

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 15G720		X2) MULTIPLE CONSTRUCTION A. BUILDING 00 B. WING _____		X3) DATE SURVEY COMPLETED 02/15/2013	
NAME OF PROVIDER OR SUPPLIER REM-INDIANA INC				STREET ADDRESS, CITY, STATE, ZIP CODE 82 BENNY LN NORTH VERNON, IN 47265			
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W0000	<p>This visit was for an annual recertification and state licensure survey.</p> <p>Survey Dates: February 6, 7, 8 and 15, 2013.</p> <p>Facility Number: 004396 Provider Number: 15G720 AIM Number: 200510170</p> <p>Surveyor: Vickie Kolb, RN, BSN, Public Health Nurse Surveyor III</p> <p>These deficiencies also reflect state findings in accordance with 460 IAC 9. Quality Review completed 2/25/13 by Ruth Shackelford, Medical Surveyor III.</p>	W0000					

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

TITLE

(X6) DATE

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

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W0120	<p>483.410(d)(3) SERVICES PROVIDED WITH OUTSIDE SOURCES</p> <p>The facility must assure that outside services meet the needs of each client. Based on observation, record review and interview for 1 additional client (#3), the facility failed to ensure the outside services followed client #3's dining plans and to ensure the facility nurse was notified immediately of medical concerns in regards to client #3's history of choking and dysphasia.</p> <p>Findings include:</p> <p>The facility reportable records were reviewed on 2/6/13 at 12 PM. The facility BDDS (Bureau of Developmental Disabilities Services) reports indicated:</p> <p>__ On 10/6/12 client #3 was congested, not feeling well, and PO2 sat (pulse oxygen saturation) levels were low. The client was taken to the ER (emergency room) where she was diagnosed with pneumonia and admitted to the hospital.</p> <p>__ On 11/7/12 at 6:30 PM client was "being fed meal by staff per plan. Staff was waiting for her to clear her mouth so another bite could be given but [client #3] began to cough. Staff monitored and when [client #3] began to get red in the face, staff gave 4 pats to her back and she</p>	W0120	<p>Program Director and Home Manager for group home will retrain all day program staff on client #3's dining plan and dysphagia risk plan. Home Manager for day program will complete meal time observations of all staff to ensure they are following dining plan. Program Director for day program will complete meal time observations of all staff to ensure they are following dining plan. Home Manager for group home will review all dining plans with day program staff to ensure they understand them and are implementing them correctly. Responsible Party: Program Director/Home Manager group home Program Director/Home Manager day program</p>	03/17/2013

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	<p>was able to clear her throat. Home Manager and Program Director notified. RN [Registered Nurse] consulted and instructed to take to ER for x-ray for possible aspiration. X-ray at ER revealed no aspiration and [client #3] was released and returned to the group home." The report indicated client #3 had also had a previous incident of choking in 2008.</p> <p>Observations were conducted at the DP (Day Program) on 2/7/13 between 11 AM and 1 PM.</p> <p>__ At 11 AM client #3 was sitting in a facility chair in one of the classrooms with other clients.</p> <p>__ At 12 PM one of the DP staff walked client #3 from the classroom to the dining room. Once in the dining room the DP stated to DP staff #3, "Maybe we should get her wheelchair." The other DP staff left the room and returned with client #3's wheel chair. Client #3 remained standing in the dining room while the DP staff moved the chairs around to make room for client #3's wheel chair at the table. Day program staff #2 assisted client #3 to sit down in her wheel chair, DP staff did not fasten client #3's seat belt and client #3 stood up and took a step toward the dining table. DP staff #2 stated, "What are you doing?" and prompted client #3 to return to her wheel chair.</p> <p>__ At 12:05 PM DP staff #2 placed a</p>			
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	<p>clothing protector over client #3 and then took client #3's PO2, getting a result of 84%. DP staff #2 began feeding client #3. Client #3 utilized a divided plate, a nosey cup and a rubber coated baby spoon. Client #3 tried to rock and tip her wheel chair. The client's wheels of the wheel chair were not locked and client #3's seat belt was not latched. DP staff #2 poured some of the liquid out of a cup into client #3's nosey cup and gave it to client #3. DP staff #2 did not measure client #3's liquids. DP staff #2 took client #3's PO2 again and got a result of 87%. DP staff continued to feed and give client #3 food and liquids.</p> <p>__At 12:15 PM DP staff #2 took client #3's PO2 again and got a result of 94%. DP staff #2 tipped client #3's nosey cup up for client #3 to take a drink and client #3 began coughing. DP staff #2 continued to feed client #3. When DP staff #2 was asked, "What are you supposed to do if her [client #3's] PO2 was 90% or below?" The DP staff stated, "I don't know. I'll have to ask [DP staff #1]."</p> <p>__At 12:25 PM DP staff #2 took client #3's PO2 again and got a result of 91%. Client #3 leaned forward in her chair to drink from her nosey cup while DP staff #2 held it for her.</p> <p>__At 12:40 PM client #3 stood up from her wheel chair and stumbled toward the dining room table trying to reach her plate</p>						

