

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 15G387		X2) MULTIPLE CONSTRUCTION A. BUILDING 00 B. WING _____		X3) DATE SURVEY COMPLETED 07/25/2012	
NAME OF PROVIDER OR SUPPLIER NORMAL LIFE OF INDIANA				STREET ADDRESS, CITY, STATE, ZIP CODE 1013 WHITE TAIL BRAZIL, IN 47834			
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PERCEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)			ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)		(X5) COMPLETION DATE
W0000	<p>This visit was for a recertification and state licensure survey.</p> <p>Date of Survey: July 18, 19, 20, 23, 24, 25, 2012</p> <p>Provider Number: 15G387 Aims Number: 100244360 Facility Number: 000901</p> <p>Surveyor: Mark Ficklin, Medical Surveyor III</p> <p>These deficiencies also reflect state findings in accordance with 460 IAC 9.</p> <p>Quality Review was completed on 7/27/12 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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W0189	<p>483.430(e)(1) STAFF TRAINING PROGRAM</p> <p>The facility must provide each employee with initial and continuing training that enables the employee to perform his or her duties effectively, efficiently, and competently.</p> <p>Based on record review and interview, the facility failed for 1 identified staff (staff #6) with client incident report medication errors reviewed to ensure staff received retraining on medication administration.</p> <p>Findings include:</p> <p>Record review of the facility's incident reports was done on 7/18/12 at 1:52p.m. An incident report on 6/21/12 (staff #6) indicated staff #6 had made medication errors while administering client medication. The incident report indicated staff was to be retrained regarding medication administration. There was no documented staff retraining in regards to the administration of client medication.</p> <p>Interview of professional staff #1 was done on 7/24/12 at 12:40p.m. Staff #1 indicated staff #6 was in need of retraining on the process of administering client medication. Staff #1 indicated there was no documented retraining in place.</p> <p>9-3-3(a)</p>	W0189	<p>All employees complete an orientation period that includes classroom and on-the-job training that provides the training and experience needed to perform their duties. Training is also provided on at least a monthly basis by the Home Manager, QMRP, or other person as needed to insure that the employee has the current and best information in order to complete their job duties.</p> <p>The Program Coordinator is responsible for developing the Preventative Measures following an incident. The Program Coordinator documents the measure on each incident report form and is responsible for following up as to what the measure indicates. The Program Coordinator is responsible for ensuring that if staff requires additional training in order to elevate the reoccurrence of the incident it is completed and documented. The training is to be documented in each</p>	08/24/2012	

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			<p>employees training file that is maintained by the Training Coordinator. The Program Manager is responsible for reviewing each incident report to insure that the Preventative Measure is included and that follow-up is complete.</p> <p>All staff at the home will receive re-training on Medication Administration Protocols for all individuals in the home. Training will be documented and maintained in the employees training file. The Program Coordinator will be responsible for completing this training with each staff member. The Program Manager will be responsible for providing additional training to the Program Coordinators and the Home Managers as to their responsibilities in following-up to incident reports, Preventative Measures and staff on-going training.</p>		

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W0262	<p>483.440(f)(3)(i) PROGRAM MONITORING & CHANGE The committee should review, approve, and monitor individual programs designed to manage inappropriate behavior and other programs that, in the opinion of the committee, involve risks to client protection and rights.</p> <p>Based on record review and interview, the facility's Human Rights Committee (HRC) failed for 1 of 3 sampled clients (#1) with behavior support plans (BSP) to ensure client #1's BSP (including behavior medications) was reviewed/monitored within the past year.</p> <p>Findings include:</p> <p>The record of client #1 was reviewed on 7/23/12 at 12:02p.m. Client #1's 5/3/12 individual support plan (ISP) and BSP indicated client #1's diagnosis included, but was not limited to, Schizophrenia and Autism for which client #1 received the medications Risperdal. There was no documentation the ISP/BSP had been reviewed by the HRC since 5/11.</p> <p>Interview of facility staff #2 on 7/24/12 at 12:40p.m. indicated there was no documentation the facility's HRC had reviewed client #1's ISP/BSP since 5/11. 9-3-4(a)</p>	W0262	<p>The Human Rights Committee (HRC) reviews for client #1 regarding the Behavior Support Plan have been completed.</p> <p>The Program Coordinator is responsible for preparing and presenting the required data for HRC reviews and approvals for ISPs/BSPs. The Program Manager will provide training to all Program Coordinators which review the HRC process and expectations for obtaining approvals for rights restrictions/behavior modification programs.</p> <p>The Program Manager is responsible for tracking HRC reviews and monitoring the Program Coordinators to assure required reviews are included on the HRC agenda. The Program Manager is responsible for implementing corrective action with Program Coordinators when these expectations are not met.</p>	08/24/2012			

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