

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 15G466	X2) MULTIPLE CONSTRUCTION A. BUILDING 00 B. WING _____		X3) DATE SURVEY COMPLETED 09/30/2013
NAME OF PROVIDER OR SUPPLIER REM-INDIANA INC			STREET ADDRESS, CITY, STATE, ZIP CODE 1926 W 75TH PL INDIANAPOLIS, IN 46260		
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W000000	<p>This visit was for the investigation of complaint #IN00136019.</p> <p>Complaint #IN00136019: Substantiated, federal and state deficiencies related to the allegation(s) are cited at: W148, W149, W153, W154 and W156.</p> <p>Dates of Survey: 9/23/13, 9/24/13, 9/25/13, 9/26/13 and 9/30/13.</p> <p>Facility Number: 000980 Provider Number: 15G466 AIMS Number: 100244620</p> <p>Surveyor: Keith Briner, QIDP</p> <p>These deficiencies also reflect state findings in accordance with 460 IAC 9. Quality Review completed 10/7/13 by Ruth Shackelford, QIDP.</p>	W000000			

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

Any deficiency statement ending with an asterisk (*) denotes a deficiency which the institution may be excused from correcting providing it is determined that other safeguards provide sufficient protection to the patients. (see instructions.) Except for nursing homes, the findings stated above are disclosable 90 days following the date of survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosable 14 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.

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W000148	<p>483.420(c)(6) COMMUNICATION WITH CLIENTS, PARENTS &</p> <p>The facility must notify promptly the client's parents or guardian of any significant incidents, or changes in the client's condition including, but not limited to, serious illness, accident, death, abuse, or unauthorized absence.</p> <p>Based on record review and interview for 1 of 4 sampled clients (A), the facility failed to ensure client A's father/guardian was notified of incidents regarding client A.</p> <p>Findings include:</p> <p>The facility's BDDS (Bureau of Developmental Disabilities Services) reports and investigations were reviewed on 9/23/13 at 3:34 PM. The review indicated the following:</p> <p>-BDDS report dated 1/11/13 indicated on 1/10/13 "[Client B] was in the kitchen trying to assist with cooking dinner (sic) she got upset and [staff #2] asked all other consumers to leave the kitchen so she and [client B] could talk. The consumers kept coming in the kitchen, and [client B] got upset when [client A] came in the kitchen and began to hit [client A] in her face. [Client B] broke [client A's] glasses and staff could not get [client B] to calm down so they called [HM (Home Manager) #1], [PD (Program Director)</p>	W000148	Home Manager and Program Director will be retrained on the need to ensure that all consumers' parents and/or guardians are notified within 24 hours of any significant incidents or changes in consumers' conditions, including anytime there are injuries, falls, client to client aggression or emergency room visits. Ongoing, HM and/or PD will notify all consumers' parents and/or guardians within 24 hours of any significant incidents or changes in consumers' condition. When completing paperwork for consumer incidents, the Program Director will work with the Home Manager to ensure that they have notified guardians of significant incidents or changes in the consumers' condition and if the HM has not done this, the Program Director will ensure it is completed. The Area Director will review all incident reports to ensure that documentation of guardian notification is listed as needed. Responsible party: Home Manager, Program Director, Area Director	10/30/2013			

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	<p>#1] and called the police."</p> <p>-BDDS report dated 1/11/13 indicated on 1/11/13 "As the consumers arrived home from day placements, [staff #3], went to let another consumer off the van (wheelchair lift) and [client B] pulled [client A] down in the grass and began to kick her."</p> <p>-BDDS report dated 2/13/13 indicated on 2/12/13 "[Client B] was upset because she wanted to go shopping with staff and [client A]. [Client B] has been shopping with [HM #1] earlier in the day. [Client B] began attacking [client A], [client B] hit [client A] several times with a plastic cup and pulled a chunk of [client A's] hair out." The 2/13/13 BDDS report indicated client B was taken to the hospital for a psychological evaluation.</p> <p>-BDDS report dated 6/2/13 indicated, "For no reason, [client B], ran outside where [client A] was outside talking to her mother and attacked [client A]. [Client B] hit [client A], pulled her hair and broke her glasses."</p> <p>-BDDS report dated 6/16/13 indicated, "[Client A] was gone for the weekend and when she returned today, [client B], wanted to talk to her and [client A] just went into her room. About 5 minutes after</p>				

