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| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 15G618 | X2) MULTIPLE CONSTRUCTION A. BUILDING 00 B. WING _____ | X3) DATE SURVEY COMPLETED 09/10/2012 |
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| NAME OF PROVIDER OR SUPPLIER REM-INDIANA INC | STREET ADDRESS, CITY, STATE, ZIP CODE 10606 HAVERSTICK CARMEL, IN 46032 |
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| W0000 | <p>This visit was for the investigation of complaint #IN00114837.</p> <p>Complaint #IN00114837 - Substantiated, Federal and state deficiencies related to the allegation are cited at W227 and W286.</p> <p>Dates of survey: September 5, 6, 7, and 10, 2012</p> <p>Surveyor: Kathy Craig, Medical Surveyor III</p> <p>Facility Number: 001173 Provider Number: 15G618 AIMS Number: 100235540</p> <p>These deficiencies also reflect state findings in accordance with 460 IAC 9.</p> <p>Quality Review was completed on 9/11/12 by Tim Shebel, 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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| W0227 | <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 record review and interview, the facility failed for 1 of 4 sampled clients (client A) by not incorporating into client A's behavior plan a program to address making false allegations.</p> <p>Findings include:</p> <p>Review on 9/5/12 at 1:50 PM of the facility's records included the BDDS (Bureau of Developmental Disabilities Services) incident reports and investigations. The following incident reports and investigations indicated client A made allegations of staff abuse:</p> <p>On 8/16/12, reported to BDDS on 8/17/12, Day program staff reported that client A said an Indiana Mentor staff, DSP #1 (direct support professional) from the group home where she lives punched her in the mouth while she was at the group home. The day program staff reported it to client A's house manager who reported it to the PD (program director). The investigation dated 8/22/12 indicated client A's face was assessed by day program staff and there were no</p> | W0227 | <p>Per Indiana MENTOR policy and procedures, all staff are client specifically trained before working with each client. If or when updates occur to a client's ISP, including their behavior support plan, all staff will be retrained on the plan before it is expected to be implemented. Client A's Behavior Support Plan is currently being updated by Indiana MENTOR's new Behavior Analysis to ensure that the false allegations are being addressed. Once the completed plan is guardian and HRC approved, all staff will be retrained on the new Behavior Support Plan. Completion Date 10-10-12 REsponsible Party: Home Manager and PProgram Director</p> | 10/10/2012 | | | |

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| | <p>visible injuries that could be a result from being punched. DSP #2 interview indicated client A "engaged in her typical routine of making false statements as she continuously does. These statements include she is pregnant. . . ."</p> <p>DSP #2 and DSP #3's interview in the investigation indicated they did not see any marks on client A's face on the morning of 8/16/12. The conclusion of the investigation indicated it did not support client A was punched in the face by DSP #1.</p> <p>On 8/22/12, reported to BDDS on 8/22/12, day program staff reported that client A said that her Indiana Mentor house manager from the group home where she lives took her bracelet then hit her in the head while she was at the group home. Day program staff reported it to Indiana Mentor Program Director (PD) and Area Director (AD). Day program staff also reported that at the end of the program day, client A began crying, yelling and refused to get on the group home van to go home. Staff was able to calm her down and she agreed to get on the van. The investigation dated 8/22/12 through 8/27/12 indicated client A "makes false statements about herself and others." Day program staff's interview in the investigation indicated client A</p> | | | | |

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| | <p>"makes false allegations and has hallucinations against people that are not normally involved in her everyday life . . ." and "It is not typical for [client A] to make an allegation against her staff."</p> <p>Interview in the investigation with DSP #4 indicated client A "makes false accusations about herself and others throughout every conversation she has." and "It is very difficult to tell when [client A] is telling the truth because she takes things out of context, makes things up, and has hallucinations." The conclusion indicated the evidence did not support the allegation the house manager hit client A.</p> <p>Reveiw on 9/5/12 at 7:00 PM of client A's Behavior Development Program (BDP) dated 12/9/12 indicated client A had the following target behaviors: Negative verbalizations, bossing, anger control incidents, physical assault, repetitive verbalizations, and hallucinations. The target behavior of making false allegations was not added to client A's BDP after the above-mentioned incidents.</p> <p>Review on 9/7/12 at 5:00 PM of a meeting note dated 8/22/12 indicated the former behavior specialist and the PD (Program Director) met to discuss adding the target behavior of making false allegations against the staff whenever they</p> | | | | | | |

