

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  15G548	X2) MULTIPLE CONSTRUCTION A. BUILDING 00 B. WING _____	X3) DATE SURVEY COMPLETED  02/12/2013
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NAME OF PROVIDER OR SUPPLIER  BLUE RIVER SERVICES INC	STREET ADDRESS, CITY, STATE, ZIP CODE 3607 KLERNER LN NEW ALBANY, IN 47150
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W0000	<p>This visit was for an investigation of complaint #IN00122246.</p> <p>Complaint #IN00122246: Substantiated. Federal/state deficiencies related to the allegation(s) are cited at W120, W192, and W249.</p> <p>Dates of survey: February 6, 7, 11, and 12, 2013.</p> <p>Facility Number: 001062 Provider Number: 15G548 AIM Number: 200385660</p> <p>Surveyor: Dotty Walton, Medical Surveyor III</p> <p>These deficiencies reflect state findings in accordance with 460 IAC 9. Quality Review completed 2/19/13 by Ruth Shackelford, 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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W0120	<p>483.410(d)(3) SERVICES PROVIDED WITH OUTSIDE SOURCES</p> <p>The facility must assure that outside services meet the needs of each client. Based on observation, record review and interview for 1 of 3 sampled clients (A), the outside services failed to implement the client's most current dining/choking protocols.</p> <p>Findings include:</p> <p>Observations were conducted at the workshop on 2/11/13 from 11:42 AM until 1:07 PM.</p> <p>Client A consumed a packed lunch of twelve ounce diet soda, a ham salad sandwich cut into small pieces, and a container of small bear shaped graham crackers. Day Service Staff/DSS #3 sat beside client A during lunch from 12:30 PM until 12:55 PM. Client A ate the soft ham salad sandwich pieces with his fingers. Client A would take two pieces of sandwich if not prompted by DSS #3.</p> <p>Client A took nine bites of sandwich without drinking between bites of food at 12:38 PM. Client A ate the small graham crackers 2 and 3 pieces at a time without taking sips of cola. The bites of sandwich and graham crackers were bigger than dime size. Client A was non-compliant with staff requests to clear his mouth before taking another graham cracker.</p>	W0120	<p>A staff meeting was held with Rauch Industries, the external service provider for client A, to ensure implementation of client A's most current dining plans.</p> <p>To protect other clients and prevent recurrence: A staff meeting was conducted for group home staff and Rauch Industries. During the meeting, the group home nurse discussed client A's dining plans. The group home nurse will offer to conduct training with staff at Rauch Industries to discuss clients' dining plans if Rauch Industries deems it helpful. In the event changes are made to any clients' dining plan, new copies will be sent to Rauch Industries. Any time a dining plan is filed, it must be read and signed by all staff at Rauch Industries to ensure compliance with the plan.</p> <p>Quality assurance: The group home nurse will submit copies of all revised dining plans to the group home manager, who will ensure that Rauch Industries also receives a copy. Rauch Industries will have all staff read and sign the revised dining plan. The group home nurse will conduct training on the dining plans as necessary (if requested</p>	03/14/2013			

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	<p>Interview with DSS #2 and record review of client A's dining/choking protocols on 2/11/13 at 11:50 AM indicated the facility had programs dated 7/12.</p> <p>Client A's habilitation program which he attended every Tuesday was visited on 2/11/13 at 1:20 PM. Interview with DSS #1 and record review of client A's dining/choking protocols on 2/11/13 at 1:20 PM indicated the habilitation program had programs dated 7/12. The interview indicated staff were aware of client A's risk for choking since he had choked on a hotdog during a cook-out some years before (2009) there. DSS #1 indicated staff closely supervised client A and his foods/sandwiches were cut into "one inch" pieces.</p> <p>Review of client A's record on 2/6/13 at 4:20 PM, 2/7/13 at 8:30 AM, and 2/11/13 at 3:00 PM indicated client A had a Dining Plan created by RN #8 on 4/22/09 with revision dates of 7/19/12, 1/7/13 and 1/16/13.</p> <p>The Dining Plan dated 1/16/13 indicated client A was a risk for choking and staff were to implement certain "Behavioral Precautions" with client A when he was eating:</p> <p>"Sit up at a 90 degree level while eating</p>		<p>by Rauch Industries).</p> <p>Responsible party: Group home manager, Rauch Industries, group home nurse.</p>				

