

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 15G328	X2) MULTIPLE CONSTRUCTION A. BUILDING 00 B. WING _____	X3) DATE SURVEY COMPLETED 02/08/2016
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NAME OF PROVIDER OR SUPPLIER TANGRAM INC	STREET ADDRESS, CITY, STATE, ZIP CODE 1107 GREENBROOK DR GREENFIELD, IN 46140
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W 0000 Bldg. 00	<p>This visit was for a fundamental recertification and state licensure survey.</p> <p>Dates of Survey: February 1, 2, 3, 4, 5, 8, 2016</p> <p>Provider Number: 15G328 Aims Number: 100243990 Facility Number: 000846</p> <p>These deficiencies also reflect state findings in accordance with 460 IAC 9. Quality Review of this report completed by #15068 on 2/17/16.</p>	W 0000		
W 0126 Bldg. 00	<p>483.420(a)(4) PROTECTION OF CLIENTS RIGHTS</p> <p>The facility must ensure the rights of all clients. Therefore, the facility must allow individual clients to manage their financial affairs and teach them to do so to the extent of their capabilities.</p> <p>Based on record review and interview the facility failed for 1 of 3 sampled clients (#2) to allow spending opportunities for client #2.</p> <p>Findings include:</p> <p>The client financial record book and cash</p>	W 0126	Tangram clients have the opportunity to have their monthly spending money direct deposited into their bank accounts so that they have immediate access to these funds. Some clients choose to receive a paper check so that they can take it to the bank themselves. Tangram clients are given a choice as to how they would like to receive	03/09/2016

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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W 0189 Bldg. 00	<p>on hand (at the group home) entrusted to the facility were reviewed on 2/3/16 at 11:20a.m. The record indicated client #2 had 65 cents available in her folder. Client #2's folder also contained two uncashed checks. The checks were: 1) dated December 2015 for \$52; 2) dated January 2016 for \$52. Client #2's folder indicated her most recent money transactions were during 11/15. Client #2's 12/15 and 1/16 ledgers showed no money transactions.</p> <p>Staff #3 was interviewed on 2/3/16 at 1:54p.m. Staff #3 indicated client #2 should have the opportunity to spend her money. Staff #3 indicated the facility had not provided client #2 the opportunity to spend her money during the past 2 months.</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. Based on observation, record review and interview, the facility failed for 5 of 5</p>	W 0189	<p>their funds. Even for those who have their spending money direct deposited, the clients still have appropriate financial goals related to the use and/or management of their own funds. This client has now chosen to have her funds direct deposited into her bank account so that she can have access to those funds. This direct deposit process will be finalized prior to the deadline. For those clients who continue to receive a paper check, the Program Manager will ensure that these checks are cashed within ten (10) days from being received to ensure that the clients have access to their funds and opportunities to spend their money. Tangram's QIDP will ensure that clients maintain appropriate financial goals and will work with program staff and the Program Manager to ensure that all clients have opportunities to spend their money. A member of the compliance team will audit the financial logs to ensure that any paper checks are being cashed/deposited within the required time frame.</p> <p>Moving forward, Tangram will be ordering sharps disposal</p>	03/07/2016	

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	<p>clients (#1, #2, #3, #4, #5) residing in the group home to ensure facility staff had been retrained on the securing and disposal of sharps/biohazardous containers.</p> <p>Findings include:</p> <p>An observation was done at the group home on 2/1/16 from 4:32p.m. to 6:20p.m. At 5:02p.m., an environmental check of the back patio was done for clients #1, #2, #3, #4 and #5. On the patio was a plastic tote container. The container was open and had standing water in it. The container had 6 full (used) sharps/biohazard containers. Staff were made aware of the containers and immediately had them removed and taken to the facility office on 2/1/16.</p> <p>Professional staff #1 was interviewed on 2/1/16 at 5:32p.m. Staff #1 indicated the tote contained full used sharps/biohazard containers. Staff #1 indicated the containers had been placed on the patio during a heat cleaning of the home back in December 2015 and had not been brought back into the group home or taken for disposal. Staff #1 indicated the containers should not have been placed on the patio and should have been kept secured. Staff #1 indicated the used sharps/biohazard containers should not</p>		<p>containers from www.sharpsdisposal.com. This company provides multiple size containers to choose from and includes the proper packaging with a return shipping label. Tangram will order two (2) containers for each site that requires sharps disposal. The company has an option to automatically send you a new container when a full one is mailed in and received. Having this automatic option and ordering two (2) containers up front ensures that each site will not be without proper sharps disposal at any time. We will also be purchasing a bracket from the company as well so the containers can be secured to the wall. When the containers are full, staff will be able to put them in the return box and apply the label. Then, they can mail them in for destruction. Tangram's group home RN and the Program Manager will check the Sharps containers on a regular basis to ensure that they are being replaced with a new bin when one (1) bin becomes full and that the full bins are being shipped out of the home. This process will be utilized in all Tangram group homes. Tangram's group home RN will conduct a retraining on Tangram's Blood Borne Pathogen Exposure Control Plan policy, which includes information about proper Sharps disposal, at the group home on March 1, 2016.</p>	

