

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  15G715	X2) MULTIPLE CONSTRUCTION A. BUILDING <u>00</u> B. WING _____	X3) DATE SURVEY COMPLETED  04/19/2016
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NAME OF PROVIDER OR SUPPLIER  LIFE DESIGNS INC	STREET ADDRESS, CITY, STATE, ZIP CODE 523 PARK LN NASHVILLE, IN 47448
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W 0000  Bldg. 00	<p>This visit was for the investigation of complaint #IN00192906.</p> <p>Complaint #IN00192906 - Substantiated, Federal/state deficiencies related to the allegation are cited at W154, W157, W249 and W260.</p> <p>Unrelated deficiency cited.</p> <p>Survey dates: April 14, 15 and 19, 2016</p> <p>Facility number: 004000 Provider number: 15G715 AIM number: 200481990</p> <p>These deficiencies also reflect state findings in accordance with 460 IAC 9. Quality Review of this report completed by #15068 on 4/22/16.</p>	W 0000		
W 0154  Bldg. 00	<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 1 of 26 incident/investigative reports reviewed affecting client B, the facility</p>	W 0154	To correct the deficient practice and prevent if from recurring, all staff responsible for completing investigations will be re-trained on	05/19/2016

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

TITLE

(X6) DATE

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

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	<p>failed to conduct a thorough investigation.</p> <p>Findings include:</p> <p>On 4/14/16 at 12:33 PM, a review of the facility's incident/investigative reports was conducted and indicated the following:</p> <p>On 2/3/16 at 3:30 PM while staff from the Bureau of Developmental Disabilities Services (BDDS) were conducting an observation at the group home, client B was observed eating chips while at the dining room table without staff present. When the BDDS staff conducted a record review, it was noted client B was on a mechanical soft diet (smoother consistency than regular foods; they require very little or no chewing at all to swallow) as she had a risk of choking.</p> <p>The 2/9/16 Investigation Summary indicated in the Description of alleged event section, "During a routine visit by BDDS Field Service Staff [names], [client B] was observed to be eating chips without staff present, even though her nursing care plan indicates she has a risk for choking and is to be on a mechanical soft diet..." The Findings of the investigation indicated, "Based on all information available, the allegation of</p>		<p>LifeDesigns' investigation policy with a specific emphasis on all required elements, including a review of all relevant documentation. Ongoing monitoring will be accomplished through a dual review of all investigations by a Director of Services and either the Chief Services Officer (CSO), or Chief Executive Officer (CEO).</p>	

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	<p>staff neglect is not substantiated. [Client B] was observed by BDDS staff to each (sic) chips, but neither staff interviewed gave her chips, so she likely got them on her own...." The Action to be Taken section indicated, in part, "Nurse [name] should facilitate an IDT (interdisciplinary team) review (sic) [client B's] current dining plan to determine if it is still appropriate, and make revisions as necessary. If [client B's] snacks are limited to certain textures, the Team should consider making those specific snacks available to her so she is able to get them independently. All staff should be re-trained on [client B's] dining plan...."</p> <p>On 4/14/16 at 4:13 PM, a review of client B's record was conducted. Client B's 7/10/14 Swallow Study indicated in the Diet Consistency Recommendation of the swallow study, "Regular, chopped meats." The Summary indicated, in part, "...Even though food was not thoroughly masticated (chewed), pt. (patient) still able to adequately swallow w/ (with) no aspiration or penetration noted." Client B's 3/10/15 Behavior Support Plan (BSP) indicated, in part, "[Client B] has issues with eating and swallowing and is at risk for choking and is on a mechanically softened diet. Fresh vegetables and fruit must be cooked until soft then, chopped.</p>			

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	Meat must be cut or chopped into small bites, and moistened to make sure it is easy to swallow. Once at the table, staff must sit with her to be sure she is taking small bites, and chews. This is sometimes a struggle because [client B] likes to eat, she likes her food, and does not want to wait, take small bites or chew. She takes very large bites, and gulps her food down. If cautioned to slow down, chew, or take smaller bites she will hit staff, increasingly harder. She resists guidance in this area, and could put herself at risk of choking. She sometimes hits staff to get attention, especially if staff are caring for or paying attention to another customer." The BSP indicated, in part, "Behavior: Gulping food, without chewing, taking too large of bites. Place small amounts of food on her plate at a time, to reduce how much she can scoop up to put in her mouth at once. (Staff should be seated next to her. They should not be involved in any other customer or student but her.)" Client B's 3/23/15 Individualized Support Plan (ISP) indicated, in part, "[Client B's] requires multiple prompts to take small bites, and chew carefully. There have been no choking incidents at the group home, she has choked at school. [Client B's] tendency is to put as much food as she can into her mouth. She will take a spoonful of food and look at staff, to see			