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	<p>of food. DP staff #2 took client #3 by the arm and directed her back into her wheel chair. Client #3's nose was running, the client had a wet cough and sounded congested. DP staff #2 stated, "She is just always congested."</p> <p>__ At 12:42 PM client #3 stood up from her wheel chair and again tried to grab at the food on the dining room table. DP staff #2 stated, "She is using all her weight against me" as she lowered client #3 to her wheel chair. DP staff #2 then latched client #3's seat belt after being asked why the DP staff did not buckle her seat belt. DP staff #2 began feeding client #3 again, this time giving her larger bites and feeding her at a faster pace. DP staff #2 gave client #3 a drink of liquids after every few bites. Client #3 finished her meal at 1 PM.</p> <p>____ Throughout client #3's meal, client #3 coughed when taking liquids. DP staff #2 was not observed to give client #3 only 5 mls (milliliters) of liquid at a time. DP staff #2 did not delay client #3's meal or inform nursing of client #3's low PO2 prior to eating.</p> <p>Interview with DP staff #2 on 2/7/13 at 1:05 PM indicated DP staff #2 had been trained to feed client #3. DP staff #2 indicated she did not know why client #3 was to have the PO2 tests and did not know what was to be done if a reading of</p>			

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	<p>90% or below was obtained. DP staff #2 stated client #3 was to take small sips of liquids, "I think not more than 5 ml at a time." When asked how she ensured client #3 only got 5 ml at a time, DP staff #2 stated, "She only takes small sips." When DP staff #2 was asked what was to be done when client #3 was coughing as she did during her afternoon meal, DP staff #2 stated, "Oh, she always does that. I think she has sinus problems or something and her nose is always running." DP staff #2 stated client #3 "usually" sat in one of the chairs at the DP, not her personal wheelchair, when eating her afternoon meal. DP staff #2 stated when client #3 was in her wheelchair, client #3's seat belt was to be buckled and "I should have locked the wheels too" while feeding client #3.</p> <p>Client #3's record was reviewed on 2/7/13 at 2:30 PM. Client #3's record indicated a diagnosis of, but not limited to, pharyngeal dysphasia, and a history of respiratory insufficiency with hypoxemia (low blood oxygen), bronchospasms, asthma, pulmonary hypertension and GERD (gastric esophageal reflux disease).</p> <p>Client #3's Aspiration Protocol of 8/1/12 indicated staff must be trained to feed client #3. Client #3 was to have a</p>			

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	<p>mechanical soft diet with ground meat and was to get thin liquids only 5 milliliters at a time. The protocol indicated client #3 was to use a coated spoon and a nose cup. The protocol indicated signs and symptoms of aspiration for client #3 were rapid difficult breathing, gagging/choking during meals, persistent coughing during or after meals, wheezing, temperature above 100 and PO2 sat below 90%. The protocol indicated the staff was to take client #3's PO2 sats during and after meals. The protocol indicated if below 90% the staff were to stop feeding client #3 until her PO2 was above 90%. The protocol indicated if any signs and symptoms were observed, the staff were to immediately stop feeding client #3 and to notify their supervisor and the facility nurse and to document incident in daily notes and an incident report.</p> <p>Client #3's ISP (Individual Support Plan) of 11/20/12 indicated client #3 had an objective to pick up her cup from the table. The ISP indicated the staff were to ask client #3 if she was ready for a drink, fill her cup with 5 milliliters and prompt her to pick up her cup from the table. Client #3's ISP indicated client #3 was legally blind and was fed by the staff with client #3 to assist with her drinking. The ISP indicated the staff was to use a coated</p>						

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	<p>teaspoon due to her high choking risk and level 1 dysphasia. Client #3's ISP indicated O2 sats were to be taken before, during and after the client's meal and O2 applied if below 90%.</p> <p>Client #3's Risk Management Assessment and Plan of 11/20/12 indicated client #3 was to have the dining plan book in view while eating. Client #3 was fed by staff using a coated teaspoon but assisted with drinking using a nose cup filled with only 5 milliliters of fluid at a time. The plan indicated the staff were to feed client #3 her modified diet slowly 1 teaspoon at a time, allow her to swallow and take at least one breath before proceeding. Client #3 will be assisted to drink with her nose cup 5 milliliters of fluids at a time after 1-3 bites of food. Staff will give her rest periods during her meal. Client #3 will utilize her Rifton chair (with safety belt) with an elevation of 70 degrees for positioning or her wheelchair with reclining back when in the community. O2 sats were to be taken before, during and after the client's meal and O2 applied if below 90%, the meal stopped and resumed with O2 sat is above 90%. Staff will monitor for signs of choking/dysphasia triggers of watery eyes, facial redness, wet gurgly vocal quality, sudden change in oxygen saturation and vomiting. The risk management plan</p>			

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	<p>indicated client #3 was at risk for falls due to limited vision and gait disturbance. The plan indicated the client used a wheelchair made to her specifications for long distance travel and transporting. The plan indicated the wheelchair had a safety belt which was used each time client #3 used her wheelchair to ensure client #3 remained seated while being transported via wheelchair.</p> <p>Client #3's Quarterly Nutrition Assessment of 11/26/12 indicated the client's diet was changed to an all pureed diet. The assessment indicated client #3 was to use a divided plate, 1 ounce nose cup and a long handled spoon. The assessment indicated client #3 had problems chewing plus dysphasia. The assessment indicated client #3 had a "choking episode" on 11/7/12 and was diagnosed with pneumonia in 10/2012.</p> <p>Client #3's quarterly physician's orders dated 11/26/12 indicated client #3 was to have a ground - low sodium diet with thin liquids via a nose cup "5 mls at a time" and solids 1 teaspoon at a time. The orders indicated client #3 was to have "rest periods during meals" and for the staff to take client #3's PO2 (blood oxygen level) before and during meals. "If below 90% stop feeding until above 90%."</p>						

