STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 15G385	(X2) MULTIPLE CONSTRUCTION A. BUILDING 00 B. WING	(X3) DATE SURVEY COMPLETED 12/20/2013

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
TRADEWINDS SERVICES INC	12046 FORREST DR ST JOHN, IN 46373

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETION DATE
W000000	This visit was for the investigation of Complaint #IN00139941. COMPLAINT #IN00139941 - SUBSTANTIATED, Federal/State deficiencies related to the allegations are cited at W149 and W157. Dates of Survey: December 19 and 20, 2013. Facility number: 000899 Provider number: 15G385 AIM number: 100249270 Surveyor: Tim Shebel, LSW The following federal deficiencies also reflect state findings in accordance with 460 IAC 9. Quality review completed December 30, 2013 by Dotty Walton, QIDP.	W000000		
W000149	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, for 6 of 6 reviewed incidents, to implement their abuse/neglect policy for 3 of 4 sampled	W000149	On 10/8/2013, there was a team meeting held for Client D in	01/08/2014

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE TITLE (X6) DATE

Any defiencystatement ending with an asterisk (*) denotes a deficency which the institution may be excused from correcting providing it is determined that other safegaurds 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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	clients (clients B, C, and D), and 1 additional client (client H), to prevent client D from physically aggressing toward group home and day program clients. Findings include: The facility's records were reviewed on 12/19/13 at 10:04 A.M. The review indicated the following incidents of client to client aggression: 1. "Name: [Client D], Date: 12/17/2013, Narrative: [Client D] is a consumer (client) living at the [group home]. He also attends the ADAPT-2 (day program) at [the facility] center. While at the center, on 12/17/2013, [client D] dropped an apple. [Day program client A] was standing next to him. [Client D] pushed [day program client A] on his shoulder. Staff separated them and [client D's] BSP (Behavior Support Plan) was followed. Staff checked [day program client A], there was no visible injuries at this time. PLAN TO RESOLVE: The agency nurse was notified, she checked both consumers (clients) for any type of injury, there were none reported." 2. "Name: [Client D], Date: 11/23/2013, Narrative: [Client D] and		regards to the behaviors (Please see attached document). There was an addendum added to the Behavior Support Plan for Client D (Please see attached BSP with Addendum added). The revision was completed on 10-8-13; there was a change with Client D's reward program both at work and at home. On 10/25/13, there was a behavior support plan training for Client D (Please see attached training form). For all allegations of abuse & neglect, the investigation will start within 24 hours of the alleged incident. There was an update completed to the investigation form that will be utilized for all investigations, effective January 2, 2014 (Please see attached document). When there is an allegation of abuse & neglect the staff person(s) involved will be removed immediately from schedule pending outcome	

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	[client B] are both residents at the [facility] group home. On 11/23/13 at approximately 9:45am the guys from the [facility] group home were sitting in the living room watching TV, relaxing after morning activities. [Client D] got up and began walking towards [client B]. Suddenly, [client D] grabbed [client B's] face causing a 2 inch long superficial scratch that went from the side of [client B's] right eye {not touching the eye}, down towards his cheek. There is also a 1 inch long superficial scratch on the right side of [client B's] nose. Staff immediately followed [client D's] behavior support plan and blocked [client D] from further touching [client B]. Immediately following the incident, [client D] sat down and stayed close to staff. Staff followed basic first aid procedures to clean and treat the scratches on [client B's] face. There was no bleeding. There were no further incidents between the two consumers. PLAN TO RESOLVE: [Client D] has a behavior support plan in place that addresses physical aggression. Staff will closely monitor [client D] and [client B]. Staff will also continue to follow [client D's] BSP. [Client D] has been adjusting from a decrease in his psychotropic medications. He will continue to see his psychiatrist quarterly (every three months)."		of investigation. The staff person(s) involved is responsible for completing an internal incident report & notifying all necessary person(s), such as: House Manager, QDDP & Residential Nurse. The QDDP must be notified as soon as the incident is under control & there is no further danger to either client(s) involved. The QDDP is responsible for making all necessary incident reports to the Bureau of Developmental Disabilities (BDDS) within the guidelines (within 24 hours of incident). Tradewinds Quality Assurance/Crisis Team meets monthly to review all internal incident reports in regards to all consumers. The Quality Assurance/Crisis Team also monitors trends for each incident. During the Quality & Assurance/Crisis Team meetings, the team discusses if	