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	<p>[client A] went into her room, [client B] went into [client A's] room and began pulling her hair and trying to fight her. It took 3 staff to get [client B] off of [client A]."</p> <p>-BDDS report dated 9/5/13 indicated, "Once at home, [client B] asked [client F] if [client A] was mad at her... [client F] told [client B] yes so [client B] went after [client A]. [Client B] pulled some of [client A's] hair out."</p> <p>Client A's record was reviewed on 9/24/13 at 1:00 PM. Client A's ISP (Individual Support Plan) dated 3/1/13 indicated client A's father and mother, who were divorced, were co-guardians.</p> <p>Client A's father was interviewed on 9/23/13 at 12:51 PM. Client A's father stated, "[Client A's] mother and I are her co-guardians. I have requested several times to be notified of any incidents that happen with my daughter, [client A]. I requested a print out of all of the incidents that have involved my daughter since she's been at the group home. I was shocked. I had no idea. There were, since 2009, around 40 incidents. I was never notified of any incidents from the staff. I knew of 4 incidents because my daughter, [client A], told me."</p>						

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	<p>Electronic correspondence from client A's father dated 6/17/13 was reviewed on 9/23/13 at 1:41 PM. The 6/17/13 electronic correspondence indicated, "The other resident keeps pulling [client A's] hair out and breaking her glasses and physically hurting her. No phone calls are ever made to me by the group home and I have repeatedly asked for this to be done with no positive outcome."</p> <p>AS (Administrative Staff) #1 was interviewed on 9/25/13 at 3:15 PM. AS #1 indicated client A's guardian should be notified of incidents regarding client A. AS #1 indicated the facility had been notifying client A's mother of incidents. AS #1 indicated the facility had identified incidents that client A had self reported to her father prior to notifying the facility of incidents/concerns.</p> <p>This federal tag relates to complaint #IN00136019.</p> <p>9-3-2(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 4 of 4 sampled clients (A, B, C and D) plus 3 additional clients (E, F and G), the facility failed to implement its policy and procedures to prevent neglect regarding client B's physical aggression toward client A.</p> <p>The facility failed to implement its policy and procedures to immediately notify BDDS (Bureau of Developmental Disabilities Services) in accordance with state law regarding an allegation of sexual abuse regarding client A.</p> <p>The facility failed to implement its policy and procedures to ensure three separate incidents of client to client aggression involving clients A and B were investigated.</p> <p>The facility failed to implement its policy and procedures to ensure the results of investigations regarding three separate investigations of client to client aggression involving clients A and B, an allegation of staff neglect for clients A, B, D, E, F and G, an incident of alleged sleeping/headache pill overdose for client E, an allegation of sexual abuse for client</p>	W000149	<p>Client B was moved to a different group home effective 9/5/13. The Program Director will receive retraining on investigations including ensuring that all reports of any significant incidents or changes in consumers' conditions are investigated, investigations are completed thoroughly and accurately and all investigations are reported to the administrator or designee the results within 5 work days. All future incident reports will be reviewed by the Area Director and Regional Quality Assurance Specialist to determine if an investigation needs to be completed. All future investigations will be reviewed for thoroughness by the Area Director and Quality Assurance Specialist. If the investigations are not thorough enough the Quality Assurance Specialist will provide immediate feedback to the Program Director and necessary changes will be made. All Direct care staff and Day Services staff will be receive retraining on incident reporting requirements including what incidents need to be reported, designated timeframes in which incidents are to be reported and the procedure for immediately notifying the Program Director or On Call supervisor of reportable</p>	10/30/2013	

