

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 15G492	X2) MULTIPLE CONSTRUCTION A. BUILDING <u>00</u> B. WING _____	X3) DATE SURVEY COMPLETED 12/14/2015
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NAME OF PROVIDER OR SUPPLIER COMMUNITY ALTERNATIVES SW IN	STREET ADDRESS, CITY, STATE, ZIP CODE 1480 W 47TH ST JASPER, IN 47546
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W 0000 Bldg. 00	<p>This visit was for a fundamental recertification and state licensure survey</p> <p>Survey Dates: December 9, 10, 11 and 14, 2015</p> <p>Provider Number: 15G492 AIMS Number: 100235270 Facility Number: 001006</p> <p>These deficiencies also reflect state findings in accordance with 460 IAC 9. Quality Review of this report completed by #15068 on 1/4/16.</p>	W 0000		
W 0125 Bldg. 00	<p>483.420(a)(3) PROTECTION OF CLIENTS RIGHTS</p> <p>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>	W 0125		01/08/2016

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>Based on observation and interview for 2 of 4 sampled clients (#1 and #4), the facility failed to ensure the rights of the clients by not allowing them the opportunity to attend a Work Shop Program for a sufficient length of time to be able to earn maximum wages.</p> <p>Findings include:</p> <p>Upon arriving at the day Work Shop Program approximately 65 miles from the group home at 10:30 AM local time (11:30 AM group home time) on 12/11/15, clients #1 and #4 were observed getting out of the group home van in front of the Work Shop. At 10:45 AM clients #1 and #4 were observed putting handles on buckets (one of several job duties at the Work Shop Program). Both were focused on their job duties and working at a consistent pace for approximately 30 minutes. Both were working independently with no prompting needed from the Work Shop supervisor.</p> <p>The Work Shop Program Manager was interviewed at 10:50 AM on 12/11/15. He stated "[Client #1] and [Client #4] just arrived at the Work Shop." He stated "the clients from the group home frequently arrive late not giving them the opportunity to work a full day." He stated</p>		<p>W125: 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>Corrective Action: (Specific): All staff will be in-serviced on assisting all individuals with getting ready in the morning and preparing to leave the home no later than 8:00 am to go to workshop and working until at least 3:00 pm on the days they are to attend.</p> <p>How others will be identified: (Systemic): The Residential Manager will be in the home at least five times weekly to ensure that all clients are being assisted with morning routine and are leaving for the workshop no later than 8:00 am and are working until at least 3:00 pm on the days they are to attend workshop. The QIDP will follow up with the workshop at least weekly regarding attendance, arrival and departure time for all clients. Any issues or problems will be</p>	

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	<p>"the Van Driver from the Group Home then tries to pick them up at 2:15 PM instead of 3 PM which is our normal stopping time for all the clients to be picked up. I have emailed [Name of Executive Director of the facility] numerous times and have yet to get a reply. The clients are only working 3 - 4 hours per day instead of 6 or 7 hours like the other clients. I have indicated in the emails (to the Executive Director) the clients should arrive no later than 10:00 AM local time and not be picked up until 3:00 PM in the afternoon. That way they are working more time than they are riding in the van. The facility is not giving them (the clients) the opportunity to earn the maximum amount of money they are able to." He also stated "both clients are good workers; I have little to no problem with them."</p> <p>Client #1 was interviewed on 12/11/15 at 11:20 AM. He stated "I like working at the Work Shop and like to earn money."</p> <p>Client #4 was interviewed at 11:26 AM on 12/11/15. He stated "I don't mind working during the day." When asked if he comes to the workshop Monday through Friday, he stated "not all the time. We miss a few days sometimes."</p> <p>In an electronic interview (email) with</p>		<p>addressed with the Residential Manager and corrected.</p> <p>Measures to be put in place: All staff will be in-serviced on assisting all individuals with getting ready in the morning and preparing to leave the home no later than 8:00 am to go to workshop and working until at least 3:00 pm on the days they are to attend.</p> <p>Monitoring of Corrective Action: The Residential Manager will be in the home at least five times weekly to ensure that all clients are being assisted with morning routine and are leaving for the workshop no later than 8:00 am and are working until at least 3:00 pm on the days they are to attend workshop. The QIDP will follow up with the workshop at least weekly regarding attendance, arrival and departure time for all clients. Any issues or problems will be addressed with the Residential Manager and corrected.</p> <p>Completion date: 01/08/2016</p>				

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W 0209 Bldg. 00	<p>the facility Quality Assurance Coordinator on 12/11/15 at 2:04 PM, she stated "as for being late, we know this has been an ongoing problem. Truthfully, it is just the clients who are having a difficult time getting into a good routine. There are many days where some clients are refusing to go or one of the clients may have an accident before they are about to leave. We are also having staffing issues that we are addressing currently. We are looking to switch the night staff to someone more consistent and reliable in order to get the clients in a more regular morning routine. [Name of Executive Director] is also working on some schedule adjustments, now that we have been able to get some additional staff in the homes to allow for a higher staffing ratio during the day when there are clients that need certain accommodations or assistance in the morning."</p> <p>9-3-2(a)</p> <p>483.440(c)(2) INDIVIDUAL PROGRAM PLAN Participation by the client, his or her parent (if the client is a minor), or the client's legal</p>				

