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| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION |  | X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:<br><br>15G721 |   | X2) MULTIPLE CONSTRUCTION<br>A. BUILDING 00<br>B. WING _____                 |  | X3) DATE SURVEY COMPLETED<br><br>01/20/2012 |  |
| NAME OF PROVIDER OR SUPPLIER<br><br>AWS          |  |   |   | STREET ADDRESS, CITY, STATE, ZIP CODE<br>6835 W CR 950 N<br>SCIPIO, IN 47273 |  |   |  |
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| W0000  | <p>This visit was for an annual fundamental recertification and state licensure survey.</p> <p>Dates of Survey: January 17, 18 and 19, 2012.</p> <p>Surveyor: Dotty Walton, Medical Surveyor III</p> <p>Facility Number: 004492<br/>AIM Number: 200512660<br/>Provider Number: 15G182</p> <p>The following deficiencies reflect state findings in accordance with 460 IAC 9.</p> <p>Quality Review completed on 1/26/12 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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| W0262  | <p>The committee should review, approve, and monitor individual programs designed to manage inappropriate behavior and other programs that, in the opinion of the committee, involve risks to client protection and rights.</p> <p>Based on record review and interview for 1 of 2 sampled clients who used drugs for behavioral management, (#1), the facility failed to ensure the specially constituted committee (Human Rights Committee) had reviewed all behavior management drugs used by client #1 including their possible side effects.</p> <p>Findings include:</p> <p>Client #1's record was reviewed on 1/19/12 at 11:00 AM. The client's 12/2011 physician's orders indicated client #1 received the following psychotropic medications: Abilify (antipsychotic) 5 mg. (milligrams) daily, clonazepam (anti-anxiety) 3 mg. daily, fluvoxamine maleate (anti-depressant) 50 mg. twice daily, Seroquel (anti-psychotic) 100 mg. once daily, and Desyrel (antidepressant) 150 mg. once daily. The record review indicated client #1 had a behavior support plan/BSP dated 10/26/11. The behavior plan indicated the medications Abilify, clonazepam, and Desyrel were used for compulsive behaviors, rubbing her scalp and wandering/leaving the dwelling/AWOL.</p> | W0262   | All AWS behavior plans will include a current list of client medications and potential side effects, and all current behavior plans will be sent to a Human Rights Committee with all current medications listed. The plan cited in this survey will be updated, reviewed and approved by HRC. The AWS QMRP will insure that all Behavior Plans contain current medications and side effects when sent to the HRC. The consulting pharmacist working with AWS will review all client medications and physician orders quarterly. The AWS Nurse will insure that the pharmacist consults are completed. AWS group homes will have quarterly compliance checklists completed that will include the monitoring of Behavior Plans and Physician orders, which will be reviewed by the AWS Management Team including the AWS Residential Director to ensure and monitor compliance. The AWS QMRP will also send Behavior Plans to the AWS Residential Director for review to ensure and monitor compliance. | 02/19/2012   |  |   |  |

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|  | <p>The record contained a review by the specially constituted committee (Human Rights Committee/HRC) dated 10/02/11. The HRC had considered the 10/26/11 BSP but the BSP did not contain the medications fluvoxamine maleate and Seroquel. The BSP did not contain the side effects of the above mentioned psychotropic medications used for client #1's behaviors.</p> <p>Qualified Intellectual Disabilities Professional/QIDP #1 was interviewed regarding client #1's behavioral management medications on 1/19/2012 at 12:30 PM. QIDP #1 was unable to provide evidence the consulting pharmacist had assessed the possible drug related interactions prior to the implementation of each medication.</p> <p>9-3-4(a)</p> |   |   |                      |   |