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	<p>be stored at the group home and should be taken to the office/nurse. The containers are disposed of from there (office). Staff #1 indicated there shouldn't have been 6 used containers at the home. Staff #1 indicated on 2/3/16 at 1:54p.m. that all group home and professional staff were in need of retraining on storage and disposal of biohazardous materials.</p> <p>The facility's 3/4/06 "Bloodborne Pathogens Exposure Control Plan" was reviewed on 2/3/16 at 7p.m. The plan indicated: the facility is responsible to "ensure that employees whose duties involve occupational exposure to bloodborne pathogens are provided with proper training." The employees are responsible for "compliance with all work practices controls that have been established." The plan indicated: "Sharps containers are located in the nursing office and individual locations where a need has been identified. Biohazardous waste containers are located in the nursing office and individual locations where a need has been identified. The nurses and program managers are responsible for inspecting the sharps containers and biohazardous waste containers and contacting the agency nurse when waste removal is needed. Sharps containers are to be replaced when 2/3 full or yearly." The plan</p>		All staff in the home will be retrained before March 7, 2016 and will be required to take a post-test on the related materials.				

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W 0312 Bldg. 00	<p>indicated the facility contracts with a Biohazardous waste removal company for removal of contaminated waste.</p> <p>Professional staff #2 (nurse) was interviewed on 2/4/16 at 10:06a.m. Staff #2 indicated the containers are to be kept secured. Staff #2 indicated when containers are full they are to be brought to the office and are disposed of from the office. Staff #2 indicated there shouldn't have been 6 full containers at the group home. Staff #2 indicated the nurse and home manager were responsible to monitor the sharps/biohazardous containers.</p> <p>9-3-3(a)</p> <p>483.450(e)(2) DRUG USAGE Drugs used for control of inappropriate behavior must be used only as an integral part of the client's individual program plan that is directed specifically towards the reduction of and eventual elimination of the behaviors for which the drugs are employed.</p>			

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	<p>Based on record review and interview, the facility failed for 1 of 2 sampled clients (#1) who took behavior control drugs, to ensure the behavior control medication was part of the client's individual behavior support plan (BSP) which included a plan of reduction.</p> <p>Findings include:</p> <p>Review of the record of client #1 was done on 2/3/16 at 12:52p.m. Client #1's 10/16/15 BSP indicated client #1's diagnoses included, but were not limited to, Intermittent Explosive Disorder, Obsessive/Compulsive Behavior and Organic Personality Disorder. Physician's orders on 12/2/15 indicated client #1 received the behavior control medications Geodon and Lexapro. The BSP failed to include the behavior control medications in a plan which included withdrawal criteria.</p> <p>Interview of professional staff #3 on 2/3/16 at 1:54p.m. indicated client #1 did not have her current behavior control medications addressed in a plan of reduction.</p> <p>9-3-5(a)</p>	W 0312	<p>For this particular client, the plan has already been updated and it is located in the home.</p> <p>Tangram's group home behavior clinician is directed with oversight from a Master's Level clinician, Tangram's Director of Behavior Health Services. This Director will meetwith the group home behavior clinician on a monthly basis. They will start tracking for every group home client if there is a medication change and what needs updated in the plan. They will then develop the medication reduction plan for those clients who do not have a psychiatric diagnosis related to the prescribed psychotropic medications.</p> <p>This process will apply to all Tangram group home clients.</p>	03/07/2016

