

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  15G299	X2) MULTIPLE CONSTRUCTION A. BUILDING 00 B. WING _____	X3) DATE SURVEY COMPLETED  03/10/2014
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NAME OF PROVIDER OR SUPPLIER  OPPORTUNITY ENTERPRISES INC	STREET ADDRESS, CITY, STATE, ZIP CODE 1807 W PORTER AVE CHESTERTON, IN 46304
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W000000	<p>This visit was for a fundamental recertification and state licensure survey.</p> <p>Dates of Survey: 3/5, 3/6, and 3/10, 2014.</p> <p>Facility number: 000818 Provider number: 15G299 AIM number: 100234990</p> <p>Surveyors: Amber Bloss, QIDP-TC Paula Chika, QIDP</p> <p>The following federal deficiencies also reflect state findings in accordance with 460 IAC 9.</p> <p>Quality review completed March 31, 2014 by Dotty Walton, QIDP.</p>	W000000		
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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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W000149	<p>483.420(d)(1) STAFF TREATMENT OF CLIENTS The facility must develop and implement written policies and procedures that prohibit mistreatment, neglect or abuse of the client. Based on record review and interview for 1 of 3 sampled clients (#2), the facility neglected to implement its written policies and procedures to prevent neglect of the client in regard to recurrent falls. Findings include: On 3/5/14 at 2:30 PM, the facility BDDS (Bureau of Developmental Disabilities Services) and I/A (Internal incident and accident) reports from 8/5/13 to 3/5/14 were reviewed. A BDDS report dated 8/28/13 indicated Client #2 "was walking down the hallway outside of ADC (adult day center) headed toward the exit. She tripped on the edge of a long rug in front of the first door. When she fell, she did not put her hands out in front of her to break her fall, she fell onto her face. [DSP (Direct Support Professional) #1] was standing 2 feet from her when the fall occurred. She helped [Client #2] onto her side and asked her if she was ok." The report indicated "once she rolled [Client #2] over to her back she noticed she had a large abrasion on her forehead and down the bridge of her nose. Her nose was not bleeding at this time. [DSP #1] asked [Client #2] if she was ok, she just made a slight sound. She</p>	W000149	<p>W149-On 4/4/2014 staff was trained on Opportunity Enterprises Abuse and Neglect policy. The QDDP has updated formal goals that included participant #2's physical therapy exercises. On 3/31/2014 Participant #2's fall risk plan was updated. The fall risk plan includes Participant #2 should be tested for a possible UTI if a fall occurs. 3/31/2014 a high risk plan for reoccurring UTI's was completed. Staff trainings have been completed for the new and updated risk plans. On 3/27/2014 Participant #2's ISP was updated and includes her current status on falls, PT, OT, updated and new protocols, and her daily PT exercises as her formal goal. To ensure further compliance, at least monthly, The IDT team will review all medical issues that have occurred and discuss high risk plans. Once determined that a high risk plan needs to be initiated and/or updated to maintain the health and safety of each participant, nursing will complete the high risk plan. The QDDP will update the ISP's and make appropriate changes to their formal goals. The Director of Supervised Group Living will review the monthly IDTs to ensure Opportunity Enterprises remains in compliance and the health and safety of the participants is</p>	04/12/2014
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	<p>asked her if she could sit up, she made no attempt." The report indicated Client #2 was taken to urgent care and was diagnosed with "nasal fracture and 2 sprained wrists." The diagnosis was given prior to review of the x-ray.</p> <p>-The follow up BDDS report dated 9/6/13 indicated "a rug was the cause of the fall. It is unclear if the corner was flipped up or bunches in certain areas as staff was in front of [Client #2]." The report indicated "this was not previously in her fall protocol. Staff have been notified to prompt her and nursing is updating her protocol to have this added." The report indicated "the GH (group home) received a phone call (from medical office) stating that her (Client #2's) nose was not fractured" once the x-ray was reviewed.</p> <p>An internal incident report dated 12/28/13 indicated "staff had taken [Client #2] and one of her roommates, [Client #1], out to eat and to shop." The report indicated Client #1 had to use the restroom and Client #2 also indicated she needed to use the restroom. The report indicated "staff told [Client #2] to 'please stay seated; let me help [Client #1] with her walker first'." The report indicated as staff "turned to get [Client #1], [Client #2] stood up and attempted to get out of the chair, tripping over the chair leg,</p>		maintained.				

