

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 15G554	X2) MULTIPLE CONSTRUCTION A. BUILDING 00 B. WING _____	X3) DATE SURVEY COMPLETED 01/24/2014
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NAME OF PROVIDER OR SUPPLIER DEVELOPMENTAL SERVICE ALTERNATIVES INC	STREET ADDRESS, CITY, STATE, ZIP CODE 1435 W CONGRESS ST MIDDLETOWN, IN 47356
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W000000	<p>This visit was for an annual fundamental recertification and state licensure survey.</p> <p>Survey Dates: January 15, 16, 17 and 24, 2014.</p> <p>Facility Number: 001068 Provider Number: 15G554 AIMS Number: 100239880</p> <p>Surveyor: Vickie Kolb, RN</p> <p>These federal deficiencies also reflect state findings in accordance with 460 IAC 9. Quality Review completed 1/31/14 by Ruth Shackelford, QIDP.</p>	W000000		
W000104	<p>483.410(a)(1) GOVERNING BODY The governing body must exercise general policy, budget, and operating direction over the facility.</p> <p>Based on observation, interview and record review for 3 of 3 sampled clients (#1, #2 and #3) and 3 additional clients (#4, #5 and #6), the facility's governing body failed to exercise general policy and operating direction over the facility to ensure:</p>	W000104	<p>W104-Facility staff will receive additional training on the requirement to report and investigate client to client abuse and injuries of unknown origin. The administrator will routinely review documentation and complete observations in the</p>	02/23/2014

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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	<p>__ All client to client abuse was reported immediately to the administrator and to the Bureau of Developmental Disabilities Services (BDDS) per 460 IAC 9-3-1(b)(5) and to Adult Protective Services (APS) per IC 12-10-3 in accordance with state law and to ensure all injuries of unknown origin were reported immediately to the administrator for clients #1, #2, #3, #4, #5 and #6.</p> <p>__ All allegations of client to client abuse and injuries of unknown origin were thoroughly investigated for clients #1, #2, #3, #4, #5 and #6.</p> <p>__ The clients' cash on hand money was secured and maintained at the clients' group home.</p> <p>__ The environment was free of bedbugs.</p> <p>Findings include:</p> <p>1. Please see W149: The governing body failed to exercise general policy and operating direction over the facility to ensure all allegations of client to client abuse were immediately reported to the administrator and to BDDS/APS in accordance with state law, to ensure all injuries of unknown origin were reported immediately to the administrator and to ensure all client to client abuse and injuries of unknown origin were thoroughly investigated for</p>		<p>home a minimum of biweekly to assure that instances of client to client abuse and injuries of unknown origin are properly reported to all applicable entities and investigated. Facility staff will receive training regarding the requirement to assure that cash on hand money is secured and maintained in the group home. Professional staff will complete unannounced audits of the cash to assure compliance not less than bi-weekly. The facility aggressively treated the bedbugs, which are a nationwide epidemic, and the treatment was completed by a reputable national company multiple times. Consulting the CDC (Center for Disease Control) website yields that bedbugs "should not be considered as a medical or public health hazard" and "not considered to be dangerous". The facility will be inspected not less than quarterly to assure ongoing pest control and more frequently should any concerns of bedbugs be again noted. Facility staff have received training to notify the administrator should there be any future bedbug sightings and professional staff will be trained regarding the requirement to report to BDDS should any future issues with bedbugs.</p>				

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	<p>clients #1, #2, #3, #4, #5 and #6.</p> <p>2. Please see W153: The governing body failed to exercise general policy and operating direction over the facility to ensure all allegations of client to client abuse were immediately reported to the administrator and to BDDS/APS in accordance with state law and to ensure all injuries of unknown origin were immediately reported to the administrator for clients #1, #2, #3, #4, #5 and #6.</p> <p>3. Please see W154: The governing body failed to exercise general policy and operating direction over the facility to ensure thorough investigations were conducted for clients #1, #2, #3, #4, #5 and #6 in regard to client to client abuse and injuries of unknown origin.</p> <p>4. On 1/16/14 between 2:45 PM and 3:15 PM, the clients' (#1, #2, #3, #4, #5 and #6) financial records were reviewed with the RC (Residential Coordinator). The RC brought a large plastic tool box with a pad lock on it to the facility office with the clients' money in it. The money was counted with the RC. Client #1 had \$119.27, client #2 had \$100.60 and client #3 had \$81.58.</p> <p>During interview with the RC on</p>						

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	<p>1/16/14 at 3 PM, the RC indicated the RC kept \$5 to \$10 of the clients' money for each client in the group home for the clients to use for spending money in case the clients wanted to go out or to purchase something. The RC indicated she kept a total average of \$100 of each client's money (a total of \$600) on hand for the clients locked up in a safe in her home (the RC's place of residence). The RC indicated when the clients' spending money was gone, she would take money from the clients' cash from her safe at her home and replenish the cash on hand in the group home for the clients. The RC indicated when the clients' cash on hand in her safe was running low, she would go to the bank and take money from each clients' bank account to replenish her supply she kept at her home to bring the total for each client back up to \$100 per client (a total of \$600). The RC stated, "The RCs were told we were responsible for their (the clients') money, so we take it home with us. We (the RCs) all do it." When asked if the RC was then acting as a financial institution similar to a bank, the RC stated, "Yes, I guess you could say that."</p> <p>Interview with the AD (Area Director) on 1/17/14 at 4 PM indicated it was the facility policy for the RC to be responsible for client #1's, #2's, #3's,</p>			

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	<p>#4's, #5's and #6's cash on hand. The AD indicated the money was to be maintained in a cash box with a lock and was taken out of the group home for the monthly audit. The AD indicated it was by choice by the RC how the money was maintained and ultimately the RC was responsible to keep the clients' money safe.</p> <p>Review of the revised "Reconciliation of Consumer Finances" facility policy dated 9/13 on 1/16/14 at 2:45 PM indicated "To assure that consumers' finances are protected, when a consumer or his/her guardian allows DSA, Inc. to assume responsibility for his/her financial accounts, DSA, Inc. will regularly monitor the consumer's financial records. DSA, Inc. employs a cashbox system to ensure that consumers' finances are accurately reconciled on a regular basis.... Each cash box shall be locked with a padlock accessible only by a key signed out to the RC or LDSP (QIDP - Qualified Intellectual Disabilities Professional) responsible for the cash box and by a duplicate key secured by the Area Director (AD). Responsibility for the contents of the cash box shall be fixed with the RC or LDSP to whom the cash box is assigned...." The facility financial policy did not indicate the RC was to</p>				

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	<p>remove the clients' money from the group home and store the money in the RC's residence.</p> <p>5. The facility's reportable records were reviewed on 1/15/14 at 1 PM. The facility records indicated no reports of bed bug infestation and/or the need for exterminators.</p> <p>Interview with the QIDP (Qualified Intellectual Disabilities Professional) on 1/15/14 at 2 PM indicated professional exterminators had been to the group home where clients #1, #2, #3, #4, #5 and #6 resided to spray for bed bugs. The QIDP provided receipts for review. The QIDP indicated the clients' beds and mattresses were replaced in order to rid the home of bed bugs.</p> <p>Review of the contract and receipts from the professional exterminator on 1/15/14 at 2:15 PM indicated: ___6/20/13 a contract with a professional exterminator for the extermination of bedbugs. ___8/19/13 a hand written note indicating a message had been left with the exterminators. ___9/23/13 a hand written note indicating the exterminator had been called again. The note indicated the exterminator had not gotten the previous messages and the</p>			

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	<p>calls were forwarded to someone else while he (the exterminator) was out of his office.</p> <p>__9/26/13 "Treated room baseboards, bed frames and mattresses" for bed bug activity.</p> <p>__10/2/13 "Extra treatment for bed bugs through entire house. No bed bug activity found."</p> <p>__10/28/13 treated four of the clients' bedrooms, the living room, the recreation room and the kitchen furniture for bed bugs.</p> <p>__11/1/13 the public areas and the guest rooms were treated for bed bug activity.</p> <p>__11/19/13 "Bedrooms #1 and #4 complete bed bug treatments. Bedroom #1 found 7 dead bedbugs. Bedrooms #2 and #3, bed bug inspections and no alive activity found."</p> <p>__12/20/13 "Treated both bed frames, 1 mattress and 1 bedspring."</p> <p>Review of client #1's, #2's, #3's, #4's, #5's and #6's Injury/Illness and Full Body Check Reports for 2013 on 1/17/14 at 8 AM indicated:</p> <p>Client #2's reports indicated 12/19/13 client #2 "has bite marks on her arm and on her neck from the bed bugs."</p> <p>Client #3's reports indicated: 8/10/13 at 9:53 PM "[Client #3]</p>			