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	<p>Client #3's Physical and Nutritional Management Plan of 11/2012 indicated client #3 was at risk of choking and aspiration. The plan indicated triggers for the staff to observe for the client was "bottom not back in chair, coughing with signs of struggle (watery eyes, drooling), sudden change of breathing, wheezing, wet gurgly voice, O2 sats below 90." The plan indicated client #3 could have regular liquids and was to sit upright in "special chair" at 70 degrees or upright in wheelchair during meals. The plan indicated the client was to use a divided plate, 1 ounce nose cup and a long handled spoon for dining. The plan indicated the staff were to allow client #3 to swallow between bites and to rest during the middle portion of her meal. The plan indicated client #3 was to alternate between bites and sips.</p> <p>Interview with the facility RN on 2/7/13 at 3 PM indicated the staff were to follow client #3's Aspiration Protocol, ISP, Risk Management Plan and Physical/Nutritional Management Plan. The RN indicated the staff were to use a small coated baby spoon to feed client #3 to ensure she was given small bites and the staff were to measure out 5 ml and pour that into client #3's nose cup to ensure client #3 only got 5 ml of liquid at</p>				

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	<p>a time. The RN indicated she was to be notified immediately if client #3 showed signs of stress while dining. The RN indicated one of the indicators of stress would be coughing and the client's face turning red. The RN indicated client #3 was to sit in her wheel chair at the DP, her seat belt was to be buckled and the wheels locked while client #3 was eating. When asked if she had been notified of client #3's PO2 level of 84% and 87% during her afternoon meal at the DP on 2/7/13, the RN stated, "No." The RN indicated the DP staff should have notified her of the low PO2 levels as well of the client coughing during the meal.</p> <p>9-3-1(a)</p>			

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W0140	<p>483.420(b)(1)(i) CLIENT FINANCES</p> <p>The facility must establish and maintain a system that assures a full and complete accounting of clients' personal funds entrusted to the facility on behalf of clients. Based on record review and interview for 2 of 2 sampled clients (#1 and #2), the facility failed to maintain a system that assured a full and complete account of the clients' personal funds and expenditures.</p> <p>Findings include:</p> <p>Client #1's and #2's financial records were reviewed on 2/8/13 at 11 AM.</p> <p>Client #1's COHRs (Cash on Hand Records) and receipts for 2012/2013 indicated the following:</p> <p>___ On 11/8/12 client #1's COHRs indicated client #1 had a balance of \$20.96.</p> <p>___ On 11/9/12 client #1's COHRs indicated a withdrawal of \$140 and a purchase at a local department store for items totaling \$51.61 leaving a balance of \$109.35. On 11/19/12 client #1's COHRs indicated client #1's balance was \$7.35.</p> <p>___ On 12/19/12 client #1's COHRs indicated a balance of \$15.75. On 12/21/12 client #1 spent \$40 at a local department store. The COHRs indicated client #1's balance after the purchase was \$10.41. The department store receipt of</p>	W0140	<p>Area Director will retrain Program Director and Home Manager on finance management. Home Manager will review client's finances, including petty cash weekly to ensure that all deposits and withdraws are being documented accurately. Program Director will review client's finances, including petty cash monthly to ensure that all deposits and withdraws are being documented accurately. Responsible Parties: Area Director, Program Director and Home Manager</p>	03/17/2013			

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	<p>12/21/12 indicated client #1 spent \$44.28. ___ On 1/4/13 client #1's COHRs indicated client #1 had spent \$4 at the movies leaving client #1 with a balance of \$7.37 after going to the movies. The client's receipts did not indicate a receipt for client #1 to go to the movies on 1/4/13. ___ On 1/5/13 client #1's COHRs indicated client #1 had gone bowling on 1/5/13 and on 1/12/13 spending \$1.50 each time. As of 1/12/13 client #1's COHRs indicated client #1 had a balance of \$4. ___ On 1/25/13 client #1 spent 50 cents on a granola bar. Client #1's receipts indicated client #1 spent \$1 on a granola bar.</p> <p>Review of client #1's savings account records indicated the following deposits into client #1's cash on hand: ___ 12/21/12 for \$40, 12/15/12 for \$20, 12/1/12 for \$20, 10/26/12 for \$40, 10/16/12 for \$20, 10/10/12 for \$20, 10/7/12 for \$23, 9/22/12 for \$20, 8/31/12 for \$40, 8/19/12 for \$40, 8/15/12 for \$20, 7/17/12 for \$20 and 7/12/12 for \$20. ___ Client #1's COHRs did not indicate a deposit into client #1's cash on hand on 12/21/12, 12/15/12, 12/1/12, 10/26/12, 10/16/12, 10/10/12, 10/7/12, 9/22/12, 8/31/12, 8/19/12, 8/15/12, 7/17/12 and 7/12/12.</p> <p>Client #2's COHRs for 2012/2013</p>			

