

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  15G367	X2) MULTIPLE CONSTRUCTION A. BUILDING 00 B. WING _____	X3) DATE SURVEY COMPLETED  08/02/2013
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NAME OF PROVIDER OR SUPPLIER  CARDINAL SERVICES INC OF INDIANA	STREET ADDRESS, CITY, STATE, ZIP CODE 1207 W WINONA AVE WARSAW, IN 46580
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W000000	<p>This visit was for the investigation of Complaint #IN00132387.</p> <p>COMPLAINT #IN00132387 - SUBSTANTIATED, federal/state deficiencies related to the allegation are cited at W149 and W153.</p> <p>Dates of Survey: August 1 and 2, 2013.</p> <p>Facility number: 000881 Provider number: 15G367 AIM number: 100249180</p> <p>Surveyor: Tim Shebel, LSW</p> <p>The following federal deficiencies also reflect state findings in accordance with 460 IAC 9. Quality Review completed 8/8/13 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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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, the facility neglected to implement their abuse/neglect policy to immediately report to the administrator 1 of 1 reviewed abuse allegation affecting 1 of 4 additional clients (client E).</p> <p>Findings include:</p> <p>The facility's records were reviewed on 8/1/13 at 1:29 P.M.. A review of the facility's incident reports from 7/1/13 to 8/2/13 indicated the following abuse allegation:</p> <p>- "Date: 07/04/2013, Date of Knowledge: 07/08/2013, On Monday, July 8, 2013 at approximately 6:30 am the Residential Manager was made aware that a staff had locked [client E] out of his home on July 4, 2013. Plan to Resolve: The alleged staff responsible for locking [client E] out of his home has been suspended pending an investigation. The reporting staff has received training on reporting guidelines per [name of facility] Abuse/Neglect Reporting policy as well as additional training regarding their responsibility to ensure abuse/neglect does not occur." Further review of the 7/4/13 alleged abuse</p>	W000149	<p><b>W149</b> The facility must develop and implement written policies and procedures that prohibit mistreatment, neglect or abuse of the client. Cardinal Services is committed to providing supports for people that are free from abuse, neglect or mistreatment. To this end Cardinal Services provides training to all new staff regarding the prevention and reporting of all abuse, neglect and mistreatment. In addition, staff receives annual training regarding the prevention and reporting of abuse, neglect and mistreatment. Staff that failed to report suspected abuse on July 4, 2014 in a timely manner received additional training on July 9, 2013 advising them that all incidents of abuse or neglect whether suspected or confirmed must be reported to the on-call supervisor immediately. (See Attachment A) Staff that failed to report suspected abuse to the on call supervisor immediately reviewed, agreed to and signed a Statement of Commitment, agreeing to report all incidents immediately. (See Attachment B) To ensure that all staff working in the West Winona group home are familiar with Cardinal Services' standards and reporting guidelines</p>	08/20/2013			

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	<p>incident report indicated the facility's administrator was notified of the alleged abuse incident on 7/8/13.</p> <p>Program Coordinator #1 was interviewed on 8/1/13 at 2:00 P.M.. Program Coordinator #1 indicated the 7/4/13 alleged abuse incident was not reported to the facility's administrator until 7/8/13.</p> <p>The facility's records were further reviewed on 8/1/13 at 5:30 P.M.. A review of the facility's "Incident/Abuse/Neglect Policy, dated 5/13, indicated, in part, the following: "All injuries of unknown origin and allegations of abuse, neglect and mistreatment must be reported to the Administrator immediately."</p> <p>This federal tag relates to complaint #IN00132387. 9-3-2(a)</p>		<p>additional training was provided on July 12, 2013 stating that all incidents of abuse or neglect whether suspected or confirmed must be reported to the on-call supervisor immediately. (See Attachment C) To ensure this deficiency does not occur again, the Residential Manager, QDP and Residential Coordinator will monitor the staff performance through weekly, monthly and quarterly observations. <b>QDP, Residential Manager and Residential Coordinator Responsible.</b></p>		

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W000153	<p><b>483.420(d)(2)</b> <b>STAFF TREATMENT OF CLIENTS</b> 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.</p> <p>Based on record review and interview, the facility failed to immediately report to the administrator 1 of 1 reviewed abuse allegation affecting 1 of 4 additional clients (client E) in accordance with state law.</p> <p>Findings include:</p> <p>The facility's records were reviewed on 8/1/13 at 1:29 P.M.. A review of the facility's incident reports from 7/1/13 to 8/2/13 indicated the following abuse allegation:</p> <p>- "Date: 07/04/2013, Date of Knowledge: 07/08/2013, On Monday, July 8, 2013 at approximately 6:30 am the Residential Manager was made aware that a staff had locked [client E] out of his home on July 4, 2013. Plan to Resolve: The alleged staff responsible for locking [client E] out of his home has been suspended pending an investigation. The reporting staff has received training on reporting guidelines per [name of facility] Abuse/Neglect Reporting policy as well as additional</p>	W000153	<p><b>W153</b></p> <p>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.</p> <p>Cardinal Services, Inc. is committed to providing quality services and a safe environment free from abuse, neglect and mistreatment for the people that we provide supports for. Cardinal Services, Inc. ensures that staff are trained regarding the prevention of abuse and neglect and the incident reporting guidelines by providing "Prevention of Abuse and Neglect" foundations training during the new hire process. In addition to this, Cardinal Services, Inc.</p>	08/20/2013			

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	<p>training regarding their responsibility to ensure abuse/neglect does not occur." Further review of the 7/4/13 alleged abuse incident report indicated the facility's administrator was notified of the alleged abuse incident on 7/8/13.</p> <p>Program Coordinator #1 was interviewed on 8/1/13 at 2:00 P.M.. Program Coordinator #1 indicated the 7/4/13 alleged abuse incident was not reported to the facility's administrator until 7/8/13.</p> <p>This federal tag relates to complaint #IN00132387. 9-3-2(a)</p>		<p>staff receive annual training regarding abuse prevention along with annual review of the Incident/Abuse/Neglect policy.</p> <p>Staff that failed to report suspected abuse on July 4, 2014 in a timely manner received additional training on July 9, 2013 advising them that all incidents of abuse or neglect whether suspected or confirmed must be reported to the on-call supervisor immediately. (See Attachment A) Staff that failed to report suspected abuse to the on call supervisor immediately reviewed, agreed to and signed a Statement of Commitment, agreeing to report all incidents immediately. (See Attachment B)</p> <p>To ensure that all staff working in the West Winona group home are familiar with Cardinal Services' standards and reporting guidelines additional training was provided on July 12, 2013 stating that all incidents of abuse or neglect whether suspected or confirmed must be reported to the on-call supervisor immediately. (See</p>		

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			<p>Attachment C)</p> <p>To ensure this deficiency does not occur again, the Residential Manager, QDP and Residential Coordinator will monitor the staff performance through weekly, monthly and quarterly observations.</p> <p><b>QMRP, Residential Manager and Residential Coordinator Responsible.</b></p>	