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	<p>A and an incident of client to client aggression involving clients B, C and G.</p> <p>Findings include:</p> <p>1. The facility's BDDS reports and investigations were reviewed on 9/23/13 at 3:34 PM. The review indicated the following:</p> <p>-BDDS report dated 1/11/13 indicated on 1/10/13 "[Client B] was in the kitchen trying to assist with cooking dinner (sic) she got upset and [staff #2] asked all other consumers to leave the kitchen so she and [client B] could talk. The consumers kept coming in the kitchen, and [client B] got upset when [client A] came in the kitchen and began to hit [client A] in her face. [Client B] broke [client A's] glasses and staff could not get [client B] to calm down so they called [HM (Home Manager) #1], [PD (Program Director) #1] and called the police."</p> <p>The review did not indicate documentation of an investigation regarding the 1/10/13 incident of client to client aggression for clients A and B.</p> <p>-BDDS report dated 1/11/13 indicated on 1/11/13 "As the consumers arrived home from day placements, [staff #3], went to let another consumer off the van</p>		<p>incidents. The Home Manager will receive retraining on documentation review including reviewing all consumer Daily support records, behavior tracking and narrative notes to ensure all incidents that have been documented have been reported to the Program Director so reports can be made to the Bureau of Developmental Disability Services and investigations can be completed as needed. Ongoing, the Home Manager and/or Program Director will review the DSRs and Behavior tracking records a minimum of twice weekly for 30 days to ensure that all incidents that fall under the BDDS reportable incident guidelines are reported to the on call supervisor, Program Director and/or Area Director within the designated reporting guidelines. After the 30 days, the Home Manager and/or Program Director will review the DSRs and Behavior tracking records a minimum of once per week to ensure that all incidents that fall under the BDDS reportable incident guidelines are reported to the on call supervisor, Program Director and/or Area Director within the designated reporting guidelines. The Program Director will receive retraining on investigations including ensuring that all reports of any significant incidents or changes in consumers' conditions are</p>				

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	<p>(wheelchair lift) and [client B] pulled [client A] down in the grass and began to kick her."</p> <p>The review did not indicate documentation of an investigation regarding the 1/11/13 incident of client to client aggression for clients A and B.</p> <p>-BDDS report dated 2/13/13 indicated on 2/12/13 "[Client B] was upset because she wanted to go shopping with staff and [client A]. [Client B] has been shopping with [HM #1] earlier in the day. [Client B] began attacking [client A], [client B] hit [client A] several times with a plastic cup and pulled a chunk of [client A's] hair out." The 2/13/13 BDDS report indicated client B was taken to the hospital for a psychological evaluation.</p> <p>The review did not indicate documentation of an investigation regarding the 2/13/13 incident of client to client aggression for clients A and B.</p> <p>-BDDS report dated 6/2/13 indicated, "For no reason, [client B], ran outside where [client A] was outside talking to her mother and attacked [client A]. [Client B] hit [client A], pulled her hair and broke her glasses."</p> <p>-Investigation dated 6/5/13 regarding the</p>		<p>investigated, investigations are completed thoroughly and accurately and all investigations are reported to the administrator or designee the results within 5 work days. All future incident reports will be reviewed by the Area Director and Regional Quality Assurance Specialist to determine if an investigation needs to be completed. All future investigations will be reviewed for thoroughness by the Area Director and Quality Assurance Specialist. If the investigations are not thorough enough the Quality Assurance Specialist will provide immediate feedback to the Program Director and necessary changes will be made. The Area Director will track all incidents that require investigations and follow up with the Program Directors if investigations are not completed within the 5 business day guidelines. Responsible Party: Program Director, Quality Assurance Specialist, Area Director.</p>				

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	<p>6/2/13 incident of client to client aggression for clients A and B did not indicate documentation of the administrator being notified of the investigation findings.</p> <p>-BDDS report dated 6/16/13 indicated, "[Client A] was gone for the weekend and when she returned today, [client B], wanted to talk to her and [client A] just went into her room. About 5 minutes after [client A] went into her room, [client B] went into [client A's] room and began pulling her hair and trying to fight her. It took 3 staff to get [client B] off of [client A].</p> <p>-Investigation dated 6/18/13 regarding the 6/16/13 incident of client to client aggression for clients A and B did not indicate documentation of the administrator being notified of the investigation findings.</p> <p>-BDDS report dated 9/5/13 indicated on 9/4/13 "Once at home, [client B] asked [client F] if [client A] was mad at her... [client F] told [client B] yes so [client B] went after [client A]. [Client B] pulled some of [client A's] hair out."</p> <p>-Investigation dated 9/13/13 regarding the 9/4/13 incident of client to client aggression for clients A and B indicated</p>						

