

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 15G096	X2) MULTIPLE CONSTRUCTION A. BUILDING <u>00</u> B. WING _____	X3) DATE SURVEY COMPLETED 02/18/2016
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NAME OF PROVIDER OR SUPPLIER COMMUNITY ALTERNATIVES SW IN	STREET ADDRESS, CITY, STATE, ZIP CODE 2745 WINDEMERE DR EVANSVILLE, IN 47725
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W 0000 Bldg. 00	<p>This visit was for an extended recertification and state licensure survey.</p> <p>Dates of Survey: February 11, 12, 15, 16, 17 and 18, 2016.</p> <p>Facility Number: 000635 Provider Number: 15G096 AIMS Number: 100234020</p> <p>These deficiencies reflect state findings in accordance with 460 IAC 9. Quality Review of this report completed by #15068 on 2/26/16.</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. Based on record review and interview for 1 of 4 additional clients (#7), the governing body failed to exercise general</p>	W 0104	- The facility will ensure that the group home's walls are in good repair, not damaged, and painted.	03/25/2016

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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	<p>policy and operating direction over the facility to ensure the facility's policy was implemented in regard to client #7's physical aggression toward the other clients in the home. The governing body failed to ensure the acts of client to client aggression displayed by client #7 were reported immediately to the Bureau of Developmental Disabilities Services (BDDS). The governing body failed to ensure a thorough investigation was initiated in regard to two incidents of client to client aggression by client #7 after the IDT (Interdisciplinary Team) implemented 1:1 (one staff to one client) staffing for client #7. The governing body failed to implement sufficient safeguards to prevent client #7's repeated aggression towards other clients.</p> <p>Findings include:</p> <p>1) For 4 of 4 sampled clients (#1, #2, #3 and #4) and 3 additional clients (#5, #6 and #7), the governing body failed to implement written policies and procedures in regard to client #7 displaying aggressive behaviors (hair pulling and glasses snatching) toward the other clients. Please refer to W149.</p> <p>2) For 8 of 13 allegations of abuse, neglect, and/or mistreatment, the governing body failed to immediately</p>		<p>- Staff will be retrained on notifying Residential Manager if the group home's walls are in not in good repair, damaged, or in need of painting.</p> <p>- Staff will be retrained on submitting a work order to the maintenance department to ensure the group home's walls are in good repair, not damaged, and painted.</p> <p>- Residential Manager will make weekly home environmental checks to ensure the group home's walls are in good repair, not damaged, and painted.</p> <p>- QIDP will make monthly home environmental checks to ensure the group home's walls are in good repair, not damaged, and painted.</p> <p>- Program Manager will make monthly home environmental</p>	

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	<p>report client #7's physical aggression of hair pulling and glasses snatching involving injury to the administrator and to the Bureau of Developmental Disabilities Services (BDDS) for clients #1, #2, #3 and #4 in accordance with state law. Please refer to W153.</p> <p>3) For 2 of 13 incidents of abuse, neglect and/or mistreatment, the governing body failed to conduct a thorough investigation for two incidents in regards to client #7's aggression towards client #3. Please refer to W154.</p> <p>4) For 1 of 3 additional clients (#7), the governing body failed to implement sufficient safeguards to prevent client #7's repeated aggression towards clients #1, #2, #3 and #4.</p> <p>9-3-1(a)</p>		<p>checks to ensure the group home's walls are in good repair, not damaged, and painted.</p> <p>- Maintenance will make monthly home environmental checks to ensure the group home's walls are in good repair, not damaged, and painted.</p> <p>Persons Responsible: Staff, Residential Manager, QIDP, Program Manager, Maintenance, & Executive Director.</p>	

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W 0149 Bldg. 00	<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.</p> <p>Based on record review and interview for 4 of 4 sampled clients (#1, #2, #3 and #4) and 3 additional clients (#5, #6 and #7), the facility failed to implement written policies and procedures in regard to client #7 displaying aggressive behaviors (hair pulling and glasses snatching) toward the other clients.</p> <p>Findings include:</p> <p>Review of the facility's incident reports, BDDS (Bureau of Developmental Disabilities Services) reportables and investigations for clients #1, #2, #3, #4,</p>	W 0149	<p>W149- The facility must develop and implement written policies and procedures that prohibit mistreatment, neglect or abuse of the client.</p> <p>In order to correct the deficiency with W149:</p> <p>-The facility has a policy regarding abuse, neglect, and elopement that remains accurate and appropriate.</p>	03/25/2016

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	<p>#5, #6 and #7 was completed on 2/11/16 at 1:35 PM.</p> <p>An incident report dated 12/17/15 indicated at "5:50 PM, [Client #7] snatched [client #3's] glasses off her face and broke them for the 2nd time." A BDDS report submitted late on 2/8/16 indicated on "12/17/15, [client #3] had her glasses taken off by another client (client #7) and received a small scratch. First aid applied. Grievance policy and bill of rights completed." A Nursing Note completed on 12/17/15 by the group home nurse was reviewed on 2/17/16 at 2:30 PM. The nursing note indicated "[client #3's] glasses pulled off by peer causing an approximate 1" (inch) superficial abrasion to outer left eye and above left brow; no bleeding, skin not broken."</p> <p>An incident report dated 12/18/15 indicated at "5:00 AM [client #7] walked up to [client #1] and snatched her glasses off her face causing three cuts and several on her shoulder. It broke [client #1's] glasses, lens missing at incident." A BDDS report filed late on 2/16/16 indicated on "12/18/15 [client #1] had her glasses taken off by [client #7] and received 3 minor scratches. First aid applied. Grievance policy and bill of rights completed." A Nursing Note</p>		<ul style="list-style-type: none"> - All staff will be retrained regarding the abuse, neglect, and elopement policy and procedure. - The Residential Manager will be retrained regarding the abuse, neglect, and elopement policy and procedure. - All staff will be retrained on the individual's updated Behavioral Support Plan and Modification of Rights (to include phone and internet restrictions). - Residential Managers will be retrained on the individual's updated Behavioral Support Plan and Modification of Rights (to include phone and internet restrictions). - QIDPs will be retrained on the individual's updated Behavioral Support Plan and Modification of Rights. -Program Manager will be retrained on the individual's updated Behavioral Support Plan and Modification of Rights to 	

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	<p>completed on 12/18/15 by the group home nurse (reviewed 2/17/16 at 2:30 PM) indicated [client #1] had her glasses pulled off her face by [client #7] causing a 2" (inch) red mark above left brow, abrasion 1/2 " between eyes, 1/4" abrasion to tip of nose and right nostril and 2 - 3" abrasions down left neck area, cleansed with soap and water and triple antibiotic ointment applied. PCP (primary care physician) notified."</p> <p>An incident report dated 12/19/15 indicated at "5:10 AM [client #7] was in her room and got up and went into [client #2's] room, pulled her hair. Staff went and took her back to her own room." A BDDS report filed late on 2/8/16 indicated on "12/19/15 [client #2] had her hair pulled by [client #7]. Grievance policy and bill of rights completed."</p> <p>An incident report dated 12/23/15 indicated at "9:30 PM [client #7] hit [client #2] and knocked her glasses off and scratched her forehead." A BDDS report filed late on 2/1/16 indicated on "12/23/15 [client #7] was having a behavior, became angry, and took [client #2's] glasses off. IDT (Interdisciplinary Team) met to discuss the incident."</p> <p>An incident report dated 12/27/15 indicated at "3:50 PM [client #7] came</p>		<p>include phone and internet restrictions.</p> <p>- The Residential Manager will monitor through daily observations in the group home that the abuse, neglect, and elopement policy and procedure, along with the individual's updated Behavioral Support Plan and Modification of Rights; is being followed appropriately.</p> <p>- The QIDP will monitor through weekly observations in the group home that the abuse, neglect, and elopement policy and procedure, along with the individual's updated Behavioral Support Plan and Modification of Rights; is being followed appropriately.</p> <p>- Program Manager will monitor through monthly observations in the group home that the abuse, neglect, and elopement policy and procedure, along with the individual's updated Behavioral Support Plan and Modification of Rights; is being followed appropriately.</p> <p>Persons Responsible: Executive</p>	