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	<p>continues to have a bite on his inner thigh, it is red all around it as a reaction to the bite, I believe." 8/14/13 at 8:04 PM "has 1/8 inch pinkish red bug bites on both arms." 8/26/13 at 10:42 PM "had several pink bumps on his arm." 8/31/13 at 8:52 PM "continues to have 1/4 inch in diameter pink spots on his arms." 9/8/13 at 8:56 PM "still has little pink circles on him." 9/9/13 at 8:36 PM "still has small pink circles that are now reaching up to his neck." 9/12/13 at 7:48 PM "appears to have a boil on his inner thigh." 9/16/13 at 102 PM "has a red bump on his inner right thigh, as well as an infected hair on his right knee." 9/26/13 at 8 PM "red sore on inner thigh (not a new thing has been there for about a week or so.)" 10/13/13 at 2:59 PM "[Client #3] continues to have small pink dots about 1/4 of an inch all over him."</p> <p>Client #4's reports indicated: 9/30/13 at 9:12 PM "has a red bumpy rash on the right side of his back." The report indicated the nurse was notified. 10/14/13 at 11:24 PM "has what I am assuming to be bed bug bites on his neck, as we know the house is infected</p>			

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W000120	<p>and it is clearly a bite."</p> <p>Client #5's reports indicated: 10/12/13 at 1:57 PM "has some red marks on his shoulder, neck and arms." 10/20/13 at 8:38 PM "[Client #5] had quite a few red bumps on his arms that looked like bug bites. They didn't show up until later on in the day." The report indicated the staff notified the RD (Residential Director). 10/21/13 at 7:28 PM "red sore on right lower arm, previously documented."</p> <p>Client #6's reports indicated 11/19/13 while getting up to go to the bathroom, the staff noticed "numerous red whelps/bites (sic) on his face. Will notify the nurse."</p> <p>During interview with the Area Director (AD) on 1/17/14 at 3 PM, the AD indicated the infestation of bed bugs had not been reported to BDDS.</p> <p>9-3-1(a)</p> <p>483.410(d)(3) SERVICES PROVIDED WITH OUTSIDE SOURCES The facility must assure that outside services meet the needs of each client.</p>			
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	<p>Based on record review and interview for 3 of 3 sampled clients (#1, #2 and #3), the facility failed to ensure the clients' school teachers were included in the development and implementation of the clients' BSPs (Behavior Support Plans) and ISPs (Individualized Support Plans) and provided a copy of the clients' current ISPs and BSPs to the clients' teachers.</p> <p>Findings include:</p> <p>Client #1's record was reviewed on 1/16/14 at 11 AM. Client #1's record indicated client #1 had diagnoses of, but not limited to, Severe Intellectual Disability, Cerebral Palsy, Contractures and Seizure Disorders. Client #1's record indicated client #1 was non-ambulatory and used a wheel chair for mobility. The record indicated the client required staff assistance to meet all of her basic needs of bathing, toileting, dressing, hygiene and dining. Client #1's record indicated client #1 attended a local high school during the day. Client #1's ISP dated 2/13/13 did not indicate client #1's teacher attended client #1's program meetings and/or participated in the development of client #1's programs.</p> <p>Client #2's record was reviewed on 1/16/14 at 2 PM. Client #2's record</p>	W000120	W120-The QIDP will receive additional training to assure that school teachers receive copies of Individualized Support Plans (ISP's) and Behavior Support Plans (BSP's). The training will additionally include that the school teachers are included in the development and implementation of the ISP's and BSP's and that they are invited to meetings regarding such. The Area Director will monitor meeting notices to assure that all applicable parties are invited. Additionally, the Area Director will interact with school personnel on a monthly basis to assure that any concerns have been addressed and input obtained as necessary.	02/23/2014			

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	<p>indicated client #2 had diagnoses of, but not limited to, Profound Intellectual Disability and Autism. Client #2's record indicated an ISP dated 11/7/13. Client #2's BSP dated 11/2/13 indicated client #2 had targeted behaviors of physical aggression, property destruction, anger control, incontinence, inappropriate nudity and resistance. Client #2's record indicated client #2 attended a local high school during the day. Client #2's ISP/BSP did not indicate client #2's teacher attended client #2's program meetings and/or participated in the development of client #2's programs.</p> <p>Client #3's record was reviewed on 1/16/14 at 4:30 PM. Client #3's record indicated client #3 had diagnoses of, but not limited to, Moderate Intellectual Disability, Autism, Chronic Allergic Conjunctivitis (eye infections) and Chronic constipation. Client #3's record indicated an ISP dated 9/11/13. Client #3's BSP dated 10/10/13 indicated client #3 had targeted behaviors of resistance, property misuse/destruction, abnormal moods, physical aggression, anger control, self injurious behaviors and inappropriate social behaviors. Client #3's record indicated client #3 attended a local high school during the day. Client #3's ISP/BSP did not indicate client #3's teacher attended client #3's program</p>			

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	<p>meetings and/or participated in the development of client #3's programs.</p> <p>Interview with client #3's school teacher on 1/17/14 at 12:35 PM indicated she had not been invited to attend client #3's program meetings. Client #3's teacher stated, "I have him on a holding plan here at school that I devised. Many times what they do in the group home doesn't work here at the school." The teacher stated, "I don't have a lot of communication from the group home. I just call the office when I need someone." The teacher indicated the facility had not provided her with a copy of client #3's ISP and BSP.</p> <p>Interview with client #1's and #2's school teacher on 1/17/14 at 12:50 PM indicated she had not been invited to attend client #1's and #2's program meetings. The teacher stated, "There is not a lot of communication from the group home. Many times I don't even know who to call if I do have a problem." The teacher stated she had ordered a "potty chair" for client #1 to use at the school to help her with her toileting and had tried it for the first time the morning of 1/17/14. The teacher stated she did not know if client #1 used a "potty chair" while in the group home, "I just thought it would be a good idea."</p>			

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	<p>The teacher indicated client #1 was in her wheel chair from the time she got to school until 11:45 AM when she was laid down on a cot for a nap. Client #1's teacher indicated she did not have a specific toileting, positioning and/or dining plan for client #1. Client #1's and #2's teacher indicated the facility had not provided the school with a copy of client #1's and #2's ISPs, BSPs and dining plans.</p> <p>Interview with the QIDP (Qualified Intellectual Disabilities Professional) on 1/17/14 at 2 PM stated she was not aware the school had ordered a "potty chair" for client #1 to use while at school. The QIDP indicated it was a good idea and was going to see what kind of chair it was and see about getting one for the group home as well.</p> <p>Telephone interview with the QIDP on 1/24/14 at 7:30 AM indicated the school was to be provided with client #1's, #2's and #3's program plans and the teachers were to be invited to all of the program meetings.</p> <p>9-3-1(a)</p>				

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W000149	<p>483.420(d)(1) STAFF TREATMENT OF CLIENTS The facility must develop and implement written policies and procedures that prohibit mistreatment, neglect or abuse of the client. Based on record review and interview for 3 of 3 sample clients (#1, #2 and #3) and 3 additional clients (#4, #5 and #6), the facility neglected to implement written policy and procedures: ___ To ensure all client to client abuse was reported immediately to the administrator and to the Bureau of Developmental Disabilities Services (BDDS) per 460 IAC 9-3-1(b)(5) and to Adult Protective Services (APS) per IC 12-10-3 in accordance with state law for clients #1, #2, #3, #4, #5 and #6. ___ To ensure all allegations of client to client abuse and injuries of unknown origin were thoroughly investigated for clients #1, #2, #3, #4, #5 and #6.</p> <p>Findings include: The facility's policies and procedures were reviewed on 1/15/14 at 2 PM. The revised 10/13 facility policy entitled "Preventing Abuse and Neglect" indicated: ___ "DSA, Inc. Prohibits abuse, neglect, exploitation, mistreatment or violation of the rights of the consumers it serves. DSA, Inc. asserts that sensitizing employees to the various forms that</p>	W000149	W149-Facility staff will receive additional training on the requirement to report and investigate client to client abuse and injuries of unknown origin. Further, the administrator will routinely review documentation and complete observations in the home a minimum of biweekly to assure that instances of client to client abuse and injuries of unknown origin are properly reported and investigated.	02/23/2014			

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	<p>abuse and neglect may take is a primary method of prevention...." The policy indicated the definition of abuse to be, but not limited to, intentional or willful infliction of physical injury, unnecessary use of physical or chemical restraints or isolation and violation of the individual's rights. The policy indicated "Rights to be those rights guaranteed by the Constitution of the United States and the Constitution of Indiana and as set forth by IC 12-27."</p> <p>___ "Immediately upon learning of an allegation of abuse/neglect, exploitation... including injury during containment or suicidal gesture, staff are required to immediately report the incident to the Residential Director (RD) on-call." The RD on call will inform the Area Director (AD) and will "Report the incident to BQIS (Bureau of Quality Improvement Services) and any other applicable state or federal policy as required by Policy No. 8.01.01."</p> <p>___ "Immediately upon receiving notification of the incident from the RD the AD will initiate an investigation of the allegation(s)...."</p> <p>The revised 3/11 facility policy entitled "Investigating Injuries of Unknown Origin" indicated "Any injury to a consumer when the cause is unknown must be reported immediately to the</p>			

