

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 15G389	X2) MULTIPLE CONSTRUCTION A. BUILDING 00 B. WING _____	X3) DATE SURVEY COMPLETED 10/30/2015
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NAME OF PROVIDER OR SUPPLIER DEVELOPMENTAL SERVICE ALTERNATIVES INC	STREET ADDRESS, CITY, STATE, ZIP CODE 823 ALHAMBRA ANDERSON, IN 46011
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W 0000 Bldg. 00	<p>This visit was for the investigation of complaint #IN00184464.</p> <p>Complaint #IN00184464: Substantiated, Federal and state deficiencies related to the allegation(s) are cited at W104, W148, W189 and W331.</p> <p>Survey dates: 10/26, 10/27 and 10/30/15.</p> <p>Facility Number: 000903 Provider Number: 15G389 AIM Number: 100244370</p> <p>These deficiencies also reflect state findings in accordance with 460 IAC 9. Quality Review of this report completed by #15068 on 11/6/15.</p>	W 0000		
W 0104 Bldg. 00	<p>483.410(a)(1) GOVERNING BODY The governing body must exercise general policy, budget, and operating direction over the facility.</p> <p>Based on observation, interview and record review for 4 of 4 sampled clients (A, B, C and D) and for 3 additional clients (E, F and G), the facility's governing body failed to exercise general policy, budget and operating direction over the facility to ensure the facility</p>	W 0104	The agency will be implementing the following to ensure bedbug protocols/ procedures continue to be followed to prevent recurrence of bedbugs in the home and to ensure that all efforts have been made to prevent anyfuture spread of bed bugs. At this time there is no	11/29/2015

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>implemented its bed bug protocol/procedure to prevent the recurrence of bed bugs in the group home, and to ensure all efforts had been made to prevent the spread of bed bugs.</p> <p>Findings include:</p> <p>The facility's reportable incident reports and/or investigations were reviewed on 10/26/15 at 1:39 PM. The facility's reportable incident reports indicated the following (not all inclusive):</p> <p>-9/18/15 "A staff member discovered what appeared to be a bed bug in the bedroom of [client B] and [client A]. The entire home will be inspected by a professional exterminator and arrangements have been made to have the home treated. DSA (Developmental Service Alternatives) will work with the exterminators to ensure the treatment is completed as scheduled and to ensure all other recommendations are followed to prevent spread and/or return of bed bugs."</p> <p>-10/13/15 Bureau of Developmental Disabilities Services (BDDS) filed incident indicated "[BDDS representative] received a notice from a consumer's guardian that this home has bedbugs. No incident report has yet been</p>		<p>evidence that live bed bugs are in the home. All beds have encasements provided by the professional exterminator and all recommendations from this professional have been followed. DSA will also consult with the entomologist that works in the state's entomology lab for any further recommendations. Any additional recommendations to prevent recurrence or spread that results from this consultation will be addressed by the administrator. The agency bed bug protocol/procedure will be updated as needed to reflect any new steps taken. The administrator will also ensure that all management staff who oversee home operations and staff who work in the home are trained on current practices regarding the prevention of recurrence of bed bugs. The Residential Director is present in the home no less than weekly. During a weekly visit she will complete a check of the home to ensure there is no evidence of bed bugs and also to ensure the related protocols remain implemented as required. An administrator will also be in the home no less than twice a month. During these visits these items will also be checked. When the Residential Director and Administrator complete their visits and checks that protocols remain in place these will be documented and forwarded to the</p>		

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	<p>completed, therefore [BDDS representative] is completing this report (sic) on the instruction of DM District manager [name of DM]. [BDDS representative] followed up with DSA Res (Residential) Dir (Director) [Qualified Intellectual Disabilities Professional-QIDP #1] who informed that staff are scheduling with the pest control company to have treatment done...."</p> <p>During the 10/26/15 observation period between 5:00 PM and 5:45 PM, at the group home, client A and B's bedrooms had new beds, mattresses and box springs. The clients' mattresses were covered/sealed in a plastic mattress cover which covered the mattress and box spring. Client A and B's bedroom electrical outlets were exposed/did not have the outlet covers over the outlets to prevent the bed bugs from hiding in the electrical fixtures. Client A's and B's bedrooms had wooden dressers, baseboards and other objects. The baseboard by the door, had an opening/gap of missing baseboard from the door frame to the baseboard which would allow bed bugs to hide/nest. In a back bedroom was a bed with only the box springs on the twin bed rails. The box springs had loose plastic on top of the box spring, but it was not covered</p>		<p>Administrator and Program Quality Coordinator for review and as to serve of evidence that these items were checked.</p> <p>Responsible Party: Area Director</p>	