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	<p>indicated client #2 made purchases at a local department store on 1/29/13 for \$27.10, on 12/12/12 for \$5.35 and 12/11/12 for \$60.57. The receipt sheet indicated the receipts for 1/29/13, 12/11/12 and 12/12/12 were purchases made by client #3 but recorded on client #2's COHRS and deducted from client #2's cash on hand.</p> <p>Interview with the HM (House Manager) on 2/8/13 at 11:30 AM stated client #1's and #2's COHRs had errors "that I can't explain." The HM indicated all deposits, receipts and purchases were to be accurately entered into the clients' COHRs and balanced after each entry.</p> <p>Telephone interview with the PD (Program Director) on 2/14/13 at 11:30 AM indicated all deposits and purchases were to be accurately entered into the clients' COHRs and balanced after each entry.</p> <p>9-3-2(a)</p>				

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W0149	<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 2 of 2 sampled clients (#1 and #2), the facility neglected to develop and implement written policies and procedures to ensure a full and complete accounting of the clients' funds and expenditures.</p> <p>Findings include:</p> <p>Client #1's and #2's financial records were reviewed on 2/8/13 at 11 AM.</p> <p>Client #1's COHRs (Cash on Hand Records) and receipts for 2012/2013 indicated the following: ___ On 11/8/12 client #1's COHRs indicated client #1 had a balance of \$20.96. ___ On 11/9/12 client #1's COHRs indicated a withdraw of \$140 and a purchase at a local department store for items totaling \$51.61 leaving a balance of \$109.35. On 11/19/12 client #1's COHRs indicated client #1's balance was \$7.35. ___ On 12/19/12 client #1's COHRs indicated a balance of \$15.75 On 12/21/12 client #1 spent \$40 at a local department store. The COHRs indicated client #1's balance after the purchase was</p>	W0149	Area Director will retrain Program Director and Home Manager on finance management.Home Manager will review client's finances, including petty cash weekly to ensure that all deposits and withdraws are being documented accurately.Program Director will review client's finances, including petty cash monthly to ensure that all deposits and withdraws are being documented accurately.Responsible Parties: Area Director, Program Director and Home Manager	03/17/2013			

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	<p>\$10.41. The department store receipt of 12/21/12 indicated client #1 spent \$44.28.</p> <p>__ On 1/4/13 client #1's COHRs indicated client #1 had spent \$4 at the movies leaving client #1 with a balance of \$7.37 after going to the movies. The client's receipts did not indicate a receipt for client #1 to go to the movies on 1/4/13.</p> <p>__ On 1/5/13 client #1's COHRs indicated client #1 had gone bowling on 1/5/13 and on 1/12/13 spending \$1.50 each time. As of 1/12/13 client #1's COHRs indicated client #1 had a balance of \$4.</p> <p>__ On 1/25/13 client #1 spent 50 cents on a granola bar. Client #1's receipts indicated client #1 spent \$1 on a granola bar.</p> <p>Review of client #1's savings account records indicated the following deposits into client #1's cash on hand:</p> <p>__ 12/21/12 for \$40, 12/15/12 for \$20, 12/1/12 for \$20, 10/26/12 for \$40, 10/16/12 for \$20, 10/10/12 for \$20, 10/7/12 for \$23, 9/22/12 for \$20, 8/31/12 for \$40, 8/19/12 for \$40, 8/15/12 for \$20, 7/17/12 for \$20 and 7/12/12 for \$20.</p> <p>__ Client #1's COHRs did not indicate a deposit into client #1's cash on hand on 12/21/12, 12/15/12, 12/1/12, 10/26/12, 10/16/12, 10/10/12, 10/7/12, 9/22/12, 8/31/12, 8/19/12, 8/15/12, 7/17/12 and 7/12/12.</p>			

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	<p>Client #2's COHRs for 2012/2013 indicated client #2 made purchases at a local department store on 1/29/13 for \$27.10, on 12/12/12 for \$5.35 and 12/11/12 for \$60.57. The receipt sheet indicated the receipts for 1/29/13, 12/11/12 and 12/12/12 were purchases made by client #3 but recorded on client #2's COHRs and deducted from client #2's cash on hand.</p> <p>Interview with the HM (House Manager) on 2/8/13 at 11:30 AM stated client #1's and #2's COHRs had errors "that I can't explain." The HM indicated all deposits, receipts and purchases were to be accurately entered into the clients' COHRs and balanced after each entry.</p> <p>Telephone interview with the PD (Program Director) on 2/14/13 at 11:30 AM indicated all deposits and purchases were to be accurately entered into the clients' COHRs and balanced after each entry. The PD indicated there was not a specific policy/procedure that addressed the clients' cash on hand finances.</p> <p>The facility's policies and procedures were reviewed on 2/6/13 at 12 PM. __The revised "Financial Management" policy of 4/2011 did not indicate how the facility was to maintain the clients' cash on hand to ensure the clients were not</p>			

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	exploited financially. 9-3-2(a)				