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	<p>Administrator...." The policy indicated all injuries of unknown origin were to be investigated thoroughly.</p> <p>Please see W153: For 14 of 22 allegations of abuse/neglect reviewed, the facility failed to ensure all allegations of client to client abuse for clients #1, #2, #3, #4, #5 and #6 were immediately reported to the administrator and to BDDS and APS in accordance with state law and for 36 of 39 injuries of unknown origin for clients #1, #2, #4, #5 and #6, the facility failed to ensure all injuries of unknown origin were immediately reported to the administrator.</p> <p>Please see W154: For 14 of 22 allegations of abuse/neglect/client to client abuse and for 36 of 39 injuries of unknown origin reviewed for clients #1, #2, #3, #4, #5 and #6, the facility failed to ensure all allegations of client to client abuse and all injuries of unknown origin were thoroughly investigated.</p> <p>9-3-2(a)</p>				

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W000153	<p>483.420(d)(2) STAFF TREATMENT OF CLIENTS The facility must ensure that all allegations of mistreatment, neglect or abuse, as well as injuries of unknown source, are reported immediately to the administrator or to other officials in accordance with State law through established procedures. Based on record review and interview for 14 of 22 allegations of abuse/neglect reviewed, the facility failed to ensure all allegations of client to client abuse for clients #1, #2, #3, #4, #5 and #6 were immediately reported to the administrator and to the Bureau of Developmental Disabilities Services (BDDS) per 460 IAC 9-3-1(b)(5) and to Adult Protective Services (APS) per IC 12-10-3 in accordance with state law and for 36 of 39 injuries of unknown origin for clients #1, #2, #4, #5 and #6, the facility failed to ensure all injuries of unknown origin were immediately reported to the administrator.</p> <p>Findings include:</p> <p>Client #1's, #2's, #3's, #4's, #5's and #6's Behavior Detail Reports for October 2013 through January 2014 were reviewed on 1/17/14 at 1 PM and 1/21/14 at 8 AM.</p> <p>On 11/9/13 at 8:56 PM "[Client #4] and another consumer accompanied staff to</p>	W000153	W153-Facility staff will receive additional training on the requirement to immediately report any alleged or suspected client to client abuse and injuries of unknown origin to the administrator and to BDDS. Further, the administrator will routinely review documentation and complete observations in the home a minimum of biweekly to assure that instances of client to client abuse and injuries of unknown origin are properly reported and investigated. During observations, professional staff will quiz facility staff regarding reporting requirements to assure continued competency.	02/23/2014			

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	<p>go pick up some groceries for the house. Another staff was bringing the money to buy the things, so we waited in the van. [Client #4], after about 15 minutes, began to get impatient and grab at staff and the other consumer. Staff requested that the other consumer move to the back seat and proceeded to drive around until the other staff was ready to alleviate [client #4's] boredom, but when we returned to pick up the ingredients, [client #4] became extremely aggressive, grabbing at staff, scratching and trying to tear up the van. [Client #4] pulled the rear view mirror off of the van. Staff pulled the van over and was able to get him [client #4] calm enough to handle on the ride home." The report did not indicate which one of client #4's housemates was on the van at the time of the incident. The facility records did not indicate the administrator was notified of the client to client abuse.</p> <p>On 11/14/13 at 8:58 PM "Another consumer approached [client #6] to take back the magazine that she was reading... and [client #6] kicked at her." The report did not indicate the name of client #6's housemate. The facility records did not indicate the administrator was notified of the client to client abuse.</p>			

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	<p>On 11/19/13 at 10:42 PM "[Client #4] kept grabbing... consumers hair and clothes in an aggressive manner. This continued... for about 20 to 30 minutes to my understanding." The report did not indicate which of client #4's housemates client #4 had physically abused. The facility records did not indicate the administrator was notified.</p> <p>On 11/25/13 at 10 PM "...he [client #4] was pulling on staff, grabbing staff's hair, grabbing at other consumers, etc...." The report did not indicate which of client #4's housemates client #4 had physically abused. The facility records did not indicate the administrator was notified of the client to client abuse.</p> <p>On 12/8/13 at 8:51 AM "Multiple accounts of [client #4] pulling staff and other consumers hair..." The report did not indicate which of client #4's housemates client #4 had physically abused. The facility records did not indicate the administrator was notified of the client to client abuse.</p> <p>On 12/11/13 at 10:22 PM client #2 "pushed another consumer's head. She [client #2] was smiling through it and had just started a stereotypical behavior of circling....." The report did not indicate which of client #2's housemates</p>			

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	<p>client #2 had pushed. The facility records did not indicate the administrator was notified of the client to client abuse.</p> <p>On 12/12/13 at 4:13 PM "[Client #4] came in from school off the bus agitated. He pee'd (sic) his pants when he came inside. When staff tried to get him to the bathroom he became more agitated, pulling fire alarms and tried to attack [client #3] but was pulled away before it could happen. He [client #4] grabbed [client #1's] wheelchair trying to rock it, both staff had to get [client #1] out of that situation, he then came back and grabbed [client #1's] hair for about 2 - 3 minutes before staff could get his fingers loose. Both staff grabbed [client #4] arm in arm and assisted him down the hall to his room to calm down." The facility records did not indicate the administrator was notified of the client to client abuse.</p> <p>On 12/12/13 at 8:53 PM "[Client #4] continued to attack [client #1] by pulling her hair...." The facility records did not indicate the administrator was notified of the client to client abuse.</p> <p>On 12/19/13 at 9:45 PM "About 30 minutes after school today, [client #4] started to go into behavior and was</p>			

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	<p>grabbing at other consumers. He manipulatively grabbed at one consumer three times and grabbed with deliberation another consumer twice. Staff was trying to run separation plan, but was unable to do it very well as I (the staff) was the only one here at the time with 4 consumers, and had other behaviors/things to attend to as well." The facility records did not indicate the administrator was notified of the client to client abuse.</p> <p>On 12/23/13 at 7:42 AM "Multiple accounts throughout morning of [client #4] pulling [client #1's and client #3's] hair rather hard..." The facility records did not indicate the administrator was notified of the client to client abuse.</p> <p>On 12/27/13 at 3 PM "[Client #4] became upset because staff was unable to put his coat on right away. [Client #4] began to grab at other consumers.... This continued until staff redirected him to his favorite TV show. He then calmed down until a different staff from another house came in, as he wasn't used to her he began to grab at another consumer multiple times and shake the TV." The report did not indicate the other consumers' names. The facility records did not indicate the administrator was notified of the client to client abuse.</p>			

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	<p>On 12/27/13 at 11:16 PM client #3 was having behaviors and ran outside. "Another staff offered for [client #3] to wash his hands as they were muddy and he [client #3] went in, but was going for a specific other consumer that targets him a lot, so I tried to intervene and [client #3] continued to hit and kick..." The facility records did not indicate the administrator was notified of the client to client abuse.</p> <p>On 1/5/14 at 8:57 AM "[Client #4] was attempting to pull on [client #5's] hair and shirt. [Client #5] ran to his room and started to yell." The facility records did not indicate the administrator was notified of the client to client abuse.</p> <p>On 1/13/14 at 4:12 PM "[Client #4] became upset a little bit before the bus came he started to grab at staff and consumers." The report did not indicate the other consumers names. The facility records did not indicate the administrator was notified of the client to client abuse.</p> <p>Client #1's, #2's, #3's, #4's, #5's and #6's Injury/Illness and Full Body Check Reports for July 2013 through January 2014 were reviewed on 1/17/14 at 1 PM and 1/21/14 at 8 AM.</p>						

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	<p>Client #1's body check reports indicated:</p> <p>__7/24/13 at 11:34 PM "has small scrapes on the front of her ankles."</p> <p>__7/27/13 at 10:05 PM "red marks on her upper thigh."</p> <p>__10/23/13 at 8:57 PM "has a small abrasion on the front right of her ankle."</p> <p>__11/7/13 at 11:12 PM "has a scrape on her right front of her ankle."</p> <p>__11/12/13 at 8:20 AM "red marks on right heel."</p> <p>__11/12/13 at 9:28 PM "has abrasions on the front of both ankles where her braces sit."</p> <p>__11/21/13 at 11:20 PM "has a small abrasion on her elbow, seems to be a combination of a scrape and dry skin."</p> <p>__11/26/13 at 11:05 PM "has scrapes on her knuckles on her left hand."</p> <p>__12/19/13 at 9:31 PM "has bite marks on her right arm/wrist."</p> <p>__12/23/13 at 2:49 PM "has a bruise on her left upper thigh, it is about 1 1/4 inch wide. I believe it is from her lap tray as she has been taking it off herself and it is in a straight line on her leg."</p> <p>__12/27/13 at 8:37 PM "another consumer did grab her hair twice."</p> <p>__12/30/13 at 8:50 PM "has a bruise on the top of her right foot about an inch behind her big toe on the top."</p> <p>__1/4/14 at 9:15 PM "has a small bruise on the top of her left foot."</p>			

