

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 15G239	X2) MULTIPLE CONSTRUCTION A. BUILDING 00 B. WING _____		X3) DATE SURVEY COMPLETED 01/15/2013
NAME OF PROVIDER OR SUPPLIER OCCAZIO INC			STREET ADDRESS, CITY, STATE, ZIP CODE 1015 S 14TH ST NEW CASTLE, IN 47362		
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W0000	<p>This visit was for a full annual recertification and state licensure survey.</p> <p>Dates of Survey: January 8, 9, 10, 11, 14 and 15, 2013</p> <p>Facility number: 000762 Provider number: 15G239 AIM number: 100234890</p> <p>Surveyor: Kathy Wanner, Medical Surveyor III.</p> <p>The following federal deficiencies also reflect state findings in accordance with 460 IAC 9. Quality Review completed 1/23/13 by Ruth Shackelford, 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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W0102	<p>483.410 GOVERNING BODY AND MANAGEMENT The facility must ensure that specific governing body and management requirements are met.</p> <p>Based on record review and interview, the Condition of Participation: Governing Body and Management was not met for 1 of 4 sampled clients (client #2). The governing body failed to establish a policy for reporting restraints and injuries in restraints according to State policy for reporting, failed to ensure sufficient safeguards were in place to address repeated injuries in restraint and failed to ensure the specific physical restraint techniques were included in the client's plan.</p> <p>Findings include:</p> <p>Please refer to W104: The governing body failed to exercise operating direction over the group home by not establishing a policy for reporting restraints and injuries in restraints; failed to ensure sufficient safeguards were in place to address repeated injuries in restraint and failed to ensure the specific physical restraint techniques were included in the client's plan.</p> <p>Please refer to W266: The Condition of Participation: Client Behavior and Facility Practices was not met for 1 of 4</p>	W0102	<p>W 102 Governing Body and Management</p> <p>The facility must ensure that specific governing body and management requirements are met.</p> <p>1. What corrective action will be accomplished?</p> <ul style="list-style-type: none"> · All use of restraints will be reported. · A staff meeting will be held on 2-8-13 to discuss Client #2's use of restraint, his behavior plan, ways to prevent injury during the restraint, explore ideas on how the use of restraint can be avoided, Occazio's behavior intervention policy (#2110), and how to complete accident injury reports to identify SIB versus injury due to the restraint. · Staff will be retrained on the use of the Handle With Care restraint (PRT) during their team meeting on 2-8-14. · The IDT will meet by 2-14-13 to discuss Client #2's behavior plan and will make 	02/14/2013			

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	<p>sampled clients (client #2). The governing body failed to use restraint interventions in a safe manner to avoid client injury. The governing body failed to have a system for reporting restraint usage and injuries occurring during behavior interventions. The governing body failed to ensure the specific physical restraint techniques were included in the client's plan.</p> <p>9-3-1(a)</p>		<p>revisions as warranted.</p> <ul style="list-style-type: none"> · The restraint used in HWC will be identified in Client #2's behavior plan. · The use of restraint and injuries will be tracked by the IDT team. The Risk Committee will review the use of restraint and any injuries that occur. · Occazio's incident reporting policy (#2103) will be reviewed with the RC for the home by 2-14-13. <p>2. How will we identify other residents having the potential to be affected by the same deficient practice and what corrective action will be taken?</p> <ul style="list-style-type: none"> · All residents have the potential to be affected by the same deficient practice. · All use of restraints will be reported. · Staff will be retrained on the use of the Handle With Care restraint (PRT) during their team meeting on 2-8-14. · The use of restraint and injuries will be tracked by the IDT team. The Risk Committee will review the use of restraint and any injuries that occur. 		

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			<ul style="list-style-type: none"> · Occazio's incident reporting policy (#2103) will be reviewed with the RC for the home by 2-14-13. · The IDT will monitor the residents behavior needs. As concerns arise, the team will meet and make necessary revisions to the individual's behavior plan. · The restraint utilized will be identified in all client's behavior plans. · Staff will review during their team meeting on 2-8-13 ways to prevent injury during the restraint, explore ideas on how the use of restraint can be avoided, Occazio's behavior intervention policy (#2110), and how to complete accident injury reports to identify SIB versus injury due to the restraint. <p>3. What measures will be put into place or what systemic changes will be made to ensure that the deficient practice does not recur:</p> <ul style="list-style-type: none"> · All use of restraints will be reported. · Staff will be retrained on the use of the Handle With Care restraint (PRT) during their team 		

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			<p>meeting on 2-8-14.</p> <ul style="list-style-type: none"> · The use of restraint and injuries will be tracked by the IDT team. The Risk Committee will review the use of restraint and any injuries that occur. · Occazio's incident reporting policy (#2103) will be reviewed with the RC for the home by 2-14-13. · The IDT will monitor the residents behavior needs. As concerns arise, the team will meet and make necessary revisions to the individual's behavior plan. · The restraint utilized will be identified in all client's behavior plans. · Staff will review during their team meeting on 2-8-13 ways to prevent injury during the restraint, explore ideas on how the use of restraint can be avoided, Occazio's behavior intervention policy (#2110), and how to complete accident injury reports to identify SIB versus injury due to the restraint. <p>4. How will the corrective action be monitored to ensure the deficient practice will not recur?</p>		

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			<ul style="list-style-type: none"> · The RC will monitor on a daily basis when they are in the home. · The Program Specialist will monitor as they complete their audits. · The Risk Committee will monitor as they meet to review submitted documentation. <p>5. What is the date by which the systemic changes will be completed?</p> <p>February 14, 2013</p>	

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W0104	<p>483.410(a)(1) GOVERNING BODY</p> <p>The governing body must exercise general policy, budget, and operating direction over the facility.</p> <p>Based on observation, record review and interview for 1 of 4 sampled clients (client #2), the governing body failed to exercise operating direction over the group home by failing to report injuries which occurred during behavior interventions for 1 of 4 sampled clients (client #2); failed to ensure sufficient safeguards were in place to protect client #2 after repeated injuries during physical restraint and failed to ensure specific physical restraint techniques were in the client's plan. The governing body failed to exercise operating direction over the facility by failing to provide needed repairs/maintenance to the group home where 4 of 4 sampled clients (clients #1, #2, #3 and #4) and 4 additional clients (clients #5, #6, #7 and #8) lived.</p> <p>Findings include:</p> <p>1. Facility records were reviewed on 1/8/13 at 3:30 P.M. including the Bureau of Developmental Disabilities Services (BDDS) reports and the General Event Reports (GER) for the past year. The reports indicated the following:</p> <p>A GER report dated 1/2/13 at 8:10 A.M.</p>	W0104	<p>W 104 Governing Body</p> <p>The governing body must exercise general policy, budget, and operating direction over the facility.</p> <p>1. What corrective action will be accomplished?</p> <ul style="list-style-type: none"> · A maintenance request for the repairs has been submitted to the maintenance department by the RC to address the maintenance concerns within the group home. · The identified maintenance needs for the home have been scheduled to be completed. · All use of restraints will be reported. · A staff meeting will be held on 2-8-13 to discuss Client #2's use of restraint, his behavior plan, ways to prevent injury during the restraint, explore ideas on how the use of restraint can be avoided, Occazio's behavior intervention policy (#2110), and how to complete accident injury reports to identify SIB versus 	02/14/2013			

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	<p>indicated client #2 was "redirected several times then he smacked at staff and kicked in the back bathroom... put in PRT (Primary Restraint Technique) for 10 (ten) minutes having him count until calm." The GER did not give a description of the restraint technique utilized. The GER indicated client #2 had a "2.5 cm (two and one half centimeter) by 1 cm (one centimeter) scratch on his right arm." There was no BDDS report available for review for this incident.</p> <p>A GER report dated 12/11/12 at 8:30 P.M. indicated client #2 "...tried to push staff away...tried to bite staff...staff came up and started the PRT. [Client #2] dropped to the ground, causing staff to fall too... [client #2] got to his feet (sic) staff took over restraint and walked [client #2] outside. When outside [client #2] tried to drop, causing staff to lose their balance. Before staff regained their balance [client #2] dropped causing both staff and [client #2] to hit the wall. Staff regained his balance and put [client #2] against the wall. After approx. (approximately) 5 (five) minutes [client #2] calmed down and staff escorted him to the van." The GER did not describe the restraint technique utilized or the transport technique utilized. The GER indicated client #2 had a "small red scrape on his forehead." There was no BDDS</p>		<p>injury due to the restraint.</p> <ul style="list-style-type: none"> · Staff will be retrained on the use of the Handle With Care restraint (PRT) during their team meeting on 2-8-14. · The IDT will meet by 2-14-13 to discuss Client #2's behavior plan and will make revisions as warranted. · The restraint used in HWC will be identified in Client #2's behavior plan. · The use of restraint and injuries will be tracked by the IDT team. The Risk Committee will review the use of restraint and any injuries that occur. · Occazio's incident reporting policy (#2103) will be reviewed with the RC for the home by 2-14-13. <p>2. How will we identify other residents having the potential to be affected by the same deficient practice and what corrective action will be taken?</p> <ul style="list-style-type: none"> · All residents have the potential to be affected by the same deficient practice. · The maintenance director 				