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W0210	<p>483.440(c)(3) INDIVIDUAL PROGRAM PLAN Within 30 days after admission, the interdisciplinary team must perform accurate assessments or reassessments as needed to supplement the preliminary evaluation conducted prior to admission.</p> <p>Based on record review and interview for 1 of 2 sampled clients (#1) and 1 additional client (#3), the facility failed to ensure the Interdisciplinary Team (IDT) conducted a financial assessment that included the amount of money client #1 could carry responsibly and to ensure the IDT assessed clients #1 and #3 for the need for clothing protector in regards to food spillage.</p> <p>Findings include:</p> <p>1. Client #1's record was reviewed on 2/8/13 at 12 PM. Client #1's Individual Financial Assessment of 7/8/09 indicated client #1 was not financially independent and required staff assistance. The client's Adaptive Evaluation Scale of 6/12/12 indicated client #1 required assistance to make change with coins and to keep track of her money. Client #1's ISP (Individual Support Plan) of 7/19/12 indicated client #1 was independent in making decisions for personal purchases and needs with minimal assistance to withdraw money from her savings account but did need repeated reminders in balancing her</p>	W0210	<p>Program Director in conjunction with IDT will conduct a financial assessment that includes the amount of money client #1 can carry responsibly and complete assessments on clients #1 and #3 for the need for clothing protector in regards to food spillage. Program Director will also review all other client's records to ensure that all necessary assessments have been completed for them. Once assessments are completed, Program Director will update client's ISP's and Risk Plans accordingly to reflect results of assessments. Program Director will retrain all staff on updated ISP's and risk plans regarding changes in client's financial responsibility and use of food protectors. Home Manager will review client finances weekly to ensure financial assessments are being implemented correctly per client's needs and risks. Program Director will review client finances monthly to ensure financial assessment are being implemented correctly per client's needs and risks. Home Manager will conduct meal time observations to ensure that</p>	03/17/2013	

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	<p>ledger sheet. Client #1's record did not indicate the IDT had assessed client #1 for the amount of money the client was able to carry responsibly.</p> <p>Interview with the HM (House Manager) on 2/8/13 at 11:30 AM indicated when client #1 would return from the day program, the staff would ask client #1 how much money she had spent and how much did she have on her person upon returning from the day program. The HM indicated the staff and/or client #1 were to record the amounts in the cash on hand ledger. The HM indicated she did not know how much money client #1 was able to carry on her person responsibly. The HM indicated the staff assisted client #1 with her money while shopping but client #1 carried her own money and kept it in her bedroom.</p> <p>Telephone interview with the QMRP (Qualified Mental Retardation Professional) on 2/14/13 at 11:30 AM indicated the IDT had not been assessed client #1 for the amount of money client #1 was able to carry responsibly.</p> <p>2. Observations were conducted at the group home on 2/6/13 between 4 PM and 7:30 PM and on 2/7/13 between 5:45 AM and 8 AM. While eating their morning</p>		<p>the use of clothing protectors is being implemented as needed per client's risk plan and ISP. Program Director will conduct meal time observations to ensure that the use of clothing protectors is being implemented as needed per client's risk plan and ISP. Responsible Parties: Program Director and Home Manager</p>		

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	<p>and evening meals, clients #1 and #3 wore a large cloth draped across their chest and abdomen and then snapped it behind their necks.</p> <p>Observations were conducted at the DP (day program) on 2/7/13 between 11 AM and 1 PM. Prior to client #3 eating her afternoon meal, a staff draped a large cloth across her chest and abdomen and then snapped it behind her neck.</p> <p>Client #1's record was reviewed on 2/8/13 at 12 PM. Client #1's record did not indicate an assessment for food spillage requiring the need for a clothing protector.</p> <p>Client #3's record was reviewed on 2/7/13 at 2:30 PM. Client #3's record did not indicate an assessment for food spillage requiring the need for a clothing protector.</p> <p>Interview with DP staff #1 on 2/7/13 at 1:15 PM indicated client #3 did not have a lot of food spillage. The DP staff stated a clothing protector was used because client #3 drooled a lot and would try to mouth her clothing and "in case" client #3 would spill her food.</p> <p>Telephone interview with the PD (Program Director) on 2/14/13 at 11:30</p>				

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	<p>AM indicated clients #1 and #3 had not been assessed for the need for a clothing protector while eating their meals. The QMRP stated, "I think she (client #1) wears it because she wants to."</p> <p>9-3-4(a)</p>			

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W0331	<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 1 additional client (#3), nursing services failed to ensure the staff followed client #3's dining plan, to ensure nursing services were notified immediately of medical concerns in regards to client #3's history of choking and dysphasia and to ensure the staff used the appropriate adaptive dining utensils.</p> <p>Findings include:</p> <p>The facility reportable records were reviewed on 2/6/13 at 12 PM. The facility BDDS (Bureau of Developmental Disabilities Services) reports indicated:</p> <p>__ On 10/6/12 client #3 was congested, not feeling well, and PO2 sat (pulse oxygen saturation) levels were low. The client was taken to the ER (emergency room) where she was diagnosed with pneumonia and admitted to the hospital.</p> <p>__ On 11/7/12 at 6:30 PM client was "being fed meal by staff per plan. Staff was waiting for her to clear her mouth so another bite could be given but [client #3] began to cough. Staff monitored and when [client #3] began to get red in the face, staff gave 4 pats to her back and she</p>	W0331	<p>Facility Nurse in conjunction with Program Director will review client #3's aspiraton protocol, ISP, risk management plan and physical/nutritional management plan to ensure that all plans are identical in the equipment that is to be used while feeding client #3, how client #3's food is to be prepared and how client #3 is to be fed. Facility Nurse in conjunction with Program Director will retrain all staff at group home and day program on client #3's aspiration protocol, ISP, risk management plan and physical nutritional management planFacility Nurse will conduct meal time observation at group home and day program to ensure client #3's aspiraton protocol, ISP, risk management plan and physical/nutritional management plan are being followed correctly. Program Director will conduct meal time observations at group home and day program to ensure client #3's aspiraton protocol, ISP, risk management plan and physical/nutritional management plan are being followed correctly.Responsible Parties: Facility Nurse, Program Director</p>	03/27/2013			