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| W0312  | <p>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. Based on record review and interview for 1 of 2 sampled clients who used drugs for behavioral management, (#1), the facility failed to ensure all drugs used for behavioral management were contained in the client's behavior/program plans.</p> <p>Findings include:</p> <p>Client #1's record was reviewed on 1/19/12 at 11:00 AM. The client's 12/2011 physician's orders indicated client #1 received the following psychotropic medications: Abilify (antipsychotic) 5 mg. (milligrams) daily, clonazepam (anti-anxiety) 3 mg. daily, fluvoxamine maleate (anti-depressant) 50 mg. twice daily, Seroquel (anti-psychotic) 100 mg. once daily, and Desyrel (antidepressant) 150 mg. once daily. The record review indicated client #1 had a behavior support plan/BSP dated 10/26/11. The behavior plan indicated the medications Abilify, clonazepam, and Desyrel were used for compulsive behaviors, rubbing her scalp and wandering/leaving the dwelling/AWOL. The medications fluvoxamine maleate and Seroquel were not mentioned in the</p> | W0312   | All AWS behavior plans will include a current list of medications and potential side effects, and all current behavior plans will be sent to a Human Rights Committee with all current medications listed. The plan cited in this survey will be updated, reviewed, and approved by HRC. The AWS QMRP will insure that all Behavior Plans contain current medications and side effects when sent to the HRC. The consulting pharmacist working with AWS will review all client medications and physician orders quarterly. The AWS Nurse will insure that the pharmacist consults are completed. AWS group homes will have quarterly compliance checklists completed that will include the monitoring of Behavior Plans and Physician orders, which will be reviewed by the AWS Management Team including the AWS Residential Director to ensure and monitor compliance. The AWS QMRP will also send Behavior Plans to the AWS Residential Director for review to ensure and monitor compliance. | 02/19/2012   |  |   |  |

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|  | <p>BSP.</p> <p>Interview with Qualified Intellectual Disabilities Professional/QIDP #1 on 1/19/2012 at 12:30 PM indicated the medications fluvoxamine maleate and Seroquel were used for behavior control for client #1 physical aggression/compulsive behaviors of rubbing scalp/wandering) but they had been inadvertently left out of the 10/26/11 BSP.</p> <p>9-3-5(a)</p> |   |   |                      |   |

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| W0314  | <p>Drugs used for control of inappropriate behavior must be monitored closely in conjunction with the physician and the drug regimen review requirement at §483.460(j). Based on record review and interview for 1 of 2 sampled clients who used drugs for behavioral management, (#1), the facility failed to ensure the side effects associated with the drugs and the potential drug interactions were assessed prior to the implementation of the drugs.</p> <p>Findings include:</p> <p>Client #1's record was reviewed on 1/19/12 at 11:00 AM. The client's 12/2011 physician's orders indicated client #1 received the following psychotropic medications: Abilify (antipsychotic) 5 mg. (milligrams) daily start date was listed as 5/23/11, clonazepam (anti-anxiety) 3 mg. daily start date listed as 10/14/11, fluvoxamine maleate (anti-depressant) 50 mg. twice daily with a start date listed as 8/10/09, Seroquel (anti-psychotic) 100 mg. once daily with start date listed as 4/19/11, and Desyrel (antidepressant) 150 mg. once daily with a start date listed as 8/10/09. The record review indicated client #1 had a behavior support plan/BSP dated 10/26/11. The BSP did not contain information concerning the side effects of each medication nor was there evidence the consulting pharmacist had assessed</p> | W0314   | All AWS behavior plans will include a current list of medications and potential side effects, and all current behavior plans will be sent to a Human Rights Committee with all current medications listed. The plan cited in this survey will be updated, reviewed, and approved by the HRC. The AWS QMRP will insure that all Behavior Plans contain current medications and side effects when sent to the HRC. The consulting pharmacist working with AWS will review all client medications and physician orders quarterly. The AWS Nurse will insure that the pharmacist consults are completed. AWS group homes will have quarterly compliance checklists completed that will include the monitoring of Behavior Plans and Physician orders, which will be reviewed by the AWS Management Team including the AWS Residential Director to ensure and monitor compliance. The AWS QMRP will also send Behavior Plans to the AWS Residential Director to ensure and monitor compliance. | 02/19/2012   |  |   |  |

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|  | <p>the medications for potential drug related interactions prior to the implementation of the medications.</p> <p>Qualified Intellectual Disabilities Professional/QIDP #1 was interviewed regarding client #1's behavioral management medications on 1/19/2012 at 12:30 PM. QIDP #1 was unable to provide evidence the consulting pharmacist had assessed the possible drug related interactions prior to the implementation of each medication.</p> <p>9-3-5(a)</p> |   |   |                      |   |