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	<p>report available for review for this incident.</p> <p>A GER report dated 10/24/12 at 6:35 P.M. indicated client #2 was at the bowling alley. "...getting kind of wound up because he couldn't bowl anymore and the others were still bowling...dropped to the ground and staff tried putting their arm around...and he promptly bite (sic) their hand. Staff used the PRT and started to escort [client #2] out of the building...just dropped causing staff to lose their balance and both fell to the ground. While staff was regaining their feet, other staff took over and restrained [client #2] as soon as he got off the ground. When staff regained his feet, they took over restraining [client #2] and escorted him outside to the van where after approx. 10-15 (ten to fifteen) minutes of restraint [client #2] calmed down." The GER did not indicate what type of restraints were utilized. The GER indicated client #2 had a "small bump swelling/edema) on his forehead above his left eye. One medium size scrape mark on his abdomen, and 2 (two) small scrapes on his elbows." There was no BDDS report available for review for this incident.</p> <p>A GER report dated 9/28/12 at 9:10 A.M. indicated client #2 "Wanted to get into the</p>		<p>will help identify maintenance concerns within the group homes.</p> <ul style="list-style-type: none"> · The Residential Coordinators will continue to report all maintenance concerns using the monthly maintenance form. · All use of restraints will be reported. · Staff will be retrained on the use of the Handle With Care restraint (PRT) during their team meeting on 2-8-14. · The use of restraint and injuries will be tracked by the IDT team. The Risk Committee will review the use of restraint and any injuries that occur. · Occazio's incident reporting policy (#2103) will be reviewed with the RC for the home by 2-14-13. · The IDT will monitor the residents behavior needs. As concerns arise, the team will meet and make necessary revisions to the individual's behavior plan. · The restraint utilized will be identified in all client's behavior plans. · Staff will review during their team meeting on 2-8-13 ways to prevent injury during the restraint, 		

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	<p>fridge for his lunch but staff reminded [client #2] that it was not time for lunch, this upset him. He then started to try to hit/kick/bite staff. Staff then used PRT. He soon calmed down. Verbal praise was given for calming down." The GER did not describe the type of restraint which was used. The GER indicated client #2 had a "4 cm by 2 cm (four centimeter by two centimeter) black bruise on his face." There was no BDDS report available for review for this incident.</p> <p>A GER report dated 8/22/12 at 7:00 P.M. indicated client #2 "Returned from [sporting event] saw trash had been removed from his room. He went outside got the two trash bags and brought them to his room. Staff went to his room to remove the bags, and when [client #2] saw staff removing them he began running at staff to try to hit staff. Staff blocked his attempts to hit them and then tried to restrain him. As staff was restraining him [client #2] tried to get free pushing off the wall with his feet and tripped, smacking his head against a door frame before staff could regain balance. After maintaining the restraint for approx. 10 (ten) minutes [client #2] calmed down and was released." The GER did not describe the restraint utilized. The GER indicated client #2 had a "small red bump on his forehead near his left eye." There</p>		<p>explore ideas on how the use of restraint can be avoided, Occazio's behavior intervention policy (#2110), and how to complete accident injury reports to identify SIB versus injury due to the restraint.</p> <p>3. What measures will be put into place or what systemic changes will be made to ensure that the deficient practice does not recur:</p> <ul style="list-style-type: none"> · The maintenance director will help identify maintenance concerns within the group homes. · The Residential Coordinators will continue to report all maintenance concerns using the monthly maintenance form. · All use of restraints will be reported. · Staff will be retrained on the use of the Handle With Care restraint (PRT) during their team meeting on 2-8-14. · The use of restraint and injuries will be tracked by the IDT team. The Risk Committee will review the use of restraint and any injuries that occur. 		

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	<p>was no BDDS report available for review for this incident.</p> <p>A GER report dated 8/9/12 at 3:30 P.M. indicated client #2 "...went after staff in the office. Staff tried to redirect him. Then ran around corner after another staff. He was kicking and hitting and trying to bite. Then staff put him in PRT position for about 10-15 minutes. After the restraint he was calm and played a few games. Verbal praise was given." The GER did not describe the restraint used. The GER indicated client #2 had a "minor bump on his forehead and 2-3 scratches on his left anterior forearm that are reddened and raised." There was no BDDS report available for review for this incident.</p> <p>A GER report dated 7/9/12 at 4:20 P.M. indicated client #2 "started yelling in the back hallway, and went up front and started hitting and kicking staff and tried biting. Staff tried to ask him what was wrong and he continued to hit and kick. The other staff attempted to get him, but he ran outside and threw himself on the ground. When the staff went to go get him, he ran inside, and tried pushing the chair into staff's way. Then he dropped down to the ground again, and staff went and restrained him. After the restraint he was calm and said he was sorry. Praise</p>		<ul style="list-style-type: none"> · Occazio's incident reporting policy (#2103) will be reviewed with the RC for the home by 2-14-13. · The IDT will monitor the residents behavior needs. As concerns arise, the team will meet and make necessary revisions to the individual's behavior plan. · The restraint utilized will be identified in all client's behavior plans. · Staff will review during their team meeting on 2-8-13 ways to prevent injury during the restraint, explore ideas on how the use of restraint can be avoided, Occazio's behavior intervention policy (#2110), and how to complete accident injury reports to identify SIB versus injury due to the restraint. <p>4. How will the corrective action be monitored to ensure the deficient practice will not recur?</p> <ul style="list-style-type: none"> · The RC will monitor on a daily basis when they are in the home. · The Program Specialist will monitor as they complete their audits. 				

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	<p>was given." The GER did not describe the restraint utilized. The GER indicated client #2 had "an abrasion on his right upper arm and left elbow, and knees with significant abrasions." There was no BDDS report available for review for this incident.</p> <p>A GER report dated 6/29/12 at 3:40 P.M. indicated client #2 "...saw the sky was getting dark. He started to scream and run into the road. Staff told him everything was okay that it was just rain...started to kick and hit and bite. Staff tried to redirect him to do an activity. He continued to hit and kick and staff put him in a restraint. Held him for about 15 minutes..." The GER did not describe the type of restraint used. The GER indicated client #2 "scraped both knees." There was no BDDS report available for review for this incident.</p> <p>A GER tracking form dated from 1/19/12 to 1/3/13 was reviewed on 1/10/13 at 12:12 P.M.. The tracking form indicated client #2 had been restrained using the Primary Restraint Technique (PRT) by the staff at the group home 43 (forty-three) times, with 8 of the 43 times resulting in post intervention assessments revealing injury as indicated in the GER reports above.</p>		<ul style="list-style-type: none"> · The Maintenance Director will monitor as he is in the home. · The Risk Committee will monitor as they meet to review submitted documentation. <p>5. What is the date by which the systemic changes will be completed?</p> <p>February 14, 2013</p>				

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	Client #2's BSP (Behavior Support Plan) was reviewed on 1/9/13 at 2:00 P.M. and indicated "7 (seven) teaching methods for at the group home 1. A daily picture schedule, use of timers for 5 (five) minute prompts before transitions...2. ...Offering a 'squeeze' (PRT when [client #2] engages in maladaptive behaviors) prior to actual behavior can work as a sensory activity that will help calm/regulate [client #2]. 3. [Client #2] should be lavishly praised for appropriate behaviors. Staff should put forth substantial effort in acknowledging appropriate behaviors, even if the behaviors seem insignificant. 4. It is vital staff remain calm and quiet...Staff continue to monitor for early warning signs of aggressive behavior...provide with frequent verbal praise when compliant. 5. Use clear concise functional language, and allow ample time to process. Avoid overloading him with auditory information. 6. ...When [client #2] appears over-stimulated staff should immediately attempt to engage [client #2] in a sensory activity. One of the choices should always be a 'squeeze' (PRT) (no description). 7. ...Every effort should be made to keep [client #2's] routine as consistent as possible. Any changes in schedule should be addressed with [client #2] as soon as possible to give him time to adjust to the change....Once calm staff will praise [client #2] for 'making a				