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	<p>Client #2's body check reports indicated:</p> <p>__8/2/13 at 8:30 PM "has abrasion on her right knee."</p> <p>__8/12/13 at 8:34 PM "bite mark on left forearm, raised skin." The body check of 8/13/13 "scrap (sic) on left arm from where she got bit (sic) from another consumer."</p> <p>__8/29/13 at 10:55 PM "scratches on left side of neck from seatbelt, a bruise on right shoulder, a scratch on right forearm, a scratch on back of neck, and scratches on lower back." The report indicated the RD (Residential Director) and the nurse were notified.</p> <p>__8/30/13 at 8:14 PM "scratches on right arm and back bruises on left arm...."</p> <p>__8/31/13 at 2:31 PM "a scrape on the back of her neck."</p> <p>__9/2/13 at 9:40 PM "...has a bruise on her breast and a bruise on her left shin."</p> <p>__9/30/13 at 10:26 PM "two very small punctures on her back."</p> <p>__10/1/13 at 7:02 AM "small bruise size of penny on right knee."</p> <p>__11/10/13 at 9:01 PM "has a bruise on her elbow about 1 1/2 inches wide by 3/4 inch."</p> <p>__11/18/13 at 8:30 PM "has some scrapes on her left hand between her middle and ring fingers and middle finger knuckle."</p>			

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	<p>Client #3's body check reports indicated: __12/27/13 at 2:50 PM "[Client #3] may develop scratches from another consumer grabbing his hair and shirt."</p> <p>Client #4's body check reports indicated: __8/18/13 at 2:05 PM "has 1/4 inch abrasion on his lower back and right foot just above first knuckle on his big toe." __10/13/13 at 2:54 PM "has a red mark on the left side of his neck." __11/24/13 at 2:12 PM "has 3 scratches on the back of his thigh, I believe they are from him scratching."</p> <p>Client #5's body check reports indicated: __7/26/13 at 8:37 PM "[Client #5] has a scrape on his wrist and elbow."</p> <p>Client #6's body check reports indicated: __7/27/13 at 2:50 PM "has some abrasions under his right armpit area, looks like they may have happened when he was trying to take his shirt off during his behavior today." __8/10/13 at 9:50 PM "has 2 cuts on the top of his head, one is about 3/4 inch long, one is 1 mm (millimeter)." __8/14/13 at 8:03 PM "has a scratch about 2 inches long on his shin." __8/28/13 at 8:33 PM "has a scratch on his right hand side about 2 1/2 inches long that he has had since yesterday"</p>			

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	<p>evening." The report indicated the nurse was notified.</p> <p>__ 8/31/13 at 8:48 PM "has a scratch on the side of his nose and red marks on the back of his neck."</p> <p>__ 10/17/13 at 10:35 PM "there was a scratch on the back of his neck and a scratch on his chest, there was also marks on his hand from where he bit himself." The report indicated the RD was notified.</p> <p>__ 11/6/13 at 10:03 PM "has a small mostly healed scratch on his forehead, a small mostly healed scratch on his right palm and a small mostly healed abrasion above his right knee."</p> <p>__ 11/12/13 at 8:32 PM "three scratches on left upper arm. They are curved in a way that it appears he may have done them (sic) to himself."</p> <p>__ 11/19/13 at 2:10 AM "noticed numerous (sic) red whelps/bites (sic) on his face." The report indicated the nurse and the RC (Residential Coordinator) would be notified in the morning.</p> <p>__ 11/30/13 at 1:15 AM "noticed what appeared to be a quarter size bruise on neck/face area." The report indicated the RD was notified.</p> <p>Interview with the QIDP (Qualified Intellectual Disabilities Professional) #2 on 1/15/14 at 1 PM indicated the QIDP</p>			

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	<p>and the nurse checked the staff documentation on the computer, including the Behavior Detail Reports and the Body Check Reports. When asked if client to client abuse was reported, the QIDP indicated the AD (Area Director) would have to answer that question.</p> <p>Interview with the AD on 1/15/14 at 3 PM stated the facility did not report client to client abuse "unless it is indicative of abuse or there was a serious injury." The AD indicated all injuries of unknown origin were to be reported to the administrator.</p> <p>Interview with the AD on 1/17/14 at 4 PM indicated all reportable incidents had been provided for review.</p> <p>The facility's reportable records were reviewed on 1/15/14 at 1 PM. The facility records failed to indicate the administrator was notified of the incidents previously noted from July 2013 through January 2014 for clients #1, #2, #3, #4, #5 and #6. The facility records failed to indicate the administrator was immediately notified of all client to client abuse and the BDDS and APS were notified in accordance with state law. The facility records failed to ensure all injuries of</p>			
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NAME OF PROVIDER OR SUPPLIER DEVELOPMENTAL SERVICE ALTERNATIVES INC				STREET ADDRESS, CITY, STATE, ZIP CODE 1435 W CONGRESS ST MIDDLETOWN, IN 47356			
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W000154	<p>unknown origin were immediately reported to the administrator.</p> <p>9-3-2(a)</p> <p>483.420(d)(3) STAFF TREATMENT OF CLIENTS The facility must have evidence that all alleged violations are thoroughly investigated.</p> <p>Based on record review and interview for 14 of 22 allegations of abuse/neglect/client to client abuse and for 36 of 39 injuries of unknown reviewed for clients #1, #2, #3, #4, #5 and #6, the facility failed to ensure all allegations of client to client abuse and all injuries of unknown origin were thoroughly investigated.</p> <p>Findings include:</p> <p>Client #1's, #2's, #3's, #4's, #5's and #6's Behavior Detail Reports for October 2013 through January 2014 were reviewed on 1/17/14 at 1 PM and 1/21/14 at 8 AM.</p> <p>On 11/9/13 at 8:56 PM "[Client #4] and another consumer accompanied staff to go pick up some groceries for the house. Another staff was bringing the money to buy the things, so we waited in the van.</p>	W000154	W154-Staff will receive additional training regarding the requirement to thoroughly investigate any client to client abuse as well as any injury of unknown origin. Further, the administrator will routinely review documentation and complete observations in the home a minimum of biweekly to assure that instances of client to client abuse and injuries of unknown origin are properly reported and investigated.	02/23/2014			

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	<p>[Client #4], after about 15 minutes, began to get impatient and grab at staff and the other consumer. Staff requested that the other consumer move to the back seat and proceeded to drive around until the other staff was ready to alleviate [client #4's] boredom, but when we returned to pick up the ingredients, [client #4] became extremely aggressive, grabbing at staff, scratching and trying to tear up the van. [Client #4] pulled the rear view mirror off of the van. Staff pulled the van over and was able to get him [client #4] calm enough to handle on the ride home." The report did not indicate which one of client #4's housemates was on the van at the time of the incident. The facility records did not indicate an investigation was conducted.</p> <p>On 11/14/13 at 8:58 PM "Another consumer approached [client #6] to take back the magazine that she was reading... and [client #6] kicked at her." The report did not indicate the name of client #6's housemate. The facility records did not indicate an investigation was conducted.</p> <p>On 11/19/13 at 10:42 PM "[Client #4] kept grabbing... consumers' hair and clothes in an aggressive manner. This continued... for about 20 to 30 minutes</p>				

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	<p>to my understanding." The report did not indicate which of client #4's housemates client #4 had physically abused. The facility records did not indicate an investigation was conducted.</p> <p>On 11/25/13 at 10 PM "...he [client #4] was pulling on staff, grabbing staff's hair, grabbing at other consumers, etc...." The report did not indicate which of client #4's housemates client #4 had physically abused. The facility records did not indicate an investigation was conducted.</p> <p>On 12/8/13 at 8:51 AM "Multiple accounts of [client #4] pulling staff and other consumers hair...." The report did not indicate which of client #4's housemates client #4 had physically abused. The facility records did not indicate an investigation was conducted.</p> <p>On 12/11/13 at 10:22 PM client #2 "pushed another consumer's head. She [client #2] was smiling through it and had just started a stereotypical behavior of circling...." The report did not indicate which of client #2's housemates client #2 had pushed. The facility records did not indicate an investigation was conducted.</p> <p>On 12/12/13 at 4:13 PM "[Client #4]</p>						

