

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 15G181	X2) MULTIPLE CONSTRUCTION A. BUILDING 00 B. WING _____	X3) DATE SURVEY COMPLETED 09/29/2014
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NAME OF PROVIDER OR SUPPLIER CHILD ADULT RESOURCE SRV INC	STREET ADDRESS, CITY, STATE, ZIP CODE 442 VINE ST CLINTON, IN 47842
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W000000	<p>This visit was for a recertification and state licensure survey.</p> <p>Dates of Survey: September 22, 24, 25, 26, 29, 2014</p> <p>Provider Number: 15G181 Aims Number: 100234680 Facility Number: 000714</p> <p>Surveyor: Mark Ficklin, QIDP</p> <p>These deficiencies also reflect state findings in accordance with 460 IAC 9. Quality Review completed 10/7/14 by Ruth Shackelford, QIDP.</p>	W000000		
W000125	<p>483.420(a)(3) PROTECTION OF CLIENTS RIGHTS The facility must ensure the rights of all clients. Therefore, the facility must allow and encourage individual clients to exercise their rights as clients of the facility, and as citizens of the United States, including the right to file complaints, and the right to due process.</p> <p>Based on observation, interview and record review for 3 of 3 sampled clients (#1, #2, #3), the facility failed to ensure the clients had the right to due process in regard to alarms on the freezer and the</p>	W000125	It is C.A.R.S. practice that each client receive acopy of the C.A.R.S. Grievance Procedure, Individual Rights &Responsibilities and the	10/13/2014

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>snack food cabinet.</p> <p>Findings include:</p> <p>An observation was done on 9/24/14 at the group home for clients #1, #2 and #3 from 3:44p.m. to 6:08p.m. At 3:52p.m., during a walk through of the facility, alarms were observed to be placed on the freezer and on a cabinet in the kitchen. At 4:17p.m., direct care staff #3 indicated there were alarms placed on the freezer and on a snack cabinet in the kitchen due to client #3's food stealing behavior.</p> <p>Record review for client #1 was done on 9/25/14 at 8:30a.m. Client #1's 12/6/13 individual support plan (ISP) did not indicate/include the facility practice to have alarms placed on the freezer and the snack cabinet.</p> <p>Record review for client #2 was done on 9/25/14 at 9:02a.m. Client #2's 12/6/13 ISP did not indicate/include the facility practice to have alarms placed on the freezer and the snack cabinet.</p> <p>Record review for client #3 was done on 9/25/14 at 7:58a.m. Client #3's 12/6/13 ISP did not indicate/include the facility practice to have alarms placed on the freezer and the snack cabinet.</p>		<p>Notice of Privacy Practice upon starting services and annually thereafter. It is also C.A.R.S. practice to have these documents readily available to each client at their respective Day Service site and Group Home. On December 3, 2013 during the Clinton House annual meetings, all 6 Clinton House residents (Client #1, #2, #3, #4, #5, #6) received a copy of these documents. At this time, these practices were explained to the residents as well. In December 2014, these practices will be explained and given to all 6 Clinton House residents (Client #1, #2, #3, #4, #5, #6) again at their annual meeting.</p> <p>On September 30, 2014, C.A.R.S. CEO, held a Human Rights Committee Phone Conference requesting approval for the use of alarms on the freezer and the snack cabinet in the Clinton House due to Client #3's behavior of hoarding food. The HRC Committee approved this request for all 6 Clinton House residents</p>				

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	<p>Professional staff #1 was interviewed on 9/25/14 at 10:18a.m. Staff #1 indicated the freezer and snack alarms were due to client #3's food stealing behavior. Staff #1 indicated this restriction was not addressed in clients #1, #2 and #3's ISPs.</p> <p>9-3-2(a)</p>		<p>(Client #1, #2, #3, #4, #5, #6). It is C.A.R.S. practice that HRC approvals bereviewed by the IDT on an annual basis. Once the IDT determines the "restriction" needs to be kept in place, therestriction is sent back to the HRC for annual re-approval. C.A.R.S. will request the use of alarms onthe freezer and the snack cabinet in the Clinton House for all 6 residents (Client#1, #2, #3, #4, #5, #6) due to Client #3's behavior of hoarding food again inDecember 2014 and annually thereafter until the restriction is deemed no longer necessary by the IDT. On October 13, 2014,C.A.R.S. QMRP updated all 6 Clinton House resident's ISP's (Client #1, #2, #3,#4, #5, #6) to state, within the Home Modification section, that "HRC hasapproved alarms within the kitchen due to a client's behavior of hoardingfood." Clinton House's annual meetingsare scheduled for December 2014, where all ISP's for each resident (Client #1,#2, #3, #4, #5, #6) will be</p>		