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	<p>wonderful choice to act appropriately,' and redirect [client #2] back to previous activity without mentioning the behavior." For Physical aggression, "Staff will give one verbal prompt accompanied with a physical prompt for [client #2] to stop the behavior... staff will attempt to immediately engage [client #2] in a sensory activity and remain with him until he is calm. If his physical aggression continues staff... will then us (sic) the Primary Restraint Technique per company policy. Once he is calm encourage [client #2] to apologize to the targeted individual...." Client #2's BSP did not describe the specific restraint/squeeze. The BSP did not indicate or specify if the squeeze was performed differently than a restraint. The BSP did not indicate how staff were to perform the restraint/squeeze. Client #2's BSP did not indicate if staff were to attempt to lift client #2 up when he dropped to the ground during a behavior or during a restraint (PRT)/squeeze, or if the staff were to continue to attempt to restrain/squeeze him when/if he dropped to the ground. Client #2's BSP did not indicate why client #2 could not remain on the ground/floor if he was not endangering himself or others.</p> <p>An interview was conducted with Direct Care Staff (DCS) #1 on 1/9/13 at 7:30</p>				

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	<p>A.M.. DCS #1 stated, "He (client #2) cycles, sometimes we have to restrain him a couple times a week. Other times it might go weeks in between restraints, or sometimes it's everyday. He (client #2) tries to bite staff. We face him (client #2) against the wall, put our weight against him."</p> <p>The Residential Coordinator (RC) was interviewed on 1/10/13 at 12:39 P.M.. The RC stated, "The use of PRT is included in (client #2's) BSP." The RC indicated the PRT was a technique to apply pressure using their body weight against the back of client #2. This was to assist client #2 with his sensory needs and transition times which were reportedly the most difficult times for client #2. The RC indicated the PRTs were not reported to BDDS.</p> <p>The Program Specialist (PS) was interviewed on 1/10/13 at 12:27 P.M.. The PC stated "PRT is not really a restraint but an applied pressure to help calm [client #2] when he has sensory overload and cannot process." The PS stated "The injuries to [client #2] were not from the staff doing the PRT, but from [client #2's] behaviors of struggling and trying to get out and away from staff." The PS stated, "The PRTs are not reported to BDDS because they are a</p>						

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	<p>sensory technique, and do not need to be reported."</p> <p>The Area Residential Coordinator (ARC) was interviewed on 1/9/13 at 11:28 A.M.. When asked about the PRT technique, the ARC stated, "The client is held from the back, and pushed up to face the wall with the staff's body weight against his back to apply pressure for his sensory need to feel in control." The ARC indicated incidences of staff using the PRT for client #2 were not reported to BDDS since it is used as a sensory restraint technique.</p> <p>2. Observation of the group home where clients #1, #2, #3, #4, #5, #6, #7 and #8 lived was observed on 1/9/13 from 6:18 A.M. until 7:52 A.M.. The laundry room/medication room had a missing upper cabinet door. The sink in the small bathroom, which was located in the front hallway, had five areas where the porcelain was worn off and the sink was rusting. The largest area was located at the sink overflow and was 4" x 2" (four by two inches) in size. The living room walls had two indented areas, one was 8" x 6" (eight by six inches) and the second one was fist sized. The living room walls also had three areas which had been patched but not painted. The largest of the patched areas was 2' x 2 1/2' (two feet by</p>			
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	<p>two and one-half feet). The bathroom with the walk-in shower had a missing towel bar with the metal brackets and screws still in the wall, and the dry wall was damaged 3" (three inches) around each bracket. In client #2 and #7's bedroom the corner edge of the wall next to client #7's bed had plaster damage 4' (four feet) high, with no base trim around the corner, and no base trim under the window. The bedroom had several areas on the walls where the paint was peeling or showed discoloration. The bedroom door to client #3's and #8's bedroom was broken under the outer door knob.</p> <p>Client #7 was interviewed on 1/9/13 at 4:03 P.M.. Client #7 stated "The wall needs fixed." Client #7 also stated about his bedroom, "It could be painted." When asked what color he would like it to be painted client #7 stated, "Maybe blue."</p> <p>Direct Care Staff (DCS) #2 and #4 were interviewed on 1/9/13 at 3:50 P.M.. DCS #2 indicated the rusty sink had been like that since she started working at the group home a few years back. Both DCS #2 and DCS #4 indicated the living room walls had been damaged for about a month, and the cabinet in the medication room did have a door off. DCS #2 stated the broken door to client #8's bedroom was from "[client #8] slamming the door."</p>			

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	<p>The Residential Coordinator (RC) was interviewed on 1/10/13 at 11:49 A.M.. The RC indicated the maintenance issues needed to be repaired.</p> <p>9-3-1(a)</p>			

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W0149	<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 failed to follow their policy on Suspected Abuse, Neglect and Exploitation Reporting for 1 of 4 sampled clients (client #2) by not following client #2's Behavior Support Plan (BSP), by DCS saying verbally abusive comments about client #2 where client #2 could overhear; and by not preventing 1 of 2 sampled clients with a targeted behavior of AWOL (absent without leave) from leaving the group home without staff supervision (client #1).</p> <p>Findings include:</p> <p>Facility records were reviewed on 1/8/13 at 3:30 P.M. including the Bureau of Developmental Disabilities Services (BDDS) reports for the past year. The BDDS reports indicated the following:</p> <p>1. A BDDS report dated 8/24/12 for 8/24/12 at 7:50 A.M. indicated "Staff called and reported they had heard another staff, [DCS #10] saying loudly she was frustrated with [client #2] and if he didn't stop hitting people she was going to hit the little s---head back. It may have been loud enough for [client #2] to</p>	W0149	<p>W 149 Staff Treatment of Clients</p> <p>The facility must develop and implement written policies and procedures that prohibit mistreatment, neglect or abuse of the client.</p> <p>1. What corrective action will be accomplished?</p> <ul style="list-style-type: none"> · Staff will be retrained on Occazio's policy #2105 Abuse, Neglect and Exploitation at their staff meeting on 2-8-13. · Staff who fail to follow Occazio's policy #2105 Abuse, Neglect and Exploitation will be subject to discipline actions. · Staff involved in the incident with Client #2 has been terminated. · Staff will be retrained on Client #1 and #2's behavior plan during their team meeting on 2-8-13. · Staff will be trained on the use of 15 minute checks for Client #1 during their team 	02/14/2013			

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	<p>hear. The supervisor was contacted and [DCS #10] was suspended pending the outcome of an investigation."</p> <p>The internal investigation documentation dated 8/30/12 was reviewed on 1/8/13 at 5:00 P.M. indicated "...Three staff heard [DCS #10] make a comment 'He's not going to hit me again or I'll hit the little s-- head back.'... [DCS #10] did not respond to [client #2] when he tried to talk with her after the incident, which is not part of his BSP. The committee finds that [DCS #10] failed to follow [client #2's] BSP, and violated Occazio policies on Code of Conduct and Professional Image. The committee finds abuse and neglect could not be substantiated at this time."</p> <p>The facility policy for Suspected Abuse, Neglect and Exploitation Reporting dated 1/1/11 was reviewed on 1/10/13 at 12:17 P.M. and indicated the following: "Occazio, Inc. will not tolerate mistreatment, abuse, neglect or exploitation of any Occazio resident/consumer... Verbal Abuse-spoken or written words or gestures made by a person to or in the presence of a resident/consumer that may mentally injure or unduly distress the resident/consumer. Examples include but are not limited to: threats, profanity,</p>		<p>meeting on 2-8-13.</p> <ul style="list-style-type: none"> · Client #1 will be on 15 minute checks at this time until his behavior needs change. <p>2. How will we identify other residents having the potential to be affected by the same deficient practice and what corrective action will be taken?</p> <ul style="list-style-type: none"> · All residents have the potential to be affected by the same deficient practice. · Staff will be retrained on Occazio's policy #2105 Abuse, Neglect and Exploitation at their staff meeting on 2-8-13. · Staff who fail to follow Occazio's policy #2105 Abuse, Neglect and Exploitation will be subject to discipline actions. · Staff will review the client's behavior plan needs during their team meeting on 2-8-13. · Staff will be trained on the use of 15 minute checks during their team meeting on 2-8-13. · As the behavior needs for the residents change, the staff will be retrained. 				