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	<p>the administrator was notified of the investigations findings on 9/13/13.</p> <p>Client B's record was reviewed on 9/24/13 at 1:55 PM. Client B's record indicated the following IDT (Interdisciplinary Team) meetings:</p> <p>-2/20/13, "[Client A] seems to be the target, preventing behaviors and keeping [client B] away from [client A]."</p> <p>-2/27/13, "March 5, 2013 medication increase and one to one staffing."</p> <p>-3/7/13, "Discussion included: recent increase in medications, positive one to one attention, behavior consultant adding positive reinforcement and one to one to BSP (Behavior Support Plan)."</p> <p>-3/21/13, "Continuing one to one staffing. New placement considerations."</p> <p>-9/20/13, "Transitioning to [group home]. Request BDDS level of care to transition as soon as possible."</p> <p>Client A's record was reviewed on 9/24/13 at 1:00 PM. Client A's ISP (Individual Support Plan) dated 3/1/13 indicated client A's father and mother, who were divorced, were co-guardians.</p>			

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	<p>Client A's father was interviewed on 9/23/13 at 12:51 PM. Client A's father stated, "[Client A's] mother and I are her co-guardians. There have been several incidents of [client B] attacking my daughter. She, [client B], has pulled huge chunks of her, [client A's], hair out and keeps breaking her glasses." Client A's father stated, "I have complained many times, and they kept telling me they were trying to get [client B] moved. They have [client B] with a one on one but the staff can't control her. It took like three or four people to get her, [client B], off of [client A]. They have to call the police because they can't control [client B]."</p> <p>Electronic correspondence from client A's father dated 6/17/13 was reviewed on 9/23/13 at 1:41 PM. The 6/17/13 electronic correspondence indicated, "[Client A] is continuing to be physically abused by another resident, [client B], again this afternoon." The 6/17/13 electronic correspondence indicated, "The other resident, [client B], keeps pulling [client A's] hair out and breaking her glasses and physically hurting her."</p> <p>Client A was interviewed on 9/23/13 at 6:30 PM. Client A stated, "[Client B] is gone now. They moved her out of the house because of me. [Client B] pulled my hair out, she broke my glasses and hit</p>						

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	<p>me. Once when I came home with my mom, she did it in front of my mom. We were in my mom's car and [client B] was sitting on the porch. [Client B] saw me and just ran up to the car I was sitting in and started yelling and trying to get in. My mom called the police." Client A stated, "[Client B] came in my room and pulled my hair."</p> <p>Staff #3 was interviewed on 9/23/13 at 6:35 PM. Staff #3 indicated client B was moved out of the group home on 9/5/13. Staff #3 stated, "[Client B] targeted [client A]. [Client B] was always trying to get at [client A]. I think [client B] was jealous of [client A's] boyfriends and cell phone. [Client B] pulled [client A's] hair and broke her glasses." Staff #3 indicated client B had been assigned a one on one staff. Staff #3 stated, "It takes more than one staff to get [client B] to calm down. We had to call the police to help get [client B] calm."</p> <p>Staff #4 was interviewed on 9/23/13 at 6:43 PM. Staff #4 indicated client B was moved out of the group home on 9/5/13. Staff #4 stated, "There had been several incidents of [client B] attacking [client A]. I think there were some in May or June of this year and then some more in September. [Client B] had been on a one on one staffing but it just got too intense.</p>						

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	<p>The way [client B] was trying to fight was too much for one person."</p> <p>HM (Home Manager) #1 was interviewed on 9/23/13 at 6:02 PM. HM #1 stated, "Things are going pretty good now. [Client B's] not here. [Client B] had been attacking the other clients. [Client B] targeted [client A]." HM #1 stated, "It was really bad in June and maybe in May of this year. We had about a month of nothing and then again in the beginning of September. It was just random. [Client B] would just go after [client A] with no warning."</p> <p>PD (Program Director) #1 was interviewed on 9/24/13 at 3:37 PM. When asked if the facility had been able to stop or prevent client B from attacking client A, PD #1 stated, "No." PD #1 indicated client B had been moved out of the group home on 9/5/13.</p> <p>2. The facility's BDDS reports and investigations were reviewed on 9/23/13 at 3:34 PM. The review indicated the following:</p> <p>-BDDS report dated 5/30/13 indicated on 5/29/13 "[Client A] reported that [work peer], a boy at [day services], is touching her private area."</p>						