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	<p>came in from school off the bus agitated. He pee'd (sic) his pants when he came inside. When staff tried to get him to the bathroom he became more agitated, pulling fire alarms and tried to attack [client #3] but was pulled away before it could happen. He [client #4] grabbed [client #1's] wheelchair trying to rock it, both staff had to get [client #1] out of that situation, he then came back and grabbed [client #1's] hair for about 2 - 3 minutes before staff could get his fingers loose. Both staff grabbed [client #4] arm in arm and assisted him down the hall to his room to calm down." The facility records did not indicate an investigation was conducted.</p> <p>On 12/12/13 at 8:53 PM "[Client #4] continued to attack [client #1] by pulling her hair..." The facility records did not indicate an investigation was conducted.</p> <p>On 12/19/13 at 9:45 PM "About 30 minutes after school today, [client #4] started to go into behavior and was grabbing at other consumers. He manipulatively grabbed at one consumer three times and grabbed with deliberation another consumer twice. Staff was trying to run separation plan, but was unable to do it very well as I (the staff) was the only one here at the time with 4 consumers, and had other</p>			

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	<p>behaviors/things to attend to as well." The facility records did not indicate an investigation was conducted.</p> <p>On 12/23/13 at 7:42 AM "Multiple accounts throughout morning of [client #4] pulling [client #1's and client #3's] hair rather hard...." The facility records did not indicate an investigation was conducted.</p> <p>On 12/27/13 at 3 PM "[Client #4] became upset because staff was unable to put his coat on right away. [Client #4] began to grab at other consumers.... This continued until staff redirected him to his favorite TV show. He then calmed down until a different staff from another house came in, as he wasn't used to her he began to grab at another consumer multiple times and shake the TV." The report did not indicate the other consumers' names. The facility records did not indicate an investigation was conducted.</p> <p>On 12/27/13 at 11:16 PM client #3 was having behaviors and ran outside. "Another staff offered for [client #3] to wash his hands as they were muddy and he [client #3] went in, but was going for a specific other consumer that targets him a lot, so I tried to intervene and [client #3] continued to hit and kick...."</p>						

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	<p>The facility records did not indicate an investigation was conducted.</p> <p>On 1/5/14 at 8:57 AM "[Client #4] was attempting to pull on [client #5's] hair and shirt. [Client #5] ran to his room and started to yell." The facility records did not indicate an investigation was conducted.</p> <p>On 1/13/14 at 4:12 PM "[Client #4] became upset a little bit before the bus came he started to grab at staff and consumers." The report did not indicate the other consumers' names. The facility records did not indicate an investigation was conducted.</p> <p>Client #1's, #2's, #3's, #4's, #5's and #6's Injury/Illness and Full Body Check Reports for July 2013 through January 2014 were reviewed on 1/17/14 at 1 PM and 1/21/14 at 8 AM.</p> <p>Client #1's body check reports indicated: ___7/24/13 at 11:34 PM "has small scrapes on the front of her ankles." ___7/27/13 at 10:05 PM "red marks on her upper thigh." ___10/23/13 at 8:57 PM "has a small abrasion on the front right of her ankle." ___11/7/13 at 11:12 PM "has a scrape on her right front of her ankle." ___11/12/13 at 8:20 AM "red marks on</p>			

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	<p>right heel." __ 11/12/13 at 9:28 PM "has abrasions on the front of both ankles where her braces sit." __ 11/21/13 at 11:20 PM "has a small abrasion on her elbow, seems to be a combination of a scrape and dry skin." __ 11/26/13 at 11:05 PM "has scrapes on her knuckles on her left hand." __ 12/19/13 at 9:31 PM "has bite marks on her right arm/wrist." __ 12/23/13 at 2:49 PM "has a bruise on her left upper thigh, it is about 1 1/4 inch wide. I believe it is from her lap tray as she has been taking it off herself and it is in a straight line on her leg." __ 12/27/13 at 8:37 PM "another consumer did grab her hair twice." __ 12/30/13 at 8:50 PM "has a bruise on the top of her right foot about an inch behind her big toe on the top." __ 1/4/14 at 9:15 PM "has a small bruise on the top of her left foot." Client #2's body check reports indicated: __ 8/2/13 at 8:30 PM "has abrasion on her right knee." __ 8/12/13 at 8:34 PM "bite mark on left forearm, raised skin." The body check of 8/13/13 "scrap (sic) on left arm from where she got bit (sic) from another consumer." __ 8/29/13 at 10:55 PM "scratches on left side of neck from seatbelt, a bruise</p>			

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	<p>on right shoulder, a scratch on right forearm, a scratch on back of neck, and scratches on lower back." The report indicated the RD (Residential Director) and the nurse were notified.</p> <p>__8/30/13 at 8:14 PM "scratches on right arm and back bruises on left arm..."</p> <p>__8/31/13 at 2:31 PM "a scrape on the back of her neck."</p> <p>__9/2/13 at 9:40 PM "...has a bruise on her breast and a bruise on her left shin."</p> <p>__9/30/13 at 10:26 PM "two very small punctures on her back."</p> <p>__10/1/13 at 7:02 AM "small bruise size of penny on right knee."</p> <p>__11/10/13 at 9:01 PM "has a bruise on her elbow about 1 1/2 inches wide by 3/4 inch."</p> <p>__11/18/13 at 8:30 PM "has some scrapes on her left hand between her middle and ring fingers and middle finger knuckle."</p> <p>Client #3's body check reports indicated: __12/27/13 at 2:50 PM "[Client #3] may develop scratches from another consumer grabbing his hair and shirt."</p> <p>Client #4's body check reports indicated: __8/18/13 at 2:05 PM "has 1/4 inch abrasion on his lower back and right foot just above first knuckle on his big toe." __10/13/13 at 2:54 PM "has a red mark</p>			

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	<p>on the left side of his neck." __11/24/13 at 2:12 PM "has 3 scratches on the back of his thigh, I believe they are from him scratching."</p> <p>Client #5's body check reports indicated: __7/26/13 at 8:37 PM "[Client #5] has a scrape on his wrist and elbow."</p> <p>Client #6's body check reports indicated: __7/27/13 at 2:50 PM "has some abrasions under his right armpit area, looks like they may have happened when he was trying to take his shirt off during his behavior today." __8/10/13 at 9:50 PM "has 2 cuts on the top of his head, one is about 3/4 inch long, one is 1 mm (millimeter)." __8/14/13 at 8:03 PM "has a scratch about 2 inches long on his shin." __8/28/13 at 8:33 PM "has a scratch on his right hand side about 2 1/2 inches long that he has had since yesterday evening." The report indicated the nurse was notified. __8/31/13 at 8:48 PM "has a scratch on the side of his nose and red marks on the back of his neck." __10/17/13 at 10:35 PM "there was a scratch on the back of his neck and a scratch on his chest, there was also marks on his hand from where he bit himself." The report indicated the RD was notified.</p>			

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	<p>__ 11/6/13 at 10:03 PM "has a small mostly healed scratch on his forehead, a small mostly healed scratch on his right palm and a small mostly healed abrasion above his right knee."</p> <p>__ 11/12/13 at 8:32 PM "three scratches on left upper arm. They are curved in a way that it appears he may have done them (sic) to himself."</p> <p>__ 11/19/13 at 2:10 AM "noticed numerous (sic) red whelps/bites (sic) on his face." The report indicated the nurse and the RC (Residential Coordinator) would be notified in the morning.</p> <p>__ 11/30/13 at 1:15 AM "noticed what appeared to be a quarter size bruise on neck/face area." The report indicated the RD was notified.</p> <p>Interview with the QIDP (Qualified Intellectual Disabilities Professional) #2 on 1/17/14 at 1 PM indicated the QIDP and the nurse checked the staff documentation on the computer, including the Behavior Detail Reports and the Body Check Reports.</p> <p>During interview with the AD (Area Director) on 1/15/14 at 3 PM, the AD stated "All injuries of unknown origin are to be investigated." The AD stated "Client to client abuse was not investigated unless there was a</p>			

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W000315	<p>significant injury and/or the incident was indicative of abuse."</p> <p>The facility's reportable records were reviewed on 1/15/14 at 1 PM. The facility records failed to indicate investigations for the client to client abuse and the injuries of unknown origin previously noted from July 2013 through January 2014 for clients #1, #2, #3, #4, #5 and #6.</p> <p>9-3-2(a)</p> <p>483.450(e)(4)(i) DRUG USAGE Drugs used for control of inappropriate behavior must be monitored closely for desired responses and adverse consequences by facility staff. Based on record review and interview for 2 of 2 sampled clients (#2 and #3) who received psychotropic medications, the facility failed to provide evidence of preventive screening for EPS (extrapyramidal side effects - a group of side effects associated with the use of anti-psychotic medications including, but not limited to, restlessness and involuntary muscle movements).</p> <p>Findings include:</p>	W000315	W315-The facility will assure that a medical professional qualified to do so screens clients for EPS side effects as indicated necessary by the physician. Nurses will receive training regarding the requirement to assure the completion of such screenings in order to monitor adverse consequences of drugs used for control of inappropriate behavior. The Health Services Director will review nursing documentation on a monthly basis to assure that the required	02/23/2014

