

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 15G230	X2) MULTIPLE CONSTRUCTION A. BUILDING 00 B. WING _____	X3) DATE SURVEY COMPLETED 12/22/2014
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NAME OF PROVIDER OR SUPPLIER REM-INDIANA INC	STREET ADDRESS, CITY, STATE, ZIP CODE 1221 WARREN DR LAFAYETTE, IN 47905
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W000000	<p>This visit was for the investigation of complaint #IN00160585.</p> <p>This visit was done in conjunction to the post certification revisit to the annual recertification and state licensure survey completed 8/29/14.</p> <p>Complaint #IN00160585: Substantiated, Federal/State deficiencies related to the allegation(s) are cited at W153, W193 and W248.</p> <p>Survey Dates: December 15, 16, 19, and 22, 2014</p> <p>Facility Number: 000754 Provider Number: 15G230 AIM Number: 100243370</p> <p>Surveyor: Christine Colon, QIDP</p> <p>These deficiencies also reflect state findings in accordance with 460 IAC 9.</p> <p>Quality review completed January 2, 2015 by Dotty Walton, QIDP.</p>	W000000		
W000153	<p>483.420(d)(2) STAFF TREATMENT OF CLIENTS The facility must ensure that all allegations of mistreatment, neglect or abuse, as well as injuries of unknown source, are reported immediately to the administrator or to other officials in accordance with State law through established procedures.</p>	W000153	The facility currently has a written	01/21/2015

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 record review and interview, the facility failed for 1 of 4 sampled clients (client A), to report an allegation of staff abuse immediately to the administrator and to the Bureau of Developmental Disabilities Services (BDDS) in accordance with state law.</p> <p>Findings include:</p> <p>A review of the facility's records was conducted at the facility's administrative office on 12/16/14 at 12:35 P.M.. Review of the facility's Bureau of Developmental Disabilities Services (BDDS) reports, Internal Reports (IR) and investigation records indicated:</p> <p>-Investigation record dated 11/20/14 involving client A indicated: "[Group Home Manager (GHM)] received a report from [Direct Support Professional (DSP) #13], that on 11/19/14 (sic) that on November 15, 2014 [DSP #14] was using PIA (crisis intervention) on [client A] and had a blanket over her head. [DSP #14] was suspended immediately pending the outcome of the investigation.</p> <p>Factual Findings: [GHM]: [GHM] stated that [DSP #13] told him on 11/19/14 that she needed to tell him something that had been bugging her. [GHM] stated that [DSP #13] told him that [DSP #15] told her on Sunday that she walked into the living room and [client A] was on the floor covered with a fleece blanket. [GHM] stated that [DSP #13] said [DSP #15] told her that [client A] was saying stop [DSP #14], please stop, she just wanted to get up.</p> <p>[Client A]: ...[Client A] stated that she did have a blanket on her head....[Client A] stated that she didn't have a blanket on her head. [Client A]</p>		<p>policy and procedure for immediately reporting all allegations of mistreatment, neglect or abuse. All new employees are trained on the policy and the procedure for reporting to the proper authorities within and outside the agency.</p> <p>The facility follows a protocol and regulation for the supervisor to be notified and a BDDS report sent for any instance of witnessed or suspected abuse, neglect, or exploitation.</p> <p>The staff have been re-trained on the facility's policy of immediately notifying a supervisor for any instance of abuse, neglect, or exploitation per BDDS reporting guidelines. The Program Director has been re-trained on the mandated procedures to report any allegations of abuse, neglect, or exploitation to BDDS, and to ensure documentation of the reporting by staff to the supervisor on duty.</p> <p>In the future, the facility staff will follow the policy to immediately notify appropriate supervisor with all allegations of abuse, neglect, or exploitation. The Program Director and/or Home Manager will document the contact alert from staff, then proceed to follow BDDS guidelines for reporting the allegation as required. The Home Manager will monitor the documentation logs three times weekly to ensure that incidents that occur are reported in a timely manner in the future.</p>				