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W000264	483.440(f)(3)(iii) PROGRAM MONITORING & CHANGE The committee should review, monitor and make suggestions to the facility about its practices and programs as they relate to drug usage, physical restraints, time-out rooms, application of painful or noxious stimuli, control of inappropriate behavior, protection of client rights and funds, and any other areas that the committee believes need to be addressed.		reviewed and updated as deemed necessary. Each ISP will continue to state, within the Home Modification section, that alarms will be used in the kitchen due to client's behavior for hoarding food until the alarms are deemed no longer necessary by the IDT. On October 13, 2014 , C.A.R.S. QMRP also updated Client #3's ISP to state, within the Behavior Issues section, that "There is HRC approval for alarms in the kitchen due to food hoarding." This ISP will continue to state for Client #3, within the Behavior Issues section, that alarms will be used in the kitchen due to a this client's behavior for hoarding food until the alarms are deemed no longer necessary by the IDT.	

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	<p>Based on observation, record review and interview, the facility's Human Rights Committee (HRC) failed for 6 of 6 clients (#1, #2, #3, #4, #5, #6) to review all restrictive interventions: the facility practice of restricting client access to the freezer and the kitchen snack cabinet.</p> <p>Findings include:</p> <p>An observation was done on 9/24/14 at the group home for clients #1, #2 and #3 from 3:44p.m. to 6:08p.m. At 3:52p.m., during a walk through of the facility, alarms were observed to be placed on the freezer and on a cabinet in the kitchen. At 4:17p.m., direct care staff #3 indicated there were alarms placed on the freezer and on a snack cabinet in the kitchen due to client #3's food stealing behavior.</p> <p>Record review of the facility's HRC reviews from 9/1/13 to 9/25/14 was done on 9/25/14 at 10:02a.m. There was no documentation the HRC had reviewed the facility's restrictive practice of restricting clients' (#1, #2, #3, #4, #5, #6) access to the freezer and snack kitchen cabinet.</p> <p>Interview of professional staff #1 on 9/25/14 at 10:18a.m. indicated the facility restriction of alarms on the freezer and kitchen snack cabinet had not been</p>	W000264	<p>It is C.A.R.S. practice that each client receive acopy of the C.A.R.S. Grievance Procedure, Individual Rights &Responsibilities and the Notice of Privacy Practice upon starting services andannually thereafter. It is also C.A.R.S.practice to have these documents readily available to each client at theirrespective Day Service site and Group Home. On December 3, 2013 during the Clinton House annual meetings, all 6Clinton House residents (Client #1, #2, #3, #4, #5, #6) received a copy ofthese documents. At this time, thesepractices were explained to the residents as well. In December 2014, these practices will beexplained and given to all 6 Clinton House residents (Client #1, #2, #3, #4,#5, #6) again at their annual meeting.</p> <p>On September 30, 2014,C.A.R.S. CEO, held a Human Rights Committee Phone Conference requestingapproval for the use of alarms on the freezer and the snack cabinet in theClinton</p>	10/13/2014			

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	presented to and reviewed by the facility's HRC. 9-3-4(a)		House due to Client #3's behavior of hoarding food. The HRC Committee approved this request for all 6 Clinton House residents (Client #1, #2, #3, #4, #5, #6). It is C.A.R.S. practice that HRC approvals be reviewed by the IDT on an annual basis. Once the IDT determines the "restriction" needs to be kept in place, the restriction is sent back to the HRC for annual re-approval. C.A.R.S. will request the use of alarms on the freezer and the snack cabinet in the Clinton House for all 6 residents (Client #1, #2, #3, #4, #5, #6) due to Client #3's behavior of hoarding food again in December 2014 and annually thereafter until the restriction is deemed no longer necessary by the IDT. On October 13, 2014 , C.A.R.S. QMRP updated all 6 Clinton House resident's ISP's (Client #1, #2, #3, #4, #5, #6) to state, within the Home Modification section, that "HRC has approved alarms within the kitchen due to a client's behavior of hoarding food."		