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| | <p>enforce her BSP (Behavior Support Plan) expectations; the PD will discuss with client A's mother putting this target behavior into client A's plan; all staff will still need to be retrained as to reporting requirements; and to put in the plan not to suspend staff until more investigation can be completed to help protect the staff.</p> <p>Interview on 9/7/12 at 10:37 AM with the AD was conducted. The AD indicated the behavior of client A making false allegations had not yet been added to client A's BDP due to they no longer had the behavior specialist that was mentioned in the 8/22/12 meeting note and had just hired a new one.</p> <p>Interview on 9/10/12 at 7:50 AM with the PD was conducted. The PD indicated staff are to be trained on 9/13/12 on client A's behavior of making false allegations at the staff meeting.</p> <p>9-3-4(a) This tag is related to complaint #IN00114837.</p> | | | | |

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| W0286 | <p>483.450(b)(3) MGMT OF INAPPROPRIATE CLIENT BEHAVIOR Techniques to manage inappropriate client behavior must never be used for disciplinary purposes. Based on record review and interview, the facility failed for 1 of 4 sampled clients (client A) by using a restrictive technique on client A as punishment for her behaviors. Findings include: Review on 9/5/12 at 1:50 PM of the facility's records included the following BDDS (Bureau of Developmental Disabilities Services) incident report and the investigation: On 8/22/12, reported to BDDS on 8/22/12, day program staff reported that client A said that her Indiana Mentor house manager from the group home where she lives took her bracelet then hit her in the head while she was at the group home. Day program staff reported it to Indiana Mentor Program Director (PD) and Area Director (AD). Day program staff also reported that at the end of the program day, client A began crying, yelling and refused to get on the group home van to go home. Staff was able to calm her down and she agreed to get on the van.</p> | W0286 | <p>Indiana MENTOR's strictly prohibits the use of any type of 'punishment' that is not directly outlined in the client's Behavior Support Plan. An internal investigation was completed regarding the allegation of punishment, and was found to be unsubstantiated. Due to the allegations of the use of punishment, the Home Manager did receive corrective action and was retrained on Indiana MENTOR's abuse and neglect policy, along with the Rights of the Endangered Individuals that Indiana MENTOR serves. All staff will be retrained on Indiana MENTOR's policy regarding abuse and neglect, including the use of punishment or restrictions on the endangered individuals that we serve. Indiana MENTOR has a zero tolerance for any type of punishment or unapproved restrictions. Ongoing, the Program Director will complete observations in the home 2 times per week, for 4 weeks to ensure that staff are utilizing the Behavior Support Plans appropriately, including, but not limited to the use of any type of unapproved punishments, seclusion,</p> | 10/10/2012 | | | |

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| | <p>The investigation dated 8/27/12 indicated client A "had recently started stealing personal belongings from others", and client A "makes false statements about herself and others." The investigation contained the following interviews:</p> <p>Staff #1 indicated: Client A told staff #1 she did not like the house manager because she always "punishes" her and takes her bracelet away. Staff #2 informed staff #1 client A threw a fit and refused to get on the van when was time to go home. Client A said she hated the house manager that the house manager had her belongings and she was on punishment.</p> <p>Staff #3 indicated: Client A has been on "punishment" for 23 weeks for stealing a staff lap top and cell phone; the house manager posted notices in the house informing staff that client A was on punishment and could not do anything but go to work; staff #3 feels client A was upset about this on 8/22/12 when he went to pick her up from the day program.</p> <p>Staff #4 indicated he had not been aware of any restriction client A is on but was informed by co-workers client A was on restriction. He did not see any notices about this posted in the home.</p> | | <p>or restraints.</p> <p>After the 4 weeks, the Program Director will continue to complete weekly observations to ensure that the above mentioned items remain in place.</p> <p>Completion Date: 10-10-2012 Responsible Party: Program Director.</p> | | |