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	<p>what they will do. [Client B] has a history of choking while eating. She likes to eat, and resents using the precautions to protect her from choking. [Client B] is on a mechanically soft diet." Client B's ISP training objective indicated, "While eating staff will sit with [client B], and model the desired behavior, chewing, and taking small bites. Staff will praise her when she is using small bites and chewing, and use the verbal reminders, small bites, and chew. Best practice is to use a small utensil and sectioned plate. However it is not imperative (sic). If [client B] requires less than 8 reminders during a meal it will be met."</p> <p>The investigation was not thorough. The investigation did not include a review of client B's current 1/29/16 Nursing Care Plan (NCP) or her 7/10/14 swallow study. The investigation did not indicate if the staff failed to implement client B's NCP, Individualized Support Plan and Behavior Support Plan as written.</p> <p>On 4/14/16 at 4:05 PM, the Qualified Intellectual Disabilities Professional (QIDP) indicated client B could eat anything she wanted with no restrictions. The QIDP indicated at the time of the incident, client B's Nursing Care Plan (NCP) had not been updated to reflect the</p>			

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	<p>swallow study completed in 2014. The QIDP indicated the BDDS staff reviewed client B's NCP which indicated she was on a mechanical soft diet.</p> <p>On 4/14/16 at 4:07 PM, the QIDP called the nurse on speaker phone during his interview. The Licensed Practical Nurse (LPN) stated client B's 2014 swallow study was "normal." The LPN indicated client B's issue was chewing her food. The LPN indicated client B's chewing had improved since the swallow study. The LPN indicated client B was on a mechanical soft diet as a precautionary measure.</p> <p>On 4/15/16 at 11:34 AM, the Director of Nursing (DON) indicated on 2/3/16, client B was on a mechanical soft diet. The DON indicated chips were not part of a mechanical soft diet. The DON indicated the staff should have implemented client B's NCP as written. The DON indicated client B's 1/29/16 NCP was client B's current plan.</p> <p>On 4/14/16 at 1:51 PM, the Director of Support Services (DSS) indicated the allegation of neglect was not substantiated. The DSS indicated client B got the chips and ate them without staff giving her the chips. The DSS indicated client B was on a precautionary</p>			

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	<p>mechanical soft diet due to not chewing her food. The DSS indicated client B had a swallow study completed with no mechanical issues noted. The DSS indicated the staff should have been aware she was eating chips and intervened. On 4/15/16 at 11:12 AM, the DSS indicated she reviewed client B's NCP and showed the surveyor the plan was included in the investigation packet. The DSS indicated her review of client B's NCP should have been included in the investigation. The DSS stated, "It was an error to leave out the review." The DSS stated the NCP "clearly" indicated client B was on a mechanical soft diet. The DSS indicated she did not review the Swallow Study results. The DSS indicated the nurse reviewed the swallow study and included the recommendations into her choking risk plan in the NCP.</p> <p>On 4/15/16 at 1:35 PM, the Group Home Director indicated the DSS should have included client B's NCP and swallow study in the investigation.</p> <p>This federal tag relates to complaint #IN00192906.</p> <p>9-3-2(a)</p>			