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	<p>up and tried to snatch [client #4's] glasses off her face. [Client #4] stopped her so [client #7] punched her in the back." A BDDS report filed late on 2/6/16 indicated on "12/27/15 [client #4] was hit in the back by [client #7]. No injuries. Grievance policy and bill of rights completed."</p> <p>A BDDS report filed on 1/3/16 indicated on "1/3/16 [client #7] was sent back to [Name of Local Hospital Emergency Room] for psychiatric evaluation due to aggressive behavior."</p> <p>An incident report dated 1/3/16 indicated at "11:24 AM, [client #7] went up to [client #3] and grabbed a handful of her hair. Staff tried to help while I was running to help. [Client #7] wouldn't let go, she pulled out a handful of hair and laughed the entire time." A BDDS report filed late on 2/6/16 indicated on "1/3/16 [client #3] had her hair pulled by another client (client #7). Grievance policy and bill of rights completed."</p> <p>An incident report dated 1/9/16 indicated "at 10:20 AM [client #7] was sitting on the couch with [Name of Staff] and she got up heading towards [client #3]. Staff got up as soon as she seen (sic) her heading towards [client #3's] glasses." A BDDS report filed late on 2/6/16</p>		Director, Program Manager, QIDP, Residential Manager, Staff	

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	<p>indicated on "1/9/16 [client #3] had her glasses taken off by another client. Grievance policy and bill of rights completed." A Nursing Note dated 1/9/16 was reviewed on 2/17/16 at 2:30 PM. The nursing note indicated "[client #3's] glasses were pulled off of face - no injury noted." No investigation had been completed regarding this incident.</p> <p>An incident report dated 1/10/16 indicated "at 6 AM, [client #3] was sitting in a chair. [Client #7] was walking to table and turned and attacked [client #3]. She (client #3) was scratched, hair pulled, and pushed down making her hit her left eye against the coffee table." A BDDS report filed late on 2/6/16 indicated on "1/10/16 [client #3] had her glasses taken off by another client, scratched, and fell causing her to bump her head on the coffee table. First aid applied, head tracking initiated and PCP notified. Grievance policy and bill of rights completed." No investigation had been completed regarding this incident.</p> <p>An incident report dated 2/10/16 indicated "[client #7] reached towards [client #3] in an aggressive manner. YSIS (You're Safe, I'm Safe type of defense hold) was utilized. Staff was able to intervene before [client #7] could get to [client #3] except for a scratch on the</p>			

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	<p>nose. [Client #7] has attacked and attempted to attack [client #3] many times." A BDDS report filed on 2/12/16 indicated "on 2/10/16, [client #3] received a superficial scratch on her face from [client #7] having a behavior. Client is safe. An investigation has been initiated." An Investigative Summary completed on 2/16/2016 indicated in the conclusion "after review of witness statements and documentation, the investigative committee concludes that staff had [client #7] 1:1 (client to staff) in the kitchen when [client #3] walked into the kitchen. Staff proceeded then to place herself in the middle of the two to protect [client #3] which did help her not get her glasses taken off her face but did cause a scratch to the nose."</p> <p>During review of client #1's record on 2/15/16 at 10:30 AM, an IDT (Interdisciplinary Team) note indicated "[client #1] does not feel safe in the home because of a new client [client #7]. She says she's attacked her several times and the only place she feels safe is in her room. [Client #1] says she doesn't like the new girl hurting her housemates. She wants her (client #7) out of her home because she doesn't get along with the other housemates. [Client #1] says that [client #7] is a danger to her and the housemates. She is afraid to come out of</p>			

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	<p>her room and engage in household activities with [client #7] here."</p> <p>During review of client #2's record on 2/15/16 at 11:30 AM, an IDT note indicated "[Client #2] does not feel safe with [client #7] in the home. She is afraid she will come up behind her and pull her hair. She's very scared. She's been attacked four times, and had her hair pulled out. She had a scratch on her head. She does not like having to stay in her room. She says it's not fair she has to stay in her room because [client #7] is going after her. Other clients and staff are also being hurt. She says she is afraid to go to sleep at night because she (client #7) has come in her room at night and pulled her hair."</p> <p>Review of client #7's record on 2/15/16 at 2:30 PM indicated the following:</p> <p>--an IDT note dated 12/21/15 indicated "due to aggressive behaviors to ensure all clients health and safety the follow (sic) has been approved - 15 minute checks, to keep her (client #7) in line of sight during waking hours, and a bedroom door alarm to notify third shift. These restrictions are due to [client #7's] physically aggressive behavior towards other clients and staff. The door alarms are due to [client #7] going into other clients' rooms at night</p>			

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	<p>and pulling their hair."</p> <p>--an IDT note dated 12/22/15 indicated "[Name of Psychiatrist] recommends adding Navane 2 mg (anti-psychotic) PO (by mouth) BID (twice daily) due to [client #7's] physically aggressive behavior. Team agrees."</p> <p>--an IDT note dated 1/4/16 indicated "Subject: Home meeting with IDT. The IDT met to discuss the following: [client #7's] placement options, new updates to plan of 1:1 staff, clients not feeling safe, will reach out to BDDS, contact [Name of Psychiatrist]."</p> <p>--an IDT note dated 1/6/16 indicated "Subject: Restrictions - The IDT met to discuss the following: due to physically aggressive behaviors, we are to provide [client #7] with a 1:1 staff during waking hours for the safety of her and others. Her one on one is defined as within an arms length. Team agrees this is appropriate."</p> <p>--an IDT note dated 1/7/16 indicated "Subject: Behavior Issues - Spoke with BDDS regarding [client #7's] behaviors. Team agrees to continue the 1:1 staffing. [Client #7] will meet with [Name of Psychiatrist] tomorrow to discuss admission into the [Name of Psychiatrist's Center] or possible med</p>			

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	<p>change. Team and BDDS will meet after the appointment to discuss living options."</p> <p>--an IDT note dated 1/7/16 indicated "Subject: Medicine Change. The IDT met to discuss the following. [Name of Psychiatrist] recommends to discontinue Seroquel (behavior medication) add Zyprexa (behavior medication) 5 mg (milligrams) BID (twice daily) due to increased behavioral issues."</p> <p>--an IDT note dated 1/8/16 indicated "Subject: [Name of Psychiatrist] quarterly review - Start Clozaril 25 mg (schizophrenia medication) BID and increase by 2.5 mg BID per week until 150 mg BID is reached. Will get CBC (complete blood count lab test) weekly to monitor."</p> <p>--an IDT note dated 1/8/16 indicated "[Client #7] is on 1:1 staffing. [Name of Psychiatrist] to start client on Clozaril. Possible opening at [Name of Psychiatrist's Center] in 2 - 3 weeks. She can stay up to 14 days and also looking at placing at [name of another group home]. Discussed audio alarms, 15 minute checks. She will have a level of care for a visit. BDDS needs dates of visitation (to center if accepted). Discussed bed alarm to notify staff sooner. Consider day</p>			