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	<p>falling backwards and bumping her head on the wall behind the chair." The report indicated Client #2 did not display any signs or symptoms of injury. The report indicated "it appears [Client #2] may have not been completely pushed back when she went to stand tripping on the chair leg. [Client #2] has previously had a PT (physical therapy) eval (evaluation) completed where she was given trunk strengthening exercises and will follow-up in 1-2 months. [Client #2] sustained no injuries from her fall and staff walk close with [Client #2] ensuring that there are no obstructions in her way and the walkway is not blocked."</p> <p>A BDDS report dated 1/27/14 indicated "staff was sitting at the kitchen table with another participant when they heard a bang come from the living room. They entered the living room to see [Client #2] on the floor. [Client #2] was pointing to her head and staff discovered a quarter-size bump on the front left side of her head. Staff did not see any other injuries so they helped [Client #2] to the couch." The report indicated no further injuries were noted.</p> <p>A BDDS report dated 2/4/14 indicated "while exiting (facility owned day service) to leave for the day, [Client #2] tripped over a rug that was on the floor in</p>						

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	<p>between the automatic doors. [DSP (Direct Support Professional) #1] was assisting another participant with a walker over the rug and [Client #2] was right behind her. When she turned around to make sure [Client #2] was coming she tripped and fell to the floor hitting part of her face on the floor. [Client #2] has a small split in her bottom lip and also a small abrasion under her bottom lip." The report indicated Client #2 "had a small red mark on her right cheek area under her glasses." The report indicated the QIDP (Qualified Intellectual Disabilities Professional) Supervisor "asked that [Client #2] have a U/A (urine analysis) completed due (to) frequent past infections and to rule out possibility of infection causing her to lose balance and fall." The report indicated "upon doing a body check [DSP #1] found 1 1/4 (one and a quarter) inch bruise on right thigh on the top slight inner. A (sic) inch further there are 3 3/16 (three and three-sixteenth) inch size bruises. [Client #2] was holding her purse and lunch box at the time of the fall and had fallen on them. Bruising has no specific pattern." The report indicated "[Client #2] has an abrasion on her chin that is approximately the size of a nickel and has purplish bruising around it. [Client #2] has a bruise in the corner of her right eye that is 1" (one inch) rounded by the side of her</p>			
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	<p>nose and inside corner of eye also purple in color. On the left side of her head she has a small abrasion that was scabbed over and I noted light speckled bruising above her eyebrow. On the inside of her left thigh there was a cluster of 4 bruises the biggest being 1" and the rest between 1/4" (one fourth inch) and 1/2" (one half inch)." The report indicated Client #2 was wearing snow boots at the time. The report indicated a urine analysis had been ordered to rule out UTI (urinary tract infection). The report indicated "[Client #2] has also PT (physical therapy) evaluation gave (sic) exercises that [Client #2] should complete at home which she does daily." A handwritten note at the bottom of the BDDS report indicated Client #2's U/A (urine analysis) came back positive for UTI. The note indicated "emailed nurse 2/6/14 to have UTI protocol completed as well as add to check for UTI under fall protocol." The note was signed by the QIDP (Qualified Intellectual Disabilities Professional).</p> <p>Record review on 3/10/14 at 11:34 AM, indicated Client #2's 4/22/13 ISP (Individual Support Plan) had a fall risk protocol dated 9/9/13 which indicated the following "action:"</p> <p>" 1. Do not attempt to move individual until you examine for injury.</p>						

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	<p>2. Observe for bleeding, swelling, discoloration, redness.</p> <p>3. Ask [Client #2] if she is having any pain.</p> <p>4. Tell [Client #2] to point to the area that is causing the pain. Examine the area; again look for signs of injury.</p> <p>5. If no injury is visible assist her to her feet.</p> <p>6. Observe her when she stands, look for any signs of injury again.</p> <p>7. Assist her to a chair.</p> <p>8. Complete attached Fall Assessment Form and turn in to nursing.</p> <p>9. If [Client #2] is dragging her feet staff is to prompt [Client #2] to pick up her feet."</p> <p>Client #2's fall plan indicated the "Training Implications" were as followed:</p> <p>1. No throw rugs in the home.</p> <p>2. Hallways should remain clear of all obstacles.</p> <p>Record review indicated a "Medical Appointment Form" dated 12/11/13 which indicated Client #2 had a "physical therapy evaluation." The form indicated "[Client #2] was given bands (exercise aid) for home exercises. She is to do 4 (exercise) sets of 20 daily. Follow up in 1-2 months."</p>						