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	<p>screaming, belittlement, or any personal or racial slur or harassment."</p> <p>The Residential Coordinator (RC) was interviewed on 1/8/13 at 4:35 P.M. and stated, "She (DCS #10) did not follow his plan or facility policy."</p> <p>The Program Specialist (PS) was interviewed on 1/10/13 at 11:57 A.M. and stated, "No, she (DCS #10) did not follow facility policy or his (client #2's) BSP therefore she was terminated from employment."</p> <p>2. A BDDS report dated 10/1/12 for an incident on 9/30/12 at 3:30 P.M. indicated "[Client #1] came home upset and left group home without a staff to follow him. [Client #1] has good community safety skills but staff from other home was able to catch up with him after 15 (fifteen) minutes. He was double staffed the rest of the evening. [Client #1] states that he was suicidal. He was monitored until morning then taken to ER (emergency room) for a psychiatric evaluation. [Name of Mental Health Facility] felt he was not a risk to himself or others, and did a no harm contract with him. However during the ER visit he was complaining of a sore throat. He was positive for strep throat. He was given medication and sent home."</p>		<p>3. What measures will be put into place or what systemic changes will be made to ensure that the deficient practice does not recur:</p> <ul style="list-style-type: none"> · Staff will be retrained on Occazio's policy #2105 Abuse, Neglect and Exploitation at their staff meeting on 2-8-13. · Staff who fail to follow Occazio's policy #2105 Abuse, Neglect and Exploitation will be subject to discipline actions. · Staff will review the client's behavior plan needs during their team meeting on 2-8-13. · Staff will be trained on the use of 15 minute checks during their team meeting on 2-8-13. · As the behavior needs for the residents change, the staff will be retrained. <p>4. How will the corrective action be monitored to ensure the deficient practice will not recur?</p> <ul style="list-style-type: none"> · The RC will monitor on a daily basis when they are in the home. · The Program Specialist will 				

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	<p>The report indicated client #1's BSP was followed, and the police had been called to assist in helping to locate client #1.</p> <p>Client #1's BSP dated 9/7/12 was reviewed on 1/9/13 at 1:50 P.M.. Client #1's BSP indicated he had a targeted behavior of AWOL. "1. ...staff should attempt to get his attention and encourage him to talk with them about what is bothering him. 3(sic). If [client #1] leaves the group home property or designated area, thus putting himself in danger, the staff at the group home or the workshop will then use the PRT (primary restraint technique) per company policy...4. Once he is calm...release the PRT and direct him to designated area. 5. If [client #1] continues to struggle longer than 5 (five) minutes and is not calming down, 911 (police) may be called in order to keep him safe. 6. Per PRT training, if [client #1] breaks free, restraint should be attempted again to keep him safe; if needed other staff may assist by taking over the restraint and keeping area safe...." Client #1's ISP dated 9/7/12 indicated client #1 required 24 hour staff supervision. Client #1 was on "15 minute checks in the group home, one-on-one staffing if he is making threats to harm self. [Client #1] has a history of AWOL and has a history of making efforts to walk to the highway toward [name of</p>		<p>monitor as they complete their audits.</p> <p>5. What is the date by which the systemic changes will be completed?</p> <p>February 14 th , 2013</p>				

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	<p>city] where his family lives."</p> <p>There was no documentation available for review to indicate if staff had completed the 15 minute checks for client #1 after he "arrived home upset" as indicated in client #1's BSP.</p> <p>The facility policy for Suspected Abuse, Neglect and Exploitation Reporting dated 1/1/11 was reviewed on 1/10/13 at 12:17 P.M. and indicated the following: "Occazio, Inc. will not tolerate mistreatment, abuse, neglect or exploitation of any Occazio resident/consumer...Neglect-failure to provide the proper care for a resident/consumer in a timely manner, causing the resident/consumer undue physical or emotional stress or injury; unreasonable delays in providing appropriate services, including medication errors, are considered neglect when they cause the resident/consumer undue physical or emotional stress or injury."</p> <p>Client #1 was interviewed on 1/9/13 at 3:22 P.M.. Client #1 stated, "I want to live back with my family. Staff are nice to me here, it is just not what I want, to live in a group home for the rest of my life." Client #1 indicated he was worried about his dad being ill, and about his sisters. Client #1</p>						

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	<p>stated, "I do talk with a counselor, he tells me to just ride it out and see what happens, but I am just not happy here." Client #1 indicated he has left the group home without staff when he was upset. Client #1 stated, "I don't like how noisy this place is and all of the behaviors."</p> <p>The RC was interviewed on 1/8/13 at 4:38 P.M.. The RC indicated client #1 had gone AWOL one time without staff, but the staff from another home found him soon.</p> <p>9-3-2(a)</p>				

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W0266	<p>483.450 CLIENT BEHAVIOR & FACILITY PRACTICES The facility must ensure that specific client behavior and facility practices requirements are met.</p> <p>Based on record review and interview, the Condition of Participation: Client Behavior and Facility Practices was not met for 1 of 4 sampled clients (client #2). The facility failed to use restraint interventions in a safe manner, to avoid client injury. The facility failed to have a system for reporting restraint usage and injuries occurring during behavior interventions. The facility failed to ensure specific physical restraint techniques were included in client #2's plan.</p> <p>Findings include:</p> <p>1. Please Refer to W285: The facility failed to provide sufficient safeguards to ensure the safety of 1 of 4 sampled clients (client #2), while staff provided behavioral interventions (physical restraint).</p> <p>2. Please Refer to W295: The facility failed to ensure specific physical restraint techniques were included in client #2's plan.</p> <p>9-3-5(a)</p>	W0266	<p>W 266 Client Behavior and Facility Practices</p> <p>The facility must ensure that specific client behavior and facility practices requirements are met.</p> <p>1. What corrective action will be accomplished?</p> <ul style="list-style-type: none"> · All use of restraints will be reported. · A staff meeting will be held on 2-8-13 to discuss Client #2's use of restraint, his behavior plan, ways to prevent injury during the restraint, explore ideas on how the use of restraint can be avoided, Occazio's behavior intervention policy (#2110), and how to complete accident injury reports to identify SIB versus injury due to the restraint. · Staff will be retrained on the use of the Handle With Care restraint (PRT) during their team meeting on 2-8-14. · The IDT will meet by 2-14-13 to discuss Client #2's behavior plan and will make 	02/14/2013	

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			<p>revisions as warranted.</p> <ul style="list-style-type: none"> · The restraint used in HWC will be identified in Client #2's behavior plan. · The use of restraint and injuries will be tracked by the IDT team. The Risk Committee will review the use of restraint and any injuries that occur. · Occazio's incident reporting policy (#2103) will be reviewed with the RC for the home by 2-14-13. <p>2. How will we identify other residents having the potential to be affected by the same deficient practice and what corrective action will be taken?</p> <ul style="list-style-type: none"> · All residents have the potential to be affected by the same deficient practice. · All use of restraints will be reported. · Staff will be retrained on the use of the Handle With Care restraint (PRT) during their team meeting on 2-8-14. · The use of restraint and injuries will be tracked by the IDT team. The Risk Committee will review the use of restraint and any injuries that occur. 		

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			<ul style="list-style-type: none"> · Occazio's incident reporting policy (#2103) will be reviewed with the RC for the home by 2-14-13. · The IDT will monitor the residents behavior needs. As concerns arise, the team will meet and make necessary revisions to the individual's behavior plan. · The restraint utilized will be identified in all client's behavior plans. · Staff will review during their team meeting on 2-8-13 ways to prevent injury during the restraint, explore ideas on how the use of restraint can be avoided, Occazio's behavior intervention policy (#2110), and how to complete accident injury reports to identify SIB versus injury due to the restraint. <p>3. What measures will be put into place or what systemic changes will be made to ensure that the deficient practice does not recur:</p> <ul style="list-style-type: none"> · All use of restraints will be reported. · Staff will be retrained on the use of the Handle With Care restraint (PRT) during their team 		

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			<p>meeting on 2-8-14.</p> <ul style="list-style-type: none"> · The use of restraint and injuries will be tracked by the IDT team. The Risk Committee will review the use of restraint and any injuries that occur. · Occazio's incident reporting policy (#2103) will be reviewed with the RC for the home by 2-14-13. · The IDT will monitor the residents behavior needs. As concerns arise, the team will meet and make necessary revisions to the individual's behavior plan. · The restraint utilized will be identified in all client's behavior plans. · Staff will review during their team meeting on 2-8-13 ways to prevent injury during the restraint, explore ideas on how the use of restraint can be avoided, Occazio's behavior intervention policy (#2110), and how to complete accident injury reports to identify SIB versus injury due to the restraint. <p>4. How will the corrective action be monitored to ensure the deficient practice will not recur?</p>		

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			<ul style="list-style-type: none"> · The RC will monitor on a daily basis when they are in the home. · The Program Specialist will monitor as they complete their audits. · The Risk Committee will monitor as they meet to review submitted documentation. <p>5. What is the date by which the systemic changes will be completed?</p> <p>February 14, 2013</p>		

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W0285	<p>483.450(b)(2) MGMT OF INAPPROPRIATE CLIENT BEHAVIOR Interventions to manage inappropriate client behavior must be employed with sufficient safeguards and supervision to ensure that the safety, welfare and civil and human rights of clients are adequately protected. Based on record review and interview, the facility failed to provide sufficient safeguards to ensure the safety of 1 of 4 sampled clients (client #2), while staff provided behavioral interventions (physical restraint).</p> <p>Findings include:</p> <p>Facility records were reviewed on 1/8/13 at 3:30 P.M. including the Bureau of Developmental Disabilities Services (BDDS) reports and the General Event Reports (GER) for the past year. The reports indicated the following:</p> <p>A GER report dated 1/2/13 at 8:10 A.M. indicated client #2 was "redirected several times then he smacked at staff and kicked in the back bathroom... put in PRT (Primary Restraint Technique) for 10 (ten) minutes having him count until calm." The GER indicated client #2 had a "2.5 cm (two and one half centimeter) by 1 cm (one centimeter) scratch on his right arm."</p>	W0285	<p>W 285 Management of Inappropriate Client Behavior</p> <p>Interventions to manage inappropriate client behavior must be employed with sufficient safeguards and supervision to ensure that the safety, welfare and civil and human rights of clients are adequately protected.</p> <p>1. What corrective action will be accomplished?.</p> <ul style="list-style-type: none"> · A staff meeting will be held on 2-8-13 to discuss Client #2's use of restraint, his behavior plan, ways to prevent injury during the restraint, explore ideas on how the use of restraint can be avoided, Occazio's behavior intervention policy (#2110), and how to complete accident injury reports to identify SIB versus injury due to the restraint. · Staff will be retrained on the use of the Handle With Care restraint (PRT) during their team meeting on 2-8-14. 	02/14/2013			