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	<p>stated that [DSP #14] did put a blanket on her head then when asked again to confirm, [client A] stated that [DSP #14] didn't put a blanket on her head.'</p> <p>[DSP #15]: [DSP #15] stated that she wasn't client specific trained on [client A] because when [client A] came to [Group Home], she was working at a different home. [DSP #15] stated that she came in on Saturday, November 15th around 3:00 P.M.. When she walked in to the front room [client A] was on the floor and [DSP #14] had a blanket over her head....[DSP #15] stated in the past she had reported an issue that was employee related and she was told by a previous manager that she better keep quiet or she would be the one to lose her job.</p> <p>[DSP #13]: [DSP #13] stated that [DSP #15] told her on Sunday, November 16th that after she left last Wednesday, [DSP #14] had [client A] restrained and covered up with a fleece blanket and [client A] was yelling for him to stop....[DSP #13] stated that [DSP #15] told her and [DSP #16] that if they told anyone she would deny it. [DSP #13] stated that [client A] has more significant behaviors when [DSP #14] is working....[DSP #13] stated that she didn't report initially because she didn't see anything and felt that it was considered hearsay. [DSP #13] stated that the more that she thought about it, she should (sic) she should mention it to [GHM].</p> <p>[DSP #16]: [DSP #16] stated that on Sunday, November 16th, [DSP #15] said that she was uncomfortable with the way that [DSP #14] was handling [client A] during a behavior....[DSP #16] stated that [DSP #15] said that [client A] was on the floor with a blanket over her head. [DSP #16] stated that [DSP #15] was nervous about reporting because she had been threatened</p>		Responsible Party: Area Director				

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	<p>in the past with reporting about a prior concern. [DSP #16] stated that she told [DSP #15] that she should let someone know about her concern and assumed she did. [DSP #16] stated that she didn't report anything because she really didn't know the details and was fuzzy about what [DSP #15] had said because she wasn't present for the entire conversation and she felt it was hearsay since she wasn't present when the incident happened.... [DSP #16] stated that [DSP #15] was very concerned about losing her job for reporting.</p> <p>[DSP #17]: [DSP #17] stated that they try to redirect to activities on the weekends [client A] gets bored with them [DSP #17] stated that it seems like every weekend that she works the same thing happens regarding [client A]'s behaviors. [DSP #17] stated that she is not aware of where [client A]'s behavior plan is and does not believe she has been trained on it. [DSP #17] stated that the Home Manager that was there when she started didn't train on [client A]'s BSP (Behavior Support Plan) and she doesn't recall if she signed off on CST (Client Specific Training) for [client A].</p> <p>[DSP #14]: [DSP #14] stated that on Saturday, November 15th, [client A] tried to hit another clients (sic) and [DSP #14] intervened. [DSP #14] stated he attempted to redirect [client A] and [client A] put herself on the floor and said sorry.... [DSP #14] stated that he didn't have the blanket over head at any point. [DSP #14] stated that [DSP #15] was giving him a look as she walked into the living room and he told her he didn't have hands on her. [DSP #14] stated that anytime staff has to intervene with [client A] using PIA, [Program Director (PD)] wants to be informed. [DSP #14] stated that he did not notify [PD] during this incident because he didn't use PIA. [DSP #14] stated that he hasn't been trained on</p>						