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	<p>Client #2's record was reviewed on 1/16/14 at 2 PM. Client #2's January 2014 quarterly physician's orders indicated client #2 was given Fluvoxamine (for anxiety/depression) 250 mg (milligrams) a day, Ziprasidone (an antipsychotic) 120 mg a day, Benztropine (to treat the effects of the behavior medications) 2 mg a day and Paroxetine (an antidepressant) 20 mg a day. Client #2's record did not indicate client #2 was being screened for EPS.</p> <p>Client #3's record was reviewed on 1/16/14 at 4:30 PM. Client #3's January 2014 quarterly physician's orders indicated client #3 was given Divalproex (used to treat manic episodes related to bipolar disorders and manic depression), 750 mg a day, Invega (an antipsychotic medication) 12 mg a day and Benztropine 3 mg a day for drooling. Client #3's record did not indicate client #3 was being screened for EPS.</p> <p>Interview with the QIDP (Qualified Intellectual Disabilities Professional) and the LPN (Licensed Practical Nurse) on 1/17/14 at 3 PM indicated they did not know if clients #2 and #3 had been screened for EPS. The QIDP indicated the facility nurses were not trained to</p>		<p>screenings are completed as ordered.</p>	

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W000322	<p>screen the clients for EPS, but the facility was thinking of having their nurses trained to be able to do this in the future. When asked if the clients had ever been screened for EPS, the QIDP indicated she did not know.</p> <p>9-3-5(a)</p> <p>483.460(a)(3) PHYSICIAN SERVICES The facility must provide or obtain preventive and general medical care. Based on record review and interview for 1 of 3 sampled clients (#2), the facility failed to ensure client #2 was provided an annual physical examination.</p> <p>Findings include:</p> <p>Client #2's record was reviewed on 1/16/14 at 2 PM. Client #2's record indicated no annual physical examination by the client's physician.</p> <p>Interview with the facility LPN (Licensed Practical Nurse) and the QIDP (Qualified Intellectual Disabilities Professional) on 1/17/14 at 3 PM indicated the annual physical was not on client #2's record for review. The QIDP</p>	W000322	W322-The facility will assure that all clients have a current annual physical. The nurse will use a tracking system to assure that appointments are tracked and made expeditiously as appropriate to assure preventive and general medical care. The Health Services Director will review the nursing monthlies and/or tracking system on a monthly basis to assure that all clients have a current annual physical.	02/23/2014

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W000323	<p>stated, "We'll have to look for it and get back to you."</p> <p>Review of an email dated 1/21/14 from the QIDP on 1/23/14 at 2 PM indicated "The most recent physical we have for [client #2] is 2012. She has a physical scheduled for the 30th of this month."</p> <p>9-3-6(a)</p> <p>483.460(a)(3)(i) PHYSICIAN SERVICES The facility must provide or obtain annual physical examinations of each client that at a minimum includes an evaluation of vision and hearing. Based on record review and interview for 1 of 3 sampled clients (#2), the facility failed to ensure the client's vision was evaluated annually.</p> <p>Findings include:</p> <p>Client #2's record was reviewed on 1/16/14 at 2 PM. Client #2's record indicated a vision evaluation dated 8/1/12. Client #2's record indicated no vision evaluation in 2013.</p> <p>Interview with the facility LPN (Licensed Practical Nurse) and the QIDP (Qualified Intellectual Disabilities</p>	W000323	W323-The facility will assure that all clients have a current annual physical to include an evaluation of vision and hearing. The nurse will use a tracking system to assure that appointments are tracked and made expeditiously as appropriate/required to assure preventive and general medical care. The Health Services Director will review the nurse's tracking system on a monthly basis to assure that vision and hearing screenings are occurring on an annual basis.	02/23/2014			

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W000331	<p>Professional) on 1/17/14 at 3 PM indicated client #2's vision was last evaluated on 8/1/12.</p> <p>9-3-6(a)</p> <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 3 of 3 sampled clients (#1, #2 and #3), the facility nursing services failed:</p> <p>__ To develop and implement a specific plan of care in regard to client #1's skin integrity, positioning and toileting needs.</p> <p>__ To monitor client #1's, #2's and #3's bowel and bladder elimination and to ensure the staff followed the bowel protocols of calling the nurse if the clients had not had a bowel movement in three days.</p> <p>__ To follow up on client #3's elevated Valproic Acid blood levels.</p> <p>__ To ensure quarterly physician's orders were signed by the physician every 90 days for clients #1, #2 and #3.</p> <p>__ To assess and monitor clients #1 and #2 in regards to skin issues.</p> <p>Findings include:</p>	W000331	<p>W331-The facility nurse will receive additional training regarding providing nursing services in accordance with the needs of the clients. Specifically, the nurse will receive additional training regarding the development, monitoring and documentation of risk plans-to include addressing skin integrity, positioning and toileting needs. Further training will also include monitoring bowel and bladder elimination and compliance with associated protocols, following up on irregular test results and assuring quarterly physician orders are reviewed and signed by the physician not more than every 90 days. The nurse will assure that risk plans are developed and monitored in accordance with her training. The nurse will review all test results and assure that they physician has been made aware and follow up on subsequent recommendations for all clients. The nurse will use a tracking</p>	02/23/2014

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	<p>1. During observations at the group home on 1/15/14 between 4 PM and 6:30 PM, client #1 was observed sitting in a wheel chair. During this observation client #1 was not observed to be repositioned every 30 minutes to 1 hour. The staff checked the client once during this time for the need to change her brief.</p> <p>During observations at the group home on 1/16/13 between 5:15 AM and 7 AM, client #1 was up and sitting in a wheelchair. The staff did not reposition client #1 during this observation.</p> <p>Client #1's record was reviewed on 1/16/14 at 11 AM. Client #1's record indicated client #1 had diagnoses of, but not limited to, Cerebral Palsy and Contractures (prolonged shortening of the muscles or other soft tissue around a joint preventing movement of the joint). Client #1's record indicated client #1 was non-ambulatory, used a wheel chair for mobility and required staff assistance for all transfers and repositioning. The record indicated the client required staff assistance to meet all of her basic needs of bathing, toileting, dressing, hygiene and dining. The record indicated client #1 wore an adult brief 24/7 due to incontinence. Client #1's record</p>		<p>system to assure that appointments are tracked and made expeditiously to assure, among other things, that quarterly physician orders are signed not more than every 90 days by the physician. The nurse will review documentation not less than weekly for any skin issues and provide directives to staff regarding the care of any skin issues. The nurse will further include notes regarding skin issues on her nursing quarterlies.</p>	

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	<p>indicated client #1 attended a local high school during the day.</p> <p>Client #1's Injury/Illness and Full Body Check Reports were reviewed on 1/17/13 at 1 PM and 1/21/13 at 8 AM. The reports indicated</p> <p>__7/28/13 at 2:51 PM "has a scratch on her right gluteus maximus and is looking a little red at this time, not sure if it rash or from sitting in chair all day."</p> <p>__10/12/13 at 1:50 PM "has a slight case of diaper rash."</p> <p>__10/13/13 at 2:50 PM "has some diaper rash between her gluteus maximi (sic) and on her left upper thigh."</p> <p>__10/23/13 at 8:57 PM "continues to have minor skin breakdown around the very top of the back of her thighs."</p> <p>__12/23/13 at 2:49 PM "has some skin breakdown on her rear end, have been applying ointment."</p> <p>Client #1's Nursing Quarterly Reviews/ Nursing notes for December 2013 through March 2013 indicated no nursing notes in regard to client #1's skin break down that was reported in July, October and December. Client #1's nursing quarterlies for 2013 indicated "No health concerns this quarter."</p> <p>Client #1's "Risk for Impaired Skin Integrity Protocol" (no date) indicated"</p>				