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W000289	483.450(b)(4) MGMT OF INAPPROPRIATE CLIENT BEHAVIOR The use of systematic interventions to manage inappropriate client behavior must		Clinton House's annual meetings are scheduled for December 2014, where all ISP's for each resident (Client #1, #2, #3, #4, #5, #6) will be reviewed and updated as deemed necessary. Each ISP will continue to state, within the Home Modification section, that alarms will be used in the kitchen due to a client's behavior for hoarding food until the alarms are deemed no longer necessary by the IDT. On October 13, 2014 , C.A.R.S. QMRP also updated Client #3's ISP to state, within the Behavior Issues section, that "There is HRC approval for alarms in the kitchen due to food hoarding." This ISP will continue to state for Client #3, within the Behavior Issues section, that alarms will be used in the kitchen due to a this client's behavior for hoarding food until the alarms are deemed no longer necessary by the IDT.		

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	<p>be incorporated into the client's individual program plan, in accordance with §483.440(c)(4) and (5) of this subpart. Based on observation, record review and interview, the facility failed for 1 of 2 sampled clients (#3) with a restrictive behavior management plan, to ensure that all interventions (freezer and kitchen snack cabinet alarms) to manage client #3's behaviors were included in the client's individual support plan (ISP).</p> <p>Findings include:</p> <p>An observation was done on 9/24/14 at the group home for clients #1, #2 and #3 from 3:44p.m. to 6:08p.m. At 3:52p.m., during a walk through of the facility, alarms were observed to be placed on the freezer and on a cabinet in the kitchen. At 4:17p.m., direct care staff #3 indicated there were alarms placed on the freezer and on a snack cabinet in the kitchen due to client #3's food stealing behavior.</p> <p>Review of the record of client #3 was done on 9/25/14 at 7:58a.m. Client #3's 12/6/13 ISP indicated client #3 had a history of food bingeing and taking food from the freezer. Client #3's ISP addressed his identified behavior of "hoarding food." Client #3's ISP did not include the facility's behavioral intervention of alarms placed on the</p>	W000289	<p>It is C.A.R.S. practice that each client receive acopy of the C.A.R.S. Grievance Procedure, Individual Rights &Responsibilities and the Notice of Privacy Practice upon starting services andannually thereafter. It is also C.A.R.S.practice to have these documents readily available to each client at theirrespective Day Service site and Group Home. On December 3, 2013 during the Clinton House annual meetings, all 6Clinton House residents (Client #1, #2, #3, #4, #5, #6) received a copy ofthese documents. At this time, thesepractices were explained to the residents as well. In December 2014, these practices will beexplained and given to all 6 Clinton House residents (Client #1, #2, #3, #4,#5, #6) again at their annual meeting.</p> <p>On September 30, 2014, C.A.R.S. CEO, held a Human Rights Committee Phone Conference</p>	10/13/2014

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	<p>freezer and kitchen snack cabinet.</p> <p>Interview of staff #1 on 9/25/14 at 10:18a.m., indicated the facility's freezer and kitchen snack cabinet alarms were for client #3's identified behavior of food stealing. Staff #1 indicated client #3's behavioral program intervention (alarms) had not been incorporated into client #3's ISP.</p> <p>9-3-5(a)</p>		<p>requesting approval for the use of alarms on the freezer and the snack cabinet in the Clinton House due to Client #3's behavior of hoarding food. The HRC Committee approved this request for all 6 Clinton House residents (Client #1, #2, #3, #4, #5, #6). It is C.A.R.S. practice that HRC approvals be reviewed by the IDT on an annual basis. Once the IDT determines the "restriction" needs to be kept in place, the restriction is sent back to the HRC for annual re-approval. C.A.R.S. will request the use of alarms on the freezer and the snack cabinet in the Clinton House for all 6 residents (Client #1, #2, #3, #4, #5, #6) due to Client #3's behavior of hoarding food again in December 2014 and annually thereafter until the restriction is deemed no longer necessary by the IDT. On October 13, 2014, C.A.R.S. QMRP updated all 6 Clinton House resident's ISP's (Client #1, #2, #3, #4, #5, #6) to state, within the Home Modification section, that "HRC</p>		

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			hasapproved alarms within the kitchen due to a client's behavior of hoardingfood." Clinton House's annual meetingsare scheduled for December 2014, where all ISP's for each resident (Client #1,#2, #3, #4, #5, #6) will be reviewed and updated as deemed necessary. Each ISP will continue to state, within theHome Modification section, that alarms will be used in the kitchen due to aclient's behavior for hoarding food until the alarms are deemed no longer necessary by the IDT. On October 13, 2014 ,C.A.R.S. QMRP also updated Client #3's ISP to state, within the Behavior Issuessection, that "There is HRC approval for alarms in the kitchen due to foodhoarding." This ISP will continue tostate for Client #3, within the Behavior Issues section, that alarms will beused in the kitchen due to a this client's behavior for hoarding food until thealarms are deemed no longer necessary by the IDT.		