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W 0157  Bldg. 00	<p>483.420(d)(4) STAFF TREATMENT OF CLIENTS If the alleged violation is verified, appropriate corrective action must be taken. Based on record review and interview for 1 of 26 incident/investigative reports reviewed affecting client B, the facility failed to ensure staff implemented the recommended corrective actions (observations of snack/mealtimes for two weeks) from an investigation of neglect.</p> <p>Findings include:</p> <p>On 4/14/16 at 12:33 PM, a review of the facility's incident/investigative reports was conducted and indicated the following:</p> <p>On 2/3/16 at 3:30 PM while staff from the Bureau of Developmental Disabilities Services (BDDS) were conducting an observation at the group home, client B was observed eating chips while at the dining room table without staff present. When the BDDS staff conducted a record review, it was noted client B was on a mechanical soft diet (smoother consistency than regular foods; they require very little or no chewing at all to swallow) as she had a risk of choking.</p> <p>The 2/9/16 Investigation Summary</p>	W 0157	To correct the deficient practice, the investigation recommendations will be completed. To prevent the deficient practice from recurring, the Director of Support Services (DSS) will provide re-training to all supervisors on the expectation that all investigation recommendations will be implemented within the required timeframes. To ensure no others were affected by the deficient practice, the DSS will review investigations for the last year to ensure documentation is in place to verify the completion of all recommendations. Ongoing monitoring will be accomplished through the DSS, who is responsible for monitoring the status of all investigations and completion of recommendations. Additionally, the Services Leadership Team (including Directors of Services, CSO, CEO and ND/Qs) meets no less than twice monthly, and as part of the agenda, will review the status of all investigations and follow up.	05/19/2016

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	<p>indicated in the Description of alleged event section, "During a routine visit by BDDS Field Service Staff [names], [client B] was observed to be eating chips without staff present, even though her nursing care plan indicates she has a risk for choking and is to be on a mechanical soft diet..." The Findings of the investigation indicated, "Based on all information available, the allegation of staff neglect is not substantiated. [Client B] was observed by BDDS staff to each (sic) chips, but neither staff interviewed gave her chips, so she likely got them on her own..." The Action to be Taken section indicated, in part, "Nurse [name] should facilitate an IDT (interdisciplinary team) review (sic) [client B's] current dining plan to determine if it is still appropriate, and make revisions as necessary. If [client B's] snacks are limited to certain textures, the Team should consider making those specific snacks available to her so she is able to get them independently. All staff should be re-trained on [client B's] dining plan... The ND/Q (Network Director/Qualified Intellectual Disabilities Professional) [name] and Team Manager [name] should continue snack/mealtime observations daily for the next 2 weeks, providing re-training as necessary." The investigative packet included two observations (2/7/16 and 2/8/16). There</p>			

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W 0186 Bldg. 00	<p>was no documentation additional observations were conducted at the group home.</p> <p>On 4/15/16 at 11:48 AM, the Director of Support Services (DSS) indicated she was not provided documentation of observations being conducted for two weeks during snack/mealtimes. The DSS indicated she did not have and was not provided additional observations of snack/mealtimes at the group home. The DSS indicated the observations should have been conducted for two weeks as indicated in the investigation.</p> <p>On 4/15/16 at 1:35 PM, the Group Home Director indicated the observations should have been conducted as recommended in the investigation.</p> <p>This federal tag relates to complaint #IN00192906.</p> <p>9-3-2(a)</p> <p>483.430(d)(1-2) DIRECT CARE STAFF</p> <p>The facility must provide sufficient direct care staff to manage and supervise clients in accordance with their individual program plans.</p>			

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	<p>Direct care staff are defined as the present on-duty staff calculated over all shifts in a 24-hour period for each defined residential living unit.</p> <p>Based on observation, interview and record review for 4 of 4 clients living in the group home (A, B, C and D), the facility failed to provide sufficient staffing to manage and supervise the clients in accordance with their program plans.</p> <p>Findings include:</p> <p>On 4/14/16 from 2:59 PM to 4:29 PM, an observation was conducted at the group home. At 3:10 PM when the clients arrived home from school, there was one staff on duty. At 3:16 PM, the Qualified Intellectual Disabilities Professional (QIDP) arrived. At 3:58 PM, staff #3 left with clients A, B, C and D to go to a state park for an outing. There was no additional staff with staff #3 on the outing.</p> <p>On 4/15/16 at 1:34 PM, a review of client A's program plans was conducted. Client A's 5/29/15 Individualized Support Plan (ISP) indicated he had the following training objectives: wash his face with medicated pad, learning dollar bill amounts, brush his teeth twice a day, make his bed and pick up his room daily, use the toilet and prepare the main dish</p>	W 0186	To correct the deficient practice and prevent recurrence, 3 additional staff have been hired to work at the group home. The Network Director/ QIDP (ND/Q), Director of Residential Services (DRS) and CSO will work with the other ND/Qs on a weekly basis to evaluate staffing in other areas and deploy staff to accommodate the need for 2 staff on shift during waking hours. Ongoing monitoring will be accomplished by the review of all staffing schedules by the DRS to ensure adequate staffing levels are maintained. Additionally, the Services Leadership team meets no less than twice monthly to review the agency's strategic initiatives related to staff recruitment, retention and deployment in order to effectively schedule all current employees, prioritizing higher-need settings.	05/19/2016			