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	<p>-Investigation dated 6/5/13 indicated client A reported the allegation to day services staff on 5/25/13. The review indicated the date of knowledge of the allegation of sexual abuse regarding client A was 5/25/13 and reported to BDDS on 5/30/13.</p> <p>3. The facility's BDDS reports and investigations were reviewed on 9/23/13 at 3:34 PM. The review indicated the following:</p> <p>-BDDS reports dated 1/16/13 indicated, "[PD (Program Director) #1] went to the home to do a supervisory visit and entered the home with key. [Staff #1] was asleep on the couch with a blanket, her hair wrapped and all the lights were off. [PD #1] was in the home for approximately 12 minutes before [Staff #1] woke up. [Staff #1] is suspended pending an investigation." The BDDS report dated 1/16/13 indicated clients A, B, D, E, F and G were in the home at the time of the allegation of staff sleeping while on duty.</p> <p>-Investigation dated 1/24/13 regarding the 1/16/13 BDDS report indicated the facility administrator signed the investigation on 1/25/13. The review indicated the results of the 1/24/13 investigation were not reviewed by the administrator within 5 business days.</p>						

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	<p>-BDDS report dated 2/5/13 indicated, "[Client E] had a sleep study done last night and during the study [client E's] lips and face turned blue and purple and doctors and nurses had to monitor her. It was discovered that [client E] had a pill package of headache pills that included a sleep aid. The package had 24 spots but only 9 pills left but it is unknown how many pills [client E] actually took. This morning at approximately 9:35 AM staff called the house nurse and said [client E] was turning red and blue and was asking odd questions and acting unusual. Nurse instructed staff to call 911. [Client E] was taken to the hospital and she is being kept overnight for observation...."</p> <p>-Investigation dated 2/26/13 indicated client E's 2/5/13 incident of ingestion of sleeping/headache pills was investigated. The Investigation 2/26/13 form indicated the date of completion was 2/26/13. The 2/26/13 Investigation did not indicate documentation of the administrator being notified of the findings of the investigation.</p> <p>-BDDS report dated 3/1/13 indicated on 2/28/13 "[Client A] reported to [PD #1] that a male client, [co-worker], at [day services] unzipped her pants and touched her vagina and inside of her thigh,</p>						

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	<p>unzipped his pants and showed her his penis and sent a picture of his penis to her cell phone. [Client A] said she deleted the picture and that she asked [co-worker] to stop and told him she did not like it."</p> <p>-Investigation dated 3/11/13 indicated the 2/28/13 allegation of sexual abuse for client A was completed on 3/11/13. The review indicated the administrator reviewed the findings of the investigation on 3/11/13.</p> <p>-BDDS report dated 6/18/13 indicated, "At approximately 3:35 PM, [client B] sent a text to her dad and [HM #1] saying, 'I'm going to attack her again.' [Client B] attacked [client C] and [client G] and was pulling their hair. [Client B] also tried to attack one of the staff. [Client B] had to be put in a PIA (physical containment) hold."</p> <p>-Investigation dated 6/22/13 regarding the 6/17/13 incident of client to client aggression for clients B, D and G did not indicate documentation of the administrator's review of the investigation findings.</p> <p>AS (Administrative Staff) #1 was interviewed on 9/24/13 at 12:59 PM. AS #1 indicated the facility's abuse and neglect policy should be implemented.</p>			

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	<p>AS #1 indicated allegations of abuse, neglect, mistreatment and exploitation should be reported immediately to supervisory staff and to BDDS within 24 hours of knowledge of an allegation. AS #1 indicated allegations of abuse, neglect, mistreatment and exploitation should be thoroughly investigated and reported to the administrator within 5 business days of the incident. When asked if incidents of client to client aggression should be investigated, AS #1 stated, "Yes." When asked if the administrator should sign and date investigations of abuse, neglect, mistreatment and exploitation, AS #1 stated, "Yes, that's the date of review."</p> <p>The facility's policy and procedures were reviewed on 9/26/13 at 4:15 PM. The facility's April 2011 policy and procedure entitled Quality Risk Management indicated "Indiana Mentor (parent company) follows the BDDS Incident Reporting policy as outlined in the Providers Standards. An incident described as follows shall be reported to the BDDS on the incident report from prescribed by BDDS: 1. Alleged, suspected, or actual abuse, neglect, or exploitation of an individual. An incident in this category shall also be reported to adult protective services...." The April 2011 policy and procedure indicated, "A. Physical Abuse, including but not limited</p>						