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	<p>program after return from [Name of Psychiatrist's Center] and starting Clozaril. Long term if all fails will look into CRMRF (Comprehensive Rehabilitation Management Needs Facility)."</p> <p>--an IDT note dated 2/4/16 indicated "The IDT met to discuss the following: [client #7's] ISP (Individual Support Plan), BSP (Behavior Support Plan), and MOR (Modification of Rights)."</p> <p>--an IDT note dated 2/4/16 indicated "Discussed referring [client #7] to CRMNF in [Name of City]. BDDS sent all behavior and incident reports to central office. May be a waiting period or a wait list. [Name of Psychiatrist] recommends this placement. BDDS agrees to suspend home visits at [Name of other group home]."</p> <p>Also included in client #7's record review was an Inservice Sign-In Sheet dated 1/19/16 where the RM (group home manager) was "reviewed on proper documentation, all clients' BSPs and HRPs (high risk plans) as well as reviewed interaction techniques in conversing with clients - voice, distance and staffing."</p> <p>An electronic email from the local BDDS</p>			

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	<p>specialist assigned to client #7, dated 2/10/16, indicated "Hello, I wanted to let you know that [client #7] was added to the CRMNF referral list. Please let me know if you have any questions. Thanks." The electronic email was electronically signed by the BDDS specialist.</p> <p>Client #7's BSP dated 12/17/2015 and revised on 1/27/16 indicated "mechanical supports - Bedroom Door Alarm". Her BSP included reactive strategies for physical aggression:</p> <p>"1) Staff will prompt [client #7] to stop being physically aggressive in a loud firm tone of voice. 2) Staff will assume the YSIS (You're Safe, I'm Safe) prepared stance. 3) Staff will block any hits by using YSIS techniques. 4) If [client #7] is hitting another person staff will intervene immediately, using their body to block her and use YSIS blocking technique, and redirect her to a quiet area. 5) Staff will do a body assessment and document any reddened areas or marks. 6) Staff will direct [client #7] to talk to staff if something is bothering her."</p> <p>Client #1 was interviewed on 2/15/16 at 4:40 PM. She stated "[client #7] has thrown my glasses on the floor in the past and they broke. It's not as bad as it used</p>			

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	<p>to be because staff is with her all the time now."</p> <p>Client #2 was interviewed on 2/15/16 at 4:35 PM. She stated "[client #7] has pulled my hair before and grabbed my glasses. It's been awhile since it has happened." Client #2 indicated she feels safer now than in the past because "staff is with [client #7] all the time."</p> <p>Interview with the Associate Executive Director was conducted on 2/17/16 at 3:30 PM. She stated "we had thought about moving [client #7] to [name of other facility group home] but determined it wasn't a viable option. We figured her behaviors would continue there as well. Even though the client was placed on 1:1 client/staff ratio on 1/6/16, [client #7] still continues to attack the other clients. We have spoken to the BDDS specialist and he is in the process of trying to move the client to a CRMNF (Comprehensive Rehabilitative Management Needs Facility)." The Associate Executive Director also stated "[Name of Psychiatrist] has seen [client #7] several times and has made multiple changes to her medications. We have noticed an improvement since these medication changes were made. There have been less unwarranted behaviors from [client #7]. The RM (Residential Manager) was</p>			

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	<p>retrained on 1/19/16 on Manager's duties/checklist, paperwork, reviewed all the clients' ISPs (Individual Support Plans) and BSPs (Behavior Support Plans) as well as reviewed interaction criteria of dealing with clients - e.g./ voice level, distance, staffing, etc. We also retrained all staff in the home on 2/5/16 on all clients' ISPs, BSPs, and their Modification of Rights." The Associate Executive Director indicated the facility had not initiated investigations regarding the 1/9/16 and 1/10/16 incidents but should have. She also stated "many of the BDDS reports were filed late by the QIDP (Qualified Intellectual Disabilities Professional). Things were very hectic here in the office the last few months and we noticed incidents that should have been reported were not, so we had the QIDP report them late."</p> <p>Review of the facility's undated Abuse/Neglect/Exploitation policy was completed on 2/17/16 at 4:30 PM. The policy indicated "any act of abuse/neglect/exploitation is strictly prohibited and will not be tolerated. Failure to report death, allegations of abuse/neglect/exploitation and/or information related to alleged abuse/neglect/exploitation in a timely manner and in accordance with</p>			

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	requirements may result in employee disciplinary action up to and including termination of employment." 9-3-2(a)			

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W 0153 Bldg. 00	<p>483.420(d)(2) STAFF TREATMENT OF CLIENTS The facility must ensure that all allegations of mistreatment, neglect or abuse, as well as injuries of unknown source, are reported immediately to the administrator or to other officials in accordance with State law through established procedures.</p> <p>Based on record review and interview for 8 of 13 allegations of abuse, neglect, and/or mistreatment, the facility failed to immediately report client #7's physical aggression of hair pulling and glasses snatching involving injury to the administrator and to the Bureau of Developmental Disabilities Services (BDDS) for clients #1, #2, #3 and #4 in accordance with state law.</p> <p>Findings include:</p> <p>Review of the facility's incident reports, BDDS (Bureau of Developmental Disabilities Services) reportables and investigations was completed on 2/11/16 at 1:35 PM.</p> <p>An incident report dated 12/17/15 indicated at "5:50 PM, [Client #7] snatched [client #3's] glasses off her face and broke them for the 2nd time." A BDDS report submitted late on 2/8/16 indicated on "12/17/15, [client #3] had her glasses taken off by another client</p>	W 0153	<p>W153- The facility must ensure that all allegations of mistreatment, neglect or abuse, as well as injuries or unknown source, are reported immediately to the administrator or to other officials in accordance with State law through established procedures.</p> <p>In order to correct the deficiency with W153:</p> <p>-The facility has a policy regarding abuse, neglect, and mistreatment, which has been reviewed and remains appropriate.</p> <p>- Staff will be retrained regarding the reporting of all incidents, specifically abuse, neglect, and mistreatment, through incidents reports and by contacting the Residential Manager.</p>	03/25/2016