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	3. "Name: [Client D], Date: 9/30/2013, Narrative: [Client H] and [client D] are both residents of the [facility] group home. On 9/30/13 at approximately 4:15pm, both men were on the transport bus and waiting for the other consumers to get on the bus. [Client D] turned around and grabbed [client H's] glasses. In turn, [client H] was scratched by [client D]. There is a 1 1/2 (one and one half) inch long scratch present on [client H's] right temple area. As the incident was occurring staff intervened right away, blocking [client H] from [client D]. Staff immediately moved [client H's] seat on the bus. As soon as the men came home, staff applied basic first aid to [client H's] scratch. There were no further incidents and [client H's] glasses are not broken. PLAN TO RESOLVE: [Client D] has a BSP that addresses physical aggression as a target behavior that staff followed. [Client D] has been adjusting to a reduction in his psychotropic medications. [Client D's] psychiatrist is aware of current behavioral incidents. Staff will continue to monitor both men and will continue to follow [client D's] BSP." 4. "Name: [Client D], Date: 9/27/2013, Narrative: On September 27, 2013 at 1:00 pm, [client D] appeared to be		the consumer(s) has a history of this behavior(s), if the consumer have a behavior support plan, if so, does the plan work, if not, should the consumer be referred to a behaviorist for behavioral services, if the behaviorist was notified, what were the recommendations, has there been a team meeting to discuss the incident further, if the consumer has a psychiatrist, if so has the psychiatrist been notified, has there been any changes with the medications & etc. The Residential Coordinator will be reviewing the IRs/BDDS reports/Investigations daily (as needed). In addition, Tradewinds Quality Assurance/Crisis Team will monitor the incidents monthly. The group home manager is responsible for monitoring & ensuring that the staff following the rights	

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	agitated. He struck at [client B] and hit him on the arm and chest. [Client B] hit him (client D) back with his fist in the right arm and chest. The two were separated by staff. [Client D] then went after another consumer [client C] he did not hit [client C] however he did try to grab him. Staff intervened successfully and [client D] was escorted to his chair. BSP was followed and there were no other incidents. PLAN TO RESOLVE: Both consumers were checked for any injuries. There were no visible injuries. Staff continued to observe [client D] for any signs of agitation." 5. "Name: [Client D], Date: 9/26/2013, Narrative: On September 26, 2013 at 11 am, [day program client B] was setting the table for lunch at day program. While [day program client B] was sitting (sic) a plate on the table, [client D] grabbed her right arm and squeezed it. In doing so, [day program client B] received 3 superficial scratches on her forearm. PLAN TO RESOLVE: 1. Does [client D] have a history of behaviors described in the incident? [Client D] does have a history of physical aggression. 2. If so, does he have a behavior support plan that addresses described behaviors? Yes, [client D] has a BSP that includes physical aggression as a target behavior.		of the consumers. In addition, the QDDP will observe during unannounced visits that the staff is following the rights of the consumers. It is the policy of Tradewinds Services to ensure that all clients have a safe environment free of aggression from all sources including client on client aggression. It is also the policy of Tradewinds to ensure the health, welfare & rights of the individuals we serve.	

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	3. Has it been determined what triggered [client D's] behavior? No, [client D] just impulsively grabbed [day program client B's] arm as she was reaching in to set the plate on the table. 4. How will this be prevented from happening again? Staff will continue to monitor [client D] and implement his BSP. [Client D] has been adjusting to a reduction in his psychotropic medication. He follows up with his psychiatrist quarterly." 6. "Name: [Client D], Date: 8/28/2013, Narrative: [Client C] and [client D] are both residents of the [facility] group home. On 8/28/13 at approximately 3:30pm, [client C] and [client D] were both sitting on the transport bus at [facility] workshop getting ready to go home. [Client C] grabbed the top of [client D's] seat and suddenly [client D] turned around and smacked [client C] on the right side of his face. [Client C] immediately slapped [client D] back four times on the left side of his face. Staff came between the two consumers and directed [client C] to get off the bus. [Client C] complied and once both consumers were calm, [client C] was moved back onto the bus with no further incident. There were no injuries to either of the consumers' faces. However, [client C] does have a dime			

