

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 15G179	X2) MULTIPLE CONSTRUCTION A. BUILDING <u>00</u> B. WING _____	X3) DATE SURVEY COMPLETED 03/30/2015
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NAME OF PROVIDER OR SUPPLIER COMMUNITY ALTERNATIVES SW IN	STREET ADDRESS, CITY, STATE, ZIP CODE 8206 BUCKRIDGE TR EVANSVILLE, IN 47715
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W 000 Bldg. 00	<p>This visit was for a fundamental recertification and state licensure survey.</p> <p>Survey dates: March 26, 27, and 30, 2015.</p> <p>Provider Number: 15G179 AIMS Number: 1002430090 Facility Number: 000712</p> <p>Surveyor: Glenn David, RN</p> <p>These deficiencies also reflect state findings in accordance with 460 IAC 9. Quality Review completed 4/8/15 by Ruth Shackelford, QIDP.</p>	W 000		
W 247 Bldg. 00	<p>483.440(c)(6)(vi) INDIVIDUAL PROGRAM PLAN The individual program plan must include opportunities for client choice and self-management.</p> <p>Based on record review and interview for 3 of 3 sampled clients (clients #1, #2, and #3) and 2 of 2 additional clients (clients #4 and #5), the facility failed to provide condiments at the dinner meal.</p>	W 247	<p>W247</p> <p>The individual program plan must include opportunities for client choice and self-management.</p>	04/29/2015

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>Findings include:</p> <p>During the evening observation on 3/27/15 between 4:30 PM and 6:30 PM, clients #1, #2, #3, #4, and #5 were seated at the dinner table. The dinner meal consisted of chicken tenders, rolls, sweet potatoes, green beans, water, milk, and juice. An unidentified staff member stood up from the kitchen table and went to the refrigerator and took out the barbeque sauce, put some on her plate, and returned the barbeque sauce to the refrigerator. She subsequently used the barbeque sauce as a "dipping sauce" for her chicken tenders. There were no dipping sauces available for the clients. Additionally, there was no salt or pepper on the table during the dinner meal.</p> <p>The group home manager was interviewed on 3/27/15 at 5:30 PM. She stated "There is stuff in the refrigerator. The clients can ask for it." When asked about salt and pepper not being available to the clients, she stated "We have some. They (the clients) can ask for it if they want it."</p> <p>9-3-4(a)</p>		<p>-Staff will be in-serviced regarding clients' accessibility and choice of condiments at meal time.</p> <p>-Residential Manager will be in-serviced all regarding clients' accessibility and choice of condiments at meal time.</p> <p>--IDT with all clients regarding access to condiments at meal time.</p> <p>-Grievance Policy and Bill of Rights with all clients.</p> <p>-QIDP will be in-serviced all regarding clients' accessibility and choice of condiments at meal time.</p> <p>-Clinical Supervisor will be in-serviced all regarding clients' accessibility and choice of condiments at meal time.</p> <p>-Residential Manager will monitor through daily visits to the home</p> <p>-QIDP and Clinical Supervisor will monitor through monthly visits to the home</p> <p>Persons Responsible: Staff, Residential Manager, QIDP, Clinical Supervisor, and Executive Director</p>	

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W 312 Bldg. 00	<p>483.450(e)(2) DRUG USAGE</p> <p>Drugs used for control of inappropriate behavior must be used only as an integral part of the client's individual program plan that is directed specifically towards the reduction of and eventual elimination of the behaviors for which the drugs are employed. Based on record review and interview for 1 of 3 sampled clients (client #2), the facility failed to integrate Donepezil (dementia) and Fanapt (intermittent explosive disorder) into the client's Behavioral Support Plan (BSP), monitor for symptoms of dementia and to include a plan of reduction for these medications.</p> <p>Findings include:</p> <p>During review of client #2's records on 3/27/15 at 10:55 AM, the physician's orders dated 3/1/15 - 3/31/15 indicated client #2 took "Donepezil 5 milligrams (mg) - take one tablet by mouth at bedtime for dementia." The 3/1/15 - 3/31/15 physician's orders also indicated client #2 also took "Fanapt 6 mg - take one tablet by mouth twice daily for Intermittent Explosive Disorder."</p> <p>Review of client #2's BSP dated 12/19/14 indicated she took "Cogentin 1 mg daily for medication side effects, Depakote ER</p>	W 312	<p>W312</p> <p>Drugs used for control of inappropriate behavior must be used only as an integral part of the client's individual program plan that is directed specifically towards the reduction of and eventual elimination of the behaviors for which the drugs are employed.</p> <p>- An IDT will be completed with Client #2 to discuss any updates to their Individuals Support Plan, Behavioral Support Plan in regards to Dementia/intermittent explosive disorder and the use of behavioral medications.</p>	04/29/2015