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	<p>to:(i.) Intentionally touching another person in a rude, insolent, or angry manner; (ii.) Willful infliction of injury...." The April 2011 policy and procedure indicated, "B. Sexual abuse, including but not limited to: (i.) Nonconsensual sexual activity; (ii.) Sexual molestation; (iii.) Sexual coercion." The April 2011 policy and procedure indicated, "Peer to peer aggression that results in significant injury by one individual receiving services, to another individual receiving services" was included in the definition of abuse and neglect.</p> <p>The April 2011 policy and procedure indicated, "An initial report regarding an incident shall be submitted within 24 hours of (a) the occurrence of the incident; or (b) the reporter becoming aware of or receiving information about an incident."</p> <p>The April 2011 policy and procedure indicated "Indiana Mentor is committed to completing a thorough investigation for any event out of the ordinary which jeopardizes the health and safety of any individual served or other employee. (1.) Investigation findings will be submitted to the Area Director for review and development of further recommendations as needed within 5 days of the incident."</p>						

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	<p>This federal tag relates to complaint #IN00136019.</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 1 of 36 allegations of abuse, neglect, mistreatment, exploitation and injuries of unknown origin reviewed, the facility failed to immediately notify BDDS (Bureau of Developmental Disabilities Services) in accordance with state law regarding an allegation of sexual abuse regarding client A.</p> <p>Findings include:</p> <p>The facility's BDDS reports and investigations were reviewed on 9/23/13 at 3:34 PM. The review indicated the following:</p> <p>-BDDS report dated 5/30/13 indicated on 5/29/13 "[Client A] reported that [work peer], a boy at [day services], is touching her private area. [Client A] reported that the same boy was touching her a couple of months ago and investigation was completed and the allegation was unsubstantiated."</p> <p>-Investigation dated 6/5/13 indicated</p>	W000153	All Direct care staff and Day Services staff will be receive retraining on incident reporting requirements including what incidents need to be reported, designated timeframes in which incidents are to be reported and the procedure for immediately notifying the Program Director or On Call supervisor of reportable incidents. The Home Manager will receive retraining on documentation review including reviewing all consumer Daily support records, behavior tracking and narrative notes to ensure all incidents that have been documented have been reported to the Program Director so reports can be made to the Bureau of Developmental Disability Services and investigations can be completed as needed. Ongoing, the Home Manager and/or Program Director will review the DSRs and Behavior tracking records a minimum of twice weekly for 30 days to ensure that all incidents that fall under the BDDS reportable incident guidelines are reported to the on call supervisor, Program Director and/or Area Director within the	10/30/2013
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	<p>client A reported the allegation to day services staff on 5/25/13. The review indicated the date of knowledge of the allegation of sexual abuse regarding client A was 5/25/13 and reported to BDDS on 5/30/13.</p> <p>AS (Administrative Staff) #1 was interviewed on 9/24/13 at 12:59 PM. AS #1 indicated allegations of abuse, neglect and mistreatment should be reported to BDDS within 24 hours of knowledge of an allegation. AS #1 indicated day service staff failed to report client A's allegation to facility staff in a timely manner.</p> <p>This federal tag relates to complaint #IN00136019.</p> <p>9-3-1(b)(5) 9-3-2(a)</p>		<p>designated reporting guidelines. After the 30 days, the Home Manager and/or Program Director will review the DSRs and Behavior tracking records a minimum of once per week to ensure that all incidents that fall under the BDDS reportable incident guidelines are reported to the on call supervisor, Program Director and/or Area Director within the designated reporting guidelines. Responsible Party: Home Manager, Program Director, Area Director</p>		

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W000154	<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 3 of 36 allegations of abuse, neglect, mistreatment, exploitation and injuries of unknown origin reviewed, the facility failed to ensure three separate incidents of client to client aggression involving clients A and B were investigated.</p> <p>Findings include:</p> <p>The facility's BDDS reports and investigations were reviewed on 9/23/13 at 3:34 PM. The review indicated the following:</p> <p>-BDDS report dated 1/11/13 indicated on 1/10/13 "[Client B] was in the kitchen trying to assist with cooking dinner (sic) she got upset and [staff #2] asked all other consumers to leave the kitchen so she and [client B] could talk. The consumers kept coming in the kitchen, and [client B] got upset when [client A] came in the kitchen and began to hit [client A] in her face. [Client B] broke [client A's] glasses and staff could not get [client B] to calm down so they called [HM (Home Manager) #1], [PD (Program Director) #1] and called the police."</p>	W000154	<p>W154 The Program Director will receive retraining on investigations including ensuring that all reports of any significant incidents or changes in consumers' conditions are investigated, investigations are completed thoroughly and accurately and all investigations are reported to the administrator or designee the results within 5 work days. All future incident reports will be reviewed by the Area Director and Regional Quality Assurance Specialist to determine if an investigation needs to be completed. All future investigations will be reviewed for thoroughness by the Area Director and Quality Assurance Specialist. If the investigations are not thorough enough the Quality Assurance Specialist will provide immediate feedback to the Program Director and necessary changes will be made. Responsible Party: Program Director, Quality Assurance Specialist, Area Director.</p>	10/30/2013	