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	<p>A GER report dated 12/11/12 at 8:30 P.M. indicated client #2 "...tried to push staff away...tried to bite staff...staff came up and started the PRT. [Client #2] dropped to the ground, causing staff to fall too... he got to his feet staff took over restraint and walked [client #2] outside. When outside tried to drop, causing staff to lose their balance. Before staff regained their balance [client #2] dropped causing both staff and [client #2] to hit the wall. Staff regained his balance and put [client #2] against the wall. After approx. (approximately) 5 (five) minutes [client #2] calmed down and staff escorted him to the van." The GER indicated client #2 had a "small red scrape on his forehead."</p> <p>A GER report dated 10/24/12 at 6:35 P.M. indicated client #2 was at the bowling alley. "...getting kind of wound up because he couldn't bowl anymore and the others were still bowling...dropped to the ground and staff tried putting their arm around...and he promptly bite (sic) their hand. Staff used the PRT and started to escort [client #2] out of the building...just dropped causing staff to lose their balance and both fell to the ground. While staff was regaining their feet, other staff took over and restrained [client #2] as soon as he got off the ground. When staff regained his feet, they took over restraining [client #2] and</p>		<ul style="list-style-type: none"> · The IDT will meet by 2-14-13 to discuss Client #2's behavior plan and will make revisions as warranted. · The use of restraint and injuries will be tracked by the IDT team. The Risk Committee will review the use of restraint and any injuries that occur. <p>2. How will we identify other residents having the potential to be affected by the same deficient practice and what corrective action will be taken?</p> <ul style="list-style-type: none"> · All residents have the potential to be affected by the same deficient practice. · Staff will be retrained on the use of the Handle With Care restraint (PRT) during their team meeting on 2-8-14. · The use of restraint and injuries will be tracked by the IDT team. The Risk Committee will review the use of restraint and any injuries that occur. · The IDT will monitor the residents behavior needs. As concerns arise, the team will meet and make necessary revisions to the individual's behavior plan. · Staff will review during their 				

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	<p>escorted him outside to the van where after approx. 10-15 (ten to fifteen) minutes of restraint [client #2] calmed down." The GER indicated client #2 had a "small bump (swelling/edema) on his forehead above his left eye. One medium size scrape mark on his abdomen, and 2 (two) small scrapes on his elbows."</p> <p>A GER report dated 9/28/12 at 9:10 A.M. indicated client #2 "Wanted to get into the fridge for his lunch but staff reminded [client #2] that it was not time for lunch, this upset him. He then started to try to hit/kick/bite staff. Staff then used PRT. He soon calmed down. Verbal praise was given for calming down." The GER indicated client #2 had a "4 cm by 2 cm (four centimeter by two centimeter) black bruise on his face."</p> <p>A GER report dated 8/22/12 at 7:00 P.M. indicated client #2 "Returned from [sporting event] saw trash had been removed from his room. He went outside got the two trash bags and brought them to his room. Staff went to his room to remove the bags, and when [client #2] saw staff removing them he began running at staff to try to hit staff. Staff blocked his attempts to hit them and then tried to restrain him. As staff was restraining him [client #2] tried to get free pushing off the wall with his feet and</p>		<p>team meeting on 2-8-13 ways to prevent injury during the restraint, explore ideas on how the use of restraint can be avoided, Occazio's behavior intervention policy (#2110), and how to complete accident injury reports to identify SIB versus injury due to the restraint.</p> <p>3. What measures will be put into place or what systemic changes will be made to ensure that the deficient practice does not recur:</p> <ul style="list-style-type: none"> · Staff will be retrained on the use of the Handle With Care restraint (PRT) during their team meeting on 2-8-14. · The use of restraint and injuries will be tracked by the IDT team. The Risk Committee will review the use of restraint and any injuries that occur. · Occazio's incident reporting policy (#2103) will be reviewed with the RC for the home by 2-14-13. · The IDT will monitor the residents behavior needs. As concerns arise, the team will meet and make necessary revisions to the individual's behavior plan. · Staff will review during their 				

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	<p>tripped, smacking his head against a door frame before staff could regain balance. After maintaining the restraint for approx. 10 (ten) minutes [client #2] calmed down and was released." The GER indicated client #2 had a "small red bump on his forehead near his left eye."</p> <p>A GER report dated 8/9/12 at 3:30 P.M. indicated client #2 "...went after staff in the office. Staff tried to redirect him. Then ran around corner after another staff. He was kicking and hitting and trying to bite. Then staff put him in PRT position for about 10-15 minutes. After the restraint he was calm and played a few games. Verbal praise was given." The GER indicated client #2 had a "minor bump on his forehead and 2-3 scratches on his left anterior forearm that are reddened and raised."</p> <p>A GER report dated 7/9/12 at 4:20 P.M. indicated client #2 "started yelling in the back hallway, and went up front and started hitting and kicking staff and tried biting. Staff tried to ask him what was wrong and he continued to hit and kick. The other staff attempted to get him, but he ran outside and threw himself on the ground. When the staff went to go get him, he ran inside, and tried pushing the chair into staff's way. Then he dropped down to the ground again, and staff went</p>		<p>team meeting on 2-8-13 ways to prevent injury during the restraint, explore ideas on how the use of restraint can be avoided, Occazio's behavior intervention policy (#2110), and how to complete accident injury reports to identify SIB versus injury due to the restraint.</p> <p>4. How will the corrective action be monitored to ensure the deficient practice will not recur?</p> <ul style="list-style-type: none"> · The RC will monitor on a daily basis when they are in the home. · The Program Specialist will monitor as they complete their audits. · The Risk Committee will monitor as they meet to review submitted documentation. <p>5. What is the date by which the systemic changes will be completed?</p> <p>February 14, 2013</p>		

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	<p>and restrained him. After the restraint he was calm and said he was sorry. Praise was given." The GER indicated client #2 had "an abrasion on his right upper arm and left elbow, and knees with significant abrasions."</p> <p>A GER report dated 6/29/12 at 3:40 P.M. indicated client #2 "...saw the sky was getting dark. He started to scream and run into the road. Staff told him everything was okay that it was just rain...started to kick and hit and bite. Staff tried to redirect him to do an activity. He continued to hit and kick and staff put him in a restraint. Held him for about 15 minutes..." The GER indicated client #2 "scraped both knees."</p> <p>Client #2's BSP was reviewed on 1/9/13 at 2:00 P.M. and indicated "7 (seven) teaching methods for at the group home 1. A daily picture schedule, use of timers for 5 (five) minute prompts before transitions...2. ...Offering a 'squeeze' (PRT when [client #2] engages in maladaptive behaviors) prior to actual behavior can work as a sensory activity that will help calm/regulate [client #2]. 3. [Client #2] should be lavishly praised for appropriate behaviors. Staff should put forth substantial effort in acknowledging appropriate behaviors, even if the behaviors seem insignificant. 4. It is vital</p>			

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	<p>staff remain calm and quiet...Staff continue to monitor for early warning signs of aggressive behavior...provide with frequent verbal praise when compliant. 5. Use clear concise functional language, and allow ample time to process. Avoid overloading him with auditory information. 6. ...When [client #2] appears over-stimulated staff should immediately attempt to engage [client #2] in a sensory activity. One of the choices should always be a 'squeeze' (PRT). 7. ...Every effort should be made to keep [client #2's] routine as consistent as possible. Any changes in schedule should be addressed with [client #2] as soon as possible to give him time to adjust to the change....Once calm staff will praise [client #2] for 'making a wonderful choice to act appropriately,' and redirect [client #2] back to previous activity without mentioning the behavior." For Physical aggression, "Staff will give one verbal prompt accompanied with a physical prompt for [client #2] to stop the behavior... staff will attempt to immediately engage [client #2] in a sensory activity and remain with him until he is calm. If his physical aggression continues staff... will then us (sic) the Primary Restraint Technique per company policy. Once he is calm encourage [client #2] to apologize to the targeted individual...." Client #2's BSP did not</p>			