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	<p>was able to clear her throat. Home Manager and Program Director notified. RN [Registered Nurse] consulted and instructed to take to ER for x-ray for possible aspiration. X-ray at ER revealed no aspiration and [client #3] was released and returned to the group home." The report indicated client #3 had also had a previous incident of choking in 2008.</p> <p>Observations were conducted at the group home on 2/6/13 between 4 PM and 7:30 PM.</p> <p>__At 6:20 PM staff #1 prepared client #3 for her evening meal, placing a clothing protector on her and having her sit in her Rifton chair (a heavy chair made of wood with the back at a slight recline and a seat belt so she could not stand). Staff #1 took client #3's PO2 sat (pulse oxygen saturation level) was 98%.</p> <p>__At 6:25 PM staff #1 began feeding client #3 a pureed meal of Swiss steak, au gratin potatoes and cooked carrots. Staff #1 used a plastic spoon to feed client #3. The spoon was twice the size of a baby spoon and was not rubber coated. Staff #1 filled a 30 ml medicine cup with liquids and poured it into a nosey cup and gave client #3 a drink. Client #3 began coughing, staff #1 waited only seconds before continuing to feed client #3. The bites being provided to client #3 were larger than a teaspoon and at no time</p>						

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	<p>during the feeding did client #3 get only 5 ml of fluid at one time.</p> <p>__At 6:40 PM client #3 continued to have a wet congested cough. Client #3 pushed herself back away from the table and around in a circle by using her feet and legs. Staff #1 indicated client #3's chair was heavy and difficult to move. Staff #1 pushed client #3 back up to the table and said, "I haven't heard you cough like this at a meal in forever." Staff #1 began trying to feed client #3 again. Client #3 continued to cough intermittently and again pushed herself away from the table. Staff #2 opened a can of chocolate nutritional supplement for client #3, pushed client #3 back up to the table and began feeding client #3 at a slower pace with smaller bites and smaller sips of liquids. Client #3 continued to cough throughout her meal.</p> <p>__At 6:57 PM client #3 was coughing, her face red and again pushed herself back from the table. Staff #1 took client #3's PO2 sat and obtained a reading of 96%. Staff #1 got up from the table and indicated she was going to let client #3 rest before trying to feed her anymore. The HM (House Manager) and the PD (Program Director) watched client #3 as she continued to cough intermittently. The HM took client #3's seat belt off and prompted client #3 to get up and walk around. Staff #1 said, "She [client #3]</p>			

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	<p>normally doesn't do that. She [client #3] has breathing problems and was just at the doctor's office. Plus her nose is always draining."</p> <p>__At 7:07 PM client #3 was escorted to the living room to her recliner where she sat and continued to have an intermittent wet gurgly cough.</p> <p>Observations were conducted at the group home on 2/7/13 between 5:45 AM and 8 AM. Staff #3 fed client #3 her breakfast meal using a rubber tipped baby spoon and a nose cup. Staff #3 did not measure the amount of liquid poured into client #3's nose cup. Staff #3 gave client #3 small bites at a slow pace and intermittent swallows of liquids. Client #3 was heard coughing intermittently before, during and after her breakfast.</p> <p>Observations were conducted at the DP (Day Program) on 2/7/13 between 11 AM and 1 PM.</p> <p>__At 11 AM client #3 was sitting in a facility chair in one of the classrooms with other clients.</p> <p>__ At 12 PM one of the DP staff walked client #3 from the classroom to the dining room. Once in the dining room the DP stated to DP staff #3, "Maybe we should get her wheelchair." The other DP staff left the room and returned with client #3's wheel chair. Client #3 remained standing</p>						

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	<p>in the dining room while the DP staff moved the chairs around to make room for client #3's wheel chair at the table. Day program staff #2 assisted client #3 to sit down in her wheel chair, DP staff did not fasten client #3's seat belt and client #3 stood up and took a step toward the dining table. DP staff #2 stated, "What are you doing?" and prompted client #3 to return to her wheel chair.</p> <p>__At 12:05 PM DP staff #2 placed a clothing protector over client #3 and then took client #3's PO2, getting a result of 84%. DP staff #2 began feeding client #3. Client #3 utilized a divided plate, a nosey cup and a rubber coated baby spoon. Client #3 tried to rock and tip her wheel chair. The client's wheels of the wheel chair were not locked and client #3's seat belt was not latched. DP staff #2 poured some of the liquid out of a cup into client #3's nosey cup and gave it to client #3. DP staff #2 did not measure client #3's liquids. DP staff #2 took client #3's PO2 again and got a result of 87%. DP staff continued to feed and give client #3 food and liquids.</p> <p>__At 12:15 PM DP staff #2 took client #3's PO2 again and got a result of 94%. DP staff #2 tipped client #3's nosey cup up for client #3 to take a drink and client #3 began coughing. DP staff #2 continued to feed client #3. When DP staff #2 was asked, "What are you supposed to do if</p>			