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	<p>with a zippered plastic mattress covering to prevent bed bugs from getting into the box spring.</p> <p>The facility's Pest Control reports were reviewed on 10/26/15 at 2:55 PM. The facility's pest control reports indicated the following (not all inclusive):</p> <p>-9/28/15 The group home was inspected for bed bugs and treated. The pest control report indicated they installed 1 mattress and box spring. The pest control report indicated 5 live bed bugs were in the bed frames, 25 live bed bugs were found in the mattress and 5 live bed bugs were found on the "perimeter." The report indicated no bed bugs were found in the couch and love seats. The pest control report indicated live bed bugs were found in the "primary room (client A and B's bedroom)." The report also indicated the pest control company "vacuumed, Applied Conventional Treatment and RapidFreeze or steam. Follow up visit in 48 hours."</p> <p>-9/30/15 The pest control report indicated 10 live bed bugs and 8 dead bed bugs were found on a bed frame. The pest control report indicated 8 box springs were delivered. The pest control report indicated "Inspection/Encasements put on beds." The pest control report</p>			

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	<p>indicated the group home was treated/sprayed for bed bugs in the "guest rooms."</p> <p>-10/14/15 The group home bed rooms and living rooms were sprayed for bed bugs. The pest control report indicated Pyrethrins solution and Imidacloprid and Cyfluthrin solutions were used to rid the group home of bed bugs. The 10/14/15 pest control report indicated in the comments section: the pest control had checked the bedroom where bed bugs had been found. The comments section further indicated "...make sure all clothes are completely dried fully to kill any possible in clothing. check (sic) bedding daily to see if any remain and to see if brought in. House #823/rooms 1, 3, 4/Other Areas: found no signs but beds had bedding and clothes on them."</p> <p>11/21/14 The group home was treated for bed bugs. The pest control report indicated live bed bugs were found on a headboard of a bedroom and on two night stands. The pest control report indicated "Fecal Spots," Body Parts," or "shed Skins" were found on 2 bed frames, baseboards and a dresser. The pest control report indicated the facility was treated/sprayed for bed bugs.</p> <p>The facility's inservice training records</p>			

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	<p>were reviewed on 10/26/15 at 3:36 PM. The facility's 10/15/15 Course Attendance And Grade Sheet indicated facility staff were trained in regard to bed bugs on 10/15/15. The facility's 10/15/15 inservice record indicated 3 of the 7 facility staff (staff #1, #2 and #3) had not been trained in regard to bed bugs.</p> <p>The facility's 7/14 policy and procedures were reviewed on 10/26/15 at 2:55 PM. The facility's Protocol for Homes with Known history of Bedbug Activity indicated how the facility would treat clients' clothing and luggage when they returned from a home visit. The protocol also indicated the following:</p> <p>-..."Climb up interceptors shall be placed on the legs of all beds. The interceptors will be monitored by designated personnel.</p> <p>-Staff shall bring extra set of clothing and change just prior to leaving their shift placing clothing worn during their shift in a plastic bag.</p> <p>-After leaving, staff should then launder and dry the clothing worn as indicated above."</p> <p>An attached Pest Control Information form indicated facility staff are to sign</p>			