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	<p>describe the specific restraint/squeeze.</p> <p>The BSP did not indicate or specify if the squeeze was performed differently than a restraint. The BSP did not indicate how staff were to perform the restraint/squeeze. Client #2's BSP did not indicate if staff were to attempt to lift client #2 up when he dropped to the ground during a behavior or during a restraint (PRT), or if the staff were to continue to attempt to restrain him when/if he dropped to the ground. Client #2's BSP did not indicate why client #2 could not remain on the ground if he was not endangering himself or others.</p> <p>The Residential Coordinator (RC) was interviewed on 1/10/13 at 12:39 P.M.. The RC stated, "The use of PRT is included in (client #2's) BSP. The RC indicated the PRT was a technique to apply pressure to assist client #2 with his sensory needs and transition times were the most difficult times for client #2.</p> <p>The Program Specialist (PS) was interviewed on 1/10/13 at 12 :27 P.M.. The PC stated "PRT is not really a restraint but an applied pressure to help calm [client #2] when he has sensory overload and cannot process." The PS stated, "The injuries to [client #2] were not from the staff doing the PRT, but from [client #2's] behaviors of struggling</p>			

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	<p>and trying to get out and away from staff."</p> <p>The Area Residential Coordinator (ARC) was interviewed on 1/9/13 at 11:28 A.M.. When asked about the PRT technique the ARC stated, "The client is held from the back, and pushed up to face the wall with the staff's body weight against his back to apply pressure for his sensory need to feel in control." The ARC indicated incidences of staff using the PRT for client #2 were not reported to BDDS since it is used as a sensory restraint technique.</p> <p>9-3-5(a)</p>			

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W0295	<p>483.450(d)(1)(i) PHYSICAL RESTRAINTS The facility may employ physical restraint only as an integral part of an individual program plan that is intended to lead to less restrictive means of managing and eliminating the behavior for which the restraint is applied.</p> <p>Based on record review and interview for 1 of 4 sampled clients (client #2), the facility failed to ensure specific physical restraint techniques were included in client #2's plan.</p> <p>Findings include:</p> <p>Facility records were reviewed on 1/8/13 at 3:30 P.M. including the Bureau of Developmental Disabilities Services (BDDS) reports and the General Event Reports (GER) for the past year. The reports indicated the following:</p> <p>A GER report dated 1/2/13 at 8:10 A.M. indicated client #2 was "redirected several times then he smacked at staff and kicked in the back bathroom... put in PRT (Primary Restraint Technique) for 10 (ten) minutes having him count until calm." The GER did not give a description of the restraint technique utilized. The GER indicated client #2 had a "2.5 cm (two and one half centimeter) by 1 cm (one centimeter) scratch on his right arm."</p>	W0295	<p>W 295 Physical Restraints</p> <p>The facility may employ physical restraint only as an integral part of an individual program plan that is intended to lead to less restrictive means of managing and elimination the behavior for which the restraint is applied.</p> <p>1. What corrective action will be accomplished?</p> <ul style="list-style-type: none"> · A staff meeting will be held on 2-8-13 to discuss Client #2's use of restraint, his behavior plan. · The IDT will meet by 2-14-13 to discuss Client #2's behavior plan and will make revisions as warranted. · The restraint used in HWC will be identified in Client #2's behavior plan. <p>2. How will we identify other residents having the potential to be affected by the same</p>	02/14/2013			

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	<p>A GER report dated 12/11/12 at 8:30 P.M. indicated client #2 "...tried to push staff away...tried to bite staff...staff came up and started the PRT. [Client #2] dropped to the ground, causing staff to fall too... [client #2] got to his feet (sic) staff took over restraint and walked [client #2] outside. When outside [client #2] tried to drop, causing staff to lose their balance. Before staff regained their balance [client #2] dropped causing both staff and [client #2] to hit the wall. Staff regained his balance and put [client #2] against the wall. After approx. (approximately) 5 (five) minutes [client #2] calmed down and staff escorted him to the van." The GER did not describe the restraint technique utilized or the transport technique utilized. The GER indicated client #2 had a "small red scrape on his forehead."</p> <p>A GER report dated 10/24/12 at 6:35 P.M. indicated client #2 was at the bowling alley. "...getting kind of wound up because he couldn't bowl anymore and the others were still bowling...dropped to the ground and staff tried putting their arm around...and he promptly bite (sic) their hand. Staff used the PRT and started to escort [client #2] out of the building...just dropped causing staff to lose their balance and both fell to the ground. While staff was regaining their</p>		<p>deficient practice and what corrective action will be taken?</p> <ul style="list-style-type: none"> · All residents have the potential to be affected by the same deficient practice. · The IDT will monitor the residents behavior needs. As concerns arise, the team will meet and make necessary revisions to the individual's behavior plan. · The restraint utilized will be identified in all client's behavior plans. <p>3. What measures will be put into place or what systemic changes will be made to ensure that the deficient practice does not recur:</p> <ul style="list-style-type: none"> · All use of restraints will be reported. · The IDT will monitor the residents behavior needs. As concerns arise, the team will meet and make necessary revisions to the individual's behavior plan. · The restraint utilized will be identified in all client's behavior plans. 		

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	<p>feet, other staff took over and restrained [client #2] as soon as he got off the ground. When staff regained his feet, they took over restraining [client #2] and escorted him outside to the van where after approx. 10-15 (ten to fifteen) minutes of restraint [client #2] calmed down." The GER did not indicate what type of restraints were utilized. The GER indicated client #2 had a "small bump swelling/edema) on his forehead above his left eye. One medium size scrape mark on his abdomen, and 2 (two) small scrapes on his elbows."</p> <p>A GER report dated 9/28/12 at 9:10 A.M. indicated client #2 "Wanted to get into the fridge for his lunch but staff reminded [client #2] that it was not time for lunch, this upset him. He then started to try to hit/kick/bite staff. Staff then used PRT. He soon calmed down. Verbal praise was given for calming down." The GER did not describe the type of restraint which was used. The GER indicated client #2 had a "4 cm by 2 cm (four centimeter by two centimeter) black bruise on his face."</p> <p>A GER report dated 8/22/12 at 7:00 P.M. indicated client #2 "Returned from [sporting event] saw trash had been removed from his room. He went outside got the two trash bags and brought them to his room. Staff went to his room to</p>		<p>4. How will the corrective action be monitored to ensure the deficient practice will not recur?</p> <ul style="list-style-type: none"> · The RC will monitor on a daily basis when they are in the home. · The Program Specialist will monitor as they complete their audits. <p>5. What is the date by which the systemic changes will be completed?</p> <p>February 14, 2013</p>				

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	<p>remove the bags, and when [client #2] saw staff removing them he began running at staff to try to hit staff. Staff blocked his attempts to hit them and then tried to restrain him. As staff was restraining him [client #2] tried to get free pushing off the wall with his feet and tripped, smacking his head against a door frame before staff could regain balance. After maintaining the restraint for approx. 10 (ten) minutes [client #2] calmed down and was released." The GER did not describe the restraint utilized. The GER indicated client #2 had a "small red bump on his forehead near his left eye."</p> <p>A GER report dated 8/9/12 at 3:30 P.M. indicated client #2 "...went after staff in the office. Staff tried to redirect him. Then ran around corner after another staff. He was kicking and hitting and trying to bite. Then staff put him in PRT position for about 10-15 minutes. After the restraint he was calm and played a few games. Verbal praise was given." The GER did not describe the restraint used. The GER indicated client #2 had a "minor bump on his forehead and 2-3 scratches on his left anterior forearm that are reddened and raised."</p> <p>A GER report dated 7/9/12 at 4:20 P.M. indicated client #2 "started yelling in the back hallway, and went up front and</p>			

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	<p>started hitting and kicking staff and tried biting. Staff tried to ask him what was wrong and he continued to hit and kick. The other staff attempted to get him, but he ran outside and threw himself on the ground. When the staff went to go get him, he ran inside, and tried pushing the chair into staff's way. Then he dropped down to the ground again, and staff went and restrained him. After the restraint he was calm and said he was sorry. Praise was given." The GER did not describe the restraint utilized. The GER indicated client #2 had "an abrasion on his right upper arm and left elbow, and knees with significant abrasions."</p> <p>A GER report dated 6/29/12 at 3:40 P.M. indicated client #2 "...saw the sky was getting dark. He started to scream and run into the road. Staff told him everything was okay that it was just rain...started to kick and hit and bite. Staff tried to redirect him to do an activity. He continued to hit and kick and staff put him in a restraint. Held him for about 15 minutes..." The GER did not describe the type of restraint used. The GER indicated client #2 "scraped both knees."</p> <p>A GER tracking form dated from 1/19/12 to 1/3/13 was reviewed on 1/10/13 at 12:12 P.M.. The tracking form indicated client #2 had been restrained using the</p>						