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	<p>her [client #3's] PO2 was 90% or below?" The DP staff stated, "I don't know. I'll have to ask [DP staff #1]." __At 12:25 PM DP staff #2 took client #3's PO2 again and got a result of 91%. Client #3 leaned forward in her chair to drink from her nose cup while DP staff #2 held it for her. __At 12:40 PM client #3 stood up from her wheel chair and stumbled toward the dining room table trying to reach her plate of food. DP staff #2 took client #3 by the arm and directed her back into her wheel chair. Client #3's nose was running, the client had a wet cough and sounded congested. DP staff #2 stated, "She is just always congested." __At 12:42 PM client #3 stood up from her wheel chair and again tried to grab at the food on the dining room table. DP staff #2 stated, "She is using all her weight against me" as she lowered client #3 to her wheel chair. DP staff #2 then latched client #3's seat belt after being asked why the DP staff did not buckle her seat belt. DP staff #2 began feeding client #3 again, this time giving her larger bites and feeding her at a faster pace. DP staff #2 gave client #3 a drink of liquids after every few bites. Client #3 finished her meal at 1 PM. ____Throughout client #3's meal, client #3 coughed when taking liquids. DP staff #2 was not observed to give client #3 only</p>				

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	<p>5 mls (milliliters) of liquid at a time. DP staff #2 did not delay client #3's meal or inform nursing of client #3's low PO2 prior to eating.</p> <p>Interview with staff #1 on 2/6/13 at 7 PM stated client #3 did not "usually" cough while eating as she had during her evening meal on 2/6/13. Staff #1 indicated client #3 had been showing symptoms of a cold/sinus drainage and "I think it's the phlegm and her sinus drainage that's making her cough like that."</p> <p>Interview with DP staff #2 on 2/7/13 at 1:05 PM indicated DP staff #2 had been trained to feed client #3. DP staff #2 indicated she did not know why client #3 was to have the PO2 tests and did not know what was to be done if a reading of 90% or below was obtained. DP staff #2 stated client #3 was to take small sips of liquids, "I think not more than 5 ml at a time." When asked how she ensured client #3 only got 5 ml at a time, DP staff #2 stated, "She only takes small sips." When DP staff #2 was asked what was to be done when client #3 was coughing as she did during her afternoon meal, DP staff #2 stated, "Oh, she always does that. I think she has sinus problems or something and her nose is always running." DP staff #2 stated client #3</p>			

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	<p>"usually" sat in one of the chairs at the DP, not her personal wheelchair, when eating her afternoon meal. DP staff #2 stated when client #3 was in her wheelchair, client #3's seat belt was to be buckled and "I should have locked the wheels too" while feeding client #3.</p> <p>Interview with the PD (Program Director) on 2/7/13 at 3 PM indicated the spoon the staff had used to feed client #3 the evening of 2/6/13 was not a coated spoon. The PD indicated the staff were to use a coated baby spoon to feed client #3. The PD indicated the staff at the group home used a 30 ml plastic medication cup to measure out 5 ml of liquids to give to client #3 to ensure client #3 only got 5 mls of liquid at a time.</p> <p>Client #3's record was reviewed on 2/7/13 at 2:30 PM. Client #3's record indicated a diagnosis of, but not limited to, pharyngeal dysphasia, and a history of respiratory insufficiency with hypoxemia (low blood oxygen), bronchospasms, asthma, pulmonary hypertension and GERD (gastric esophageal reflux disease).</p> <p>Client #3's Aspiration Protocol of 8/1/12 indicated staff must be trained to feed client #3. Client #3 was to have a mechanical soft diet with ground meat</p>				

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	<p>and was to get thin liquids only 5 milliliters at a time. The protocol indicated client #3 was to use a coated spoon and a nose cup. The protocol indicated signs and symptoms of aspiration for client #3 were rapid difficult breathing, gagging/choking during meals, persistent coughing during or after meals, wheezing, temperature above 100 and PO2 sat below 90%. The protocol indicated the staff was to take client #3's PO2 sats during and after meals. The protocol indicated if below 90% the staff were to stop feeding client #3 until her PO2 was above 90%. The protocol indicated if any signs and symptoms were observed, the staff were to immediately stop feeding client #3 and to notify their supervisor and the facility nurse and to document incident in daily notes and an incident report.</p> <p>Client #3's OT (Occupational Therapy) assessment of 11/7/12 indicated recommendations for client #3 to use a divided plate, coated spoon and a nose cup for meals.</p> <p>Client #3's Dysphasia Evaluation of 11/18/12 indicated recommendations for client #3's diet to be changed to ground meats with extra gravy, broken bread, cake and cookie items soaked in milk and all other foods should be pureed. The</p>				