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	for a meal weekly. Client A's 5/29/15 Behavior Support Plan (BSP) indicated he had the following targeted behaviors: Self-Injurious Behavior - defined as head banging, hair pulling, biting, pinching, or scratching self, putting things in his ears. Aggression - defined as hitting or pinching others. Sexual Hyperactivity - defined as requesting "private time" (masturbation) more than three times daily. The BSP indicated, in part, "[Client A] needs staff assistance in most areas of independent living and self-care, but can participate in all things if given directions one step at a time. [Client A] communicates verbally with one or two words or simple sentences. [Client A] functions best in a fun, playful, consistent environment with activities that interest him. [Client A] responds better to being asked to 'help' someone with something, rather than being prompted with something HE has to do. He enjoys being outside and swinging on the swing set. [Client A] needs encouragement to participate in activities outside of his bedroom, although this has improved over time. [Client A] enjoys going for rides in vehicles and will often ask to go somewhere. [Client A] has a strong personality and knows what he wants to do or not do as well as when he wants to do it." Client A's BSP indicated in the aggression section, "...If aggression			

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	<p>continues, another staff will remove other individuals from the area, monitor them, and keep them safe."</p> <p>On 4/15/16 at 1:59 PM, a review of client B's program plans was conducted. Client B's 3/31/15 ISP indicated she had the following training objectives: "When [client B] approaches staff or peers wanting to touch, hold a hand, hug, or any physical interaction, staff will remind her to say or sign ask please. If [client B] does not ask first please ask her to move away from the person and try again. While eating staff will sit with [client B], and model the desired behavior, chewing, and taking small bites. Staff will praise her when she is using small bites and chewing, and use the verbal reminders, small bites, and chew. Best practice is to use a small utensil and sectioned plate. However it is not imperative (sic). [Client B] will become interested and independent in toileting by sitting on the toilet for at least 5 minutes no longer than 10 minutes. [Client B] will brush her teeth for one minute and use a mouthwash swab or allow staff to brush her teeth, and the mouthwash swab without resisting. Each morning after [client B] has finished her AM routine she will go back into her room with staff and make her bed and pick up her room. Staff will cue [client B] to straighten the</p>			

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	<p>covers up on her bed and pick up items off her floor. At each medication pass [client B] will administer her own topical. [Client B] will do her Range of Motion exercises daily. [Client B] will understand that money is needed for getting wanted items."</p> <p>Client B's 3/10/15 BSP indicated she had the following targeted behaviors: Aggression towards staff, housemates, and students at school. Decrease tantrums, characterized by screaming, fighting, and refusals. Lack of compliance with meal time precautions, for her own protection. Reduce unwanted physical contact with staff, housemates and peers at school. The BSP indicated, in part, "[Client B] is a friendly, outgoing, 20-year-old young lady who lived with her mother until moving into [name] Group Home in March of 2010. [Client B] needs staff assistance in all areas of personal care, but can participate in things if given simple one step instructions. [Client B] enjoys attention from and interacting with staff members, as well as with her roommates. When [client B's] requests cannot be immediately met, she often does not respond to verbal cues. If request cannot be met she can be given a favorite item at that time and she is able to wait and amuse herself. [Client B]</p>			