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	<p>Primary Restraint Technique (PRT) by the staff at the group home 43 (forty-three) times, with 8 of the 43 times resulting in post intervention assessments revealing injury as indicated in the GER reports above.</p> <p>A GER tracking form dated from 1/19/12 to 1/3/13 was reviewed on 1/10/13 at 12:12 P.M.. The tracking form indicated client #2 had been restrained at the group home on the following dates: No details were given describing the type of restraint(s) utilized.</p> <p>-12/31/12- Restraint related to behavior. -12/20/12- Restraint related to behavior. -12/12/12- Restraint related to behavior. -09/10/12- Restraint related to behavior. -09/03/12- Restraint related to behavior. -08/23/12- Restraint related to behavior. -08/02/12- Restraint related to behavior. -07/17/12- Restraint related to behavior. -07/13/12- Restraint related to behavior. -06/27/12- Restraint related to behavior. -06/27/12- Restraint related to behavior. -06/27/12- Restraint related to behavior. -06/26/12- Restraint related to behavior. -06/21/12- Restraint related to behavior. -06/21/12- Restraint related to behavior. -06/18/12- Restraint related to behavior. -05/30/12- Restraint related to behavior. -05/25/12- Restraint related to behavior. -05/23/12- Restraint related to behavior. -05/19/12- Restraint related to behavior.</p>			

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	<p>-05/19/12- Restraint related to behavior. -05/15/12- Restraint related to behavior. -04/26/12- Restraint related to behavior. -04/03/12- Restraint related to behavior. -04/03/12- Restraint related to behavior. -03/27/12- Restraint related to behavior. -03/16/12- Restraint related to behavior. -03/16/12- Restraint related to behavior. -03/14/12- Restraint related to behavior. -03/07/12- Restraint related to behavior. -02/26/12- Restraint related to behavior. -02/09/12- Restraint related to behavior. -01/28/12- Restraint Other (no other details documented). -01/20/12- Restraint related to behavior. -01/19/12- Restraint related to behavior.</p> <p>Client #2's BSP (Behavior Support Plan) was reviewed on 1/9/13 at 2:00 P.M. and indicated "7 (seven) teaching methods for at the group home 1. A daily picture schedule, use of timers for 5 (five) minute prompts before transitions...2. ...Offering a 'squeeze' (PRT when [client #2] engages in maladaptive behaviors) prior to actual behavior can work as a sensory activity that will help calm/regulate [client #2]. 3. [Client #2] should be lavishly praised for appropriate behaviors. Staff should put forth substantial effort in acknowledging appropriate behaviors, even if the behaviors seem insignificant. 4. It is vital staff remain calm and quiet...Staff continue to monitor for early warning</p>						

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	<p>signs of aggressive behavior...provide with frequent verbal praise when compliant. 5. Use clear concise functional language, and allow ample time to process. Avoid overloading him with auditory information. 6. ...When [client #2] appears over-stimulated staff should immediately attempt to engage [client #2] in a sensory activity. One of the choices should always be a 'squeeze' (PRT) (no description). 7. ...Every effort should be made to keep [client #2's] routine as consistent as possible. Any changes in schedule should be addressed with [client #2] as soon as possible to give him time to adjust to the change....Once calm staff will praise [client #2] for 'making a wonderful choice to act appropriately,' and redirect [client #2] back to previous activity without mentioning the behavior." For Physical aggression, "Staff will give one verbal prompt accompanied with a physical prompt for [client #2] to stop the behavior... staff will attempt to immediately engage [client #2] in a sensory activity and remain with him until he is calm. If his physical aggression continues staff... will then us (sic) the Primary Restraint Technique per company policy. Once he is calm encourage [client #2] to apologize to the targeted individual...." Client #2's BSP did not describe the specific restraint/squeeze. The BSP did not indicate or specify if the</p>			

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	<p>squeeze was performed differently than a restraint. The BSP did not indicate how staff were to perform the restraint/squeeze. Client #2's BSP did not indicate if staff were to attempt to lift client #2 up when he dropped to the ground during a behavior or during a restraint (PRT)/squeeze, or if the staff were to continue to attempt to restrain/squeeze him when/if he dropped to the ground. Client #2's BSP did not indicate why client #2 could not remain on the ground/floor if he was not endangering himself or others.</p> <p>An interview was conducted with Direct Care Staff (DCS) #1 on 1/9/13 at 7:30 A.M.. DCS #1 stated, "He (client #2) cycles, sometimes we have to restrain him a couple times a week. Other times it might go weeks in between restraints, or sometimes it's everyday. He (client #2) tries to bite staff. We face him (client #2) against the wall, put our weight against him."</p> <p>The Residential Coordinator (RC) was interviewed on 1/10/13 at 12:39 P.M.. The RC stated, "The use of PRT is included in (client #2's) BSP." The RC indicated the PRT was a technique to apply pressure using their body weight against the back of client #2. This was to assist client #2 with his sensory needs and</p>			

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	<p>transition times which were reportedly the most difficult times for client #2. The RC indicated the PRTs were not reported to BDDS.</p> <p>The Program Specialist (PS) was interviewed on 1/10/13 at 12 :27 P.M.. The PC stated "PRT is not really a restraint but an applied pressure to help calm [client #2] when he has sensory overload and can not process." The PS stated, "The injuries to [client #2] were not from the staff doing the PRT, but from [client #2's] behaviors of struggling and trying to get out and away from staff." The PS stated, "The PRTs are not reported to BDDS because they are a sensory technique, and do not need to be reported."</p> <p>The Area Residential Coordinator (ARC) was interviewed on 1/9/13 at 11:28 A.M.. When asked about the PRT technique the ARC stated, "The client is held from the back, and pushed up to face the wall with the staff's body weight against his back to apply pressure for his sensory need to feel in control." The ARC indicated incidences of staff using the PRT for client #2 were not reported to BDDS since it is used as a sensory restraint technique.</p> <p>9-3-5(a)</p>						

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W9999	<p>State Findings</p> <p>The following Community Residential Facilities for Persons with Developmental Disabilities rule was not met:</p> <p>460 IAC 9-3-1(a) Governing Body</p> <p>(b) The residential provider shall report the following circumstances to the division by telephone no later than the first business day followed by written summaries as requested by the division.</p> <p>This state rule was not met as evidenced by:</p> <p>Based on record review and interview, the facility failed to immediately report the use of restraints for 1 of 4 sampled clients (client #2) 8 of which resulted in injury to client #2, to BDDS (Bureau of Developmental Disabilities Services) and to other officials in accordance with State law through established procedures.</p> <p>Findings include:</p> <p>The BQIS/DDRS (Bureau of Quality Improvement Services/Division of Disability and Rehabilitative Services) Policy: Incident Reporting and</p>	W9999	<p>W 9999 Final Observations State Findings 460 IAC 9-3-1 (a) Governing Body</p> <p>(b) The residential provider shall report the following circumstances to the division by telephone no later than the first business day followed by written summaries as requested by the division.</p> <p>1. What corrective action will be accomplished?</p> <ul style="list-style-type: none"> · All use of restraints will be reported. · Occazio's incident reporting policy (#2103) will be reviewed with the RC for the home by 2-14-13. <p>2. How will we identify other residents having the potential to be affected by the same deficient practice and what corrective action will be taken?</p> <ul style="list-style-type: none"> · All residents have the potential to be affected by the same deficient practice. · All use of restraints will be reported. 	02/14/2013	

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	<p>Management #460-0301-008 effective date March 1, 2011, was reviewed on 1/10/13 at 5:00 P.M. The Policy indicated the following:</p> <p>Incidents to be reported to BQIS include any event or occurrence characterized by risk or uncertain resulting in or having the potential to result in significant harm or injury to an individual including but not limited to: 1. Alleged, suspected or actual abuse...which includes but is not limited to: a. physical... iii unauthorized restraint or confinement from physical or chemical intervention. b. sexual... c. emotional/verbal...d. domestic...4. Peer to Peer aggression that results in significant injury...19. Use of any physical or manual restraint regardless of a. planning; b. human rights committee approval; c. informed consent."</p> <p>Facility records were reviewed on 1/8/13 at 3:30 P.M. including the Bureau of Developmental Disabilities Services (BDDS) reports and the General Event Reports (GER) for the past year. The reports indicated the following:</p> <p>A GER report dated 1/2/13 at 8:10 A.M. indicated client #2 was "redirected several times then he smacked at staff and kicked in the back bathroom... put in PRT (Primary Restraint Technique) for 10</p>		<ul style="list-style-type: none"> · Occazio's incident reporting policy (#2103) will be reviewed with the RC for the home by 2-14-13. <p>3. What measures will be put into place or what systemic changes will be made to ensure that the deficient practice does not recur:</p> <ul style="list-style-type: none"> · All use of restraints will be reported. · Occazio's incident reporting policy (#2103) will be reviewed with the RC for the home by 2-14-13. <p>4. How will the corrective action be monitored to ensure the deficient practice will not recur?</p> <ul style="list-style-type: none"> · The RC will monitor on a daily basis when they are in the home. · The Program Specialist will monitor as they complete their audits. <p>5. What is the date by which the systemic changes will be</p>				