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	size bruise on his right thumbnail from hitting the back of the seat of the bus. PLAN TO RESOLVE: [Client C] has a behavior plan in place that addresses physical aggression. Staff followed his BSP. [Client D] is profoundly IDD (Intellectually Developmentally Disabled) and is nonverbal. Currently he is adjusting to a reduction in his medications. He does have a BSP that was followed by staff at the time of the incident. Incidents of physical aggression for [client D] are reported to the residential nurse, in order to follow up with his psychiatrist. Staff will continue to monitor [client C] and [client D]." The facility's records were further reviewed on 12/19/13 at 11:58 A.M. Review of QIDP (Qualified Intellectual Disabilities Professional) #1's notes indicated interventions put in place during the time span of the aforementioned incidents of physical aggression (12/17/13 through 8/28/13) were as follows: On 10/23/13, all group home staff received behavior training in regards to managing client D's behaviors. On 10/8/13, an IDT (Inter-Disciplinary Team) meeting was held to discuss client D's physically aggressive behaviors and the need for direct care staff to be retrained on			

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	managing client D's physically aggressive behaviors. QIDP #1 was interviewed on 12/19/13 at 12:09 P.M. QIDP #1 stated, "We had an IDT meeting on 10/8/13 at which we decided to retrain the group home staff on managing [client D's] behaviors in order to stop his physical aggression. The training with the staff was held on 10/28/13. It took about three weeks to arrange to get everyone (direct care staff) together for the training." When asked if the 10/8/13 IDT meeting and the 10/28/13 training were effective in deterring client D from physically aggressing toward client B on 11/27/13 and from physically aggressing toward day program client A on 12/17/13, QIDP #1 stated, "No, it wasn't effective." The facility's records were further reviewed on 12/20/13 at 2:58 P.M. Review of the facility's "Policy of Abuse, Neglect, Exploitation, Mistreatment, Violation of an Individual's Rights, and Injuries of Unknown Origin", dated 2/1/11, indicated, in part, the following: "II. Policy Statement: Abuse and or neglect or any mistreatment of any consumer who participates in a [facility name] program is strictly prohibited . . . ."			

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	This federal tag relates to complaint #IN00139941 9-3-2(a)			
W000157	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, the facility failed, for 6 of 6 reviewed incidents, to implement effective corrective action for 3 of 4 sampled clients (clients B, C, and D), and 1 additional client (client H), to keep client D from physically aggressing toward group home and day program clients. Findings include: The facility's records were reviewed on 12/19/13 at 10:04 A.M. The review indicated the following incidents of client to client aggression: 1. "Name: [Client D], Date: 12/17/2013, Narrative: [Client D] is a consumer (client)living at the [group	W000157	The QDDP is scheduling an IDT meeting in order to request another Behavior Support Plan revision/update for client D. After the team meeting, the BSP will be revised once the team is in agreement & recommends the changes. Additionally, after the BSP revision/recommendations from the IDT, the QDDP & House Manager will ensure that all staffs are trained on the revisions/updates.	01/15/2014

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	home]. He also attends the ADAPT-2 (day program) at [the facility] center. While at the center, on 12/17/2013, [client D] dropped an apple. [Day program client A] was standing next to him. [Client D] pushed [day program client A] on his shoulder. Staff separated them and [client D's] BSP (Behavior Support Plan) was followed. Staff checked [day program client A], there was no visible injuries at this time. PLAN TO RESOLVE: The agency nurse was notified, she checked both consumers (clients) for any type of injury, there were none reported." 2. "Name: [Client D], Date: 11/23/2013, Narrative: [Client D] and [client B] are both residents at the [facility] group home. On 11/23/13 at approximately 9:45am the guys from the [facility] group home were sitting in the living room watching TV, relaxing after morning activities. [Client D] got up and began walking towards [client B]. Suddenly, [client D] grabbed [client B's] face causing a 2 inch long superficial scratch that went from the side of [client B's] right eye {not touching the eye}, down towards his cheek. There is also a 1 inch long superficial scratch on the right side of [client B's] nose. Staff immediately followed [client D's] behavior support plan and blocked		On Wednesday, January 15, 2014, the QDDP & Behavior Specialist conducted training on teaching/utilizing replacement behaviors & in-home activities/sensory items for client D. In the past, the emphasis has been on what client D should not do. The secondary focus was on what client D should do. Due to client D refusing some activities in the home, staff will be working with client D to find additional activities for client D to enjoy. Client D's team continues to work with client D in order to increase client D's functional communication as stated in the BSP. This is due to client D being primarily	