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	<p>prefers interaction with others, particularly staff members. Preferred activities with staff include dancing, singing, and swinging. She also likes to draw, play with play doh, washing the table top, and helping with any chore she can do. [Client B] is non-verbal, but does understand most verbal communication. [Client B] makes an effort to mimic one syllable words if given playful prompting as part of a game, she is using housemates and staff's names to communicate with them. [Client B] can use a few simple signs to communicate, (eat, drink, please, more, touch please, etc.) [Client B] does well when offered 3-5 minutes of processing time after each cue and between activities, she likes having choices of what to do, what order to do it in, and when to stop. [Client B] works well in a fun, light toned atmosphere and is sensitive to the moods and behaviors of others. She models her behaviors and how to do things on staff, which is a useful teaching tool. She touches staff, visitors, and housemates without permission, and if she is told to stop or another behavior is suggested she has been known to hit staff in response. She will often try to comfort others if she senses that they are upset. [Client B] needs staff prompts and/or guidance to leave the area when a peer is having a</p>			

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	behavior to avoid aggressive behavior as she will often want to comfort the peer that is upset. [Client B] has issues with eating and swallowing and is at risk for choking and is on a mechanically softened diet. Fresh vegetables and fruit must be cooked until soft then, chopped. Meat must be cut or chopped into small bites, and moistened to make sure it is easy to swallow. Once at the table, staff must sit with her to be sure she is taking small bites, and chews. This is sometimes a struggle because [client B] likes to eat, she likes her food, and does not want to wait, take small bites or chew. She takes very large bites, and gulps her food down. If cautioned to slow down, chew, or take smaller bites she will hit staff, increasingly harder. She resists guidance in this area, and could put herself at risk of choking. She sometimes hits staff to get attention, especially if staff are caring for or paying attention to another customer... [Client B] also demonstrates behaviors such as crying, screaming and pushing staff 's hands away when asked to allow staff to help her brush her teeth, use an oral swab to put a prescribed rinse on her teeth and for medical procedures (such as blood draws, x-rays or other types of care, and dental care)... [Client B] also has tantrums while in stores, or other public places, she screams or cries if there is something she wants, or she is			

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	<p>asked to slow down, and take small bites. [Client B] has sometimes taken everything out of her closet, and chest of drawers, most often if she is upset when she goes to bed. She also touches, hugs and gets very close to staff and sometimes to her housemates. She has a very poor sense of personal space."</p> <p>On 4/15/16 at 2:15 PM, a review of client C's program plans was conducted. Client C's 6/13/15 ISP indicated she had the following training objectives: spooning out her own medication mixed with pudding, brush her teeth twice daily, make a purchase at least every two weeks in the community, maintain own living space, loading and unloading the dishwasher, comply with fire drills, express emotions using an emotion board, and awareness of hot items in the kitchen. Client C's 6/13/15 BSP indicated she had the following targeted behaviors: obsessing, self-injurious behavior and aggression. The BSP indicated, in part, "[Client C] is an overall happy, energetic 20-year-old young lady. [Client C] has lived at the [name] Group Home since 2004. [Client C] enjoys spending time with staff and some peers. [Client C] is non-verbal, but does communicate with loud vocalizations and leading staff to what she wants. [Client C] is very curious and</p>			

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	<p>very quick. She has clear ideas and opinions and can become frustrated if others do not comply with how she wants things done or where she would like things to be. [Client C] requires assistance from staff in all areas of her life including: self-help skills, independent living skills, hygiene, safety, etc. [Client C] is capable of doing some of these things for herself; however, she will always choose to let staff do it if they are there. [Client C] needs to be encouraged to do things for herself. [Client C] has in the past attempted to dart or elope from the group home. As this behavior has not been observed in more than a year, it is not included in her current targeted behaviors but should be watched for. [Client C's] goals center on teaching her to use appropriate methods of communication and methods to channel her obsessive tendencies. This BSP will provide steps for staff to use with [client C] to help identify ways in which she can express herself and manage frustrations...."</p> <p>On 4/15/16 at 2:22 PM, a review of client D's program plans was conducted. Client D's 9/1/15 ISP indicated he had the following training objectives: use a communication card to indicate when he wanted to go outside, cut up his food into bite sized pieces, participate in an activity</p>			