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	<p>On 3/10/14 at 2:20 PM during an interview, the QIDP (Qualified Intellectual Disabilities Professional) indicated Client #2's fall risk plan had not been revised since 9/9/13. The QIDP indicated Client #2 did not have a UTI (Urinary Tract Infection) care plan developed. The QIDP indicated Client #2's care plans were to be revised at her upcoming IDT (Interdisciplinary team meeting). The QIDP indicated staff should have been doing Client #2's PT (physical therapy) but the exercises were not added to Client #2's ISP (Individual Support Plan). The QIDP indicated there was no documentation available to review to indicate Client #2 had been doing her PT exercises.</p> <p>On 3/5/14 at 3:30 PM, the facility's policy and procedure on "Abuse and Neglect" dated 4/14/10 was reviewed and indicated the facility "does not condone and will not tolerate physical, verbal or sexual abuse, neglect or exploitation of individuals served." The policy defined neglect as "includes the refusal or failure to provide appropriate care, food, medical care, or supervision."</p> <p>9-3-2(a)</p>						

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W000154	<p>483.420(d)(3) STAFF TREATMENT OF CLIENTS The facility must have evidence that all alleged violations are thoroughly investigated.</p> <p>Based on interview and record review for 2 of 4 allegations of abuse, neglect and/or injuries of unknown source reviewed for client #6, the facility failed to conduct thorough investigations in regard to allegations of neglect in regard to staff to client care and in regard to staff sleeping at the facility.</p> <p>Findings include:</p> <p>1. The facility's reportable incident reports and/or investigations were reviewed on 3/5/14 at 2:30 PM. The facility's 6/2/13 reportable incident report indicated on 6/2/13 "...[Client #6] reported that she had a seizure and fell out of bed in the middle of the night and staff did not assist. [Client #6's] lip was slightly swollen on the inside, she had a small tear under the left breast pocket of her pajamas and a 1.5 inch bruise on her left calf. Staff reports that [client #6] did not have a seizure and there were no incidents throughout the night. Five hours later, the same reporting staff called me to say that [client #6] is now reporting that she did not have a seizure but that she fell and the midnight staff did help her. Due to the initial allegation,</p>	W000154	<p>W 154 1. Effective immediately, the Social Services Director/Designee will thoroughly investigate all allegations of abuse, neglect and injuries of unknown origin. The investigations that are conducted will include interviews with additional staff and participants to ensure the health and safety is maintained and properly monitored and that all alleged violations are thoroughly investigated. To ensure further compliance, The Chief Executive Officer and/or Chief Program Officer will review and monitor the investigations for abuse, neglect, and injuries of unknown origin to certify thorough and appropriate investigations are being completed and conducted properly.</p> <p>W154 2.-Please see plan of correction for W154.1</p>	04/12/2014			

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	<p>conflicting stories, and the injuries of unknown origin, an investigation has been initiated. Staff is considered on suspension as she is off the schedule until Wednesday...."</p> <p>The facility's 6/13/13 Report of Investigation Final Report indicated the allegation of neglect was "Unsubstantiated." The facility's investigation indicated the night staff (staff #2) was interviewed on 6/2/13. The facility's investigation indicated staff #2 indicated client #6 did not have a seizure during the night in question and did not experience a fall. Staff #2's summary indicated staff #2 assisted client #6 to get up and go to the bathroom. Staff #2's statement indicated client #6 had a seizure on a previous night which resulted in the client's swollen lip. Staff #2's summary indicated she assisted client #6 to bathe the next morning and did not remember seeing client #6 with torn pajamas and a bruise on her leg. The facility's investigation did not specifically indicate how client #6 received the bruise to her lip and/or indicate how client #6 tore her pajamas and received the injury to the client's leg. The facility's 6/13/13 investigative report indicated only 2 staff and client #6 were interviewed. The facility's investigation did not indicate any additional staff and/or clients were</p>			
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	<p>interviewed.</p> <p>Interview with the Director of Social Services on 3/6/14 at 3:50 PM indicated no additional staff and/or clients were interviewed in regard to client #6's allegation of neglect and/or injuries of unknown source.</p> <p>2. The facility's reportable incident reports and/or investigations were reviewed on 3/5/14 at 2:30 PM. The facility's 5/29/13 reportable incident report indicated "[Client #6] reported staff was sleeping while on shift last night (05/29/2013). Upon notification of the incident an investigation was initiated. Staff was placed on suspension and had no client contact for the duration of the investigation. [Client #6] and alleged staff were interviewed as the incident allegedly occurred in the middle of the night with no other staff or client witnesses to interview. [Client #6] told the investigator the staff was awake. Investigator asked [client #6] multiple times and in various ways inquiring about staff sleeping. [Client #6] did not corroborate her original statement about staff sleeping-rather saying staff was awake. Alleged staff's statement to investigator included a detailed account of the night's events, what staff did (e.g.</p>			
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	<p>cleaning, paperwork...etc) and also documented accounts of [client #6] getting up to use the bathroom about every hour. And, bed checks for all clients in the home were performed and documented every 2 hours. The investigation is complete and the allegation of consumer neglect has been unsubstantiated...."</p> <p>The facility's 5/31/13 Report of Investigation Final Report indicated only client #6 and staff #2 were interviewed in regard to the allegation of neglect. The facility's investigation did not indicate any additional staff and/or clients were interviewed.</p> <p>Interview with the Director of Social Services on 3/6/14 at 3:50 PM indicated she did not interview any additional staff and/or clients as only client #6 and staff #2 were up and present when the incident occurred. The Director of Social Services indicated she did not interview any clients and/or staff to determine if they were aware of any staff sleeping, while on duty, at the group home.</p> <p>9-3-2(a)</p>						