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	<p>No talking or laughing while chewing food or drinking</p> <p>No walking/running while eating</p> <p>Staff will supervise [client A] at meals/snacks: Sit beside [client A] within arms (sic) reach during meal will lightly touch his hand during meals/snacks to get his attention and then prompt to slow down.</p> <p>Alternate liquids and solids.</p> <p>Staff will make sure [client A] is using small utensils.</p> <p>Food Texture: Cut into dime size pieces.</p> <p>Eating: Eat slowly and take small bites. Double swallow each bite.</p> <p>Drinking: Take small sips. (Thin fluids.)</p> <p>Specific Skills to Maintain/Acquire: Tuck chin down when swallowing food or liquids. Put fork/spoon down between bites. (see choking care plan if questions) dated 1/8/13."</p> <p>Interview with Home Manager staff #2 on 2/6/13 at 6:30 PM indicated all day service sites had been emailed new programs and should be implementing the most recent dining and choking protocols for client A.</p>			

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	This federal tag relates to complaint #IN00122246.  9-3-1(a)				

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W0192	<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, record review and interview for 1 of 3 sampled clients (A), the facility failed to ensure staff were sufficiently trained to follow policy/procedures in the client's health needs in regards to choking risk protocols.</p> <p>Findings include:</p> <p>Review of facility reportable incident reports/investigations on 2/6/13 at 8:30 PM indicated client A had choked on 1/3/13 at 6:05 PM and staff #3 applied the Heimlich Maneuver to clear his airway.</p> <p>According to review (2/7/13 10:00 AM) of the medical incident report made by staff #3 regarding the 1/3/13 choking incident with client A, the House Manager staff #2 had been called and informed of the incident on 1/3/13. The report did not indicate the residential RN #8 had been called.</p> <p>According to review on 2/11/13 at 9:00 AM of the agency's policy dated 11/04 with revision date of 6/2012, "Residential Supervised Group Living Manual Attachment 'J': Choking Procedures</p>	W0192	<p>A staff meeting has been held to review clients' care plans and dining plans.</p> <p>To protect other clients and prevent recurrence: A staff meeting was held to train staff on client A's care plans and dining plans. Additionally, the group home manager trained staff on the procedures for a choking incident and the protocol for incident and accident reports. During this meeting, the group home manager has emphasized the importance of consistently implementing the care plans and dining plans so that all staff follow precisely the same procedures.</p> <p>Quality assurance: If any changes are made to a client's dining or care plans, the group home nurse will submit copies of the revised plans to the group home manager. The group home manager and QMRP will ensure that all staff have read and signed the revised dining plans and care plans. The group home nurse will conduct training on the dining plans as necessary.</p> <p>Responsible party: Group home manager, group home nurse, QMRP.</p>	03/14/2013			

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	<p>indicated:</p> <p>"1. If a resident has a known choking history, identified by report, assessment/observation, or any difficulties with eating then staff must supervise that individual at all times while eating. The residential nurse and the residential manager should be notified immediately (staff should follow any recommendations made by the nurse), (sic) We will then assess medically."</p> <p>Interview with HM #2 on 2/07/13 at 9:45 AM indicated staff #3 had failed to notify RN #8 regarding client A's choking on 1/3/13 as was the agency's policy. The RN was notified the following morning (1/4/13). HM #2 indicated all direct contact personnel were retrained to ensure a failure to follow agency policy was not repeated.</p> <p>This federal tag relates to complaint #IN00122246.</p> <p>9-3-3(a)</p>				