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	<p>with a peer for 30 minutes, hand a cashier money to make a purchase, carry a wallet with his identification in it, brush his teeth twice a day, and punch out a medication from a container. Client D's 9/1/15 BSP indicated he had the following targeted behaviors: physical display of frustration (crying, screaming, squealing, tensing his muscles, refusal to complete task at hand), self-injurious behavior (hitting self with fist on head) and inappropriate eating (stealing food, standing by seat to eat or leaving table during meals, eating out of trash or off the floor, using fingers (in lieu of table service) to eat, and falling asleep during meal time).</p> <p>On 4/14/16 at 3:03 PM, staff #3 indicated there was usually one staff working at the group home. Staff #3 indicated one staff was not sufficient to manage and supervise the clients. Staff #3 indicated the QIDP was supposed to work with her during the shift on this date.</p> <p>On 4/14/16 at 4:10 PM, the QIDP indicated one staff was not sufficient to manage and supervise the clients. The QIDP indicated he was working on hiring new staff. On 4/14/16 at 4:12 PM, the QIDP stated one staff "is not ideal." The QIDP stated one staff was a "necessity" at this time. The QIDP indicated there has</p>			

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W 0249  Bldg. 00	<p>been one staff working at the group home during the week for the past few weeks.</p> <p>On 4/15/16 at 12:04 PM, the Director of Support Services (DSS) stated when asked if one staff was sufficient to manage and supervise the clients, "In order to provide adequate programming, no." The DSS indicated one staff was not sufficient in order to pass medications, shower and assist the clients in the restroom. The DSS indicated client D was an elopement risk.</p> <p>On 4/15/16 at 1:35 PM, the Group Home Director (GHD) indicated one staff was not sufficient to implement the clients' program plans. The GHD stated, "Two staff ideal during waking hours." The GHD stated, "There's not enough people to go around" when asked why the group home did not have two staff working. The GHD stated, "It happens more than we like" in regard to the group home being staffed with one staff.</p> <p>9-3-3(a)</p> <p>483.440(d)(1) PROGRAM IMPLEMENTATION As soon as the interdisciplinary team has formulated a client's individual program plan, each client must receive a continuous active</p>			

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	<p>treatment program consisting of needed interventions and services in sufficient number and frequency to support the achievement of the objectives identified in the individual program plan.</p> <p>Based on observation, record review and interview for 1 of 2 clients in the sample (B), the facility failed to ensure staff implemented her plans for supervision while eating as written.</p> <p>Findings include:</p> <p>On 4/14/16 from 2:59 PM to 4:29 PM, an observation was conducted at the group home. At 3:12 PM, client B ate a Zinger. Client B ate the Zinger at the dining room table without staff #3 sitting next to her. At 3:16 PM, client B ate an Oatmeal Pie while sitting at the table. Staff #3 did not sit next to her. At 3:21 PM, client B ate a bowl of yogurt while sitting at the table. Staff #3 did not sit next to her. Staff #3 did not sit next to client B to ensure she took small bites and chewed her snack.</p> <p>On 4/14/16 at 12:33 PM, a review of the facility's incident/investigative reports was conducted and indicated the following: On 2/3/16 at 3:30 PM while staff from the Bureau of Developmental Disabilities Services (BDDS) were conducting an observation at the group home, client B was observed eating chips while at the dining room table without</p>	W 0249	To correct the deficient practice and prevent recurrence, the ND/Q will re-train all staff in the setting in Client B's current plans. To ensure no others are affected by the deficient practice, the ND/Q will also re-train staff on current plans for all other individuals living in the home. Ongoing monitoring will be accomplished through observations completed by the Team Manager, ND/Q, DRS, CSO and DSS no less than 5 times per week for a minimum of 4 weeks. Supervisors completing observations will provide immediate feedback and model appropriate interactions, when necessary, to ensure staff have adequate knowledge and resources to implement customer plans.	05/19/2016	

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	<p>staff present. When the BDDS staff conducted a record review, it was noted client B was on a mechanical soft diet (smoother consistency than regular foods; they require very little or no chewing at all to swallow) as she had a risk of choking.</p> <p>The 2/9/16 Investigation Summary indicated in the Description of alleged event section, "During a routine visit by BDDS Field Service Staff [names], [client B] was observed to be eating chips without staff present, even though her nursing care plan indicates she has a risk for choking and is to be on a mechanical soft diet..." The Findings of the investigation indicated, "Based on all information available, the allegation of staff neglect is not substantiated. [Client B] was observed by BDDS staff to each (sic) chips, but neither staff interviewed gave her chips, so she likely got them on her own...."</p> <p>On 4/14/16 at 4:13 PM, a review of client B's 7/10/14 Swallow Study was conducted. The Diet Consistency Recommendation of the swallow study was "Regular, chopped meats." The Summary indicated, in part, "...Even though food was not thoroughly masticated (chewed), pt. (patient) still able to adequately swallow w/ (with) no</p>			