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	<p>___ "Shift position every 30 min (minutes) to an hour while up in wheel chair. This can be done by placing a pillow under alternating buttocks every 30 min to hour."</p> <p>___ "Encourage [client #1] to take a break from wheelchair when returning home from school, example staff assistance to slide to floor to play."</p> <p>___ "Report any skin redness or irritation to nurse immediately and ensure documentation." Client #1's undated Skin Integrity Protocol failed to include the client's positioning needs while in bed.</p> <p>Client #1's physician's orders indicated client #1 was given Polyethylene glycol (a laxative) 17 grams once a day and Colace (a stool softener) twice a day for constipation. Client #1's Constipation Protocol indicated the nurse was to be notified if the client had not had a BM (bowel movement) within 3 days. Review of client #1's Bowel and Bladder Detailed Entry Reports from 10/23/13 through 1/17/14 indicated client #1 was being assessed one to three times a day for continence/incontinence. The reports indicated client #1 did not have a bowel movement on the following days: October 23, 24, 25, November 4, 5, 6, 16, 17, 18, 19, December 1, 2, 3, 4, 7, 8, 9, 10, 13, 14, 15, 22, 23, 24, 25, 2013,</p>				

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	<p>January 12, 13 and 14, 2014. Client #1's nursing notes for October, December, 2013 and January, 2014 did not indicate the nurse was notified each time client #1 had gone three days with no bowel movement.</p> <p>Client #1's record indicated no documentation of client #1's positioning every "30 minutes to one hour." Client #1's record indicated no specific toileting plan in place. Nursing services failed to develop and implement a specific plan of care in regard to client #1's skin integrity, positioning and toileting needs. Nursing services failed to monitor client #1 in regards to skin break down and bowel and bladder elimination.</p> <p>During interview with staff #3 on 1/16/14 at 6 PM staff #3 indicated client #1 was non ambulatory and required staff to reposition her. Staff #3 indicated client #1 was not able to reposition herself while she was in the wheelchair. Staff #3 stated, client #1 was to be repositioned "at least every two hours."</p> <p>During interview with staff #8 on 1/17/14 at 6 AM, staff #8 stated client #1 was incontinent and the staff "try to check her every 2 hours" for continence.</p>			

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	<p>During interview with client #1's school teacher on 1/17/14 at 12:50 PM, the teacher stated she had ordered a "potty chair" for client #1 to use at the school to help her with her toileting and had tried it for the first time the morning of 1/17/14. The teacher stated she did not know if client #1 used a "potty chair" while in the group home, "I just thought it would be a good idea." The teacher indicated client #1 was in her wheel chair from the time she got to school until 11:45 AM when she was laid down on a cot for a nap. Client #1's teacher indicated she was not aware of a specific toileting, positioning and/or dining plan for client #1.</p> <p>2. Client #2's record was reviewed on 1/16/14 at 2 PM. Client #2's physician's orders indicated client #2 was given Polyethylene glycol 17 grams once a day and a PRN (as needed) order for Polyethylene Glycol 17 grams twice a day and a Dulcolax suppository once a day for constipation.</p> <p>Client #2's Constipation Protocol (no date) indicated the nurse was to be notified if client #2 did not had a BM within 3 days. Review of client #2's Bowel and Bladder Detailed Entry Reports from 10/23/13 through 1/17/14 indicated client #2 did not have a bowel</p>			

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	<p>movement on the following days: October 20, 21, 22, 23, 26, 27, 28, 30, 31, November 1, 2, 11, 12, 13, 14, 15, 16, 17, 18, 19, 20, 25, 26, 27, 28, 29, 30, December 1, 2, 3, 10, 11, 12, 13, 14, 15, 20, 21, 22, 24, 25, 26, 27, 2013, January 3, 4, 5, 6 and 7, 2014. Client #2's nursing notes for 2013 (October, November, December) and 2014 (January) did not indicate the nurse was notified each time the client had gone three days with no bowel movement.</p> <p>Client #2's Injury/Illness and Full Body Check Reports were reviewed on 1/17/13 at 1 PM and 1/21/13 at 8 AM. The reports indicated: __ 11/12/13 at 9:29 PM "has a large area of skin breakdown between her breasts, specifically her left breast. Nurse was called." __ 11/13/13 at 8:50 PM "has some skin breakdown between her breasts. Nurse was notified yesterday." __ 11/14/13 at 10:04 PM "has skin breaking down between her breasts." The report indicated the nurse was notified.</p> <p>Client #2's nursing notes for 2013 indicated no specific notes in regard to skin breakdown for client #2. Client #2's record did not indicate client #2 was assessed by nursing services in regard to</p>			

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	<p>skin break down.</p> <p>3. Client #3's record was reviewed on 1/16/14 at 4:30 PM. Client #3's physician's orders indicated client #3 was given Polyethylene glycol 17 grams once a day and Docqplace (a stool softener) 200 mg a day for constipation. Client #3's physician's orders indicated client #3 could have a PRN of Glycerin suppository 2.1 gm as directed and Milk of Magnesia 2 tablespoons as needed for constipation. Client #3's Constipation Protocol (no date) indicated the nurse was to be notified if client #3 did not have a BM within 3 days. Review of client #3's Bowel and Bladder Detailed Entry Reports from 10/23/13 through 1/17/14 indicated client #3 did not have a bowel movement on the following days: November 10, 11, 12, 14, 15, 16, 23, 24, 25, 26, 27, 28, 29, 30, 31, 2013, January 7, 8, 9, 23, 24, 25, 26, 29, 30 and 31, 2014. Client #3's nursing notes for 2013 (October, November, December) and 2014 (January) did not indicate the nurse was notified each time client #3 had gone three days with no bowel movement.</p> <p>Client #3's Injury/Illness and Full Body Check Reports were reviewed on 1/17/13 at 1 PM and 1/21/13 at 8 AM. The reports indicated:</p>			

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	<p>__8/10/13 at 9:53 PM "[Client #3] continues to have a bite on his inner thigh, it is red all around it as a reaction to the bite, I believe."</p> <p>__8/14/13 at 8:04 PM "has 1/8 inch pinkish red bug bites on both arms."</p> <p>__8/26/13 at 10:42 PM "had several pink bumps on his arm."</p> <p>__8/31/13 at 8:52 PM "continues to have 1/4 inch in diameter pink spots on his arms."</p> <p>__9/8/13 at 8:56 PM "still has little pink circles on him."</p> <p>__9/9/13 at 8:36 PM "still has small pink circles that are now reaching up to his neck."</p> <p>__9/12/13 at 7:48 PM "appears to have a boil on his inner thigh."</p> <p>__9/16/13 at 102 PM "has a red bump on his inner right thigh, as well as an infected hair on his right knee."</p> <p>__9/26/13 at 8 PM "red sore on inner thigh (not a new thing has been there for about a week or so.)"</p> <p>__10/13/13 at 2:59 PM "[Client #3] continues to have small pink dots about 1/4 of an inch all over him."</p> <p>__Client #3's nursing notes for 2013 indicated no specific notes in regard to skin issues for client #3. Client #3's record did not indicate client #3 was assessed by nursing services in regard to skin issues/problems.</p>			

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	<p>Client #3's physician's orders indicated client #3 was taking Depakote 750 mg a day. Client #3's record indicated the most current Depakote (Valproic Acid) level was drawn 5/22/13 with an elevated Valproic Acid level of 140.9 (normal 50 - 100 ug/ml).</p> <p>During interview with the facility LPN (Licensed Practical Nurse) on 1/17/14 at 3 PM, the LPN stated, "I need to update several of the plans and am working on that." When asked how often the staff were to be repositioning client #1 and did she have a specific skin integrity plan that included a positioning schedule and a toileting schedule, the LPN did not answer and indicated she would look for the plan. The LPN returned with an undated and unsigned skin integrity plan that did not include client #1's positioning and toileting needs. The LPN indicated she was not aware of client #1 having any skin integrity issues and/or break downs. The LPN indicated nursing services was responsible for monitoring the clients' bowel and bladder elimination and needs. The LPN indicated she could review the clients' bowel and bladder documentation from her computer as well as the Full Body Check Reports. The LPN indicated the staff were to call the nurse whenever they find an injury. When asked how</p>			

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	<p>often the clients' risk plans were reviewed and updated, the LPN indicated the risk plans were to be updated annually and as needed. The LPN indicated the risk plans were not dated and/or signed and she was working on getting that changed also. When asked what was done about client #3's elevated Valproic Acid level that was drawn on 5/22/13 and had the labs been repeated, the LPN indicated she was not aware of the elevated Valproic Acid for client #3 and would call the doctor to see if he wanted to repeat the lab work. The LPN indicated client #3 had a change from liquid to a pill for the Depakote and did not know if that was what might have caused the elevation.</p> <p>4. Review of client #1's, #2's and #3's 2013/2014 quarterly physician's orders on 1/17/14 at 1 PM indicated June 2013 was the most current signed physician's quarterly for clients #1, #2 and #3.</p> <p>During interview with the facility LPN on 1/17/14 at 3 PM, the LPN stated, "I know, I made the mistake of sending the original orders that were signed by the doctor to the pharmacy and I never got them back from the pharmacist." The LPN indicated June 2013 was the most current signed quarterly physician's orders for clients #1, #2 and #3. The</p>			