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W000227	<p>483.440(c)(4) INDIVIDUAL PROGRAM PLAN The individual program plan states the specific objectives necessary to meet the client's needs, as identified by the comprehensive assessment required by paragraph (c)(3) of this section. Based on interview and record review, the facility failed to include Physical Therapy recommendations in the Individual Service Plan for 1 of 3 sampled clients (Client #2). Findings include: On 3/5/14 at 2:30 PM, the facility BDDS (Bureau of Developmental Disabilities Services) and I/A (Internal incident and accident) reports from 8/5/13 to 3/5/14 were reviewed. An internal incident report dated 12/28/13 indicated "staff had taken [Client #2] and one of her roommates, [Client #1], out to eat and to shop." The report indicated Client #1 had to use the restroom and Client #2 also indicated she needed to use the restroom. The report indicated "staff told [Client #2] to 'please stay seated; let me help [Client #1] with her walker first!'" The report indicated as staff "turned to get [Client #1], [Client #2] stood up and attempted to get out of the chair, tripping over the chair leg, falling backwards and bumping her head on the wall behind the chair." The report indicated Client #2 did not display any</p>	W000227	W227-Please see plan of correction for W149	04/12/2014			

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	<p>signs or symptoms of injury. The report indicated "it appears [Client #2] may have not been completely pushed back when she went to stand tripping on the chair leg. [Client #2] has previously had a PT (physical therapy) eval (evaluation) completed where she was given trunk strengthening exercises and will follow-up in 1-2 months. [Client #2] sustained no injuries from her fall and staff walk close with [Client #2] ensuring that there are no obstructions in her way and the walkway is not blocked."</p> <p>A BDDS report dated 2/4/14 indicated "while exiting (facility owned day service) to leave for the day, [Client #2] tripped over a rug that was on the floor in between the automatic doors. [DSP (Direct Support Professional) #1] was assisting another participant with a walker over the rug and [Client #2] was right behind her. When she turned around to make sure [Client #2] was coming she tripped and fell to the floor hitting part of her face on the floor. [Client #2] has a small split in her bottom lip and also a small abrasion under her bottom lip." The report indicated Client #2 "had a small red mark on her right cheek area under her glasses." The report indicated "[Client #2] has an abrasion on her chin that is approximately the size of a nickel and has purplish bruising around</p>			
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	<p>it. [Client #2] has a bruise in the corner of her right eye that is 1" (one inch) rounded by the side of her nose and inside corner of eye also purple in color. On the left side of her head she has a small abrasion that was scabbed over and I noted light speckled bruising above her eyebrow. On the inside of her left thigh there was a cluster of 4 bruises the biggest being 1" and the rest between 1/4" (one fourth inch) and 1/2" (one half inch)." The report indicated "[Client #2] has also PT (physical therapy) evaluation gave (sic) exercises that [Client #2] should complete at home which she does daily."</p> <p>Record review on 3/10/14 at 11:34 AM indicated on a 12/11/13 "Medical Appointment Form," Client #2 had a PT (physical therapy) evaluation. The form indicated "[Client #2] was given bands (exercise aids) for home exercises. She is to do 4 (exercise) sets of 20 daily. Follow up in 1-2 months." The form indicated the exercises were for "trunk strengthening."</p> <p>Record review indicated Client #2's 3/28/13 ISP (Individual Support Plan) did not include a PT (physical therapy) goal or how staff should monitor or track Client #2's PT exercises.</p>						