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	<p>aspiration or penetration noted." Client B's 3/10/15 Behavior Support Plan indicated, in part, "[Client B] has issues with eating and swallowing and is at risk for choking and is on a mechanically softened diet. Fresh vegetables and fruit must be cooked until soft then, chopped. Meat must be cut or chopped into small bites, and moistened to make sure it is easy to swallow. Once at the table, staff must sit with her to be sure she is taking small bites, and chews. This is sometimes a struggle because [client B] likes to eat, she likes her food, and does not want to wait, take small bites or chew. She takes very large bites, and gulps her food down. If cautioned to slow down, chew, or take smaller bites she will hit staff, increasingly harder. She resists guidance in this area, and could put herself at risk of choking. She sometimes hits staff to get attention, especially if staff are caring for or paying attention to another customer." The BSP indicated, in part, "Behavior: Gulping food, without chewing, taking too large of bites. Place small amounts of food on her plate at a time, to reduce how much she can scoop up to put in her mouth at once. (Staff should be seated next to her. They should not be involved in any other customer or student but her.)" Client B's 3/23/15 Individualized Support Plan (ISP) indicated, in part, "[Client B's]</p>			

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	<p>requires multiple prompts to take small bites, and chew carefully. There have been no choking incidents at the group home, she has choked at school. [Client B's] tendency is to put as much food as she can into her mouth. She will take a spoonful of food and look at staff, to see what they will do. [Client B] has a history of choking while eating. She likes to eat, and resents using the precautions to protect her from choking. [Client B] is on a mechanically soft diet." Client B's ISP training objective indicated, "While eating staff will sit with [client B], and model the desired behavior, chewing, and taking small bites. Staff will praise her when she is using small bites and chewing, and use the verbal reminders, small bites, and chew. Best practice is to use a small utensil and sectioned plate. However it is not imperative (sic). If [client B] requires less than 8 reminders during a meal it will be met."</p> <p>On 4/15/16 at 11:34 AM, the Director of Nursing (DON) indicated on 2/3/16, client B was on a mechanical soft diet. The DON indicated chips were not part of a mechanical soft diet. The DON indicated the staff should have implemented client B's NCP as written. The DON indicated client B's 1/29/16 NCP was client B's current plan.</p>			

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W 0260 Bldg. 00	<p>On 4/15/16 at 1:35 PM, the Group Home Director indicated client B's NCP should be implemented as written.</p> <p>This federal tag relates to complaint #IN00192906.</p> <p>9-3-4(a)</p> <p>483.440(f)(2) PROGRAM MONITORING &amp; CHANGE At least annually, the individual program plan must be revised, as appropriate, repeating the process set forth in paragraph (c) of this section.</p> <p>Based on record review and interview for 1 of 2 clients in the sample (B), the facility failed to ensure her Individualized Support Plan (ISP) was revised and reviewed at least annually.</p> <p>Findings include:</p> <p>On 4/15/16 at 11:40 AM, a review of client B's 3/31/15 ISP was conducted. There was no documentation the facility revised and reviewed client B's ISP since 3/31/15.</p> <p>On 4/15/16 at 12:04 PM, the Director of Support Services indicated client B's ISP should be revised annually or when</p>	W 0260	<p>To correct the deficient practice, client B's ISP was revised on 4/18/16. ISPs for all others living in the home will also be reviewed, and updated as necessary, to ensure no others were affected by the deficient practice. To ensure the deficient practice does not continue, all ND/Qs will be re-trained on the annual process, which includes updating the ISP. A space is included on the customer electronic record to track dates of required documentation, including the ISP. Ongoing monitoring will be accomplished through the ND/Q reviewing the annual documentation for each individual with the Director of Residential Services, as well as a review of the electronic file to ensure</p>	05/19/2016

DEPARTMENT OF HEALTH AND HUMAN SERVICES  
CENTERS FOR MEDICARE & MEDICAID SERVICES

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	significant changes occurred.  This federal tag relates to complaint #IN00192906.  9-3-4(a)		documentation is current.		