

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 15G346	X2) MULTIPLE CONSTRUCTION A. BUILDING 00 B. WING _____	X3) DATE SURVEY COMPLETED 06/04/2014
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NAME OF PROVIDER OR SUPPLIER BLUE RIVER SERVICES INC	STREET ADDRESS, CITY, STATE, ZIP CODE 118 N NICHOLS AVE SALEM, IN 47167
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W000000	<p>This visit was for an annual fundamental recertification and state licensure survey.</p> <p>Dates of Survey: June 2, 3 and 4, 2014,</p> <p>Surveyor: Dotty Walton, QIDP.</p> <p>Facility Number: 000862 AIM Number: 100385670 Provider Number: 15G346</p> <p>The following deficiencies reflect state findings in accordance with 460 IAC 9. Quality Review completed 6/18/14 by Ruth Shackelford, QIDP.</p>	W000000		
W000312	<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. Based on record review and interview for 1 of 2 sampled clients who used drugs for inappropriate behavior, (#1), the facility failed to ensure the use of behavior drugs (risperadone/lexapro) was included in the client's plan.</p>	W000312	<p>W312 We have no records for Client # 1 listing a diagnosis of Intermittent Explosive Disorder. Client #1 visited the Psychiatrist on May 92014 and was diagnosed with Psychotic Disorder NOS, Mood Disorder NOS,</p>	07/04/2014

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>Findings include:</p> <p>Client #1's record was reviewed on 6/03/14 at 10:00 AM. His 6/14 MAR (Medication Administration Record) indicated a generic form of the anti-psychotic drug Risperdal (risperadone) 1.00 mg/milligrams was prescribed twice daily for IED (Intermittent Explosive Disorder) by the consulting psychiatrist on 5/15/14 "for hallucinations and psychosis." Client #1 was prescribed lexapro (anti-depressant) for depression/anxiety 10 mg. daily since 11/20/13 by his consulting neurologist. Client #1's record review indicated a BSP/Behavior Support Program dated 11/07/13; the BSP did not contain the use of lexapro or risperadone as behavioral medications. The BSP contained the following information: "[Client #1] has a diagnosis of Mild Mental Retardation and a Seizure Disorder, but no diagnosis of any mental illness. He is not prescribed any psychotropic medications. [Client #1] has generally exhibited positive and appropriate behavior, though he did have a formal goal in the past to address his inappropriate interactions with females. This was discontinued as a formal area as the behavior subsided and has not been an issue since. His current challenging behavior is in the form of relaying</p>		<p>andAnxiety Disorder NOS. We have no record of client # 1 seeing a Psychiatrist onMay 15, 2014. The symptoms client # 1 is exhibiting are being monitored anddocumented. All staff was trained on June 6, on what forms to use and how totrack client # 1 symptoms. Client #1's BSP will be updated to include allmedications that client #1 has been prescribed and distributed to the IDT.</p> <p>To protect other clients: All clients' BSPs will be reviewedto ensure that all behavioral drugs are included in the plan. All symptoms andtarget behaviors to track will be updated if necessary.</p> <p>To prevent recurrence: The IDT will meet to discuss any newor changing behaviors. The team will develop a plan to address the behaviors.Medications will be used only when other methods used to address the behaviordo not work or if the severity of the behavior poses a significant risk. When anew medication is prescribed, the Behavior Specialist, Nurse, and other IDT teammembers will be notified by the Manager. The Behavior Specialist will updatethe BSP to include the symptoms and target behavior to track.The staff will be trained on the plan.</p> <p>Quality assurance: Home Manager will notify the BehaviorSpecialist of any medication change. The Manager will send an updatedmedication list to</p>				