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	<p>On 3/10/14 at 2:20 PM during an interview, the QIDP (Qualified Intellectual Disabilities Professional) indicated Client #2's fall risk plan had not been revised since 9/9/13. The QIDP indicated staff should have been assisting Client #2 with her PT (physical therapy) exercises but indicated the PT exercises were not added to Client #2's ISP (Individual Support Plan). The QIDP indicated there was no documentation available to review to indicate Client #2 had been doing her PT exercises.</p> <p>9-3-4(a)</p>			
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W000331	<p>483.460(c) NURSING SERVICES</p> <p>The facility must provide clients with nursing services in accordance with their needs. Based on record review and interview, the nursing staff failed to develop a UTI (urinary tract infection) care plan as needed and failed to revise a Fall Risk plan as needed to prevent recurrence of medical issues for 1 of 3 sampled clients (#2).</p> <p>Findings include:</p> <p>On 3/5/14 at 2:30 PM, the facility BDDS (Bureau of Developmental Disabilities Services) and I/A (Internal incident and accident) reports from 8/5/13 to 3/5/14 were reviewed. A BDDS report dated 8/28/13 indicated Client #2 "was walking down the hallway outside of ADC (adult day center) headed toward the exit. She tripped on the edge of a long rug in front of the first door. When she fell, she did not put her hands out in front of her to break her fall, she fell onto her face. [DSP (Direct Support Professional) #1] was standing 2 feet from her when the fall occurred. She helped [Client #2] onto her side and asked her if she was ok." The report indicated "once she rolled [Client #2] over to her back she noticed she had a large abrasion on her forehead and down the bridge of her nose. Her nose was not bleeding at this</p>	W000331	<p>W331- On 3/31/2014 Participant #2's fall risk plan was updated. The fall risk plan includes Participant #2 should be tested for a possible UTI if a fall occurs. 3/31/2014 a high risk plan for reoccurring UTI's was completed. Staff trainings have been completed for the new and updated risk plans. On 3/27/2014 Participant #2's ISP was updated and includes her current status on falls, PT, OT, updated and new protocols, and her daily PT exercises as her formal goal. To ensure further compliance, at least monthly, The IDT team will review all medical issues that have occurred and discuss high risk plans. Once determined that a high risk plan needs to be initiated and/or updated to maintain the health and safety of each participant, nursing will complete the high risk plan. The QDDP will update the ISP's and make appropriate changes to their formal goals. The Director of Supervised Group Living will review the monthly IDTs to ensure Opportunity Enterprises remains in compliance and the health and safety of the participants is maintained.</p>	04/12/2014			

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	<p>time. [DSP #1] asked [Client #2] is she was ok, she just made a slight sound. She asked her if she could sit up, she made no attempt." The report indicated Client #2 was taken to urgent care and was diagnosed with "nasal fracture and 2 sprained wrists." The diagnosis was given prior to review of the x-ray.</p> <p>-The follow up BDDS report dated 9/6/13 indicated "a rug was the cause of the fall. It is unclear if the corner was flipped up or bunches in certain areas as staff was in front of [Client #2]." The report indicated "this was not previously in her fall protocol. Staff have been notified to prompt her and nursing is updating her protocol to have this added."</p> <p>An internal incident report dated 12/28/13 indicated "staff had taken [Client #2] and one of her roommates, [Client #1], out to eat and to shop." The report indicated Client #1 had to use the restroom and Client #2 also indicated she needed to use the restroom. The report indicated "staff told [Client #2] to 'please stay seated; let me help [Client #1] with her walker first'." The report indicated as staff "turned to get [Client #1], [Client #2] stood up and attempted to get out of the chair, tripping over the chair leg, falling backwards and bumping her head on the wall behind the chair." The report</p>						

