

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 15G363	X2) MULTIPLE CONSTRUCTION A. BUILDING 00 B. WING _____	X3) DATE SURVEY COMPLETED 07/27/2012
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NAME OF PROVIDER OR SUPPLIER TRANSITIONAL SERVICES SUB LLC	STREET ADDRESS, CITY, STATE, ZIP CODE 84 S WALNUT ST DANVILLE, IN 46122
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W0000	<p>This survey was for the investigation of complaint #IN00110904.</p> <p>Complaint #IN00110904: Substantiated with no Federal and State deficiency related to the allegation cited.</p> <p>Unrelated deficiencies cited.</p> <p>Survey dates: July 26 and 27, 2012</p> <p>Facility number: 000877 Provider number: 15G363 AIMS number: 100244220</p> <p>Surveyor: Brenda Nunan, RN, CDDN, Public Health Nurse Surveyor III</p> <p>These deficiencies also reflect state findings in accordance with 460 IAC 9.</p> <p>Quality Review was completed on 8/2/12 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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W0189	<p>483.430(e)(1) STAFF TRAINING PROGRAM</p> <p>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.</p> <p>Based on record review and interview, the facility failed to train staff in safe procedures for placing a client, who refused to voluntarily leave a community location, in the van for 1 of 4 sampled clients (client B),</p> <p>Findings include:</p> <p>The facility's reportable incidents were reviewed on 07/26/2012 at 12:13 p.m. An Indiana Division of Disability and Rehabilitative Services Incident Report, dated, 05/09/2012 at 4:35 p.m., indicated client B refused to leave the day program and was escorted using 4 staff to lift her into the van. The record indicated 2 staff lifted client B's upper body and 2 staff lifted the lower body.</p> <p>An Indiana Division of Disability and Rehabilitative Services Incident Report, dated, 06/29/2012 at 9:30 a.m. indicated bruises on client B's right arm were the result of "several staff" attempting to place client B in the van.</p> <p>Client B's record was reviewed on 07/26/2012 at 3:44 p.m. A "HEALTH</p>	W0189	Behavioral Specialist will update the Behavioral Support plan to include alternative methods for safely escorting client B when the existing strategies are not effective. Program Director will retrain staff on the updated Behavioral Support Plan to include alternative methods for safely escorting client B. Staff will be trained by Physical Therapist on transfers and lift training when client B refuses to stand or move. Responsible Party: Behavioral Specialist, Program Director, Physical Therapist Completion Date: 8/26/12	08/26/2012	

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	<p>CARE COORDINATION/MONTHLY HEALTH REVIEW," dated May 2012, indicated, "...Small abrasion noted Lt (left) knee and 3 cm (centimeter) x (by) 3 cm purple bruise noted under Lt arm, both of which occurred when staff was assisting client with leaving day program yesterday...."</p> <p>A "HEALTH CARE COORDINATION/MONTHLY HEALTH REVIEW," dated 07/02/2012, indicated, "...Resolving bruises on Rt (right) posterior upper arm and resolving abrasion on knees which occurred several days ago when client refused to leave day programming...."</p> <p>A Behavior Support Plan (BSP), dated 2/2/12, indicated target behaviors of type 1 resistance (failure to complete any task after the deadline specified) and 2 resistance.(refusal to comply with and incidental staff request to cease/initiate a behavior), physical assault and self injurious behaviors. The BSP indicated, "...Historically, [client B] often refuses to leave community places...If [client B] refuses, give her 5 minutes and ask again. During the 5 minutes minimize your interaction with [client B]. Once the five minutes are up ask her again to leave. If she still refuses, use the gait belt to guide her out of the location...." The BSP did</p>			

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	<p>not address alternative methods for safely escorting client B onto the van when the existing BSP strategies were not effective.</p> <p>An "INSERVICE RECORD," dated September 6, 2011, indicated group home and day program staff were trained to use a gait belt to assist client B off the floor during a refusal to leave a community location. A gait belt protocol, dated 09/06/2011, indicated, "...Keep the gait belt with [client B] when she leaves the group home, although she DOES NOT need to wear it...When possible, have 2 staff assist her up from the floor to avoid injury to [client B] or the staff..." The training record did not indicate staff were retrained in safe techniques for lifting client B onto the van.</p> <p>During an interview on 06/26/2012 at 1:20 p.m., the Qualified Developmental Disabilities Professional (QDDP) indicated staff had been trained to use the gait belt to assist client B when refusing to leave an area. She indicated staff had not been retrained in techniques for safely escorting client B onto the van following incidents where client B received injuries while staff lifted client B onto the van.</p> <p>During an interview on 06/26/2012 at 2:50 p.m., Direct Support Professional (DSP) #1 indicated she had been trained</p>			

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	<p>to use the gait belt to escort client B when she refused to leave an area. The DSP indicated she had not been trained to techniques for lifting client B when she refused to voluntarily leave a community location.</p> <p>During an interview on 06/26/2012 at 2:55 p.m., DSP #2 indicated she was trained to use a gait belt to assist client B to a standing position. She indicated she had not been trained in techniques for lifting client B when she refused to voluntarily leave a community location.</p> <p>During an interview on 06/26/2012 at 2:55 p.m., the House Manger, indicated staff were trained to use the gait belt. She stated, "Nothing works when she refuses to get on the van." The House Manager indicated staff had not received training for lifting client B when she refused to voluntarily leave a community location.</p> <p>During an interview on 06/27/2012 at 10:25 a.m., DSP #4 indicated she had been trained to use the gait belt to assist client B onto the van when she refused to board voluntarily. She indicated she had not been trained in alternative methods for lifting client B into the van.</p> <p>9-3-4(a)</p>				

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W0210	<p>483.440(c)(3) INDIVIDUAL PROGRAM PLAN Within 30 days after admission, the interdisciplinary team must perform accurate assessments or reassessments as needed to supplement the preliminary evaluation conducted prior to admission.</p> <p>Based on record review and interview, the facility failed to assess safe procedures for placing a client, who refused to voluntarily leave a community location, in the van for 1 of 4 sampled clients (client B),</p> <p>Findings include:</p> <p>The facility's reportable incidents were reviewed on 07/26/2012 at 12:13 p.m. An Indiana Division of Disability and Rehabilitative Services Incident Report, dated, 05/09/2012 at 4:35 p.m., indicated client B refused to leave the day program and was escorted using 4 staff to lift her into the van. The record indicated 2 staff lifted client B's upper body and 2 staff lifted the lower body.</p> <p>An Indiana Division of Disability and Rehabilitative Services Incident Report, dated, 06/29/2012 at 9:30 a.m. indicated bruises on client B's right arm were the result of "several staff" attempting to place client B in the van.</p> <p>Client B's record was reviewed on</p>	W0210	Behavioral Specialist will update the Behavioral Support plan to include alternative methods for safely escorting client B when the existing strategies are not effective. Program Director will retrain staff on the updated Behavioral Support Plan to include alternative methods for safely escorting client B. Staff will be trained by Physical Therapist on transfers and lift training when client B refuses to stand or move. Responsible Party: Behavioral Specialist, Program Director Completion Date: 8/26/12	08/26/2012			

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	<p>her out of the location...." The BSP did not address alternative methods for safely escorting client B onto the van when the existing BSP strategies were not effective.</p> <p>During an interview on 06/26/2012 at 1:20 p.m., the Qualified Developmental Disabilities Professional (QDDP) indicated staff had been trained to use the gait belt to assist client B when refusing to leave an area. She indicated the IDT had not met to discuss alternative methods for safely escorting client B onto the van when the existing BSP strategies were not effective..</p> <p>9-3-4(a)</p>			