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	<p>they have been trained in regard to how to prevent the spread of bed bugs which indicated the following (not all inclusive):</p> <p>-Staff are to report if they should see a bed bug.</p> <p>-The Area Director is to be contacted if bed bugs are seen so the pest control company could be contacted.</p> <p>-"...I understand that the home is under contract with a national pest control company and it is expected that the home has been treated and the problem will not recur.</p> <p>-5. I understand that sustained heat kills bed bugs. Putting clothing through a cycle of the dryer on high heat should kill anything in there.</p> <p>-6. General information: It has been suggested on the internet that spraying the soles of shoes with a repellent containing DEET will repel bugs from shoes...."</p> <p>Interview with administrative staff #1 on 10/26/15 at 3:40 PM indicated 3 facility staff had not been trained in regard to bed bugs. Administrative staff #1 indicated one staff (staff #1) was on medical leave,</p>			

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	<p>staff #2 worked every other weekend and staff #3 did not attend the meeting.</p> <p>Administrative staff #1 indicated the facility had been treating the bed bugs since 9/28/15. Administrative staff indicated the group home had bed bugs in 11/14. When asked if facility staff were still changing clothes as indicated the facility's protocol, administrative staff #1 indicated she did not know.</p> <p>Administrative staff #1 indicated the pest control company had been back to the group home on 10/26/15 in the morning due to staff reporting another bed bug was found. Administrative staff #1 indicated the facility staff should be following its protocol and the pest control company was still treating the bed bugs using different methods/sprays.</p> <p>Administrative staff #1 indicated on 9/18/15, one of the clients had a red rash. Administrative staff #1 indicated the facility's nurse assessed one of the clients (client B) and determined it could be a bed bug bite. Administrative staff #1 indicated clients' mattresses and box springs had been replaced and client A and B's wooden beds had been replaced with a metal bed.</p> <p>Interview with staff #4 on 10/26/15 at 5:15 PM indicated the group home had bed bugs in client A and B's bedroom. Staff #4 indicated he was aware bed bugs</p>			

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	<p>had also been seen on the furniture in the living room. Staff #4 indicated he changed his clothes at the end of the shift to prevent taking the bed bugs home. Staff #4 indicated clients A, B, C, E, F and G washed their own clothing. Staff #4 indicated facility staff assisted client D to wash his clothes. When asked if client A washed her clothes in hot water and/or dried her clothes on high heat, staff #4 indicated he did not know for sure, but the client should.</p> <p>Interview with QIDP #1 on 10/26/15 at 5:32 PM indicated clients A and B's bedroom was the only bedroom the bed bugs had been found in. When asked if facility staff still needed to change clothes, QIDP #1 stated "No, that is for the clients to change when they come back from a home visit. QIDP #1 stated "We have advised them to change when they get home. I do." QIDP #1 indicated she had recently been told by facility staff a bed bug was found on the table in the living room. QIDP #1 indicated facility staff called the on-call staff and reported.</p> <p>This federal tag relates to complaint #IN00184464.</p> <p>9-3-1(a)</p>			

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W 0148 Bldg. 00	<p>483.420(c)(6) COMMUNICATION WITH CLIENTS, PARENTS &</p> <p>The facility must notify promptly the client's parents or guardian of any significant incidents, or changes in the client's condition including, but not limited to, serious illness, accident, death, abuse, or unauthorized absence.</p> <p>Based on interview and record review for 3 of 4 sampled clients (A, C and D), the facility failed to immediately/timely notify the clients' guardians of bed bugs found at the group home.</p> <p>Findings include:</p> <p>1. The facility's reportable incident reports and/or investigations were reviewed on 10/26/15 at 1:39 PM. The facility's 9/18/15 reportable incident report indicated "A staff member discovered what appeared to be a bed bug in the bedroom of [client B] and [client A]. The entire home will be inspected by a professional exterminator and arrangements have been made to have the home treated. DSA (Developmental Service Alternatives) will work with the exterminators to ensure the treatment is completed as scheduled and to ensure all other recommendations are followed to prevent spread and/or return of bed bugs." The reportable incident report indicated "Legal Guardian? N/A (Non-applicable)."</p>	W 0148	<p>W148</p> <p>The Residential Director who receives the report of anysuspected bed bug or any other reportable event will be responsible for notifying guardians for those whom are affected. It is the policy of the agency that these events are first reported immediately to the administrator to ensure any immediate protection needs are implemented. Following this contact the Residential Director or Administrator will immediately notify guardians. This notification will be documented per agency procedure. All Residential Directors who take calls for this facility will be trained on this procedure. The administrator will routinely review records of guardian contact to ensure notifications have occurred as required and are documented as required. Should there be any future concerns with bed bugs in the home, all guardians will be notified regardless of where they are found in the home.</p> <p>Responsible Party: Residential Director</p>	11/29/2015			