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	<p>(client #7) and received a small scratch. First aid applied. Grievance policy and bill of rights completed."</p> <p>An incident report dated 12/18/15 indicated at "5:00 AM [client #7] walked up to [client #1] and snatched her glasses off her face causing three cuts and several on her shoulder. It broke [client #1's] glasses, lens missing at incident." A BDDS report filed late on 2/16/16 indicated on "12/18/15 [client #1] had her glasses taken off by [client #7] and received 3 minor scratches. First aid applied. Grievance policy and bill of rights completed."</p> <p>An incident report dated 12/19/15 indicated at "5:10 AM [client #7] was in her room and got up and went into [client #2's] room, pulled her hair. Staff went and took her back to her own room." A BDDS report filed late on 2/8/16 indicated on "12/19/15 [client #2] had her hair pulled by [client #7]. Grievance policy and bill of rights completed."</p> <p>An incident report dated 12/23/15 indicated at "9:30 PM [client #7] hit [client #2] and knocked her glasses off and scratched her forehead." A BDDS report filed late on 2/1/16 indicated on "12/23/15 [client #7] was having a behavior, became angry, and took [client</p>		<p>- Residential Manager will be retrained regarding the reporting of all incidents, specifically abuse, neglect, and mistreatment, through incidents reports and by contacting the Program Manager, QIDP, or QA Coordinator.</p> <p>- QIDP will be retrained regarding the reporting of all incidents, specifically abuse, neglect, and mistreatment, through incidents reports and by contacting the Program Manager or QA Coordinator.</p> <p>- QA Coordinator will review all incidents daily to assure they are reported to the Executive Director in a timely manner, as well as, assuring that all incidents are investigated thoroughly and assure review within 5 days of the incident.</p> <p>- QA Manager will assure QA reviews all incidents daily and that they are reported to the Executive Director in a timely manner, as well as, assuring that all incidents are investigated thoroughly and assure review within 5 days of the incident.</p>	

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	<p>#2's] glasses off. IDT (Interdisciplinary Team) met to discuss the incident."</p> <p>An incident report dated 12/27/15 indicated at "3:50 PM [client #7] came up and tried to snatch [client #4's] glasses off her face. [Client #4] stopped her so [client #7] punched her in the back." A BDDS report filed late on 2/6/16 indicated on "12/27/15 [client #4] was hit in the back by [client #7]. No injuries. Grievance policy and bill of rights completed."</p> <p>An incident report dated 1/3/16 indicated at "11:24 AM, [client #7] went up to [client #3] and grabbed a handful of her hair." Staff tried to help while I was running to help. [Client #7] wouldn't let go, she pulled out a handful of hair and laughed the entire time." A BDDS report filed late on 2/6/16 indicated on "1/3/16 [client #3] had her hair pulled by another client (client #7). Grievance policy and bill of rights completed."</p> <p>An incident report dated 1/9/16 indicated "at 10:20 AM [client #7] was sitting on the couch with [Name of Staff] and she got up heading towards [client #3]. Staff got up as soon as she seen (sic) her heading towards [client #3's] glasses." A BDDS report filed late on 2/6/16 indicated on "1/9/16 [client #3] had her</p>		<p>-The Executive Director shall assure through review of incidents to assure proper documentation and review occurs within 5 days. Any issues shall be dealt with through ResCare policy and procedure.</p> <p>Persons Responsible: Staff, Residential Manager, QIDP, Program Manager, QA Coordinator, QA Manager, Associate Executive Director, Executive Director</p>				

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	<p>glasses taken off by another client. Grievance policy and bill of rights completed."</p> <p>An incident report dated 1/10/16 indicated "at 6 AM, [client #3 was sitting in a chair. [Client #7] was walking to table and turned and attacked [client #3]. She (client #3) was scratched, hair pulled, and pushed down making her hit her left eye against the coffee table." A BDDS report filed late on 2/6/16 indicated on "1/10/16 [client #3] had her glasses taken off by another client, scratched, and fell causing her to bump her head on the coffee table. First aid applied, head tracking initiated and PCP notified. Grievance policy and bill of rights completed."</p> <p>The Associate Executive Director was interviewed on 2/17/16 at 3:30 PM. She stated "many of the BDDS reports were filed late by the QIDP (Qualified Intellectual Disabilities Professional). Things were very hectic here in the office the last few months and we noticed incidents that should have been reported were not, so we had the QIDP report them late."</p> <p>9-3-2(a)</p>			

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W 0154 Bldg. 00	<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 regarding 2 of 13 incidents of abuse, neglect and/or mistreatment, the facility failed to conduct a thorough investigation for two incidents in regards to client #7's aggression towards client #3.</p> <p>Findings include:</p> <p>Review of the facility's incident reports, BDDS (Bureau of Developmental Disabilities Services) reportables and investigations was completed on 2/11/16 at 1:35 PM.</p> <p>An incident report dated 1/9/16 indicated "at 10:20 AM [client #7] was sitting on the couch with [Name of Staff] and she got up heading towards [client #3]. Staff got up as soon as she seen (sic) her heading towards [client #3's] glasses." A</p>	W 0154	<p>W154- The facility must have evidence that all alleged violations are thoroughly investigated.</p> <p>In order to correct the deficiency with W154:</p> <p>- QA Coordinator will be retrained on conducting a thorough investigation in regards to all alleged violations and assure review within 5 days of the incident.</p> <p>- QA Manager will be retrained on</p>	03/25/2016

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	<p>BDDS report filed late on 2/6/16 indicated on "1/9/16 [client #3] had her glasses taken off by another client. Grievance policy and bill of rights completed." A Nursing Note dated 1/9/16 was reviewed on 2/17/16 at 2:30 PM. The note indicated "[client #3's] glasses were pulled off of face - no injury noted." No investigation had been completed regarding this incident.</p> <p>An incident report dated 1/10/16 indicated "at 6 AM, [client #3] was sitting in a chair. [Client #7] was walking to table and turned and attacked [client #3]. She (client #3) was scratched, hair pulled, and pushed down making her hit her left eye against the coffee table." A BDDS report filed late on 2/6/16 indicated on "1/10/16 [client #3] had her glasses taken off by another client, scratched, and fell causing her to bump her head on the coffee table. First aid applied, head tracking initiated and PCP notified. Grievance policy and bill of rights completed."</p> <p>The Associate Executive Director was interviewed on 2/17/16 at 3:30 PM. She stated "the facility had not initiated investigations regarding the 1/9/16 and 1/10/16 incidents but should have since [client #7] was on a 1:1 staff ratio beginning 1/6/16." She stated "in doing</p>		<p>conducting a thorough investigation in regards to all alleged violations and assure review within 5 days of the incident.</p> <p>- QA Manager will be retrained on ensuring the QA Coordinator is conducting a thorough investigation in regards to all alleged violations and assure review within 5 days of the incident.</p> <p>-The Executive Director shall assure through review of incidents and investigations to assure proper documentation and review occurs within 5 days. Any issues shall be dealt with through ResCare policy and procedure.</p> <p>Persons Responsible: QA Coordinator, QA Manager, Program Manager, Associate Executive Director, and Executive Director.</p>	

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W 0157 Bldg. 00	<p>the investigations, we would have been able to determine if staff was within an arm's length of the client at the time the aggression took place."</p> <p>9-3-2(a)</p> <p>483.420(d)(4) STAFF TREATMENT OF CLIENTS If the alleged violation is verified, appropriate corrective action must be taken.</p> <p>Based on record review and interview for 1 of 3 additional clients (#7), the facility failed to implement sufficient safeguards to prevent client #7's repeated aggression towards clients #1, #2, #3 and #4.</p> <p>Findings include:</p> <p>Review of the facility's incident reports, BDDS (Bureau of Developmental Disabilities Services) reportables and investigations was completed on 2/11/16 at 1:35 PM.</p> <p>An incident report dated 12/17/15 indicated at "5:50 PM, [Client #7] snatched [client #3's] glasses off her face and broke them for the 2nd time." A BDDS report submitted late on 2/8/16 indicated on "12/17/15, [client #3] had</p>	W 0157	<p>W157: If the alleged violation is verified, appropriate corrective action must be taken.</p> <p>In order to correct the deficiency with W157:</p> <p>- All staff will be retrained on the Abuse Neglect Exploitation Policy and Procedures.</p> <p>- QA Coordinator will be retrained on the initiating investigations and having them completed within 5 business days and the final investigation will be sent to the Executive Director.</p>	03/25/2016