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	<p>[client A]'s current BSP and there is not one in the home he doesn't think. [DSP #14] stated that the PD and GHM have been made aware numerous times that [client A] is acting out frequently on the weekend and throughout the week.</p> <p>Additional Information: BSP tracking shows that [client A] had behaviors on November 1, 2, 12, 13, 15 and 16. Daily Support records (DSR) indicate that on [client A] (sic) had behaviors on 11/15/14 and 11/16/14. There is no specific information about behaviors. The DSR for both days' (sic) state that [client A] had bad behaviors. Client specific training documentation in the home does not show that [DSP #14], [DSP #13], [DSP #15] or [DSP #16] has signed off on client specific training for [client A]. [Client A]'s behavior plan was not found in the home. The other clients in the home are not able to report or answer questions with accuracy.</p> <p>Conclusion: Evidence could not be found to support any abuse or inappropriate use of PIA. Evidence supports that not all staff have been trained on CST for [client A]."</p> <p>An interview with the Program Director (PD) was conducted on 12/22/14 at 1:30 P.M.. The PD indicated there was no written documentation to indicate the administrator was immediately notified of the allegation of abuse. The PD further indicated the administrator should have been immediately notified and BDDS should have been notified within 24 hours of the mentioned allegation of abuse.</p> <p>This federal tag relates to complaint #IN00160585.</p> <p>9-3-2(a)</p>			

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W000193	<p>483.430(e)(3) STAFF TRAINING PROGRAM Staff must be able to demonstrate the skills and techniques necessary to administer interventions to manage the inappropriate behavior of clients.</p> <p>Based on record review and interview for 1 of 4 sampled clients (client A), the facility failed to ensure all staff who worked with the clients were trained in regard to the clients' behavioral needs/plans.</p> <p>Findings include:</p> <p>A review of the facility's records was conducted at the facility's administrative office on 12/16/14 at 12:35 P.M.. Review of the facility's Bureau of Developmental Disabilities Services (BDDS) reports, Internal Reports (IR) and investigation records indicated:</p> <p>-Investigation record dated 11/20/14 involving client A indicated: "[Group Home Manager (GHM)] received a report from [Direct Support Professional (DSP) #13], that on 11/19/14 (sic) that on November 15, 2014 [DSP #14] was using PIA (crisis intervention) on [client A] and</p>	W000193	<p>The facility currently has written policy and procedures for ensuring staff are able to demonstrate the skills and techniques necessary to administer interventions to manage the inappropriate behaviors of clients. The facility requires all staff to be trained on each client's Behavior Support Plan, and other client-specific related information, prior to working with that individual. The staff have been re-trained on client A's Behavior Support Plan, including what non-restrictive and restrictive actions to implement when client A engages in inappropriate behaviors. The Program Director and Home Manager have been re-trained in ensuring all staff are properly trained on every new individual and/or any time an individual has a revision or update to any part of their Plan. This training includes, but is not limited to, the Behavior Support Plan, the Individualized Support Plan, and Client-Specific Training. In the future, the facility will ensure all staff have been trained</p>	01/21/2015			

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	<p>had a blanket over her head. [DSP #14] was suspended immediately pending the outcome of the investigation.</p> <p>Factual Findings: [GHM]: [GHM] stated that [DSP #13] told him on 11/19/14 that she needed to tell him something that had been bugging her. [GHM] stated that [DSP #13] told him that [DSP #15] told her on Sunday that she walked into the living room and [client A] was on the floor covered with a fleece blanket. [GHM] stated that [DSP #13] said [DSP #15] told her that [client A] was saying stop [DSP #14], please stop, she just wanted to get up.</p> <p>[Client A]: ...[Client A] stated that she did have a blanket on her head...[Client A] stated that she didn't have a blanket on her head. [Client A] stated that [DSP #14] did put a blanket on her head then when asked again to confirm, [client A] stated that [DSP #14] didn't put a blanket on her head.'</p> <p>[DSP #15]: [DSP #15] stated that she wasn't client specific trained on [client A] because when [client A] came to [Group Home], she was working at a different home. [DSP #15] stated that she came in on Saturday, November 15th around 3:00 P.M.. When she walked in to the front room [client A] was on the floor and</p>		<p>on each client and their Plans prior to staff working with them. The Program Director will ensure all staff have been trained in the Behavior Support Plans, and any other required trainings. The Program Director will ensure copies of these trainings are maintained and readily available. The Area Director will monitor the next three new employees and confirm their compliance and completion of required trainings. The Area Director will then continue to do ongoing random checks to ensure continual compliance. Responsible Staff: Area Director</p>				