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W000368	<p>LPN indicated the signed orders were good for 90 days. The LPN stated, "I messed up." The LPN indicated she would contact the pharmacist and the physician and get an updated quarterly physician's orders for clients #1, #2 and #3.</p> <p>9-3-6(a)</p> <p>483.460(k)(1) DRUG ADMINISTRATION The system for drug administration must assure that all drugs are administered in compliance with the physician's orders. Based on record review and interview for 2 of 3 sampled clients (#1 and #3) and 3 additional clients (#4, #5 and #6), the facility failed to ensure all medications were administered to the clients in compliance with the physician's orders.</p> <p>Findings include:</p> <p>A review of the facility's BDDS (Bureau of Developmental Disabilities Services) reports was conducted on 1/15/13 at 1 PM. The review indicated:</p> <p>On 10/7/13 the staff failed to give client #4 his AM medications. The report did not indicate the medications client #4</p>	W000368	W368-Facility staff will receive additional training regarding the requirement to and mechanics of administering medications without error in accordance with DSA policy. Professional staff will observe medication passes twice weekly to assure that staff are administering medications competently, properly, and without error.	02/23/2014	

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	<p>was not given.</p> <p>On 6/25/13 the staff failed to give client #4 his 7 AM medications of a Vitamin, 1 mg (milligram) of Risperidone for behavior modification, 50 mg of Lamotrigine for seizures, 17 gm (grams) of Miralax (a laxative), 1 mg of Benzotropine for side effects from the psychotropic medications), 625 mg of Divalproex for seizures) and Ensure (a dietary supplement).</p> <p>On 6/26/13 the staff failed to give client #4's 7 PM medications of Lamotrigine 50 mg, Abilify (for behavior control) 15 mg, and Cyproheptad (an antihistamine) 4 mg.</p> <p>On 6/24/13 the staff gave client #3 another client's antiepileptic medications of Keppra 1000 mg and Trileptal 750 mg.</p> <p>On 6/7/13 client #5 did not receive his "evening topical treatments" due to not being packed when the client went out of town on a leave. Client #5 did not get his Tretinoin cream, Benzoyl peroxide cream and Duac gel (antibiotic ointments).</p> <p>On 4/18/13 the staff failed to give client #3 his 7 PM medications of Fluticasone</p>			

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NAME OF PROVIDER OR SUPPLIER DEVELOPMENTAL SERVICE ALTERNATIVES INC				STREET ADDRESS, CITY, STATE, ZIP CODE 1435 W CONGRESS ST MIDDLETOWN, IN 47356			
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	<p>spray 50 mcg (micrograms), DocQLace (a stool softener) 100 mg, Valproic acid (for seizures) 20 ml and Benztropine 1 mg.</p> <p>On 4/14/13 the staff failed to give client #6 his 4 PM medication of Provigil (a medication that promotes wakefulness and used to treat excessive sleepiness caused by sleep apnea) 100 mg.</p> <p>On 3/31/13 the staff failed to give client #4 his 6 AM medication of Lamotrigine 25 mg.</p> <p>On 3/20/13 the staff failed to give client #4 his 7 PM medication of Lamotrigine 50 mg, Benztropine 1 mg, Ability 15 mg and Cyproheptad 4 mg.</p> <p>On 3/16/13 the staff discovered client #1 was given her AM medications the evening before (3/15/13).</p> <p>Interview with the facility LPN (Licensed Practical Nurse) on 1/17/14 at 3 PM indicated all medications were to be given as prescribed by the clients' physician.</p> <p>9-3-6(a)</p>						

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W009999	<p>State Findings</p> <p>The following Community Residential Facilities for Persons with Developmental Disabilities rule was not met.</p> <p>460 IAC 9-3-1 Governing Body</p> <p>(b) The residential provider shall report the following circumstances to the division by telephone no later than the first business day followed by written summaries as requested by the division (6. A service delivery site with a structural or environmental problem that jeopardizes or compromises the health or welfare of an individual.).</p> <p>This state rule was not met as evidenced by:</p> <p>Based on record review and interview for 3 of 3 sample clients (#1, #2 and #3) and 3 additional clients (#4, #5 and #6), the facility failed to notify the Bureau of Developmental Disabilities Services (BDDS) within 24 hours in accordance with state law of an infestation of bed bugs within the group home.</p> <p>Findings include:</p>	W009999	W9999- Facility staff have received training to notify the administrator should there be any future bedbug sightings and professional staff will be trained regarding the requirement to report to BDDS should any future issues with bedbugs.	02/23/2014			

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	<p>The facility's reportable records were reviewed on 1/15/14 at 1 PM. The facility records indicated no reports of bed bug infestation and/or the need for exterminators.</p> <p>Interview with the QIDP (Qualified Intellectual Disabilities Professional) on 1/15/14 at 2 PM indicated professional exterminators had been to the group home where clients #1, #2, #3, #4, #5 and #6 resided to spray for bed bugs. The QIDP provided receipts for review. The QIDP indicated the clients' beds and mattresses were replaced in order to rid the home of bed bugs.</p> <p>Review of the contract and receipts from the professional exterminator on 1/15/14 at 2:15 PM indicated: ___6/20/13 a contract with a professional exterminator for the extermination of bedbugs. ___8/19/13 a hand written note indicating a message had been left with the exterminators. ___9/23/13 a hand written note indicating the exterminator had been called again. The note indicated the exterminator had not gotten the previous messages and the calls were forwarded to someone else while he (the exterminator) was out of his office.</p>						

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	<p>__9/26/13 "Treated room baseboards, bed frames and mattresses" for bed bug activity.</p> <p>__10/2/13 "Extra treatment for bed bugs through entire house. No bed bug activity found."</p> <p>__10/28/13 treated four of the clients' bedrooms, the living room, the recreation room and the kitchen furniture for bed bugs.</p> <p>__11/1/13 the public areas and the guest rooms were treated for bed bug activity.</p> <p>__11/19/13 "Bedrooms #1 and #4 complete bed bug treatments. Bedroom #1 found 7 dead bedbugs. Bedrooms #2 and #3, bed bug inspections and no alive activity found."</p> <p>__12/20/13 "Treated both bed frames, 1 mattress and 1 bedspring."</p> <p>Review of client #1's, #2's, #3's, #4's, #5's and #6's Injury/Illness and Full Body Check Reports for 2013 on 1/17/14 at 8 AM indicated:</p> <p>Client #2's reports indicated 12/19/13 client #2 "has bite marks on her arm and on her neck from the bed bugs."</p> <p>Client #3's reports indicated: 8/10/13 at 9:53 PM "[Client #3] continues to have a bite on his inner thigh, it is red all around it as a reaction to the bite, I believe."</p>						

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	<p>8/14/13 at 8:04 PM "has 1/8 inch pinkish red bug bites on both arms."</p> <p>8/26/13 at 10:42 PM "had several pink bumps on his arm."</p> <p>8/31/13 at 8:52 PM "continues to have 1/4 inch in diameter pink spots on his arms."</p> <p>9/8/13 at 8:56 PM "still has little pink circles on him."</p> <p>9/9/13 at 8:36 PM "still has small pink circles that are now reaching up to his neck."</p> <p>9/12/13 at 7:48 PM "appears to have a boil on his inner thigh."</p> <p>9/16/13 at 102 PM "has a red bump on his inner right thigh, as well as an infected hair on his right knee."</p> <p>9/26/13 at 8 PM "red sore on inner thigh (not a new thing has been there for about a week or so.)"</p> <p>10/13/13 at 2:59 PM "[Client #3] continues to have small pink dots about 1/4 of an inch all over him."</p> <p>Client #4's reports indicated: 9/30/13 at 9:12 PM "has a red bumpy rash on the right side of his back." The report indicated the nurse was notified. 10/14/13 at 11:24 PM "has what I am assuming to be bed bug bites on his neck, as we know the house is infected and it is clearly a bite."</p> <p>Client #5's reports indicated:</p>			

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	<p>10/12/13 at 1:57 PM "has some red marks on his shoulder, neck and arms."</p> <p>10/20/13 at 8:38 PM "[Client #5] had quite a few red bumps on his arms that looked like bug bites. They didn't show up until later on in the day." The report indicated the staff notified the RD (Residential Director).</p> <p>10/21/13 at 7:28 PM "red sore on right lower arm, previously documented."</p> <p>Client #6's reports indicated 11/19/13 while getting up to go to the bathroom, the staff noticed "numerous red whelps/bites on his face. Will notify the nurse."</p> <p>During interview with the Area Director (AD) on 1/17/14 at 3 PM, the AD indicated the infestation of bed bugs had not been reported to BDDS.</p> <p>9-3-1(b)</p>			