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	<p>her glasses taken off by another client (client #7) and received a small scratch. First aid applied. Grievance policy and bill of rights completed." A Nursing Note completed on 12/17/15 by the group home nurse was reviewed on 2/17/16 at 2:30 PM. The note indicated "[client #3's] glasses pulled off by peer causing an approximate 1" (inch) superficial abrasion to outer left eye and above left brow; no bleeding, skin not broken."</p> <p>An incident report dated 12/18/15 indicated at "5:00 AM [client #7] walked up to [client #1] and snatched her glasses off her face causing three cuts and several on her shoulder. It broke [client #1's] glasses, lens missing at incident." A BDDS report filed late on 2/16/16 indicated on "12/18/15 [client #1] had her glasses taken off by [client #7] and received 3 minor scratches. First aid applied. Grievance policy and bill of rights completed." A Nursing Note completed on 12/18/15 by the group home nurse was reviewed on 2/17/16 at 2:30 PM. The note indicated "[client #1] had her glasses pulled off her face by [client #7] causing a 2" (inch) red mark above left brow, abrasion 1/2 " between eyes, 1/4" abrasion to tip of nose and right nostril and 2 - 3" abrasions down left neck area, cleansed with soap and water and triple antibiotic ointment</p>		<p>- QA Manager will be retrained on ensuring all approved recommendations are completed or submitted to HR for corrective action.</p> <p>- The QA Manager will follow up with the QA Coordinator at least weekly to ensure that all incidents that require and investigation are initiated and completed within 5 business days.</p> <p>- The QA Manager will ensure the QA Coordinator submits all finalized investigations to the Executive Director for review of any recommendations.</p> <p>- All investigations will be provided to the Executive Director upon completion for review.</p> <p>Persons Responsible: QA Coordinator, QA Manager, and Executive Director.</p>	

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	<p>applied. PCP (primary care physician) notified."</p> <p>An incident report dated 12/19/15 indicated at "5:10 AM [client #7] was in her room and got up and went into [client #2's] room, pulled her hair. Staff went and took her back to her own room." A BDDS report filed late on 2/8/16 indicated on "12/19/15 [client #2] had her hair pulled by [client #7]. Grievance policy and bill of rights completed."</p> <p>An incident report dated 12/23/15 indicated at "9:30 PM [client #7] hit [client #2] and knocked her glasses off and scratched her forehead." A BDDS report filed late on 2/1/16 indicated on "12/23/15 [client #7] was having a behavior, became angry, and took [client #2's] glasses off. IDT (Interdisciplinary Team) met to discuss the incident."</p> <p>An incident report dated 12/27/15 indicated at "3:50 PM [client #7] came up and tried to snatch [client #4's] glasses off her face. [Client #4] stopped her so [client #7] punched her in the back." A BDDS report filed late on 2/6/16 indicated on "12/27/15 [client #4] was hit in the back by [client #7]. No injuries. Grievance policy and bill of rights completed."</p>				

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	<p>A BDDS report filed on 1/3/16 indicated on "1/3/16 [client #7] was sent back to [Name of Local Hospital Emergency Room] for psychiatric evaluation due to aggressive behavior."</p> <p>An incident report dated 1/3/16 indicated at "11:24 AM, [client #7] went up to [client #3] and grabbed a handful of her hair. Staff tried to help while I was running to help. [Client #7] wouldn't let go, she pulled out a handful of hair and laughed the entire time." A BDDS report filed late on 2/6/16 indicated on "1/3/16 [client #3] had her hair pulled by another client (client #7). Grievance policy and bill of rights completed."</p> <p>An incident report dated 1/9/16 indicated "at 10:20 AM [client #7] was sitting on the couch with [Name of Staff] and she got up heading towards [client #3]. Staff got up as soon as she seen (sic) her heading towards [client #3's] glasses." A BDDS report filed late on 2/6/16 indicated on "1/9/16 [client #3] had her glasses taken off by another client. Grievance policy and bill of rights completed." A Nursing Note dated 1/9/16 was reviewed on 2/17/16 at 2:30 PM. The note indicated "[client #3's] glasses were pulled off of face - no injury noted."</p> <p>An incident report dated 1/10/16</p>			

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	<p>indicated "at 6 AM, [client #3] was sitting in a chair. [Client #7] was walking to table and turned and attacked [client #3]. She (client #3) was scratched, hair pulled, and pushed down making her hit her left eye against the coffee table." A BDDS report filed late on 2/6/16 indicated on "1/10/16 [client #3] had her glasses taken off by another client, scratched, and fell causing her to bump her head on the coffee table. First aid applied, head tracking initiated and PCP notified. Grievance policy and bill of rights completed."</p> <p>An incident report dated 2/10/16 indicated "[client #7] reached towards [client #3] in an aggressive manner. YSIS (You're Safe, I'm Safe type of defense hold) was utilized. Staff was able to intervene before [client #7] could get to [client #3] except for a scratch on the nose. [Client #7] has attacked and attempted to attack [client #3] many times." A BDDS report filed on 2/12/16 indicated "on 2/10/16, [client #3] received a superficial scratch on her face from [client #7] having a behavior. Client is safe. An investigation has been initiated." An Investigative Summary completed on 2/16/2016 indicated in the conclusion "after review of witness statements and documentation, the investigative committee concludes that</p>			

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	<p>staff had [client #7] 1:1 (client to staff) in the kitchen when [client #3] walked into the kitchen. Staff proceeded then to place herself in the middle of the two to protect [client #3] which did help her not get her glasses taken off her face but did cause a scratch to the nose."</p> <p>During review of client #1's record on 2/15/16 at 10:30 AM, an IDT (Interdisciplinary Team) note indicated "[client #1] does not feel safe in the home because of a new client [client #7]. She says she's attacked her several times and the only place she feels safe in in her room. [Client #1] says she doesn't like the new girl hurting her housemates. She wants her (client #7) out of her home because she doesn't get along with the other housemates. [Client #1] says that [client #7] is a danger to her and the housemates. She is afraid to come out of her room and engage in household activities with [client #7] here."</p> <p>During review of client #2's record on 2/15/16 at 11:30 AM, an IDT note indicated "[Client #2] does not feel safe with [client #7] in the home. She is afraid she will come up behind her and pull her hair. She's very scared. She's been attacked four times, and had her hair pulled out. She had a scratch on her head. She does not like having to stay in her</p>			

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	<p>room. She says it's not fair she has to stay in her room because [client #7] is going after her. Other clients and staff are also being hurt. She says she is afraid to go to sleep at night because she (client #7) has come in her room at night and pulled her hair."</p> <p>During review of client #7's record on 2/15/16 at 2:30 PM:</p> <p>--an IDT note dated 12/21/15 indicated "due to aggressive behaviors to ensure all clients health and safety the follow (sic) has been approved - 15 minute checks, to keep her (client #7) in line of sight during waking hours, and a bedroom door alarm to notify third shift. These restrictions are due to [client #7's] physically aggressive behavior towards other clients and staff. The door alarms are due to [client #7] going into other clients' rooms at night and pulling their hair."</p> <p>--an IDT note dated 12/22/15 indicated "[Name of Psychiatrist] recommends adding Navane 2 mg (anti-psychotic) PO (by mouth) BID (twice daily) due to [client #7's] physically aggressive behavior. Team agrees."</p> <p>--an IDT note dated 1/4/16 indicated "Subject: Home meeting with IDT. The IDT met to discuss the following: [client</p>			

