

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 15G579	X2) MULTIPLE CONSTRUCTION A. BUILDING 00 B. WING _____	X3) DATE SURVEY COMPLETED 09/07/2012
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NAME OF PROVIDER OR SUPPLIER MCSHERR INC - NEW CASTLE	STREET ADDRESS, CITY, STATE, ZIP CODE 496 DENNY DR NEW CASTLE, IN 47362
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W0000	<p>This visit was for the investigation of complaint #IN00115612.</p> <p>Complaint #IN00115612 - Substantiated, Federal and state deficiencies related to the allegation are cited at W148, W149, and W153.</p> <p>Dates of survey: September 4, 5, 6, and 7, 2012</p> <p>Surveyor: Kathy Craig, Medical Surveyor III</p> <p>Facility Number: 001093 Provider Number: 15G579 AIMS Number: 100239970</p> <p>These deficiencies also reflect state findings in accordance with 460 IAC 9.</p> <p>Quality Review was completed on 9/10/12 by Tim Shebel, 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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W0148	<p>483.420(c)(6) COMMUNICATION WITH CLIENTS, PARENTS & 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 record review and interview, the facility failed for 1 of 3 sampled clients (client A) by not notifying client A's mother of 1 of 1 allegation of sexual abuse reviewed.</p> <p>Findings include:</p> <p>Review on 9/4/12 at 3:30 PM of the facility's records included BDDS (Bureau of Developmental Disabilities) incident reports. One allegation of sexual abuse at the workshop dated 8/24/12 indicated the following: A male client (client Y) reported to workshop trainer he saw two gay guys in the men's bathroom. He said one client was sucking on another's penis at the urinal. He pointed out the two clients (client A and client X-who was from another agency). Client X was interviewed and said client A pinched his penis. Client X said this has happened before but he never told a work trainer. Client A could not be interviewed because of his low verbal skills and comprehension. Client A's work trainer said client A was in the bathroom at the</p>	W0148	<p>After the exit interview with the State Surveyor was completed, the McSherr Social Worker did inform the client's mother of the allegation and the conclusion drawn from the investigation conducted by Hillcroft. The mother did tell the social worker that she wished to inform his sister in person. In the future, the McSherr social worker will contact the guardian, parent, family member or advocate as soon as she is aware of an allegation to inform them of any allegation of any abuse and again at the conclusion of the investigation to relay to them the outcome of the investigation. This step of notification has been added to the McSherr Vulnerable Client Abuse and/or Neglect Reporting System. Exhibit A If the social worker is not available, the QMRP or a member of the home management team will make the contact.</p>	09/10/2012

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	<p>time this incident was to have occurred.</p> <p>There was no evidence client A's mother was notified of this incident. A follow-up BDDS report dated 8/30/12 indicated the workshop was unable to substantiate the allegation of sexual abuse had occurred.</p> <p>Interview on 9/7/12 at 9:25 AM with the Social Service Director indicated client A's mother, who was also client A's advocate along with client A's sister, was not notified of this allegation of sexual abuse.</p> <p>9-3-2(a) This tag is related to complaint #IN00115612.</p>			

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W0149	<p>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 failed for to implement their abuse/neglect policy for 1 of 3 sampled clients (client A) by not doing their own internal investigation regarding an allegation of sexual abuse at the workshop.</p> <p>Findings include:</p> <p>Review on 9/4/12 at 3:30 PM of the facility's records included BDDS (Bureau of Developmental Disabilities) incident reports. One allegation of sexual abuse at the workshop dated 8/24/12 indicated the following: A male client (client Y) reported to workshop trainer he saw two gay guys in the men's bathroom. He said one client was sucking on another's penis at the urinal. He pointed out the two clients (client A and client X-who was from another agency). Client X was interviewed and said client A pinched his penis. Client X said this has happened before but he never told a work trainer. Client A could not be interviewed because of his low verbal skills and comprehension. Client A's work trainer said client A was in the bathroom at the time this incident was to have occurred.</p>	W0149	<p>On 8/24/2012, the McSherr QMRP contacted Hillcroft workshop and advised them that McSherr needed to be notified immediately when any allegation of abuse such as this occurred. Also on 8/24/2012, the McSherr QMRP contacted the facility QMRP of client Y, the client who reported the alleged abuse to inquire of his honesty. That facility QMRP stated that client Y had been noted to tell falsehoods in the past so was not reliable. The McSheer QMRP talked to the facility QMRP of client X, the alleged aggressor, who stated that there had never been any reports of inappropriate sexual conduct by this client. He stated also that he had always known client X to be truthful. No further investigation was done by McSherr as the QMRP received the report from Hillcroft on 8/24/2012 and did talk with the program supervisor of that agency. In the future, if any allegation of abuse is made, the social worker, or in her absence, the QMRP or a member of the home management team will conduct an investigation at the workshop as soon as McSherr is made aware of the allegation.</p>	09/07/2012	

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	<p>A follow-up BDDS report dated 8/30/12 indicated the workshop was unable to substantiate the allegation of sexual abuse had occurred. There was no investigation from McSherr available for review.</p> <p>Review on 9/4/12 at 5:15 PM of the facility's "Abuse, Neglect, and Exploitation" policy (not dated), indicated McSherr would facilitate "prompt internal investigation of suspected abuse and/or neglect of vulnerable clients as necessary."</p> <p>Interview on 9/4/12 at 4:05 PM with the QMRP (Qualified Mental Retardation Professional) indicated McSherr did not do an investigation into the above-mentioned allegation because the workshop (who is an outside agency) did an investigation since it happened there.</p> <p>9-3-2(a) This tag is related to complaint #IN00115612.</p>				

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W0154	<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, the facility failed for 1 of 3 sampled clients (client A) by not doing their own internal investigation regarding an allegation of sexual abuse at the workshop.</p> <p>Findings include:</p> <p>Review on 9/4/12 at 3:30 PM of the facility's records included BDDS (Bureau of Developmental Disabilities) incident reports. One allegation of sexual abuse at the workshop dated 8/24/12 indicated the following: A male client (client Y) reported to workshop trainer he saw two gay guys in the men's bathroom. He said one client was sucking on another's penis at the urinal. He pointed out the two clients (client A and client X-who was from another agency). Client X was interviewed and said client A pinched his penis. Client X said this has happened before but he never told a work trainer. Client A could not be interviewed because of his low verbal skills and comprehension. Client A's work trainer said client A was in the bathroom at the time this incident was to have occurred. A follow-up BDDS report dated 8/30/12 indicated the workshop was unable to</p>	W0154	The McSherr QMRP did conact the residential QMRP for both client Y and X to inquire about their previous conduct concerning inapprpriate sexual behavior and their past history of truthfulness. Client Y was reported to have questionable truthfulness. Client X was reported to be a reliable source of information. His residential QMRP stated that he had no history of inappropriate sexual behavior. An invesstigation was not done at workshop due to the fact that it was late Friday and all clients at the workshop had left for the day. Workshop had conducted an investigation on Friday of the incident. In the future, McSherr will conduct an investigation the day of the incident. If one of the clients involved has left for the day, McSherr will investigate the next day he is at workshop. All investigations will bse completed as soon as possible in whatever setting they occur.	09/25/2012			

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	<p>substantiate the allegation of sexual abuse had occurred. There was no investigation from McSherr available for review.</p> <p>Interview on 9/4/12 at 4:05 PM with the QMRP (Qualified Mental Retardation Professional) indicated McSherr did not do an investigation into the above-mentioned allegation because the workshop (who is an outside agency) did an investigation since it happened there.</p> <p>9-3-2(a) This tag is related to complaint #IN00115612.</p>			