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	<p>[DSP #14] had a blanket over her head....</p> <p>[DSP #15] stated in the past she had reported an issue that was employee related and she was told by a previous manager that she better keep quiet or she would be the one to lose her job.</p> <p>[DSP #13]: [DSP #13] stated that [DSP #15] told her on Sunday, November 16th that after she left last Wednesday, [DSP #14] had [client A] restrained and covered up with a fleece blanket and [client A] was yelling for him to stop....</p> <p>[DSP #13] stated that [DSP #15] told her and [DSP #16] that if they told anyone she would deny it. [DSP #13] stated that [client A] has more significant behaviors when [DSP #14] is working....[DSP #13] stated that she didn't report initially because she didn't see anything and felt that it was considered hearsay. [DSP #13] stated that the more that she thought about it, she should (sic) she should mention it to [GHM].</p> <p>[DSP #16]: [DSP #16] stated that on Sunday, November 16th, [DSP #15] said that she was uncomfortable with the way that [DSP #14] was handling [client A] during a behavior....[DSP #16] stated that [DSP #15] said that [client A] was on the floor with a blanket over her head. [DSP #16] stated that [DSP #15] was nervous about reporting because she had been</p>			

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	<p>threatened in the past with reporting about a prior concern. [DSP #16] stated that she told [DSP #15] that she should let someone know about her concern and assumed she did. [DSP #16] stated that she didn't report anything because she really didn't know the details and was fuzzy about what [DSP #15] had said because she wasn't present for the entire conversation and she felt it was hearsay since she wasn't present when the incident happened....[DSP #16] stated that [DSP #15] was very concerned about losing her job for reporting.</p> <p>[DSP #17]: [DSP #17] stated that they try to redirect to activities on the weekends [client A] gets bored with them [DSP #17] stated that it seems like every weekend that she works the same thing happens regarding [client A]'s behaviors. [DSP #17] stated that she is not aware of where [client A]'s behavior plan is and does not believe she has been trained on it. [DSP #17] stated that the Home Manager that was there when she started didn't train on [client A]'s BSP (Behavior Support Plan) and she doesn't recall if she signed off on CST (Client Specific Training) for [client A].</p> <p>[DSP #14]: [DSP #14] stated that on Saturday, November 15th, [client A] tried to hit another clients (sic) and [DSP #14]</p>			

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	<p>intervened. [DSP #14] stated he attempted to redirect [client A] and [client A] put herself on the floor and said sorry....[DSP #14] stated that he didn't have the blanket over head at any point. [DSP #14] stated that [DSP #15] was giving him a look as she walked into the living room and he told her he didn't have hands on her. [DSP #14] stated that anytime staff has to intervene with [client A] using PIA, [Program Director (PD)] wants to be informed. [DSP #14] stated that he did not notify [PD] during this incident because he didn't use PIA. [DSP #14] stated that he hasn't been trained on [client A]'s current BSP and there is not one in the home he doesn't think. [DSP #14] stated that the PD and GHM have been made aware numerous times that [client A] is acting out frequently on the weekend and throughout the week.</p> <p>Additional Information: BSP tracking shows that [client A] had behaviors on November 1, 2, 12, 13, 15 and 16. Daily Support records (DSR) indicate that on [client A] (sic) had behaviors on 11/15/14 and 11/16/14. There is no specific information about behaviors. The DSR for both days' (sic) state that [client A] had bad behaviors. Client specific training documentation in the home does not show that [DSP #14], [DSP #13], [DSP #15] or [DSP #16] has</p>			

