

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 15G758		X2) MULTIPLE CONSTRUCTION A. BUILDING 00 B. WING _____		X3) DATE SURVEY COMPLETED 07/19/2013	
NAME OF PROVIDER OR SUPPLIER TRADEWINDS SERVICES INC				STREET ADDRESS, CITY, STATE, ZIP CODE 665 E BURRELL DR CROWN POINT, IN 46307			
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W000000	<p>This visit was for a fundamental recertification and state licensure survey.</p> <p>Dates of survey: July 15, 16, 17, 18 and 19, 2013.</p> <p>Facility number: 011988 Provider number: 15G758 AIM number: 200952910</p> <p>Surveyor: Amber Bloss, QIDP</p> <p>The following federal deficiencies also reflect state findings in accordance with 460 IAC 9.</p> <p>Quality review completed July 30, 2013 by Dotty Walton, QIDP.</p>			W000000			

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

TITLE

(X6) DATE

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

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W000231	<p>483.440(c)(4)(iii) INDIVIDUAL PROGRAM PLAN</p> <p>The objectives of the individual program plan must be expressed in behavioral terms that provide measurable indices of performance.</p> <p>Based on record review and interview, the facility failed to develop client individual program plan objectives in measurable terms in regards to time frames, prompt levels, and percentage of completion necessary for achievement for 2 of 4 clients (#1 and #2).</p> <p>Findings include:</p> <p>1) On 7/16/13 at 12:42 PM, record review for client #1 was conducted. The QIDP (Qualified Intellectual Disabilities Professional) monthly reviews for March and April 2013 were reviewed and indicated client #1 had an ISP (Individual Service Plan) dated 4/30/13 with goals in the areas of personal health, functional living, and money management. The goals did not indicate the time frames, prompt levels, and percentage of completion necessary for client #1 to achieve the following goals:</p> <p>-Client #1 had a goal to "learn the name and purpose of PRN (given as needed) medications" three times weekly.</p> <p>-Client #1 had a goal to "will state his address and phone number."</p> <p>-Client #1 had a goal to "participate in some form of exercise" for five times weekly.</p> <p>-Client #1 had a goal to "learn to tell time by the hour."</p> <p>-Client #1 had a goal to "learn single digit addition</p>	W000231	<p>Client #6 & 2, the goal listed in the ISP has been updated (8/13/13) to reflect a measurable outcome of the consumer's performance. There is a goal tracking sheet being developed & will be effective 9/1/13. The QDDP is responsible for developing goals/objectives that indicates the time frames; the various prompt levels & the percentage of all in which the goal is completed. The QDDP is responsible for making sure the goals for all consumers are measurable of the consumer(s) performance. When the ISP is completed by the QDDp, it will be reviewed by the Residential Coordinator for quality control & to ensure that all goals are measurable. The group home manager is responsible for monitoring staff & ensuring that the consumer(s) goals are being implemented accordingly to the ISPs. The QDDP is responsible for ensuring that all updated documents are in place & that if a consumer has reached his/her goal that a new goal has been written, in place & is being implemented. The QDDP is also responsible for ensuring that the new goals/objectives are measurable & indicates the time frames, various prompt levels &</p>	09/01/2013
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	<p>problems."</p> <p>2) On 7/16/13 at 12:42 PM, record review for client #2 was conducted. The QIDP (Qualified Intellectual Disabilities Professional) monthly reviews indicated client #2 had an ISP dated 2/18/13 with goals in the areas of money management, domestic skills, personal health, and safety. The goals did not indicate time frames, prompt levels, and percentage of completion necessary for client #2 to achieve the following goals:</p> <p>-Client #2 had a goal to "learn to write a check."</p> <p>-Client #2 had a goal to "learn to check the oil, tire pressure, and windshield fluids on the group home van."</p> <p>-Client #2 had a goal to "learn the name and purpose of PRN (given as needed) medications."</p> <p>-Client #2 had a goal to "learn the emergency manual."</p> <p>-Client #2 had a goal to "participate in some form of exercise."</p> <p>Interview with the QIDP on 7/16/13 at 12:42 PM indicated he didn't develop all the goals to include measurable objectives.</p> <p>9-3-4(a)</p>		<p>the percentage of completion of the goal. Additional documentation will be attached.</p>				