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W0249	<p>483.440(d)(1) PROGRAM IMPLEMENTATION</p> <p>As soon as the interdisciplinary team has formulated a client's individual program plan, each client must receive a continuous active treatment program consisting of needed interventions and services in sufficient number and frequency to support the achievement of the objectives identified in the individual program plan.</p> <p>Based on observation, record review and interview for 1 of 3 sampled clients (A), the facility failed to ensure staff implemented client A's dining/choking risk programs consistently.</p> <p>Findings include:</p> <p>During observations at the facility on 2/6/13 from 4:05 PM until 6:45 PM staff #1 was observed to be supervising 4 clients during the evening meal at 5:45 PM. Staff sat between clients A and B on one side of the dining table during the evening meal. Client A's meal consisted of baked ham (cut into small cubes consistent with dime sized pieces), cooked cauliflower (bigger than dime size pieces), a slice of bread (uncut), and baked beans. Staff #1 verbally prompted client A to alternate bites of food with sips of fluid. Client A was resistive to prompts and over filled his small fork with 3 pieces of ham and would take 2 or 3 bites of food before setting down his fork to take sips of fluids. Staff #1</p>	W0249	<p>A staff meeting has been held to review client A's care plans and dining plans to ensure the client achieves the objectives specified by the individual program plan.</p> <p>To protect other clients and prevent recurrence: A staff meeting was held to train staff on all client A's care plans and dining plans. Additionally, the group home manager trained staff on the procedures for a choking incident and the protocol for incident and accident reports. During this meeting, the group home manager has emphasized the importance of consistently implementing the care plans and dining plans so that all staff follow precisely the same procedures.</p> <p>Quality assurance: If any changes are made to a client's dining or care plans, the group home nurse will submit copies of the revised plans to the group home manager. The group home manager and QMRP will ensure that all staff have read and signed the revised dining plans and care plans. The group home nurse will</p>	03/14/2013	

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	<p>physically prompted client A to be compliant with the meal safety strategies of one bite of food, utensil down, and a sip of fluid; client A was more compliant if receiving staff #1's undivided attention. When client B good naturedly sought staff #1's attention, client A would take multiple bites of food and increase his eating speed. Staff #2 indicated the cauliflower pieces were too large and prompted staff #1 to cut it into smaller pieces at 6:00 PM.</p> <p>On 2/7/13 from 5:46 AM until 8:00 AM clients were observed preparing and consuming breakfast. Client D self initiated making coffee, setting the table, toasting bread and spreading margarine on it at 6:00 AM. Staff #4 redirected client D not to spread margarine on the toast noting that each client could add margarine as he wanted. Client A's luncheon sandwich was observed at 6:00 AM and was not entirely cut into small dime sized pieces.</p> <p>At 6:13 AM, client D placed four pieces of toast spread with margarine and two dry slices upon the table. At 6:20 AM, the table was set with toast, milk, juices, coffee and a variety of dry cereal choices. Client D had set client A's place with a regular sized teaspoon and staff #4 redirected client A to get the smaller spoon he was required to use as part of his</p>		<p>conduct training on the dining plans as necessary.</p> <p>Responsible party: Group home manager, group home nurse, QMRP.</p>				

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	<p>current dining program (1/7/13) and she prompted him to obtain a pizza cutter to use in lieu of a knife for cutting up his toast. Staff #4 sat at an angle from client A so she could watch his facial motions while eating and prompt him. Staff #4 verbally prompted client A to take a bite of dry cereal with milk and set his spoon down upon his napkin after each bite. He was prompted to take sips of fluids after each bite of cereal. Client A was resistive to prompting and would take bites of cereal without clearing the first bite and did not double swallow. Staff #4 physically prompted client A in an effort to gain his compliance and to keep him from overfilling his mouth. Staff #5 took over the mealtime supervision at 6:34 AM. Staff #4 indicated client A would have his toast after the cereal was finished. Client A increased his rate of food consumption and would not place his spoon upon the napkin/table. Client A held onto his spoon as he set it in the cereal bowl. Client A would take 2 to 6 bites of cereal with out taking sips of fluids. Client A was non-compliant with staff #5's prompting. When the cereal was finished at 6:41 AM, staff #5 assisted client A in cutting his toast into small pieces with a table knife in a hand over hand manner instead of using the pizza cutter. The toast had been spread with margarine earlier by client D. Staff #5</p>			