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	<p>#7's] placement options, new updates to plan of 1:1 staff, clients not feeling safe, will reach out to BDDS, contact [Name of Psychiatrist]."</p> <p>--an IDT note dated 1/6/16 indicated "Subject: Restrictions - The IDT met to discuss the following: due to physically aggressive behaviors, we are to provide [client #7] with a 1:1 staff during waking hours for the safety of her and others. Her one on one is defined as within an arms length. Team agrees this is appropriate."</p> <p>--an IDT note dated 1/7/16 indicated "Subject: Behavior Issues - Spoke with BDDS regarding [client #7's] behaviors. Team agrees to continue the 1:1 staffing. [Client #7] will meet with [Name of Psychiatrist] tomorrow to discuss admission into the [Name of Psychiatrist's Center] or possible med change. Team and BDDS will meet after the appointment to discuss living options."</p> <p>--an IDT note dated 1/7/16 indicated "Subject: Medicine Change. The IDT met to discuss the following. [Name of Psychiatrist] recommends to discontinue Seroquel (behavior medication) add Zyprexa (behavior medication) 5 mg (milligrams) BID (twice daily) due to increased behavioral issues."</p>			

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	<p>--an IDT note dated 1/8/16 indicated "Subject: [Name of Psychiatrist] quarterly review - Start Clozaril 25 mg (schizophrenia medication) BID and increase by 2.5 mg BID per week until 150 mg BID is reached. Will get CBC (complete blood count lab test) weekly to monitor."</p> <p>--an IDT note dated 1/8/16 indicated "[Client #7] is on 1:1 staffing. [Name of Psychiatrist] to start client on Clozaril. Possible opening at [Name of Psychiatrist's Center] in 2 - 3 weeks. She can stay up to 14 days and also looking at placing at [name of another group home]. Discussed audio alarms, 15 minute checks. She will have a level of care for a visit. BDDS needs dates of visitation (to center if accepted). Discussed bed alarm to notify staff sooner. Consider day program after return from [Name of Psychiatrist's Center] and starting Clozaril. Long term if all fails will look into CRMRF (Comprehensive Rehabilitation Management Needs Facility)."</p> <p>--an IDT note dated 2/4/16 indicated "The IDT met to discuss the following: [client #7's] ISP (Individual Support Plan), BSP (Behavior Support Plan), and MOR (Modification of Rights)."</p>			

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	<p>--an IDT noted dated 2/4/16 indicated "Discussed referring [client #7] to CRMNF in [Name of City]. BDDS sent all behavior and incident reports to central office. May be a waiting period or a wait list. [Name of Psychiatrist] recommends this placement. BDDS agrees to suspend home visits at [Name of other group home]."</p> <p>Also included in client #7's record review was an Inservice Sign-In Sheet dated 1/19/16 where the RM (group home manager) was "reviewed on proper documentation, all clients' BSPs and HRPs (high risk plans) as well as reviewed interaction techniques in conversing with clients - voice, distance and staffing."</p> <p>An electronic email from the local BDDS specialist assigned to client #7, dated 2/10/16, indicated "Hello, I wanted to let you know that [client #7] was added to the CRMNF referral list. Please let me know if you have any questions. Thanks." The electronic email was electronically signed by the BDDS specialist.</p> <p>Client #7's BSP dated 12/17/2015 and revised on 1/27/16 indicated "mechanical supports - Bedroom Door Alarm". Her BSP indicated reactive strategies for</p>			

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	<p>physical aggression include: "1) Staff will prompt [client #7] to stop being physically aggressive in a loud firm tone of voice. 2) Staff will assume the YSIS (You're Safe, I'm Safe) prepared stance. 3) Staff will block any hits by using YSIS techniques. 4) If [client #7] is hitting another person staff will intervene immediately, using their body to block her and use YSIS blocking technique, and redirect her to a quiet area. 5) Staff will do a body assessment and document any reddened areas or marks. 6) Staff will direct [client #7] to talk to staff if something is bothering her."</p> <p>Interview with the Associate Executive Director was conducted on 2/17/16 at 3:30 PM. She stated "we had thought about moving [client #7] to [name of other facility group home] but determined it wasn't a viable option. We figured her behaviors would continue there as well. Even though the client was placed on 1:1 client/staff ratio on 1/6/16, [client #7] still continues to attack the other clients. We have spoken to the BDDS specialist and he is in the process of trying to move the client to a CRMNF (Comprehensive Rehabilitative Needs Facility)."</p> <p>9-3-2(a)</p>			

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W 0192 Bldg. 00	<p>483.430(e)(2) STAFF TRAINING PROGRAM For employees who work with clients, training must focus on skills and competencies directed toward clients' health needs.</p> <p>Based on observation and interview for 1 of 3 additional clients (#5), the facility failed to train staff on how to properly position/place a blood pressure cuff on a client's arm while taking the blood pressure.</p> <p>Findings include:</p> <p>During morning medication pass at the group home on 2/12/16 at 6:15 AM, the Residential Manager (RM) attempted to take the blood pressure of client #5 with an automatic blood pressure cuff. In doing so, the RM placed the blood</p>	W 0192	<p>W 192 Staff Training Program For employees who work with clients, training must focus on skills and competencies directed towards clients' health needs.</p> <p>In order to correct the deficiency with W192:</p> <p>- Staff will be retrained on the correct policy and procedure regarding how to properly position/place a blood pressure cuff on a client's arm while taking the</p>	03/25/2016

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	<p>pressure cuff on client #5's right arm backwards. The staff received an inaccurate reading.</p> <p>Interview with the Director of Nursing services on 2/15/16 at 11:15 AM indicated all staff in the group home have been trained to properly take the clients' blood pressure. She stated "I will have [Name of Group Home Nurse] conduct an in-service/retraining for all staff in regard to accurately taking blood pressure with an automated blood pressure cuff and specifically, proper placement of the blood pressure cuff on the client's arm."</p> <p>9-3-3(a)</p>		<p>blood pressure.</p> <p>- Residential Managers will be retrained on the correct policy and procedure regarding how to properly position/place a blood pressure cuff on a client's arm while taking the blood pressure.</p> <p>- Residential Managers will ensure staff is properly trained on the correct policy and procedure regarding how to properly position/place a blood pressure cuff on a client's arm while taking the blood pressure.</p> <p>- Program Managers will ensure Residential Managers are properly trained on the correct policy and procedure regarding how to properly position/place a blood pressure cuff on a client's arm while taking the blood pressure.</p> <p>Persons Responsible: Staff, Residential Manager, Program Manager, and Executive Director.</p>	