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| | <p>Staff #5 indicated: client A is currently mad at the house manager for putting her on "punishment"; that client A has been on punishment for 1.5 to 2 weeks for stealing-client A took her roommates new clothes and a staff cell phone; client A has been saying "I hate punishment" and "I hate [name of house manager]."; he heard the house manager explaining to staff #9, client A could not go home until October because of the limited number of days she can be out of the house a year.</p> <p>Staff #6 indicated: client A had her bracelet and cell phone taken last week because she has been stealing property belonging to others; was informed client A was on restriction through a note posted in the home stating she could not do anything but attend workshop.</p> <p>Staff #7 indicated: client A has been upset because she is not allowed to go home or in the community; client A was "grounded" by the house manager 2 weeks ago for stealing; the house manager took client A's purse, bracelet, cell phone, and wallet and client A keeps asking for these items to be returned.</p> <p>Staff #8 indicated: client A is upset with the house manager for taking her cell phone and accessories and put her on punishment; client A has been requesting</p> | | | |

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| | <p>her belonging be returned. They are locked in the house manager's desk; the house manager told staff, client A, and client A's mother she could not go home for a family visit because she is on punishment; has been on punishment for 2-3 weeks.</p> <p>Staff #9 indicated: client A has been stealing items from others; these items would often be placed in or noticed in her purse; was informed by the house manager last week client A was on restriction for a few days. She is not aware of any recent restrictions or notices for restriction posted in the home.</p> <p>The house manager indicated client A's stealing has increased and it has not been addressed in client A's behavior plan; and has not placed client A on restriction or prevented her from going home for a family visit; and feels staff is using the words "grounded" and "punishment."</p> <p>Staff #10 indicated she was informed by the house manager client A had been placed on restriction last week; was not informed by the house manager client A could not come home for a visit; she had requested client A come home for a family visit on 8/19/12 when client A's sister was visiting, but was informed by staff #3 that client A was on restriction.</p> | | | | |

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| | <p>The conclusion of the investigation indicated the evidence did not support the allegation the house manager hit client A but did support the house manager violated client A's rights.</p> <p>Review on 9/10/12 at 8:30 AM of the staff communication logs for August, 2012, indicated the following: On 8/3/12 the house manager wrote "Everyone, [initials of client A] is NOT to go on any outings (sic) due to her recent behavior. She is to only go to day placement." On 8/7/12 a staff wrote client A "was hittin (sic) [initials of client B] and yellin (sic) screaming, punching the wall & kicken' (sic) it. [Name of house manager] I believe she need's (sic) to add on her punishment."</p> <p>Review on 9/5/12 at 7:00 PM of client A's Behavior Development Program (BDP) dated 12/9/12 indicated client A had the following target behaviors: Negative verbalizations, bossing, anger control incidents, physical assault, repetitive verbalizations, and hallucinations. There was nothing in client A's BDP addressing her stealing and nothing about restricting her outings or access to personal items.</p> <p>Confidential interview #1 (CI #1) indicated CI #1 didn't remember seeing a</p> | | | |

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| | <p>sign about client A being punished but the house manager "grounded" client A for stealing and denied client A access to the community. CI #1 indicated all the staff knew about it and client A had to stay in her room for punishment. CI #1 then indicated the word wasn't punishment but "grounded."</p> <p>CI #2 indicated another staff had told CI #2 client A was supposed to stay in her room, that she was on punishment. CI #2 indicated client A had been acting up in day program. CI #2 indicated client A had stolen a staff's cell phone and had been taking staff's things and putting them in her purse. CI #2 indicated there was a sign posted client A was not allowed to go on any outings or events due to her acting up. CI #2 was not sure if the sign said "punishment" or not.</p> <p>CI #3 indicated CI #3 did not see a sign regarding client A's "punishment" and did not see staff try to keep client A in her room. CI #3 indicated client A has made false allegations.</p> <p>9-3-5(a) This tag is related to complaint #IN00114837.</p> | | | | | | |

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