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W000248	<p>signed off on client specific training for [client A]. [Client A]'s behavior plan was not found in the home. The other clients in the home are not able to report or answer questions with accuracy.</p> <p>Conclusion: Evidence could not be found to support any abuse or inappropriate use of PIA. Evidence supports that not all staff have been trained on CST for [client A]."</p> <p>An interview with the Program Director (PD) was conducted on 12/22/14 at 1:30 P.M.. The PD indicated all staff who work at the group home are to be trained on all clients' BSPs and Individual Support Plans (ISPs). The PD indicated he was not sure if all staff at this group home were trained on client A's BSP and ISP.</p> <p>This federal tag relates to complaint #IN00160585.</p> <p>9-3-3(a)</p> <p>483.440(c)(7) INDIVIDUAL PROGRAM PLAN A copy of each client's individual plan must be made available to all relevant staff, including staff of other agencies who work with the client, and to the client, parents (if the client is a minor) or legal guardian.</p> <p>Based on record review and interview, the facility</p>	W000248	The facility has policy and procedure ensuring all staff	01/21/2015	

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	<p>failed for 1 of 4 sampled clients (client A), by not ensuring the client's Behavior Support Plan (BSP) was available for all staff who worked with her at the group home.</p> <p>Findings include:</p> <p>A review of the facility's records was conducted at the facility's administrative office on 12/16/14 at 12:35 P.M.. Review of the facility's Bureau of Developmental Disabilities Services (BDDS) reports, Internal Reports (IR) and investigation records indicated:</p> <p>-Investigation record dated 11/20/14 involving client A indicated: "[Group Home Manager (GHM)] received a report from [Direct Support Professional (DSP) #13], that on 11/19/14 (sic) that on November 15, 2014 [DSP #14] was using PIA (crisis intervention) on [client A] and had a blanket over her head. [DSP #14] was suspended immediately pending the outcome of the investigation.</p> <p>Factual Findings: [GHM]: [GHM] stated that [DSP #13] told him on 11/19/14 that she needed to tell him something that had been bugging her. [GHM] stated that [DSP #13] told him that [DSP #15] told her on Sunday that she walked into the living room and [client A] was on the floor covered with a fleece blanket. [GHM] stated that [DSP #13] said [DSP #15] told her that [client A] was saying stop [DSP #14], please stop, she just wanted to get up.</p> <p>[Client A]: ...[Client A] stated that she did have a blanket on her head....[Client A] stated that she didn't have a blanket on her head. [Client A] stated that [DSP #14] did put a blanket on her head then when asked again to confirm, [client A] stated that [DSP #14] didn't put a blanket on her</p>		<p>aspects of a client's individual plan are readily available to staff, other agencies who work with individual, and/or legal guardian. The Program Director and Home Manager have been re-trained on the requirement of ensuring each individual, including client A, have all the components of their individual plan present at the home and readily available to staff as needed. The individual plan includes the Behavior Support Plan, Individualized Support Plan, Client-Specific Training, and any other components of their plan. In the future, the Program Director and Home Manager will ensure all parts of each individuals' plans are present in the facility for staff to reference. The Area Director will monitor this by ensuring a current copy of each person's plan is present at the facility by the below Completion Date. The Program Director will then complete a monthly check for the next three months to ensure all current plans are available to staff. The Program Director will then complete a minimum of quarterly checks ensuring proper documentation is present at the facility for each individual. Responsible Staff: Area Director</p>				