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	<p>(Extended Release) 1500 mg at bedtime for mood stabilizer, Risperidone 8 mg daily for intermittent explosive disorder (IED), and Fluoxetine 20 mg - 3 capsules every morning for IED." Donepezil for dementia and Fanapt for IED were not included in client #2's BSP nor was there a plan of reduction for the medications. Review of the client's record did not indicate any data and/or tracking for symptoms of dementia.</p> <p>Interview with the Director of Nursing Services was conducted on 3/27/15 at 11:30 AM. She stated "There is no type of tracking being done to monitor the effectiveness of the client's medication for her dementia."</p> <p>During interview with the Director of Nursing Services on 3/27/15 at 11:30 AM, she stated the client takes "Donepezil for dementia and Fanapt for Intermittent Explosive Disorder. Neither are part of her BSP and there is not a plan of reduction for either."</p> <p>9-3-5(a)</p>		<p>- An IDT will be completed with all individuals living in the home to ensure that appropriate reduction plans are in place for all behavioral medications.</p> <p>-The Human Rights Committee will review any restrictions to Client #2's plan.</p> <p>-The QIDP will be retrained on Dementia tracking and intermittent explosive disorder including all psychotropic medication and a reduction plan for each medication.</p> <p>-The Clinical Supervisor will be retrained on Behavior Support Plans including Dementia tracking and intermittent explosive disorder and a reduction plan for each medication.</p>	

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			<p>-Residential Manager will oversee through daily visits in the home to assure programs and objectives are implemented appropriately.</p> <p>-QIDP will oversee through monthly visits in the home to assure programs and objectives are implemented appropriately.</p> <p>-Clinical Supervisor will oversee through monthly visits in the home to assure programs and objectives are implemented appropriately.</p> <p>Persons Responsible: Residential Manager, QIDP, Clinical Supervisor, and Executive Director</p>	

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W 352 Bldg. 00	<p>483.460(f)(2) COMPREHENSIVE DENTAL DIAGNOSTIC SERVICE Comprehensive dental diagnostic services include periodic examination and diagnosis performed at least annually. Based on record review and interview for 1 of 3 sampled clients (client #1), the facility failed to obtain an annual dental evaluation.</p> <p>Findings include:</p> <p>During client #1's record review on 3/27/15 at 10:10 AM, the last dental examination was dated 1/14/14.</p> <p>The Director of Nursing Services was interviewed on 3/27/15 at 11:30 AM. She stated "[Client #1] was past due for her annual dental evaluation. An appointment was made today for later in the month."</p> <p>9-3-6(a)</p>	W 352	<p>W352</p> <p>-Nurse and RM will be re-trained regarding scheduling dental exams per state and federal requirements.</p> <p>-Nurse and RM will assure that all appointments and any follow-up Appointments are made in a timely manner.</p> <p>-A dental appointment has been scheduled for client #1.</p> <p>-Residential Manager will monitor through weekly observations or as needed to ensure that dental appointments are being completed per in a timely manner.</p> <p>-Clinical Supervisor will monitor through monthly observations to ensure that dental appointments are being completed in a timely manner.</p>	04/29/2015

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			<p>-QIDP will monitor through monthly observations to ensure that dental appointments are being completed in a timely manner.</p> <p>-Nurse will complete quarterly chart reviews to ensure that all dental exams have been scheduled in a timely manner appropriately.</p> <p>Persons Responsible: Staff, Residential Manager, Clinical Supervisor, QIDP, Nurse Manager and Nurse</p>	