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	<p>non-factual information. This has included false accusations against staff and false or exaggerated medical/physical complaints. He also has a history of interacting inappropriately, as he tends to 'boss,' threaten and intimidate co-workers, and occasionally tries to do tasks for them or answer for them. He can also be rude and argumentative on occasion. However, this behavior has subsided over the past year." The behavior data sheet which accompanied the BSP indicated data was being collected for the targeted behaviors of lying, exaggerating, false allegations, and gossip/rumors. The program data collected did not include the above mentioned "hallucinations and psychosis," behaviors associated with IED, or signs/symptoms of depression/anxiety. The behaviors for these issues were not specified in a plan.</p> <p>An interview with staff #1 was conducted on 6/03/14 at 2:15 P.M. The interview indicated the 11/07/13 BSP was the most current; and the reason the medication was not included in the BSP was unknown.</p> <p>9-3-5(a)</p>		<p>Administrative Assistant. The Behavior Specialist will sendan updated BSP to the Administrative Assistant. The Administrative Assistant willcheck to ensure the BSP contains all the medications the client is currentlytaking.</p> <p>Responsible parties: Home Manager, Behavior Specialist, andAdministrative Assistant.</p>		

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W000313	<p>483.450(e)(3) DRUG USAGE</p> <p>Drugs used for control of inappropriate behavior must not be used until it can be justified that the harmful effects of the behavior clearly outweigh the potentially harmful effects of the drugs.</p> <p>Based on record review and interview for 1 of 2 sampled clients (#1) with medications prescribed to control maladaptive behaviors, the IDT (Interdisciplinary Team) failed to conduct a review of the risks of taking the medications as compared to the risks of the behaviors.</p> <p>Findings include:</p> <p>Client #1's record was reviewed on 6/03/14 at 10:00 AM. His 6/14 MAR (Medication Administration Record) indicated a generic form of the anti-psychotic drug Risperdal (risperadone) 1.00 mg/milligrams was prescribed twice daily for IED (Intermittent Explosive Disorder) by the consulting psychiatrist on 5/15/14 "for hallucinations and psychosis." Client #1 was prescribed lexapro (anti-depressant) for depression/anxiety 10 mg. daily since</p>	W000313	<p>W313</p> <p>We have no records for Client # 1 listing a diagnosis of Intermittent Explosive Disorder. Client #1 visited the Psychiatrist on May 9 2014 and was diagnosed with Psychotic Disorder NOS, Mood Disorder NOS, and Anxiety Disorder NOS. The IDT team including the consulting Pharmacist will meet to discuss the risks of taking such medication compared to the risks of the behaviors.</p> <p>To protect other clients: IDT team and Pharmacist will review all other clients' current lists of medications and compared the risks of the medications along with the behaviors.</p> <p>To prevent recurrence: If behavioral issues arise with clients and any new medication is prescribed, the IDT team including the consulting Pharmacist will be notified and discuss the need for the medication. The risks of taking such</p>	07/04/2014

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	<p>11/20/13 by his consulting neurologist.</p> <p>Client #1's record review indicated a BSP/Behavior Support Program dated 11/07/13; the BSP did not contain the use of lexapro or risperadone as behavioral medications.</p> <p>The client's record did not indicate the IDT had reviewed the risks of taking the medications as compared to the risks of the behaviors.</p> <p>An interview with staff #1 was conducted on 6/03/14 at 2:15 P.M. The interview indicated the 11/07/13 BSP was the most current; and the reason the she did not have documentation the IDT had reviewed client #1's use of behavior modification medications outweighed the potential harmful effects of the medication was unknown.</p> <p>9-3-5(a)</p>		<p>medication along with the behaviors will also bereviewed. The IDT will recommend use of behavior medications only if the behaviors pose a significant risk to the individual and other methods of behavior modification are not successful.</p> <p>Quality assurance: The Home Manager will notify the Behavior Specialist and Pharmacist of the medication prescribed. The Pharmacist will review each client quarterly and will review the possible risks of the medications prescribed. The Home Manager will ensure that all Pharmacist recommendations are implemented.</p> <p>Responsible parties: Home Manager, Consulting Pharmacist, and Behavior Specialist</p>		