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	[client D] from further touching [client B]. Immediately following the incident, [client D] sat down and stayed close to staff. Staff followed basic first aid procedures to clean and treat the scratches on [client B's] face. There was no bleeding. There were no further incidents between the two consumers. PLAN TO RESOLVE: [Client D] has a behavior support plan in place that addresses physical aggression. Staff will closely monitor [client D] and [client B]. Staff will also continue to follow [client D's] BSP. [Client D] has been adjusting from a decrease in his psychotropic medications. He will continue to see his psychiatrist quarterly (every three months)." 3. "Name: [Client D], Date: 9/30/2013, Narrative: [Client H] and [client D] are both residents of the [facility] group home. On 9/30/13 at approximately 4:15pm, both men were on the transport bus and waiting for the other consumers to get on the bus. [Client D] turned around and grabbed [client H's] glasses. In turn, [client H] was scratched by [client D]. There is a 1 1/2 (one and one half) inch long scratch present on [client H's] right temple area. As the incident was occurring staff intervened right away, blocking [client H] from [client D]. Staff immediately moved [client		non-verbal. On Wednesday, January 15, 2014 all staff were trained on Incident Reporting, such as: what is reportable, the protocol for whom to contact to notify about the incident, the correct way to fill out an incident report form & etc.(Please see attached documents). There was an update completed to the investigation form that will be utilized for all investigations, effective January 15, 2014 (Please see attached document). For all allegations of abuse & neglect, the investigation will start within 24 hours of the alleged incident. When there is an allegation of abuse & neglect the staff person(s) involved will be removed immediately from schedule pending outcome of	

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	H's] seat on the bus. As soon as the men came home, staff applied basic first aid to [client H's] scratch. There were no further incidents and [client H's] glasses are not broken. PLAN TO RESOLVE: [Client D] has a BSP that addresses physical aggression as a target behavior that staff followed. [Client D] has been adjusting to a reduction in his psychotropic medications. [Client D's] psychiatrist is aware of current behavioral incidents. Staff will continue to monitor both men and will continue to follow [client D's] BSP." 4. "Name: [Client D], Date: 9/27/2013, Narrative: On September 27, 2013 at 1:00 pm, [client D] appeared to be agitated. He struck at [client B] and hit him on the arm and chest. [Client B] hit him (client D) back with his fist in the right arm and chest. The two were separated by staff. [Client D] then went after another consumer [client C] he did not hit [client C] however he did try to grab him. Staff intervened successfully and [client D] was escorted to his chair. BSP was followed and there were no other incidents. PLAN TO RESOLVE: Both consumers were checked for any injuries. There were no visible injuries. Staff continued to observe [client D] for any signs of agitation."		investigation. The staff person(s) involved is responsible for completing an internal incident report & notifying all necessary person(s), such as: House Manager, QDDP & Residential Nurse. The QDDP must be notified as soon as the incident is under control & there is no further danger to either client(s) involved. The QDDP is responsible for making all necessary incident reports to the Bureau of Developmental Disabilities (BDDS) within the guidelines (within 24 hours of incident). Tradewinds Quality Assurance/Crisis Team meets monthly to review all internal incident reports in regards to all consumers. The Quality Assurance/Crisis Team also monitors trends for each incident. During the Quality & Assurance/Crisis Team meetings, the team discusses if the consumer(s) has a history of this behavior(s), if the consumer have a behavior support plan, if so, does the plan	