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W000331	<p>483.460(c) NURSING SERVICES</p> <p>The facility must provide clients with nursing services in accordance with their needs. Based on interview and record review, the facility's nursing services failed to ensure the primary care physician/PCP was notified of recommendations made by the dietician for 1 of 4 sampled clients (client #2).</p> <p>Findings include:</p> <p>During group home observations on 7/15/13 beginning at 4:58 PM, client #2 was observed to eat dinner. Client #2 ate a regular diet at dinner which consisted of corn on the cob, spinach, sliced pork, milk and water.</p> <p>During group home observations on 7/16/13 beginning at 6:09 AM, client #2 was observed to eat breakfast. Client #2 ate a regular diet which consisted of cereal, English muffins, oatmeal, coffee, and milk.</p> <p>On 7/16/13 at 9:29 AM, record review indicated client #2's diagnosis included, but was not limited to, hypertriglyceridemia (high blood levels of triglycerides). Client #2's physician order dated 7/1/13 indicated an order for regular diet. Client #2's physician order indicated an order dated 4/23/10 for four capsules daily of Lovaza which has an indicated use for the reduction of LDL (low-density lipoprotein), total cholesterol, triglycerides, and apolipoprotein B levels.</p> <p>Client #2's (reviewed 7/16/13 at 9:29 AM) annual nutritional assessment dated 1/16/13 indicated client #2 had a 5 lbs. (pounds) weight loss for the year which was described as "insignificant." The dietician indicated client #2 remained 40 lbs. overweight. The dietician indicated the "last</p>	W000331	For client #2, the residential nurse faxed the dietitian's recommendation to the physician on 7/22/13 & was given the change of diet order to low fat/low carbohydrate. On 7/29/13, the residential nurse sent out a memo to the Burrell Group Home, stating, due to high cholesterol & triglyceride levels, client #2 diet has been changed to a low fat/low carbohydrate diet. The residential nurse also stated in memo other foods to avoid as far as extras are soda with sugar & starches as these causes an elevation of the triglycerides. The residential nurse is responsible for notifying the physicians of any & all recommendations made by the contracted dietitian for Tradewinds Services. A form has been developed by the residential nurse on: 7/22/13 to provide documentation of recommendation(s) made from the physician & the dietitian for Tradewinds consumer. The form will also provide documentation of contact made with the residential nurse & physician. The residential nurse is responsible for reviewing all documentation & for the recommendation(s) of each consumer(s) diet per dietitian & communicating that information to the physician & ensuring that the recommendation(s) are put in	08/01/2013			

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	<p>dietary recommendation for (change) to lowfat diet Rx (prescription) was not done." The dietician indicated client #2 remained obese with a history of elevated triglycerides. The dietician recommended a "low fat diet" for one year.</p> <p>Review (7/16/13 at 9:29 AM) of client #2's bloodwork drawn on 1/17/13 indicated client #2 had triglycerides in the "high risk" range at 206. The high risk range was defined as counts between 200-499.</p> <p>Client #2's (reviewed 7/16/13 at 9:29 AM) annual physical exam dated 2/11/13 indicated Client #2 weighed 199 lbs. Client #2's primary care physician made no mention of the dietary recommendations and continued Client #2 on regular diet.</p> <p>Client #2's (reviewed 7/16/13 at 9:29 AM) annual nursing evaluation dated 2/18/13 indicated client #2 "has dropped approximately 8 lbs., but remains 30-40 lbs over his ideal weight." The evaluation recommended "check with [primary care physician] if diet should be changed to low fat as recommended by dietician. Last year recommended [client #2] stay on a regular diet, however Lovaza was started for elevated cholesterol levels." Client #2's "90 Day Nursing Evaluation" dated 4/30/13 indicated client #2 weighed 196 lbs.</p> <p>Interview with the Residential Nurse (RN) on 7/16/13 at 12:15 PM indicated the facility's nursing staff would have normally faxed recommendations to the PCP but if they did not hear back from the PCP, they assumed the PCP declined the recommendations. The RN indicated the facility did not have documentation to indicate client #2's PCP was informed of the annual dietary recommendations of a low fat diet.</p>		place & are being implemented. Additional documents will be attached.	

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	9-3-6(a)			