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	<p>recommendations indicated the client was to use a divided plate, a 1 ounce nose cup and a long handled spoon and to alternate liquids after every 2 - 3 bites.</p> <p>Client #3's ISP (Individual Support Plan) of 11/20/12 indicated client #3 had an objective to pick up her cup from the table. The ISP indicated the staff were to ask client #3 if she was ready for a drink, fill her cup with 5 milliliters and prompt her to pick up her cup from the table. Client #3's ISP indicated client #3 was legally blind and was fed by the staff with client #3 to assist with her drinking. The ISP indicated the staff was to use a coated teaspoon due to her high choking risk and level 1 dysphasia. Client #3's ISP indicated O2 sats were to be taken before, during and after the client's meal and O2 applied if below 90%.</p> <p>Client #3's Risk Management Assessment and Plan of 11/20/12 indicated client #3 was to have the dining plan book in view while eating. Client #3 was to have a low sodium diet of ground meat with extra gravy, broken bread, cookie and cake items soaked in milk and all other items pureed. Client #3 was fed by staff using a coated teaspoon but assisted with drinking using a nose cup filled with only 5 milliliters of fluid at a time. Drinks are presented after 1-3 bites of food.</p>			

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	<p>Client #3 sits in a Rifton reclined chair for proper positioning. The plan indicated client #3 "may eat from her wheelchair when in the community as the back is slightly reclined." The plan indicated the staff were to feed client #3 her modified diet slowly 1 teaspoon at a time, allow her to swallow and take at least one breath before proceeding. Client #3 will be assisted to drink with her nose cup 5 milliliters of fluids at a time after 1-3 bites of food. Staff will give her rest periods during her meal. Client #3 will utilize her Rifton chair (with safety belt) with an elevation of 70 degrees for positioning or her wheelchair with reclining back when in the community. O2 sats were to be taken before, during and after the client's meal and O2 applied if below 90%, the meal stopped and resumed with O2 sat is above 90%. Staff will monitor for signs of choking/dysphasia triggers of watery eyes, facial redness, wet gurgly vocal quality, sudden change in oxygen saturation and vomiting. The risk management plan indicated client #3 was at risk for falls due to limited vision and gait disturbance. The plan indicated the client used a wheelchair made to her specifications for long distance travel and transporting. The plan indicated the wheelchair had a safety belt which was used each time client #3 used her wheelchair to ensure client #3</p>			

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	<p>remained seated while being transported via wheelchair.</p> <p>Client #3's Quarterly Nutrition Assessment of 11/26/12 indicated the client's diet was changed to an all pureed diet. The assessment indicated client #3 was to use a divided plate, 1 ounce nose cup and a long handled spoon. The assessment indicated client #3 had problems chewing plus dysphasia. The assessment indicated client #3 had a "choking episode" on 11/7/12 and was diagnosed with pneumonia in 10/2012.</p> <p>Client #3's quarterly physician's orders dated 11/26/12 indicated client #3 was to have a ground - low sodium diet with thin liquids via a nose cup "5 mls at a time" and solids 1 teaspoon at a time. The orders indicated client #3 was to have "rest periods during meals" and for the staff to take client #3's PO2 (blood oxygen level) before and during meals. "If below 90% stop feeding until above 90%."</p> <p>Client #3's Physical and Nutritional Management Plan of 11/2012 indicated client #3 was at risk of choking and aspiration. The plan indicated triggers for the staff to observe for the client was "bottom not back in chair, coughing with signs of struggle (watery eyes, drooling),</p>			

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	<p>sudden change of breathing, wheezing, wet gurgly voice, O2 sats below 90." The plan indicated the client was to get ground meats with extra gravy, broken bread, cake and cookie items soaked in milk, all other foods were to be pureed. The plan indicated client #3 could have regular liquids and was to sit upright in "special chair" at 70 degrees or upright in wheelchair during meals. The plan indicated the client was to use a divided plate, 1 ounce nose cup and a long handled spoon for dining. The plan indicated the staff were to allow client #3 to swallow between bites and to rest during the middle portion of her meal. The plan indicated client #3 was to alternate between bites and sips.</p> <p>Interview with the facility RN on 2/7/13 at 3 PM indicated the staff were to follow client #3's Aspiration Protocol, ISP, Risk Management Plan and Physical/Nutritional Management Plan and all plans should be identical in the equipment that was to be used while feeding client #3, how client #3's food was to be prepared and how client #3 was to be fed. The RN indicated the staff were to use a small coated baby spoon to feed client #3 to ensure she was given small bites and the staff were to measure out 5 ml and pour that into client #3's nose cup to ensure client #3 only got 5 ml of liquid</p>				

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	<p>at a time. The RN indicated she was to be notified immediately if client #3 showed signs of stress while dining. The RN indicated one of the indicators of stress would be coughing and the client's face turning red. The RN indicated she was not notified until 10 AM 2/7/13 of client #3 coughing through her evening meal on 2/6/13. The RN indicated client #3 was to sit in her wheel chair at the DP, her seat belt was to be buckled and the wheels locked while client #3 was eating. When asked if she had been notified of client #3's PO2 level of 84% and 87% during her afternoon meal at the DP on 2/7/13, the RN stated, "No." The RN indicated the DP staff should have notified her of the low PO2 levels as well of the client coughing during the meal.</p> <p>9-3-6(a)</p>			