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	5. "Name: [Client D], Date: 9/26/2013, Narrative: On September 26, 2013 at 11 am, [day program client B] was setting the table for lunch at day program. While [day program client B] was sitting (sic) a plate on the table, [client D] grabbed her right arm and squeezed it. In doing so, [day program client B] received 3 superficial scratches on her forearm. PLAN TO RESOLVE: 1. Does [client D] have a history of behaviors described in the incident? [Client D] does have a history of physical aggression. 2. If so, does he have a behavior support plan that addresses described behaviors? Yes, [client D] has a BSP that includes physical aggression as a target behavior. 3. Has it been determined what triggered [client D's] behavior? No, [client D] just impulsively grabbed [day program client B's] arm as she was reaching in to set the plate on the table. 4. How will this be prevented from happening again? Staff will continue to monitor [client D] and implement his BSP. [Client D] has been adjusting to a reduction in his psychotropic medication. He follows up with his psychiatrist quarterly." 6. "Name: [Client D], Date: 8/28/2013, Narrative: [Client C] and [client D] are both residents of the [facility] group		work, if not, should the consumer be referred to a behaviorist for behavioral services, if the behaviorist was notified, what were the recommendations, has there been a team meeting to discuss the incident further, if the consumer has a psychiatrist, if so has the psychiatrist been notified, has there been any changes with the medications & etc. The Residential Coordinator will be reviewing the IRs/BDDS reports/Investigations daily (as needed). In addition, Tradewinds Quality Assurance/Crisis Team will monitor the incidents monthly. The group home manager is responsible for monitoring & ensuring that the staff following the rights of the consumers. In addition, the QDDP will observe during unannounced visits that the staff is following the rights of the	

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 15G385	X2) MULTIPLE CONSTRUCTION A. BUILDING 00 B. WING	X3) DATE SURVEY COMPLETED 12/20/2013
NAME OF PROVIDER OR SUPPLIER TRADEWINDS SERVICES INC		STREET ADDRESS, CITY, STATE, ZIP CODE 12046 FORREST DR ST JOHN, IN 46373	

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	home. On 8/28/13 at approximately 3:30pm, [client C] and [client D] were both sitting on the transport bus at [facility] workshop getting ready to go home. [Client C] grabbed the top of [client D's] seat and suddenly [client D] turned around and smacked [client C] on the right side of his face. [Client C] immediately slapped [client D] back four times on the left side of his face. Staff came between the two consumers and directed [client C] to get off the bus. [Client C] complied and once both consumers were calm, [client C] was moved back onto the bus with no further incident. There were no injuries to either of the consumers' faces. However, [client C] does have a dime size bruise on his right thumbnail from hitting the back of the seat of the bus. PLAN TO RESOLVE: [Client C] has a behavior plan in place that addresses physical aggression. Staff followed his BSP. [Client D] is profoundly IDD (Intellectually Developmentally Disabled) and is nonverbal. Currently he is adjusting to a reduction in his medications. He does have a BSP that was followed by staff at the time of the incident. Incidents of physical aggression for [client D] are reported to the residential nurse, in order to follow up with his psychiatrist. Staff will continue to monitor [client C] and		consumers. It is the policy of Tradewinds Services to ensure that all clients have a safe environment free of aggression from all sources including client on client aggression. It is also the policy of Tradewinds to ensure the health, welfare & rights of the individuals we serve.	

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	[client D]." The facility's records were further reviewed on 12/19/13 at 11:58 A.M. Review of QIDP (Qualified Intellectual Disabilities Professional) #1's notes indicated interventions put in place during the time span of the aforementioned incidents of physical aggression (12/17/13 through 8/28/13) were as follows: On 10/23/13, all group home staff received behavior training in regards to managing client D's behaviors. On 10/8/13, an IDT (Inter-Disciplinary Team) meeting was held to discuss client D's physically aggressive behaviors and the need for direct care staff to be retrained on managing client D's physically aggressive behaviors. QIDP #1 was interviewed on 12/19/13 at 12:09 P.M. QIDP #1 stated, "We had an IDT meeting on 10/8/13 at which we decided to retrain the group home staff on managing [client D's] behaviors in order to stop his physical aggression. The training with the staff was held on 10/28/13. It took about three weeks to arrange to get everyone (direct care staff) together for the training." When asked if the 10/8/13 IDT meeting and the 10/28/13 training were effective in deterring client D from physically			

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NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
TRADEWINDS SERVICES INC	12046 FORREST DR ST JOHN, IN 46373

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	aggressing toward client B on 11/27/13 and from physically aggressing toward day program client A on 12/17/13, QIDP #1 stated, "No, it wasn't effective." This federal tag relates to complaint #IN00139941 9-3-2(a)			