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	<p>stated at 6:49 AM, "That butter made the toast soggy [client A]." Staff #5 indicated the toast was difficult to cut up due to its "soggy" nature.</p> <p>Client A's luncheon sandwich was brought to the attention of House Manager/HM staff #2 on 2/7/13 at 7:00 AM. HM #2 indicated staff assisted with lunch preparation during the evenings and client A's sandwich was to be cut into small uniform pieces (dime sized) and packed with fruit, snacks (also dime sized) and beverages for workshop and a habilitation program he attended every Tuesday. HM #2 finished cutting client A's sandwich and cookies into the plan specified bites.</p> <p>Review of client A's record on 2/6/13 at 4:20 PM, 2/7/13 at 8:30 AM, and 2/11/13 at 3:00 PM indicated client A had a Dining Plan created by RN #8 on 4/22/09 with revision dates of 7/19/12 and 1/16/13.</p> <p>The Dining Plan dated 7/19/12 indicated client A was a risk for choking and staff were to implement the following "Behavioral Precautions" with client A when he was eating:</p> <p>"Sit up at a 90 degree level while eating No talking or laughing while chewing food or drinking</p>			

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	<p>No walking/running while eating Staff will supervise [client A] at meals/snacks: Sit beside [client A] within arms (sic) reach during meal will lightly touch his hand during meals/snacks to get his attention and then prompt to slow down. Alternate liquids and solids.</p> <p>Food Texture: Cut into small pieces.</p> <p>Eating: Eat slowly and take small bites. Double swallow each bite.</p> <p>Drinking: Take small sips. (Thin fluids.)</p> <p>Specific Skills to Maintain/Acquire: Tuck chin down when swallowing food or liquids. Put fork/spoon down between bites."</p> <p>The Dining Plan of 7/19/12 was revised 1/07/13 and 1/16/13 after a choking incident client A experienced on 1/03/13 at 6:05 PM. The revised Dining Plan indicated client A was a risk for choking and staff were to implement the following "Behavioral Precautions" with client A when he was eating:</p> <p>"Sit up at a 90 degree level while eating No talking or laughing while chewing food or drinking No walking/running while eating</p>			

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	<p>Staff will supervise [client A] at meals/snacks: Sit beside [client A] within arms (sic) reach during meal will lightly touch his hand during meals/snacks to get his attention and then prompt to slow down. Alternate liquids and solids. Staff will make sure [client A] is using small utensils (added 1/07/13)</p> <p>Food Texture: Cut into small pieces. Changed on 1/16/13 to: Cut into dime size pieces.</p> <p>Eating: Eat slowly and take small bites. Double swallow each bite.</p> <p>Drinking: Take small sips. (Thin fluids.)</p> <p>Specific Skills to Maintain/Acquire: Tuck chin down when swallowing food or liquids. Put fork/spoon down between bites. (see swallow safety sheet, if questions) changed on 1/16/13 to (see choking care plan if questions)."</p> <p>Interview with House Manager staff #2 on 2/6/13 at 6:30 PM indicated client A had choked during the evening meal on 1/03/13 while he was eating macaroni salad and staff #3 had implemented the Heimlich Maneuver to clear his airway. The interview indicated the client had</p>			

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	<p>been assessed by his physician and his dining protocols had been revised in 1/13 to include the use of small spoon/fork and cutting food into dime sized pieces. Staff were to follow the new dining protocols and ensure client A ate small bites, took sips of liquid between bites, and did not overfill his mouth. The interview indicated client A's mealtime behavior put him at risk for choking and he was to be supervised and prompted to following his mealtime programs.</p> <p>This federal tag relates to complaint #IN00122246.</p> <p>9-3-4(a)</p>			