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	<p>The review did not indicate documentation of an investigation regarding the 1/10/13 incident of client to client aggression for clients A and B.</p> <p>-BDDS report dated 1/11/13 indicated on 1/11/13 "As the consumers arrived home from day placements, [staff #3], went to let another consumer off the van (wheelchair lift) and [client B] pulled [client A] down in the grass and began to kick her."</p> <p>The review did not indicate documentation of an investigation regarding the 1/11/13 incident of client to client aggression for clients A and B.</p> <p>-BDDS report dated 2/13/13 indicated on 2/12/13 "[Client B] was upset because she wanted to go shopping with staff and [client A]. [Client B] has been shopping with [HM #1] earlier in the day. [Client B] began attacking [client A], [client B] hit [client A] several times with a plastic cup and pulled a chunk of [client A's] hair out." The 2/13/13 BDDS report indicated client B was taken to the hospital for a psychological evaluation.</p> <p>The review did not indicate documentation of an investigation regarding the 2/13/13 incident of client to client aggression for clients A and B.</p>						

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	<p>AS (Administrative Staff) #1 was interviewed on 9/24/13 at 12:59 PM. AS #1 indicated allegations of abuse, neglect, mistreatment and exploitation should be thoroughly investigated. When asked if incidents of client to client aggression should be investigated, AS #1 stated, "Yes."</p> <p>This federal tag relates to complaint #IN00136019.</p> <p>9-3-2(a)</p>			
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W000156	<p>483.420(d)(4) STAFF TREATMENT OF CLIENTS The results of all investigations must be reported to the administrator or designated representative or to other officials in accordance with State law within five working days of the incident.</p> <p>Based on record review and interview for 13 of 36 allegations of abuse, neglect, mistreatment, exploitation and injuries of unknown origin reviewed, the facility failed to ensure the results of investigations regarding three separate investigations of client to client aggression involving clients A and B, an allegation of staff neglect for clients A, B, D, E, F and G, an incident of alleged sleeping/headache pill overdose for client E, an allegation of sexual abuse for client A and an incident of client to client aggression involving clients B, C and G were reported to the facility administrator within 5 business days of the incident.</p> <p>Findings include:</p> <p>The facility's BDDS reports and investigations were reviewed on 9/23/13 at 3:34 PM. The review indicated the following:</p> <p>-BDDS reports dated 1/16/13 indicated, "[PD (Program Director) #1] went to the home to do a supervisory visit and entered the home with key. [Staff #1] was asleep</p>	W000156	<p>The Program Director will receive retraining on investigations including ensuring that all reports of any significant incidents or changes in consumers' conditions are investigated, investigations are completed thoroughly and accurately and all investigations are reported to the administrator or designee the results within 5 work days. All future incident reports will be reviewed by the Area Director and Regional Quality Assurance Specialist to determine if an investigation needs to be completed. All future investigations will be reviewed for thoroughness by the Area Director and Quality Assurance Specialist. If the investigations are not thorough enough the Quality Assurance Specialist will provide immediate feedback to the Program Director and necessary changes will be made. The Area Director will track all incidents that require investigations and follow up with the Program Directors if investigations are not completed within the 5 business day guidelines. Responsible Party: Program Director, Quality Assurance Specialist, Area Director.</p>	10/30/2013
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	<p>on the couch with a blanket, her hair wrapped and all the lights were off. [PD #1] was in the home for approximately 12 minutes before [Staff #1] woke up. [Staff #1] is suspended pending an investigation." The BDDS report dated 1/16/13 indicated clients A, B, D, E, F and G were in the home at the time of the allegation of staff sleeping while on duty.</p> <p>-Investigation dated 1/24/13 regarding the 1/16/13 BDDS report indicated the facility administrator signed the investigation on 1/25/13. The review indicated the results of the 1/24/13 investigation were not reviewed by the administrator within 5 business days.</p> <p>-BDDS report dated 2/5/13 indicated, "[Client E] had a sleep study done last night and during the study [client E's] lips and face turned blue and purple and doctors and nurses had to monitor her. It was discovered that [client E] had a pill package of headache pills that included a sleep aid. The package had 24 spots but only 9 pills left but it is unknown how many pills [client E] actually took. This morning at approximately 9:35 AM staff called the house nurse and said [client E] was turning red and blue and was asking odd questions and acting unusual. Nurse instructed staff to call 911. [Client E] was taken to the hospital and she is being kept</p>						