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	<p>head.'</p> <p>[DSP #15]: [DSP #15] stated that she wasn't client specific trained on [client A] because when [client A] came to [Group Home], she was working at a different home. [DSP #15] stated that she came in on Saturday, November 15th around 3:00 P.M.. When she walked in to the front room [client A] was on the floor and [DSP #14] had a blanket over her head....[DSP #15] stated in the past she had reported an issue that was employee related and she was told by a previous manager that she better keep quiet or she would be the one to lose her job.</p> <p>[DSP #13]: [DSP #13] stated that [DSP #15] told her on Sunday, November 16th that after she left last Wednesday, [DSP #14] had [client A] restrained and covered up with a fleece blanket and [client A] was yelling for him to stop....[DSP #13] stated that [DSP #15] told her and [DSP #16] that if they told anyone she would deny it. [DSP #13] stated that [client A] has more significant behaviors when [DSP #14] is working....[DSP #13] stated that she didn't report initially because she didn't see anything and felt that it was considered hearsay. [DSP #13] stated that the more that she thought about it, she should (sic) she should mention it to [GHM].</p> <p>[DSP #16]: [DSP #16] stated that on Sunday, November 16th, [DSP #15] said that she was uncomfortable with the way that [DSP #14] was handling [client A] during a behavior....[DSP #16] stated that [DSP #15] said that [client A] was on the floor with a blanket over her head. [DSP #16] stated that [DSP #15] was nervous about reporting because she had been threatened in the past with reporting about a prior concern. [DSP #16] stated that she told [DSP #15] that she should let someone know about her concern and</p>						

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	<p>assumed she did. [DSP #16] stated that she didn't report anything because she really didn't know the details and was fuzzy about what [DSP #15] had said because she wasn't present for the entire conversation and she felt it was hearsay since she wasn't present when the incident happened.... [DSP #16] stated that [DSP #15] was very concerned about losing her job for reporting.</p> <p>[DSP #17]: [DSP #17] stated that they try to redirect to activities on the weekends [client A] gets bored with them [DSP #17] stated that it seems like every weekend that she works the same thing happens regarding [client A]'s behaviors. [DSP #17] stated that she is not aware of where [client A]'s behavior plan is and does not believe she has been trained on it. [DSP #17] stated that the Home Manager that was there when she started didn't train on [client A]'s BSP (Behavior Support Plan) and she doesn't recall if she signed off on CST (Client Specific Training) for [client A].</p> <p>[DSP #14]: [DSP #14] stated that on Saturday, November 15th, [client A] tried to hit another clients (sic) and [DSP #14] intervened. [DSP #14] stated he attempted to redirect [client A] and [client A] put herself on the floor and said sorry.... [DSP #14] stated that he didn't have the blanket over head at any point. [DSP #14] stated that [DSP #15] was giving him a look as she walked into the living room and he told her he didn't have hands on her. [DSP #14] stated that anytime staff has to intervene with [client A] using PIA, [Program Director (PD)] wants to be informed. [DSP #14] stated that he did not notify [PD] during this incident because he didn't use PIA. [DSP #14] stated that he hasn't been trained on [client A]'s current BSP and there is not one in the home he doesn't think. [DSP #14] stated that the PD and GHM have been made aware numerous</p>			

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	<p>times that [client A] is acting out frequently on the weekend and throughout the week.</p> <p>Additional Information: BSP tracking shows that [client A] had behaviors on November 1, 2, 12, 13, 15 and 16. Daily Support records (DSR) indicate that on [client A] (sic) had behaviors on 11/15/14 and 11/16/14. There is no specific information about behaviors. The DSR for both days' (sic) state that [client A] had bad behaviors. Client specific training documentation in the home does not show that [DSP #14], [DSP #13], [DSP #15] or [DSP #16] has signed off on client specific training for [client A]. [Client A]'s behavior plan was not found in the home. The other clients in the home are not able to report or answer questions with accuracy.</p> <p>Conclusion: Evidence could not be found to support any abuse or inappropriate use of PIA. Evidence supports that not all staff have been trained on CST for [client A]."</p> <p>A review of client A's record was conducted on 12/16/14 at 3:00 P.M.. Review of the record indicated a BSP dated 4/14.</p> <p>An interview with the Program Director (PD) was conducted on 12/22/14 at 1:30 P.M.. The PD indicated client A's BSP should be at the group home for all staff. The PD indicated he did not know if the BSP was at the group home at the time of the incident.</p> <p>This federal tag relates to complaint #IN00160585.</p> <p>9-3-4(a)</p>						