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W 0454 Bldg. 00	<p>483.470(l)(1) INFECTION CONTROL</p> <p>The facility must provide a sanitary environment to avoid sources and transmission of infections.</p> <p>Based on observation, record review and interview, the facility failed for 5 of 5 clients (#1, #2, #3, #4, #5) residing in the facility, to ensure a sanitary environment, by the placement of full (used) sharps/biohazard containers unsecured on the group home back patio, accessible to the clients.</p> <p>Findings include:</p> <p>An observation was done at the group home on 2/1/16 from 4:32p.m. to 6:20p.m. At 5:02p.m., an environmental check of the back patio was done for clients #1, #2, #3, #4 and #5. On the patio was a plastic tote container. The container was open and had standing water in it. The container had 6 full (used) sharps/biohazard containers. Staff were made aware of the containers and immediately had them removed and taken to the facility office on 2/1/16.</p> <p>Professional staff #1 was interviewed on 2/1/16 at 5:32p.m. Staff #1 indicated the tote contained full used sharps/biohazard containers. Staff #1 indicated the containers had been placed on the patio during a heat cleaning of the home back</p>	W 0454	<p>Moving forward, Tangram will be ordering sharps disposal containers from www.sharpsdisposal.com. This company provides multiple size containers to choose from and includes the proper packaging with a return shipping label.</p> <p>Tangram will order two (2) containers for each site that requires sharps disposal. The company has an option to automatically send you a new container when a full one is mailed in and received. Having this automatic option and ordering two (2) containers up front ensures that each site will not be without proper sharps disposal at any time. We will also be purchasing a bracket from the company as well so the containers can be secured to the wall. When the containers are full, staff will be able to put them in the return box and apply the label. Then, they can mail them in for destruction. Tangram's group home RN and the Program Manager will check the Sharps containers on a regular basis to ensure that they are being replaced with a new bin when one (1) bin becomes full and that the full bins are being shipped out of the home. This process will be utilized in all Tangram group</p>	03/07/2016

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	<p>in December 2015. The containers had not been brought back into the group home or taken for disposal. Staff #1 indicated the containers should not have been placed on the patio and should have been kept secured. Staff #1 indicated the used sharps/biohazard containers should not be stored at the group home and should be taken to the office/nurse. The containers are disposed of from there (office). Staff #1 indicated there shouldn't have been 6 used containers at the home.</p> <p>The facility's 3/4/06 "Bloodborne Pathogens Exposure Control Plan" was reviewed on 2/3/16 at 7p.m. The plan indicated: the facility is responsible to "ensure that employees whose duties involve occupational exposure to bloodborne pathogens are provided with proper training." The employees are responsible for "compliance with all work practices controls that have been established." The plan indicated: "Sharps containers are located in the nursing office and individual locations where a need has been identified. Biohazardous waste containers are located in the nursing office and individual locations where a need has been identified. The nurses and program managers are responsible for inspecting the sharps containers and biohazardous waste containers and contacting the agency</p>		<p>homes. Tangram's group home RN will conduct a retraining on Tangram's Blood Borne Pathogen Exposure Control Plan policy, which includes information about proper Sharps disposal, at the group home on March 1, 2016. All staff in the home will be retrained before March 7, 2016 and will be required to take a post-test on the related materials.</p>		

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	<p>nurse when waste removal is needed. Sharps containers are to be replaced when 2/3 full or yearly." The plan indicated the facility contracts with a Biohazardous waste removal company for removal of contaminated waste.</p> <p>Professional staff #2 (nurse) was interviewed on 2/4/16 at 10:06a.m. Staff #2 indicated the containers are to be kept secured. Staff #2 indicated when containers are full they are to be brought to the office and are disposed of from the office. Staff #2 indicated there shouldn't have been 6 full containers at the group home. Staff #2 indicated the nurse and home manager were responsible to monitor the sharps/biohazardous containers.</p> <p>9-3-7(a)</p>			