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W 0268 Bldg. 00	<p>483.450(a)(1)(i) CONDUCT TOWARD CLIENT These policies and procedures must promote the growth, development and independence of the client.</p> <p>Based on observation and interview for 1 of 4 sampled clients (#2), the facility failed to ensure the client's dignity in regard to appearance.</p> <p>Findings include:</p> <p>During the 2/12/16 observation period between 5:30 AM and 7:45 AM at the group home, client #2, a female, was sitting on the sofa in the living room watching television. The client had multiple facial hairs on her chin. The client's hair was disheveled (not combed). Client #2 was not been prompted by staff to comb her hair.</p> <p>Client #2's record was reviewed on 2/15/16 at 11:30 AM. Client #2's 11/10/15 ISP (Individual Support Plan) indicated she had a goal "to improve personal hygiene skills therefore increasing independence".</p> <p>Interview with the Associate Executive Director on 2/17/16 at 11:30 AM indicated staff should be aware of the</p>	W 0268	<p>W268: These policies and procedures must promote the growth, development and independence of the client.</p> <p>In order to correct the deficiency with W268:</p> <ul style="list-style-type: none"> - A feminine battery operated facial hair remover has been purchased and will be used by Client #2 to assure proper hygiene and dignity. - Staff will be re-trained regarding expectations for grooming and hygiene for all clients. - Residential Manager will be re-trained regarding expectations for grooming and hygiene for all clients. - Residential Manager will make 	03/25/2016

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W 0407 Bldg. 00	<p>hair growing on client #2's chin and prompt and assist her to utilize a razor to eliminate them.</p> <p>9-3-5(a)</p> <p>483.470(a)(1) CLIENT LIVING ENVIRONMENT The facility must not house clients of grossly different ages, developmental levels, and social needs in close physical or social proximity unless the housing is planned to promote the growth and development of all those housed together. Based on observation, interview and record review for 1 of 3 additional clients</p>	W 0407	<p>daily home checks to assure appropriate grooming and hygiene is maintained.</p> <p>- QIDP will make weekly home checks to assure appropriate grooming and hygiene is maintained.</p> <p>- Program Manager will assure the Residential Manager and QIDP are making sure appropriate client grooming and hygiene is maintained.</p> <p>Persons Responsible: Staff, Residential Manager, QIDP, Program Manager, and Executive Director.</p> <p>W407: The facility must not house clients of grossly different ages,</p>	03/25/2016	

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	<p>(#7), the facility failed to ensure the client was properly placed in an environment which was appropriate for the client's behavioral and psychiatric needs to address the client's physically aggressive behavior.</p> <p>Findings include:</p> <p>Review of the facility's incident reports, BDDS (Bureau of Developmental Disabilities Services) reportables and investigations was completed on 2/11/16 at 1:35 PM.</p> <p>An incident report dated 12/17/15 indicated at "5:50 PM, [Client #7] snatched [client #3's glasses off her face and broke them for the 2nd time." A BDDS report submitted late on 2/8/16 indicated on "12/17/15, [client #3] had her glasses taken off by another client (client #7) and received a small scratch. First aid applied. Grievance policy and bill of rights completed." A Nursing Note completed on 12/17/15 by the group home nurse (reviewed 2/17/16 2:30 PM) indicated "[client #3's] glasses pulled off by peer causing an approximate 1" (inch) superficial abrasion to out left eye and above left brown; no bleeding, skin not broken."</p> <p>An incident report dated 12/18/15</p>		<p>developmental levels, and social needs in close physical or social proximity unless the housing is planned to promote the growth and development of all those housed together.</p> <p>In order to correct the deficiency with W407:</p> <p>Current behavior support plan will be followed for Client #7 including the need to have staff with-in arm's reach of her when outside her bedroom for her and all clients health and safety.</p> <p>The interdisciplinary team has met to discuss placement for client #7, submitted to BDDS, received LOC, and have approval for a Comprehensive Rehabilitative Management Needs Facility and will continue to follow up with the state for alternate placement for client #7.</p> <p>The interdisciplinary team will continue to review all referrals thoroughly to ensure that client placement is planned to promote growth and development of all clients and that the ages,</p>	

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	<p>indicated at "5:00 AM [client #7] walked up to [client #1] and snatched her glasses off her face causing three cuts and several on her shoulder. It broke [client #1's] glasses, lens missing at incident." A BDDS report filed late on 2/16/16 indicated on "12/18/15 [client #1] had her glasses taken off by [client #7] and received 3 minor scratches. First aid applied. Grievance policy and bill of rights completed." A Nursing Note completed on 12/18/15 by the group home nurse (reviewed 2/17/16 2:30 PM) indicated "[client #1] had her glasses pulled off her face by [client #7] causing a 2" (inch) red mark above left brow, abrasion 1/2 " between eyes, 1/4" abrasion to tip of nose and right nostril and 2 - 3" abrasions down left neck area, cleansed with soap and water and triple antibiotic ointment applied. PCP (primary care physician) notified."</p> <p>An incident report dated 12/19/15 indicated at "5:10 AM [client #7] was in her room and got up and went into [client #2's] room, pulled her hair. Staff went and took her back to her own room." A BDDS report filed late on 2/8/16 indicated on "12/19/15 [client #2] had her hair pulled by [client #7]. Grievance policy and bill of rights completed."</p> <p>An incident report dated 12/23/15</p>		<p>developmental levels and social needs of all clients are appropriate prior to admission.</p> <p>Persons Responsible: Staff, Residential Manager, QIDP, Program Manager, and Executive Director.</p>	

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	<p>indicated at "9:30 PM [client #7] hit [client #2] and knocked her glasses off and scratched her forehead." A BDDS report filed late on 2/1/16 indicated on "12/23/15 [client #7] was having a behavior, became angry, and took [client #2's] glasses off. IDT (Interdisciplinary Team) met to discuss the incident."</p> <p>An incident report dated 12/27/15 indicated at "3:50 PM [client #7] came up and tried to snatch [client #4's] glasses off her face. [Client #4] stopped her so [client #7] punched her in the back." A BDDS report filed late on 2/6/16 indicated on "12/27/15 [client #4] was hit in the back by [client #7]. No injuries. Grievance policy and bill of rights completed."</p> <p>A BDDS report filed on 1/3/16 indicated on "1/3/16 [client #7] was sent back to [Name of Local Hospital Emergency Room] for psychiatric evaluation due to aggressive behavior."</p> <p>An incident report dated 1/3/16 indicated at "11:24 AM, [client #7] went up to [client #3] and grabbed a handful of her hair. Staff tried to help while I was running to help. [Client #7] wouldn't let go, she pulled out a handful of hair and laughed the entire time." A BDDS report filed late on 2/6/16 indicated on "1/3/16</p>			

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	<p>[client #3] had her hair pulled by another client (client #7). Grievance policy and bill of rights completed."</p> <p>An incident report dated 1/9/16 indicated "at 10:20 AM [client #7] was sitting on the couch with [Name of Staff] and she got up heading towards [client #3]. Staff got up as soon as she seen (sic) her heading towards [client #3's] glasses." A BDDS report filed late on 2/6/16 indicated on "1/9/16 [client #3] had her glasses taken off by another client. Grievance policy and bill of rights completed." A Nursing Note dated 1/9/16 (reviewed 2/17/16 2:30 PM) indicated "[client #3's] glasses were pulled off of face - no injury noted."</p> <p>An incident report dated 1/10/16 indicated "at 6 AM, [client #3] was sitting in a chair. [Client #7] was walking to table and turned and attacked [client #3]. She (client #3) was scratched, hair pulled, and pushed down making her hit her left eye against the coffee table." A BDDS report filed late on 2/6/16 indicated on "1/10/16 [client #3] had her glasses taken off by another client, scratched, and fell causing her to bump her head on the coffee table. First aid applied, head tracking initiated and PCP notified. Grievance policy and bill of rights completed."</p>			