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	<p>guardian is required unless the participation is unobtainable or inappropriate.</p> <p>Based on record review and interview for 2 of 4 sampled clients (#1 and #2), the facility failed to obtain the clients' or the parent/guardians' approval/signature for their ISPs (Individual Support Plans).</p> <p>Findings include:</p> <p>Client #1's record review was completed on 12/10/15 at 10:44 AM. The ISP dated 5/29/15 did not include the client's signature or the signature of his parent/guardian.</p> <p>Client #2's record was reviewed on 12/10/15 at 10:05 AM. The ISP dated 5/29/15 did not include the client's signature or the signature of his parent/guardian.</p> <p>Interview with the QIDP was completed on 12/10/15 at 1:34 PM. She stated "both clients' plans should be signed by the client and/or parent/guardian. Since both plans were revised on 5/29/15, I'm not sure why we have not obtained the appropriate signatures by now. The clients were not invited to participate in their annual IDT (Interdisciplinary Team) meetings."</p>	W 0209	<p>W209: Participation by the client, his or her parents (if the client is a minor), or the client's legal guardian is required unless the participation is unobtainable or inappropriate.</p> <p>Corrective Action: (Specific): The QIDP will be in-serviced on the client, parents or legal guardian's participation in their annual IDT meetings and obtaining signature for program plans from the client, parent or legal guardian. Client #1 and Client #2 will have a meeting scheduled to review their current program plans and the clients, parents or legal guardians will be invited to participate and signature form the client, parents or legal guardian will be obtained.</p> <p>How others will be identified: (Systemic) The Program Manager will review all clients ISP's and meeting notes to ensure that the client, parents or legal guardians participated in the annual IDT meetings and that signatures on all program plans have been obtained by the client, parent or legal guardian.</p> <p>Measures to be put in place: The QIDP will be in-serviced on the client, parents or legal guardian's</p>	01/08/2016			

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	9-3-4(a)		<p>participation in their annual IDT meetings and obtaining signature for program plans from the client, parent or legal guardian. Client #1 and Client #2 will have a meeting scheduled to review their current program plans and the clients, parents or legal guardians will be invited to participate and signature form the client, parents or legal guardian will be obtained.</p> <p>Monitoring of Corrective Action: The Program Manager will review all clients ISP's and meeting notes to ensure that the client, parents or legal guardians participated in the annual IDT meetings and that signatures on all program plans have been obtained by the client, parent or legal guardian.</p> <p>Completion date: 01/08/2016</p>		

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W 0455 Bldg. 00	<p>483.470(I)(1) INFECTION CONTROL</p> <p>There must be an active program for the prevention, control, and investigation of infection and communicable diseases.</p> <p>Based on observation and interview for 4 of 4 sampled clients (#1, #2, #3 and #4) and 4 of 4 additional clients (#5, #6, #7 and #8), the facility failed to ensure the clients washed their hands prior to the dinner meal.</p> <p>Findings include:</p> <p>During evening observation at the group home on 12/9/15 from 4:45 PM until 7:15 PM, staff #1 prompted clients #1, #2, #3, #4, #5, #6, #7 and #8 to sit down at the dining room table for dinner at 5:30 PM. No clients were prompted to wash their hands or to utilize any alcohol hand sanitizer prior to the meal.</p> <p>The QIDP (Qualified Intellectual Disabilities Professional and the QA (Quality Assurance) Coordinator were interviewed on 12/10/15 at 1:34 PM. They indicated all the clients should be prompted to wash their hands with soap and water or utilize an alcohol based hand sanitizer prior to all meals.</p>	W 0455	<p>W455: There must be an active treatment program for the prevention, control and investigation of infection and communicable diseases.</p> <p>Corrective Action: (Specific): All staff will be in-serviced on prompting all client's to wash their hands or to utilize alcohol hand sanitizer prior to meals and at all other times where hand washing is necessary to decrease the risk of infection.</p> <p>How others will be identified: (Systemic): The Residential Manager will visit the home five times weekly to ensure that all clients are being prompted to wash their hands or to utilize alcohol hand sanitizer prior to meals and at all other times where hand washing is necessary to decrease the risk of infection.</p> <p>Measures to be put in place: All staff will be in-serviced on prompting all client's to wash their hands or to utilize alcohol hand sanitizer prior to meals and at all</p>	01/08/2016

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	9-3-7(a)		<p>other times where hand washing is necessary to decrease the risk of infection.</p> <p>Monitoring of Corrective Action: The Residential Manager will visit the home five times weekly to ensure that all clients are being prompted to wash their hands or to utilize alcohol hand sanitizer prior to meals and at all other times where hand washing is necessary to decrease the risk of infection.</p> <p>Completion date: 01/08/2016</p>		