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	<p>Client A's record was reviewed on 10/26/15 at 3:29 PM. Client A's 5/12/14 Individual Support Plan (ISP-current one in record) indicated client A's mother was the client's legal guardian. Client A's record and/or ISP did not indicate the facility informed and/or documented they informed client A's guardian within 24 hours of the bed bug incident.</p> <p>Interview with client A's guardian on 10/27/15 at 7:04 PM indicated she was the legal guardian for client A. When asked when the legal guardian was informed of bed bugs being in client A's bedroom, Client A's guardian indicated client A had informed her of the bed bugs. When asked if the facility called her and informed her, client A's legal guardian stated someone from the group home called her "A day or two after" client A called her.</p> <p>2. The facility's reportable incident reports and/or investigations were reviewed on 10/26/15 at 1:39 PM. The facility's 10/13/15 reportable incident reports indicated an 10/13/15 Bureau of Developmental Disabilities Services (BDDS) filed incident indicated "[BDDS representative] received a notice from a consumer's guardian that this home has bedbugs. No incident report has yet been</p>			

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	<p>completed, therefore [BDDS representative] is completing this report (sic) on the instruction of DM District manager [name of DM]. [BDDS representative] followed up with DSA Res (Residential) Dir (Director) [Qualified Intellectual Disabilities Professional-QIDP #1] who informed that staff are scheduling with the pest control company to have treatment done...."</p> <p>Client C's record was reviewed on 10/20/15 at 4:52 PM. Client C's 9/10/14 ISP indicated client C had a guardian. Client C's ISP and/or record did not indicate the facility notified client C's guardian of the group home having bed bugs and/or being treated for bed bugs.</p> <p>Client D's record was reviewed on 10/26/15 at 3:54 PM. Client D's 3/20/15 ISP indicated the client had a guardian. The client's ISP and/or record did not indicate the facility had contacted client D's guardian to inform them of the group home having bed bugs and/or being treated for bed bugs.</p> <p>Interview with administrative staff #1 on 10/26/15 at 3:40 PM indicated she did not know if the facility had contacted client A, C and D's guardians in regard to the bed bugs at the group home.</p>			

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W 0189 Bldg. 00	<p>Administrative staff #1 indicated the QIDP should have contacted the guardians.</p> <p>Interview with client C's guardian on 10/30/15 at 11:53 AM, by phone, indicated she had not been informed the group home had bed bugs.</p> <p>Interview with client D's guardian on 10/26/15 at 1:38 PM, by phone, indicated she had not been informed the group home had bed bugs.</p> <p>This federal tag relates to complaint #IN00184464.</p> <p>9-3-2(a)</p> <p>483.430(e)(1) STAFF TRAINING PROGRAM The facility must provide each employee with initial and continuing training that enables the employee to perform his or her duties effectively, efficiently, and competently.</p> <p>Based on interview and record review for 2 of 4 sampled clients (A and B), the facility failed to ensure all staff were trained in regard to bed bugs.</p> <p>Findings include:</p> <p>The facility's reportable incident reports and/or investigations were reviewed on</p>	W 0189	The Residential Director will ensure that all staff who work in the home are trained on current practices regarding the prevention of recurrence of bed bugs, identification of a bed bug problem, and response to evidence of possible bugs. This training will be documented and provided to the administrator for review. The	11/29/2015			

