3 state what he did or did not enjoy about the outing.</p> <p>The record review indicated client #3 had a 4/12/12 Behavior Action Plan/BAP which indicated client #3 had the targeted behaviors of physical aggression (hitting, grabbing, head butting, scratching others), throwing objects at staff other clients or in general, self-injurious behavior defined as anytime the client hits himself or objects with the potential to leave a red mark or bruise on his person. The BAP indicated client #3's behaviors could be "set off" by ignoring him, loud noises and telling him</p>			

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	<p>"no."</p> <p>Interview with Qualified Intellectual Disabilities Professional/QIDP #1 on 8/01/12 at 12:45 PM indicated all clients should be engaged in training objectives. The interview also indicated attempts to engage client #3 in the traditional active treatment routine (prompting client #3 to participate in activities, change his clothes after a bowel movement, or get up to eat breakfast or lunch with his peers) could lead to client #3 becoming combative toward peers and staff.</p> <p>A confidential interview stated direct contact staff were "afraid" of being attacked/hurt by client #3 so they did not attempt to engage him in activities but allowed him to follow his own schedule.</p> <p>9-3-4(a)</p>				

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W0369	<p>483.460(k)(2) DRUG ADMINISTRATION</p> <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 30 medications observed (client #3), the facility failed to ensure all prescribed medications were administered.</p> <p>Findings include:</p> <p>During observations at the facility on 7/31/12 from 6:00 AM until 8:00 AM clients' medications were readied and administered. At 6:15 AM, staff #6 poured 17 grams of polyethylene glycol powder (generic form of Miralax for constipation) and left it on the table in the locked medication room. According to staff #6 on 7/31/12 at 6:15 AM, the powder was for client #3. Staff #6 administered medications to clients #1, #2, #4, #5, #6, and #7. At 8:00 AM on 7/31/12, staff #3 prompted client #3 to get out of bed and come to the medication room. Client #3 did not take the Miralax. At 12:50 PM on 7/31/12, client #3 was still in bed and had not yet taken the Miralax.</p> <p>Review of client #3's 7/12 MAR/medication administration record</p>	W0369	<p><b>W369:</b> The system for drug administration must assure that all drugs, including those that are self-administered, are administered without error.</p> <p><b>Corrective Action: (Specific):</b> The Program Coordinator and staff will be trained on the medication administration policy and procedure.</p> <p><b>How others will be identified (Systemic):</b> The program coordinator and staff will check the client name and specific orders on the medication administration record against the label to ensure that medications are being given as ordered by the physician.</p> <p><b>Measures to be put in place:</b> The Program Coordinator and staff will be trained on the medication administration policy and procedure.</p> <p><b>Monitoring of corrective action:</b> The operations manager for supervised group living or the nurse will complete medication administration observations at random intervals to ensure that all medications are being administered per physician's</p>	09/09/2012

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	<p>on 7/31/12 at 9:00 AM indicated client #3 was to receive 17 grams of polyethylene glycol in 4 to 8 ounces of water daily at 7:00 AM.</p> <p>Interview with staff #6 and #3 on 7/31/12 at 9:45 AM indicated client #3 would not take medications in the traditional way of dispensing them from their containers or mixing medications in water while he witnessed the proceedings. Client #3 would take the polyethylene glycol/Miralax if it was pre-mixed into chocolate milk but only when he was ready to get up and eat.</p> <p>9-3-6(a)</p>		<p>orders.</p> <p>Completion Date: 9/9/12</p>	