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	<p>overnight for observation...."</p> <p>-Investigation dated 2/26/13 indicated client E's 2/5/13 incident of ingestion of sleeping/headache pills was investigated. The Investigation 2/26/13 form indicated the date of completion was 2/26/13. The 2/26/13 Investigation did not indicate documentation of the administrator being notified of the findings of the investigation.</p> <p>-BDDS report dated 3/1/13 indicated on 2/28/13 "[Client A] reported to [PD #1] that a male client, [co-worker], at [day services] unzipped her pants and touched her vagina and inside of her thigh, unzipped his pants and showed her his penis and sent a picture of his penis to her cell phone. [Client A] said she deleted the picture and that she asked [co-worker] to stop and told him she did not like it."</p> <p>-Investigation dated 3/11/13 indicated the 2/28/13 allegation of sexual abuse for client A was completed on 3/11/13. The review indicated the administrator reviewed the findings of the investigation on 3/11/13.</p> <p>-BDDS report dated 6/2/13 indicated, "For no reason, [client B], ran outside where [client A] was outside talking to her mother and attacked [client A]."</p>						

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	<p>[Client B] hit [client A], pulled her hair and broke her glasses."</p> <p>-Investigation dated 6/5/13 regarding the 6/2/13 incident of client to client aggression for clients A and B did not indicate documentation of the administrator being notified of the investigations findings.</p> <p>-BDDS report dated 6/16/13 indicated, "[Client A] was gone for the weekend and when she returned today, [client B], wanted to talk to her and [client A] just went into her room. About 5 minutes after [client A] went into her room, [client B] went into [client A's] room and began pulling her hair and trying to fight her. It took 3 staff to get [client B] off of [client A]."</p> <p>-Investigation dated 6/18/13 regarding the 6/16/13 incident of client to client aggression for clients A and B did not indicate documentation of the administrator being notified of the investigations findings.</p> <p>-BDDS report dated 6/18/13 indicated, "At approximately 3:35 PM, [client B] sent a text to her dad and [HM #1] saying, 'I'm going to attack her again.' [Client B] attacked [client C] and [client G] and was pulling their hair. [Client B] also tried to</p>						

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NAME OF PROVIDER OR SUPPLIER REM-INDIANA INC				STREET ADDRESS, CITY, STATE, ZIP CODE 1926 W 75TH PL INDIANAPOLIS, IN 46260			
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETION DATE			
	<p>attack one of the staff. [Client B] had to be put in a PIA (physical containment) hold."</p> <p>-Investigation dated 6/22/13 regarding the 6/17/13 incident of client to client aggression for clients B, D and G did not indicate documentation of the administrator's review of the investigation findings.</p> <p>-BDDS report dated 9/5/13 indicated on 9/4/13 "Once at home, [client B] asked [client F] if [client A] was mad at her... [client F] told [client B] yes so [client B] went after [client A]. [Client B] pulled some of [client A's] hair out."</p> <p>-Investigation dated 9/13/13 regarding the 9/4/13 incident of client to client aggression for clients A and B indicated the administrator was notified of the investigations findings on 9/13/13.</p> <p>AS (Administrative Staff) #1 was interviewed on 9/24/13 at 12:59 PM. AS #1 indicated allegations of abuse, neglect, mistreatment and exploitation should be reported to the administrator within 5 business days of the incident. When asked if incidents of client to client aggression should be investigated, AS #1 stated, "Yes." When asked if the administrator should sign and date investigations of</p>						

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	<p>abuse, neglect, mistreatment and exploitation, AS #1 stated, "Yes, that's the date of review."</p> <p>This federal tag relates to complaint #IN00136019.</p> <p>9-3-2(a)</p>			