

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  15G024	X2) MULTIPLE CONSTRUCTION A. BUILDING 00 B. WING _____	X3) DATE SURVEY COMPLETED  05/03/2013
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NAME OF PROVIDER OR SUPPLIER  ADEC INC	STREET ADDRESS, CITY, STATE, ZIP CODE 807 MOTTVILLE RD BRISTOL, IN 46507
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W000000	<p>This visit was for a pre-determined full recertification and state licensure survey.</p> <p>Dates of Survey: May 1, 2, and 3, 2013</p> <p>Facility number: 000590 Provider number: 15G024 AIM number: 100248560</p> <p>Surveyor: Tim Shebel, LSW</p> <p>The following federal deficiencies also reflect state findings in accordance with 460 IAC 9.</p> <p>Quality review completed May 8, 2013 by Dotty Walton, QIDP.</p>	W000000		

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, the facility neglected to implement their abuse/neglect policy to report investigative findings to the administrator within five business days for 1 of 1 reviewed investigation of alleged abuse which involved 1 of 4 sampled clients living at the group home (client #3.)</p> <p>Findings include:</p> <p>The facility's incident reports from 5/1/12 to 5/1/13, were reviewed on 5/1/13 at 1:16 P.M. The review indicated the following allegation of neglect involving client #3: "Name: [Client #3], Date: 3/12/2013, Narrative: Staff witnessed that [client #3] was crying and asked her what was wrong. [Client #3] stated that her mother hit her with a belt in the head. [Client #3] had gone on a home visit on 3/12/13. Staff did a head to toe assessment and no injuries were found. Plan to Resolve: An investigation will take place and [client #3] will not go on any home visits until the investigation is complete."</p> <p>Review on 5/1/13 at 1:35 P.M. of the investigation of the 3/12/13 allegation of</p>	W000149	Per our policy, the administrator was immediately notified of the incident and was sent all BDDS reports related to the incident. To avoid this specific citation in the future, the protective service staff will add the correspondence with the administrator into the investigation notes so that the notification can be verified. The Protective Service Coordinator will be trained on this change. Person Responsible: Protective Service Coordinator	05/29/2013	

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	<p>abuse involving client #3 indicated the allegation of abuse was investigated and proved to be unfounded. Further review of the investigation indicated the "Date incident investigation was completed: 3/25/2013."</p> <p>QIDP (Qualified Intellectual Disabilities Professional) #1 was interviewed on 5/1/13 at 2:53 P.M. QIDP #1 indicated there was no evidence the investigative findings of the 3/12/13 incident involving client #3 being forwarded to the facility's administrator prior to 3/25/13.</p> <p>Facility Director #1 was interviewed on 5/2/13 at 9:24 A.M. Facility Director #1 stated there was "no evidence" to indicate the investigative results of the 3/12/13 allegation of abuse involving client #3 were forwarded to the administrator within five business days of the incident.</p> <p>The facility's records were further reviewed on 5/2/13 at 2:47 P.M. Review of the facility's "Incident Reporting and Management Policy," dated 12/21/11, indicated, in part, the following: "ADEC will conduct all investigations of alleged incidents in accordance with state regulations. The administrator will be notified of investigative results within five business days of the incident."</p> <p>9-3-2(a)</p>				

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W000156	<p>483.420(d)(4) STAFF TREATMENT OF CLIENTS The results of all investigations must be reported to the administrator or designated representative or to other officials in accordance with State law within five working days of the incident. Based on record review and interview, the facility failed to report investigative findings to the administrator within five business days for 1 of 1 reviewed investigation of alleged abuse which involved 1 of 4 sampled clients living at the group home (client #3.)</p> <p>Findings include:</p> <p>The facility's incident reports from 5/1/12 to 5/1/13, were reviewed on 5/1/13 at 1:16 P.M. The review indicated the following allegation of neglect involving client #3: "Name: [Client #3], Date: 3/12/2013, Narrative: Staff witnessed that [client #3] was crying and asked her what was wrong. [Client #3] stated that her mother hit her with a belt in the head. [Client #3] had gone on a home visit on 3/12/13. Staff did a head to toe assessment and no injuries were found. Plan to Resolve: An investigation will take place and [client #3] will not go on any home visits until the investigation is complete."</p> <p>Review on 5/1/13 at 1:35 P.M. of the</p>	W000156	Per our policy, the administrator was immediately notified of the incident and was sent all BDDS reports related to the incident. To avoid this specific citation in the future, the protective service staff will add the correspondence with the administrator into the investigation notes so that the notification can be verified. The Protective Service Coordinator will be trained on this change. Person Responsible: Protective Service Coordinator	05/29/2013	

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	<p>investigation of the 3/12/13 allegation of abuse involving client #3 indicated the allegation of abuse was investigated and proved to be unfounded. Further review of the investigation indicated the "Date incident investigation was completed: 3/25/2013."</p> <p>QIDP (Qualified Intellectual Disabilities Professional) #1 was interviewed on 5/1/13 at 2:53 P.M. QIDP #1 indicated there was no evidence the investigative findings of the 3/12/13 incident involving client #3 was forwarded to the facility's administrator prior to 3/25/13.</p> <p>Facility Director #1 was interviewed on 5/2/13 at 9:24 A.M. Facility Director #1 stated there was "no evidence" the investigative results of the 3/12/13 allegation of abuse involving client #3 were forwarded to the administrator within five business days of the incident.</p> <p>9-3-2(a)</p>			