

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 15G698		X2) MULTIPLE CONSTRUCTION A. BUILDING 00 B. WING _____		X3) DATE SURVEY COMPLETED 12/07/2012	
NAME OF PROVIDER OR SUPPLIER CARDINAL SERVICES INC OF INDIANA				STREET ADDRESS, CITY, STATE, ZIP CODE 1300 MITCHEL ST ROCHESTER, IN 46975			
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W0000	<p>This visit was for an annual fundamental recertification and state licensure survey.</p> <p>Dates of Survey: December 4, 5, 6, and 7, 2012</p> <p>Facility number: 003238 Provider number: 15G698 AIM number: 200371780</p> <p>Surveyor: Tracy Brumbaugh, Medical Surveyor III</p> <p>These federal deficiencies also reflect state findings in accordance with 460 IAC 9.</p> <p>Quality review completed December 19, 2012 by Dotty Walton, 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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W0214	<p>483.440(c)(3)(iii) INDIVIDUAL PROGRAM PLAN The comprehensive functional assessment must identify the client's specific developmental and behavioral management needs.</p> <p>Based on record review and interview, the facility failed for 1 of 4 sampled clients (client #1), and 3 additional clients (clients #6, #7, and #8), to ensure a professional had assessed their visual impairment needs.</p> <p>Findings include:</p> <p>On 12-4-12 from 1:20 p.m. until 3:00 p.m., clients #1, #6, #7, and #8 were observed at the facility owned in home day program. Client #7 did not mobilize around his home without direct care staff (DCS) #1 assisting him by holding his gait belt or transferring him into wheelchair. Client #1 pulled her pants down and had a bowel movement on the living room floor. DCS #4 walked back into the room and prompted client #1 to go into the bathroom. DCS #3 assisted client #1 to the bathroom.</p> <p>On 12-4-12 from 3:00 p.m. until 5:30 p.m., clients #1, #6, #7, and #8 were observed in their home. Clients #1, #6, #7, and #8 were not offered adaptive equipment for mobility, dining, or other deficits due to the impairment. Client #7</p>	W0214	<p>Nurse contacted the League of the Blind on 12/12/12. She was informed of a grant for training and assessments in assisted technology where they would come to the group home to do an evaluation on our blind consumers and instruct staff on trainings to help improve the lives of these consumers. Initial meeting was held 1-3-12 to discuss the process they will follow with the grant. First training date will be set by the 3rd week of January. We are waiting for a date in February for this assessment to be completed. See attachment A.</p>	12/12/2012
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	<p>did not mobilize throughout his house without the assistance from direct care staff holding on to him or transferring him into a wheelchair. Direct care staff (DCS) #6 placed crackers in front of client #1. Client #1 ate her crackers then felt around on the table with her hand. DCS #5 led client #6 around her home by having client #6 hold DCS #5's arm. Client #1 stood up at the recliner then DCS #6 went over to her and had client #1 hold her arm as they walked to the kitchen.</p> <p>On 12-5-12 from 6:35 a.m. until 9:00 a.m., an observation at the home of client #1, #6, #7, and #8 was conducted. Client #7 sat in his recliner, client #1 yelled and walked around her home holding DCS #2 arm. Client #1 walked around her bedroom bumping into walls. Client #6 walked into the front door and hit her head two times. Client #8 manipulated his wheelchair with his feet. Clients #1, #6, #7 and #8 had impaired eyesight and were unable to do tasks and access their environment independently.</p> <p>On 12-5-12 at 11:10 a.m., a record review for client #1 was conducted. The Physicians' Orders dated 10-1-12 indicated client #1's diagnoses included, but were not limited to, bilateral cataracts and severe retinal degeneration. The review indicated no visual assessment for</p>						

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	<p>client #1's visual impairment needs which included adaptive equipment, mobility, and/or other supports to address the impairment.</p> <p>On 12-6-12 at 11:45 a.m., a review of client #6's Comprehensive Functional Assessment (CFA) was conducted. The CFA dated 4-12 did not include a visual assessment for client #6's visual impairment needs which may include adaptive equipment, mobility, and/or other supports to address the impairment.</p> <p>On 12-6-12 at 11:50 a.m., a review of client #7's CFA was conducted. The CFA dated 11-12 did not include a visual assessment for client #7's visual impairment needs which may include adaptive equipment, mobility, and/or other supports to address the impairment.</p> <p>On 12-6-12 at 12:00 p.m. a review of client #8's CFA was conducted. The CFA dated 4-12 did not include a visual assessment for client #8's visual impairment needs which may include adaptive equipment, mobility, and/or other supports to address the impairment.</p> <p>On 12-6-12 at 12:30 p.m., an interview with the Qualified Mental Retardation Professional (QMRP) indicated clients #1, #6, #7, and #8 were visually impaired</p>			

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	<p>and a professional had not assessed them for the use of adaptive equipment, mobility or any other supports for someone with visual impairment. The QMRP indicated there were no assessments with recommendations for mobility or adaptive equipment.</p> <p>9-3-4(a)</p>			

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W0368	<p>483.460(k)(1) DRUG ADMINISTRATION</p> <p>The system for drug administration must assure that all drugs are administered in compliance with the physician's orders. Based on record review and interview the facility failed for 1 of 4 sampled clients (client #4), to ensure medications were given as prescribed by the physician.</p> <p>Findings include:</p> <p>On 12-4-12 at 9:50 a.m., a review of the facility's Bureau of Developmental Disabilities Services (BDDS) reports was conducted. The review indicated the following.</p> <p>-A report dated 3-28-12 indicated from 3-1-12 through 3-27-12 client #4 did not receive his Milk of Magnesia (MOM) liquid for constipation at 9:00 p.m.</p> <p>On 12-5-12 at 11:30 a.m. a record review for client #4 was conducted. The Physicians' Orders (PO) dated 3-12 indicated client #4 was prescribed MOM 1 ounce at bedtime daily.</p> <p>On 12-6-12 at 2:00 p.m. an interview with the facility nurse indicated client #4 should not have went with out his MOM for 26 days. The nurse indicated staff involved did receive corrective action and retraining was completed. The nurse</p>	W0368	Nurse trained staff on 12/13/12 on medication pass procedures and constipation and bowel obstruction. Staff signed off on training. Staff will be monitored by observations of Nurse, RM, QDP, and Coordinator. See attachment B, C, D, E, and F	12/13/2012			