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	<p>indicated Client #2 did not display any signs or symptoms of injury. The report indicated "it appears [Client #2] may have not been completely pushed back when she went to stand tripping on the chair leg. [Client #2] has previously had a PT (physical therapy) eval (evaluation) completed where she was given trunk strengthening exercises and will follow-up in 1-2 months. [Client #2] sustained no injuries from her fall and staff walk close with [Client #2] ensuring that there are no obstructions in her way and the walkway is not blocked."</p> <p>A BDDS report dated 1/27/14 indicated "staff was sitting at the kitchen table with another participant when they heard a bang come from the living room. They entered the living room to see [Client #2] on the floor. [Client #2] was pointing to her head and staff discovered a quarter-size bump on the front left side of her head. Staff did not see any other injuries so they helped [Client #2] to the couch." The report indicated no further injuries were noted.</p> <p>A BDDS report dated 2/4/14 indicated "while exiting (facility owned day service) to leave for the day, [Client #2] tripped over a rug that was on the floor in between the automatic doors. [DSP (Direct Support Professional) #1] was</p>			
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	<p>assisting another participant with a walker over the rug and [Client #2] was right behind her. When she turned around to make sure [Client #2] was coming she tripped and fell to the floor hitting part of her face on the floor. [Client #2] has a small split in her bottom lip (and) also a small abrasion under her bottom lip." The report indicated Client #2 "had a small red mark on her right cheek area under her glasses." The report indicated the QIDP (Qualified Intellectual Disabilities Professional) Supervisor "asked that [Client #2] have a U/A (urine analysis) completed due (to) frequent past infections and to rule out possibility of infection causing her to lose balance and fall." The report indicated "upon doing a body check [DSP #1] found 1 1/4 (one and a quarter) inch bruise on right thigh on the top slight inner. A inch further there are 3 3/16 (three and three-sixteenth) inch size bruise. [Client #2] was holding her purse and lunch box at the time of the fall and had fallen on them. Bruising has no specific pattern." The report indicated "[Client #2] has an abrasion on her chin that is approximately the size of a nickel and has purplish bruising around it. [Client #2] has a bruise in the corner of her right eye that is 1" (one inch) rounded by the side of her nose and inside corner of eye also purple in color. On the left side of her head she</p>			
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	<p>has a small abrasion that was scabbed over and I noted light speckled bruising above her eyebrow. On the inside of her left thigh there was a cluster of 4 bruises the biggest being 1" and the rest between 1/4" (one fourth inch) and 1/2" (one half inch)." The report indicated Client #2 was wearing snow boots at the time. The report indicated a urine analysis had been ordered to rule out UTI (urinary tract infection). The report indicated "[Client #2] has also PT (physical therapy) evaluation gave (sic) exercises that [Client #2] should complete at home which she does daily." A handwritten note at the bottom of the BDDS report indicated Client #2's U/A (urine analysis) came back positive for UTI. The note indicated "emailed nurse 2/6/14 to have UTI protocol completed as well as add to check for UTI under fall protocol." The note was signed by the QIDP (Qualified Intellectual Disabilities Professional).</p> <p>Record review on 3/10/14 at 11:34 AM, indicated Client #2's 4/22/13 ISP (Individual Support Plan) had a fall risk protocol dated 9/9/13 which indicated the following "action":</p> <p>" 1. Do not attempt to move individual until you examine for injury. 2. Observe for bleeding, swelling, discoloration, redness.</p>						

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	<p>3. Ask [Client #2] if she is having any pain.</p> <p>4. Tell [Client #2] to point to the area that is causing the pain. Examine the area; again look for signs of injury.</p> <p>5. If no injury is visible assist her to her feet.</p> <p>6. Observe her when she stands, look for any signs of injury again.</p> <p>7. Assist her to a chair.</p> <p>8. Complete attached Fall Assessment Form and turn in to nursing.</p> <p>9. If [Client #2] is dragging her feet staff is to prompt [Client #2] to pick up her feet."</p> <p>Client #2's fall plan indicated the "Training Implications" were as followed:</p> <p>1. No throw rugs in the home.</p> <p>2. Hallways should remain clear of all obstacles.</p> <p>Record review indicated Client #2's 4/22/13 Fall Plan had not been updated/revised after a pattern of falls. Client #2's 4/22/13 ISP (Individual Support Plan) did not indicate the facility's nursing services developed a risk plan for UTI (Urinary Tract Infection).</p> <p>Record review indicated a "Residential Monthly Summary" dated 6/10/13 which</p>						

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	<p>indicated "[Client #2] saw [physician] for urology appointment due to frequent urination. Overactive bladder and start Vesicare (urinary antispasmodic) 5mg (milligram) qd (each day). Follow up 9/13/13."</p> <p>Record review indicated a "Residential Monthly Summary" dated 10/21/13 which indicated a note dated 9/3/13 which indicated "Follow-up from urgent care for fall and facial bruising. Area healing nicely. It will still be a week maybe two before the bruising completely absorbs into skin." A note dated 9/18/13 indicated Client #2 went to ER (emergency room) for "abdominal pain." The note indicated Client #2 had a UTI (urinary tract infection) and "elevated white cell count" and a scan indicating a "dense area over kidney." The note indicated Client #2 was admitted to the hospital for "Levaquin (antibiotic) and IV (Intravenous Therapy) fluids" The note indicated Client #2 was discharged on 9/25/13 on "oral antibiotics."</p> <p>On 3/10/14 at 2:20 PM during an interview, the QIDP (Qualified Intellectual Disabilities Professional) indicated Client #2's fall risk plan had not been revised since 9/9/13. The QIDP indicated Client #2 did not have a UTI</p>			