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	<p>An incident report dated 2/10/16 indicated "[client #7] reached towards [client #3] in an aggressive manner. YSIS (You're Safe I'm Safe-type of defense hold) was utilized. Staff was able to intervene before [client #7] could get to [client #3] except for a scratch on the nose. [Client #7] has attacked and attempted to attack [client #3] many times." A BDDS report filed on 2/12/16 indicated "on 2/10/16, [client #3] received a superficial scratch on her face from [client #7] having a behavior. Client is safe. An investigation has been initiated." An Investigative Summary completed on 2/16/2016 indicated in the conclusion "after review of witness statements and documentation, the investigative committee concludes that staff had [client #7] 1:1 (client to staff) in the kitchen when [client #3] walked into the kitchen. Staff proceeded then to place herself in the middle of the two to protect [client #3] which did help her not get her glasses taken off her face but did cause a scratch to the nose."</p> <p>During review of client #1's record on 2/15/16 at 10:30 AM, an IDT note indicated "[client #1] does not feel safe in the home because of a new client [client #7]. She says she's attacked her several times and the only place she feels safe in</p>			

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	<p>in her room. [Client #1] says she doesn't like the new girl hurting her housemates. She wants her (client #7) out of her home because she doesn't get along with the other housemates. [Client #1] says that [client #7] is a danger to her and the housemates. She is afraid to come out of her room and engage in household activities with [client #7] here."</p> <p>During review of client #2's record on 2/15/16 at 11:30 AM, an IDT note indicated "[Client #2] does not feel same with [client #7] in the home. She is afraid she will come up behind her and pull her hair. She's very scared. She's been attacked four times, and had her hair pulled out. She had a scratch on her head. She does not like having to stay in her room. She says it's not fair she has to stay in her room because [client #7] is going after her. Other clients and staff are also being hurt. She says she is afraid to go to sleep at night because she (client #7) has come in her room at night and pulled her hair."</p> <p>During review of client #7's record on 2/15/16 at 2:30 PM:</p> <p>--an IDT note dated 12/21/15 indicated "due to aggressive behaviors to ensure all clients health and safety the follow (sic) has been approved - 15 minute checks, to</p>			

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	<p>keep her (client #7) in line of sight during waking hours, and a bedroom door alarm to notify third shift. These restrictions are due to [client #7's] physically aggressive behavior towards other clients and staff. The door alarms are due to [client #7] going into other clients' rooms at night and pulling their hair."</p> <p>--an IDT note dated 12/22/15 indicated "[Name of Psychiatrist] recommends adding Navane 2 mg (anti-psychotic) PO (by mouth) BID (twice daily) due to [client #7's] physically aggressive behavior. Team agrees."</p> <p>--an IDT note dated 1/4/16 indicated "Subject: Home meeting with IDT. The IDT met to discuss the following: [client #7's] placement options, new updates to plan of 1:1 staff, clients not feeling safe, will reach out to BDDS, contact [Name of Psychiatrist]."</p> <p>--an IDT note dated 1/6/16 indicated "Subject: Restrictions - The IDT met to discuss the following: due to physically aggressive behaviors, we are to provide [client #7] with a 1:1 staff during waking hours for the safety of her and others. Her one on one is defined as within an arms length. Team agrees this is appropriate."</p> <p>--an IDT note dated 1/7/16 indicated</p>			

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	<p>"Subject: Behavior Issues - Spoke with BDDS regarding [client #7's] behaviors. Team agrees to continue the 1:1 staffing. [Client #7] will meet with [Name of Psychiatrist] tomorrow to discuss admission into the [Name of Psychiatrist's Center] or possible med change. Team and BDDS will meet after the appointment to discuss living options."</p> <p>--an IDT note dated 1/7/16 indicated "Subject: Medicine Change. The IDT met to discuss the following. [Name of Psychiatrist] recommends to discontinue Seroquel (behavior medication) add Zyprexa (behavior medication) 5 mg (milligrams) BID (twice daily) due to increased behavioral issues."</p> <p>--an IDT note dated 1/8/16 indicated "Subject: [Name of Psychiatrist] quarterly review - Start Clozaril 25 mg (schizophrenia medication) BID and increase by 2.5 mg BID per week until 150 mg BID is reached. Will get CBC (complete blood count lab test) weekly to monitor."</p> <p>--an IDT note dated 1/8/16 indicated "[Client #7] is on 1:1 staffing. [Name of Psychiatrist] to start client on Clozaril. Possible opening at [Name of Psychiatrist's Center] in 2 - 3 weeks. She</p>			

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	<p>can stay up to 14 days and also looking at placing at [name of another group home]. Discussed audio alarms, 15 minute checks. She will have a level of care for a visit. BDDS needs dates of visitation (to center if accepted). Discussed bed alarm to notify staff sooner. Consider day program after return from [Name of Psychiatrist's Center] and starting Clozaril. Long term if all fails will look into CRMRF (Comprehensive Rehabilitation Management Needs Facility)."</p> <p>--an IDT note dated 2/4/16 indicated "The IDT met to discuss the following: [client #7's] ISP (Individual Support Plan), BSP (Behavior Support Plan), and MOR (Modification of Rights)."</p> <p>--an IDT noted dated 2/4/16 indicated "Discussed referring [client #7] to CRMNF in [Name of City]. BDDS sent all behavior and incident reports to central office. May be a waiting period or a wait list. [Name of Psychiatrist] recommends this placement. BDDS agrees to suspend home visits at [Name of other group home]."</p> <p>Also included in client #7's record review was an Inservice Sign-In Sheet dated 1/19/16 where the RM (group home manager) was "reviewed on proper</p>			

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	<p>documentation, all clients' BSPs and HRP (high risk plans) as well as reviewed interaction techniques in conversing with clients - voice, distance and staffing."</p> <p>An electronic email from the local BDDS specialist assigned to client #7, dated 2/10/16, indicated "Hello, I wanted to let you know that [client #7] was added to the CRMNF referral list. Please let me know if you have any questions. Thanks." The electronic email was electronically signed by the BDDS specialist.</p> <p>Client #7's BSP dated 12/17/2015 and revised on 1/27/16 indicated "mechanical supports - Bedroom Door Alarm". Her BSP indicated reactive strategies for physical aggression include:</p> <p>"1) Staff will prompt [client #7] to stop being physically aggressive in a loud firm tone of voice. 2) Staff will assume the YSIS (You're Safe, I'm Safe) prepared stance. 3) Staff will block any hits by using YSIS techniques. 4) If [client #7] is hitting another person staff will intervene immediately, using their body to block her and use YSIS blocking technique, and redirect her to a quiet area. 5) Staff will do a body assessment and document any reddened areas or marks.</p>			

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	<p>6) Staff will direct [client #7] to talk to staff if something is bothering her."</p> <p>Interview with the Associate Executive Director was conducted on 2/17/16 at 3:30 PM. She stated "we had thought about moving [client #7] to [name of other facility group home] but determined it wasn't a viable option. We figured her behaviors would continue there as well. Even though the client was placed on 1:1 client/staff ratio on 1/6/16, [client #7] still continues to attack the other clients. We have spoken to the BDDS specialist and he is in the process of trying to move the client to a CRMNF (Comprehensive Rehabilitative Management Needs Facility)."</p> <p>9-3-7(a)</p>			

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

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