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	<p>10/26/15 at 1:39 PM. The facility's reportable incident reports indicated the following (not all inclusive):</p> <p>-9/18/15 "A staff member discovered what appeared to be a bed bug in the bedroom of [client B] and [client A]. The entire home will be inspected by a professional exterminator and arrangements have been made to have the home treated. DSA (Developmental Service Alternatives) will work with the exterminators to ensure the treatment is completed as scheduled and to ensure all other recommendations are followed to prevent spread and/or return of bed bugs."</p> <p>-10/13/15 Bureau of Developmental Disabilities Services (BDDS) filed incident emailed to the facility indicated "[BDDS representative] received a notice from a consumer's guardian that this home has bedbugs. No incident report has yet been completed, therefore [BDDS representative] is completing this report (sic) on the instruction of DM District manager [name of DM]. [BDDS representative] followed up with DSA Res (Residential) Dir (Director) [Qualified Intellectual Disabilities Professional-QIDP #1] who informed that staff are scheduling with the pest control company to have treatment</p>		<p>Residential Director will ensure review of practices at monthly staff meetings to ensure the information remains current and salient. A training on current bed bug protocols/procedures will be included in new hire training for new staff who begin training in the home. All completed training will be provided to the administrator for review and to serve as verification that all staff are trained as required. Responsible Party: Residential Director</p>				

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 15G389		X2) MULTIPLE CONSTRUCTION A. BUILDING 00 B. WING _____		X3) DATE SURVEY COMPLETED 10/30/2015	
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W 0331 Bldg. 00	<p>done...."</p> <p>The facility's inservice training records were reviewed on 10/26/15 at 3:36 PM. The facility's 10/15/15 Course Attendance And Grade Sheet indicated facility staff were trained in regard to bed bugs on 10/15/15. The facility's 10/15/15 inservice record indicated 3 of the 7 facility staff (staff #1, #2 and #3) had not been trained in regard to bed bugs.</p> <p>Interview with administrative staff #1 on 10/26/15 at 3:40 PM indicated staff #1, #2 and #3 had not been trained in regard to bed bugs. Administrative staff #1 indicated staff #3 did not attend the meeting/training and staff #2 only worked every other weekend, but would need to be trained. Administrative staff #1 indicated staff #2 was on medical leave.</p> <p>This federal tag relates to complaint #IN00184464.</p> <p>9-3-3(a)</p> <p>483.460(c) NURSING SERVICES The facility must provide clients with nursing services in accordance with their needs. Based on interview and record review for 1 of 4 sampled clients (B), the facility's</p>	W 0331	The nurse will receive training to ensure she records anyassessments	11/29/2015			

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	<p>nursing services failed to document an assessment of a client concerning a possible bed bug bite.</p> <p>Findings include:</p> <p>The facility's reportable incident reports and/or investigations were reviewed on 10/26/15 at 1:39 PM. The facility's 9/18/15 reportable incident report indicated "A staff member discovered what appeared to be a bed bug in the bedroom of [client B] and [client A]. The entire home will be inspected by a professional exterminator and arrangements have been made to have the home treated. DSA (Developmental Service Alternatives) will work with the exterminators to ensure the treatment is completed as scheduled and to ensure all other recommendations are followed to prevent spread and/or return of bed bugs."</p> <p>Client B's record was reviewed on 10/26/15 at 3:32 PM. Client B's September 2015 Nurse Quarterly Review and/or record did not indicate client B had been assessed for a bed bug bite.</p> <p>Interview with administrative staff #1 on 10/26/15 at 3:40 PM indicated the facility had been treating the bed bugs since 9/28/15. Administrative staff indicated</p>		<p>she completes in a client's file per agency procedure. The nurse is responsible for completing this documentation. Any nursing documentation is available for review by the administrator. The administrator will routinely review records to ensure that assessments are properly documented.</p> <p>Responsible Party: Facility nurse</p>		

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	<p>the group home had bed bugs in 11/14. Administrative staff #1 indicated on 9/18/15, one of the clients had a red rash. Administrative staff #1 indicated the facility's nurse assessed one of the clients (client B) and determined it could be a bed bug bite.</p> <p>Interview with LPN #1 on 10/26/15 at 5:31 PM indicated she had been to the group home and had assessed client B in regard to a red/rash area. LPN #1 indicated she had suspected it was a bed bug bite. LPN #1 indicated she did not document her assessment of client B.</p> <p>This federal tag relates to complaint #IN00184464.</p> <p>9-3-6(a)</p>			