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	indicated the PO should be followed at all times. 9-3-6(a)			

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W0488	<p>483.480(d)(4) DINING AREAS AND SERVICE The facility must assure that each client eats in a manner consistent with his or her developmental level.</p> <p>Based on observation, record review and interview, the facility failed for 4 of 4 sampled clients (clients #1, #2, #3, and #4), and for 4 additional clients (clients #5, #6, #7, and #8), to ensure they assisted with meal preparation consistent with their developmental level.</p> <p>Findings include:</p> <p>On 12-4-12 from 3:00 p.m. until 5:30 p.m., an observation at the home of clients #1, #2, #3, #4, #5, #6, #7, and #8 was conducted. Direct care staff (DCS) #5 filled a pitcher with water and got the milk from the refrigerator. DCS #6 preheated the oven to 375 degrees. DCS #6 opened the cans of salmon. DCS #6 placed the salmon cans in the trash. DCS #6 picked the bones out of the salmon. DCS #6 took the eggs out of the refrigerator, took a bowl and cracked the eggs in the bowl. DCS #6 stirred the mixture. DCs #6 opened the crackers and placed them in a baggy. DCS #6 smashed the crackers in the baggy. DCS #6 poured the crackers into a measuring cup then poured them into the salmon mixture. DCS #6 took milk from the refrigerator and poured 3/4 cup into the mixture.</p>	W0488	QDP trained staff on 12/13/12 over active treatment. Staff signed off on training. Staff will be monitored by observations by RM, QDP, and Coordinator. See attachment G, H, and F.	12/13/2012			

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	DCS #6 stirred the mixture. Clients #1, #2, and #3, sat at the table. but were not involved. DCS #6 took 2 cookie sheets out from the cabinet and sprayed cooking spray on them. DCS #6 made the salmon patties, placed them on the cookie sheets, and placed them in the oven. DCS #6 placed the eggs back into the refrigerator. DCS #4 placed a pan of water on the stove. DCS #6 loaded dishes into the dishwasher. DCS #6 poured the dry rice into the boiling water. DCS #6 stirred the rice. DCS #6 took the salmon patties from the oven and stirred the rice. DCS #6 placed some salmon patties on a plate, placed some rice in a bowl and carried it to clients #4, #5, #7 and #8's side of the house. DCS #6 placed rice in a bowl, and placed the salmon patties on a plate for clients #1, #2, #3, and #6. DCS #6 took a bowl out and poured the cans of peaches into it. CDS #6 cut up the peaches with scissors. DCS #8 cooked the green beans in the microwave. DCS #8 placed green beans on clients #4, #7 and #8's plates for them. DCS #8 poured the milk for clients #7 and #8. DCS #9 poured the milk for clients #4 and #5. DCS #8 placed the rice on clients #4 and #5's plate. DCS #7 cut up client #8's food with scissors for him. DCS #8 placed the peaches on client #4's plate for him. DCS #9 placed peaches on clients #5, #7 and #8 plates. DCS #7 cut up client #7's food with scissors. DCS #9			

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	<p>poured clients #4, #5, #7, and #8's kool-aid. DCS #9 poured client #4 a cup of prune juice. Clients #1, #2, #3, #4, #5, #6, #7, and #8 did not assist with meal preparation consistent with their developmental levels.</p> <p>On 12-5-12 at 11:10 a.m., a record review for client#1 was conducted. The Comprehensive Functional Assessment (CFA) dated 3-12 indicated client #1 could assist with meal preparation with assistance.</p> <p>On 12-5-12 at 10:20 a.m., a record review for client #2 was conducted. The CFA dated 7-12 indicated client #2 could assist with meal preparation with assistance.</p> <p>On 12-5-12 at 2:00 p.m., a record review for client #3 was conducted. The CFA dated 4-12 indicated client #3 could assist with meal preparation with assistance.</p> <p>On 12-5-12 at 11:30 a.m., a record review for client #4 was conducted. The CFA dated 7-12 indicated client #4 could assist with meal preparation with assistance.</p> <p>On 12-6-12 at 12:10 p.m., a record review for client #5 was conducted. The CFA dated 4-12 indicated client #5 could assist with meal preparation with assistance.</p>			

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	<p>On 12-6-12 at 11:45 a.m., a record review for client #6 was conducted. The CFA dated 4-12 indicated client #6 could assist with meal preparation with assistance.</p> <p>On 12-6-12 at 11:50 a.m., a record review for client #7 was conducted. The CFA dated 11-12 indicated client #7 could assist with meal preparation with assistance.</p> <p>On 12-6-12 at 12:00 p.m., a record review for client #8 was conducted. The CFA dated 4-12 indicated client #8 could assist with meal preparation with assistance.</p> <p>On 12-6-12 at 1:00 p.m., an interview with the Qualified Mental Retardation Professional (QMRP) indicated clients #1, #2, #3, #4, #5, #6, #7, and #8 were all able to assist with meal preparation and with assisting in cutting up their own food. The QMRP indicated DCS should have included the clients in meal preparation.</p> <p>9-3-8-(a)</p>				