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	(Urinary Tract Infection) care plan developed. The QIDP indicated Client #2's care plans were to be revised at her upcoming IDT (Interdisciplinary team meeting). The QIDP indicated the group home did not have an assigned nurse but was overseen by the Nurse Supervisor until a new nurse was hired. The QIDP indicated she was aware Client #2 needed a UTI care plan and a revision of the fall risk plan to prevent recurrence.  9-3-6(a)			
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W000336	<p>483.460(c)(3)(iii) NURSING SERVICES</p> <p>Nursing services must include, for those clients certified as not needing a medical care plan, a review of their health status which must be on a quarterly or more frequent basis depending on client need. Based on record review and interview, the facility's nursing services failed to review the clients' health status on a quarterly basis for 3 of 3 sampled clients who resided in the home (Clients #1, #2, #3).</p> <p>Findings include:</p> <p>1. Record review on 3/10/14 at 11:34 AM indicated Client #2's diagnoses included, but were not limited to, osteoporosis, constipation, and history of anemia. Record review indicated Client #2 only had one nursing quarterly review in the last calendar year dated 2/17/14.</p> <p>On 3/10/14 at 9:30 AM, record review indicated Client #3's diagnosis included, but was not limited to, Down's Syndrome. Record review indicated Client #2 only had one nursing quarterly review dated 2/17/14 for the past year.</p>	W000336	<p>W336- The nursing department has completed quarterly nursing reviews on each participant. To ensure further compliance, the quarterlies will be checked by the Social Services Senior Director upon completion at the end of each quarter. File audits will be completed on a random sample of files to ensure nursing forms are completed and in the participant file by the lead nurse or designee at least twice a year.</p>	04/12/2014			

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W000336	<p>483.460(c)(3)(iii) NURSING SERVICES</p> <p>Nursing services must include, for those clients certified as not needing a medical care plan, a review of their health status which must be on a quarterly or more frequent basis depending on client need.</p> <p>2. Client #1's record was reviewed on 3/6/14 at 9:40 AM. Client #1's record indicated a nursing quarterly examination/assessment was completed on 2/18/14. Client #1's record indicated no additional documentation of quarterly nursing assessments in regard to client #1's health status for the past year.</p> <p>Client #1's 2/14 Medication Administration Record indicated client #1 received routine medications. Client #1's 7/12/13 Individual Support Plan (ISP) indicated client #1 did not require a medical care plan. Client #1's 7/12/13 ISP indicated client #1's diagnoses included, but were not limited to, High Blood Pressure, Hyperlipidemia (high cholesterol), Neurogenic Bladder, Mitro Valve Prolapse, Hypothyroidism and Obesity.</p> <p>Interview with the Qualified Intellectual Disabilities Professional (QIDP) on 3/6/14 at 9:45 AM indicated the facility's last nurse did not conduct any quarterly nursing assessments of client #1's health. The QIDP indicated the facility had an</p>	W000336	<p>W336- The nursing department has completed quarterly nursing reviews on each participant. To ensure further compliance, the quarterlies will be checked by the Social Services Senior Director upon completion at the end of each quarter. File audits will be completed on a random sample of files to ensure nursing forms are completed and in the participant file by the lead nurse or designee at least twice a year.</p>	04/12/2014
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	interim nurse and only 1 quarterly nursing assessment had been conducted in the past year.  9-3-6(a)			
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W000363	<p>483.460(j)(2) DRUG REGIMEN REVIEW The pharmacist must report any irregularities in clients' drug regimens to the prescribing physician and interdisciplinary team.</p> <p>Based on interview and record review for 3 of 3 sampled clients (#1, #2 and #3), the facility failed to address the irregularities/recommendations found during the quarterly pharmacy reviews.</p> <p>Findings include:</p> <p>The facility's Consultant Pharmacist's Medication Regimen Reviews (quarterly pharmacy reviews) were reviewed on 3/6/14 at 10:10 AM. The facility's 5/2/13 Note To Attending Physician/Prescriber indicated "After reviewing [client #1's] med sheets for the last quarter, I (pharmacist) noticed that a diagnosis was missing/not complete for several medications. Please provide a diagnosis that supports the use of the following medications so that they may be included in the medical record: olanzapine (behavior) Dx (diagnosis): _____ Detrol (urinary incontinence) Dx: _____ Hydrochlorothiazide (blood pressure) Dx: _____ amlodipine (blood pressure) Dx: _____" The 5/2/13 quarterly</p>	W000363	<p>W363-The Lead Nurse and Designee have submitted all recommendations by the pharmacist in the review to the attending physician with a request for review and signature. The Lead Nurse and/or designee will review the physician's orders and make appropriate changes to the Medication Administration Record. To ensure further compliance, the pharmacist will seek clarification from the Lead Nurse and/or Prescribing doctor prior to printing the Medication Administration Record. Quarterly, the Lead Nurse and/or Designee will complete file audits to ensure this process is continued and that the agency remains in compliance.</p>	04/12/2014
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NAME OF PROVIDER OR SUPPLIER  OPPORTUNITY ENTERPRISES INC	STREET ADDRESS, CITY, STATE, ZIP CODE 1807 W PORTER AVE CHESTERTON, IN 46304
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	<p>review also indicated "This patient (client #1) is no longer seeing [name of doctor]. Please re-evaluate the need/necessity of [client #1's] PRN (as needed) medication regimen (calcium antacid (upset stomach), diphenhydramine (cold symptoms), ibuprofen (pain), mapap (pain), etc)." The note indicated a section entitled "Physician/Prescriber Response" with an area for the physician's signature and date were blank.</p> <p>The facility's 8/14/13 Note To Attending Physician/Prescriber indicated the following:</p> <p>-"[Client #2] is currently taking Synthroid 112 mcg (micrograms). There are no current TSH (thyroid) labs in her record. Recommend TSH during next labs." Client #2's pharmacy review note indicated the section where client #2's doctor was to respond to the recommendation was blank.</p> <p>-After reviewing [client #3's] med sheets for the last quarter, I noticed that the diagnosis for several medications were missing from the med sheets. Please provide a diagnosis that supports the use of the following medications so that they may be included: Omeprazole (reflux) Dx: _____ Levothyroxine (thyroid) Dx: _____</p>			
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	<p>Vitamin D (supplement) Dx: _____."</p> <p>Client #3's pharmacy review note indicated the section where client #3's doctor was to respond to the recommendation was blank.</p> <p>The facility's 11/25/13 Note To Attending Physician/Prescriber indicated the following:</p> <p>"This patient (client #1) is no longer seeing [name of doctor]. Please re-evaluate the need/necessity of [client #1's] PRN (as needed) medication regimen (calcium antacid (upset stomach), diphenhydramine (cold symptoms), ibuprofen (pain), mapap (pain), etc)." The note indicated a section entitled "Physician/Prescriber Response" with an area for the physician's signature and date were blank.</p> <p>-"Currently [client #3] has some PRN medications listed in her medical record prescribed by [name of doctor]. Please consult with her current primary physician to determine the need/necessity of these medications." Client #3's pharmacy review note indicated the section where client #3's doctor was to respond to the recommendation was blank.</p> <p>The facility's 1/31/14 Note To Attending</p>			
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	<p>Physician/Prescriber indicated the following recommendations:</p> <p>-"After reviewing [client #1's] med sheets for the last quarter, I noticed that a diagnosis was missing/not complete for a few medications. Please provide a diagnosis that supports the use of the following medications so that they may be included in the medical record.: (sic) Detrol Dx: _____ hydrochlorothiazide DX: _____ amlodipine Dx: _____." Client #1's quarterly review indicated the area where the client's doctor was to respond to the recommendation was blank.</p> <p>-"After reviewing [client #2's] med sheets for the last quarter, I noticed that a diagnosis was missing/incomplete for a couple medications. Please provide a diagnosis that supports the use of the following medications so that they may be included in the medical record:</p> <p>Vesicare (overactive bladder) Dx: _____ loratadine (allergies) Dx: _____." Client #2's 1/31/14 Note to Attending Physician/Prescriber indicated the area where the physician responded to the pharmacist's recommendations were blank.</p>						

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	<p>Interview with the Qualified Intellectual Disabilities Professional (QIDP) on 3/10/14 at 10:30 AM, by phone, indicated the facility's nurse did not address client #1, #2 and #3's above mentioned pharmacy recommendations. The QIDP indicated the facility had faxed the above mentioned recommendations to the clients' doctor after they were cited on another survey. The QIDP indicated client #1, #2 and #3's doctor had not responded to client #1, #2 and #3's recommendations made by the pharmacist.</p> <p>9-3-6(a)</p>			
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