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	<p>(ten) minutes having him count until calm." The GER did not give a description of the restraint technique utilized. The GER indicated client #2 had a "2.5 cm (two and one half centimeter) by 1 cm (one centimeter) scratch on his right arm." There was no BDDS report available for review for this incident.</p> <p>A GER report dated 12/11/12 at 8:30 P.M. indicated client #2 "...tried to push staff away...tried to bite staff...staff came up and started the PRT. [Client #2] dropped to the ground, causing staff to fall too... [client #2] got to his feet (sic) staff took over restraint and walked [client #2] outside. When outside [client #2] tried to drop, causing staff to lose their balance. Before staff regained their balance [client #2] dropped causing both staff and [client #2] to hit the wall. Staff regained his balance and put [client #2] against the wall. After approx. (approximately) 5 (five) minutes [client #2] calmed down and staff escorted him to the van." The GER did not describe the restraint technique utilized or the transport technique utilized. The GER indicated client #2 had a "small red scrape on his forehead." There was no BDDS report available for review for this incident.</p> <p>A GER report dated 10/24/12 at 6:35</p>		<p>completed?</p> <p>February 14, 2013</p>				

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	<p>P.M. indicated client #2 was at the bowling alley. "...getting kind of wound up because he couldn't bowl anymore and the others were still bowling...dropped to the ground and staff tried putting their arm around...and he promptly bite (sic) their hand. Staff used the PRT and started to escort [client #2] out of the building...just dropped causing staff to lose their balance and both fell to the ground. While staff was regaining their feet, other staff took over and restrained [client #2] as soon as he got off the ground. When staff regained his feet, they took over restraining [client #2] and escorted him outside to the van where after approx. 10-15 (ten to fifteen) minutes of restraint [client #2] calmed down." The GER did not indicate what type of restraints were utilized. The GER indicated client #2 had a "small bump swelling/edema) on his forehead above his left eye. One medium size scrape mark on his abdomen, and 2 (two) small scrapes on his elbows." There was no BDDS report available for review for this incident.</p> <p>A GER report dated 9/28/12 at 9:10 A.M. indicated client #2 "Wanted to get into the fridge for his lunch but staff reminded [client #2] that it was not time for lunch, this upset him. He then started to try to hit/kick/bite staff. Staff then used PRT.</p>			

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	<p>He soon calmed down. Verbal praise was given for calming down." The GER did not describe the type of restraint which was used. The GER indicated client #2 had a "4 cm by 2 cm (four centimeter by two centimeter) black bruise on his face." There was no BDDS report available for review for this incident.</p> <p>A GER report dated 8/22/12 at 7:00 P.M. indicated client #2 "Returned from [sporting event] saw trash had been removed from his room. He went outside got the two trash bags and brought them to his room. Staff went to his room to remove the bags, and when [client #2] saw staff removing them he began running at staff to try to hit staff. Staff blocked his attempts to hit them and then tried to restrain him. As staff was restraining him [client #2] tried to get free pushing off the wall with his feet and tripped, smacking his head against a door frame before staff could regain balance. After maintaining the restraint for approx. 10 (ten) minutes [client #2] calmed down and was released." The GER did not describe the restraint utilized. The GER indicated client #2 had a "small red bump on his forehead near his left eye." There was no BDDS report available for review for this incident.</p> <p>A GER report dated 8/9/12 at 3:30 P.M.</p>						

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	<p>indicated client #2 "...went after staff in the office. Staff tried to redirect him. Then ran around corner after another staff. He was kicking and hitting and trying to bite. Then staff put him in PRT position for about 10-15 minutes. After the restraint he was calm and played a few games. Verbal praise was given." The GER did not describe the restraint used. The GER indicated client #2 had a "minor bump on his forehead and 2-3 scratches on his left anterior forearm that are reddened and raised." There was no BDDS report available for review for this incident.</p> <p>A GER report dated 7/9/12 at 4:20 P.M. indicated client #2 "started yelling in the back hallway, and went up front and started hitting and kicking staff and tried biting. Staff tried to ask him what was wrong and he continued to hit and kick. The other staff attempted to get him, but he ran outside and threw himself on the ground. When the staff went to go get him, he ran inside, and tried pushing the chair into staff's way. Then he dropped down to the ground again, and staff went and restrained him. After the restraint he was calm and said he was sorry. Praise was given." The GER did not describe the restraint utilized. The GER indicated client #2 had "an abrasion on his right upper arm and left elbow, and knees with</p>			

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	<p>significant abrasions." There was no BDDS report available for review for this incident.</p> <p>A GER report dated 6/29/12 at 3:40 P.M. indicated client #2 "...saw the sky was getting dark. He started to scream and run into the road. Staff told him everything was okay that it was just rain...started to kick and hit and bite. Staff tried to redirect him to do an activity. He continued to hit and kick and staff put him in a restraint. Held him for about 15 minutes..." The GER did not describe the type of restraint used. The GER indicated client #2 "scraped both knees." There was no BDDS report available for review for this incident.</p> <p>A GER tracking form dated from 1/19/12 to 1/3/13 was reviewed on 1/10/13 at 12:12 P.M.. The tracking form indicated client #2 had been restrained at the group home on the following dates: No details were given describing the type of restraint(s) utilized.</p> <p>-12/31/12- Restraint related to behavior. -12/20/12- Restraint related to behavior. -12/12/12- Restraint related to behavior. -09/10/12- Restraint related to behavior. -09/03/12- Restraint related to behavior. -08/23/12- Restraint related to behavior. -08/02/12- Restraint related to behavior. -07/17/12- Restraint related to behavior.</p>						

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	<p>-07/13/12- Restraint related to behavior.</p> <p>-06/27/12- Restraint related to behavior.</p> <p>-06/27/12- Restraint related to behavior.</p> <p>-06/27/12- Restraint related to behavior.</p> <p>-06/26/12- Restraint related to behavior.</p> <p>-06/21/12- Restraint related to behavior.</p> <p>-06/21/12- Restraint related to behavior.</p> <p>-06/18/12- Restraint related to behavior.</p> <p>-05/30/12- Restraint related to behavior.</p> <p>-05/25/12- Restraint related to behavior.</p> <p>-05/23/12- Restraint related to behavior.</p> <p>-05/19/12- Restraint related to behavior.</p> <p>-05/19/12- Restraint related to behavior.</p> <p>-05/15/12- Restraint related to behavior.</p> <p>-04/26/12- Restraint related to behavior.</p> <p>-04/03/12- Restraint related to behavior.</p> <p>-04/03/12- Restraint related to behavior.</p> <p>-03/27/12- Restraint related to behavior.</p> <p>-03/16/12- Restraint related to behavior.</p> <p>-03/16/12- Restraint related to behavior.</p> <p>-03/14/12- Restraint related to behavior.</p> <p>-03/07/12- Restraint related to behavior.</p> <p>-02/26/12- Restraint related to behavior.</p> <p>-02/09/12- Restraint related to behavior.</p> <p>-01/28/12- Restraint Other (no other details documented).</p> <p>-01/20/12- Restraint related to behavior.</p> <p>-01/19/12- Restraint related to behavior.</p> <p>Client #2's BSP (Behavior Support Plan) was reviewed on 1/9/13 at 2:00 P.M. and indicated "7 (seven) teaching methods for at the group home 1. A daily picture schedule, use of timers for 5 (five) minute</p>			

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	<p>prompts before transitions...2. ...Offering a 'squeeze' (PRT when [client #2] engages in maladaptive behaviors) prior to actual behavior can work as a sensory activity that will help calm/regulate [client #2]. 3. [Client #2] should be lavishly praised for appropriate behaviors. Staff should put forth substantial effort in acknowledging appropriate behaviors, even if the behaviors seem insignificant. 4. It is vital staff remain calm and quiet...Staff continue to monitor for early warning signs of aggressive behavior...provide with frequent verbal praise when compliant. 5. Use clear concise functional language, and allow ample time to process. Avoid overloading him with auditory information. 6. ...When [client #2] appears over-stimulated staff should immediately attempt to engage [client #2] in a sensory activity. One of the choices should always be a 'squeeze' (PRT) (no description). 7. ...Every effort should be made to keep [client #2's] routine as consistent as possible. Any changes in schedule should be addressed with [client #2] as soon as possible to give him time to adjust to the change....Once calm staff will praise [client #2] for 'making a wonderful choice to act appropriately,' and redirect [client #2] back to previous activity without mentioning the behavior." For Physical aggression, "Staff will give one verbal</p>			

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	<p>prompt accompanied with a physical prompt for [client #2] to stop the behavior... staff will attempt to immediately engage [client #2] in a sensory activity and remain with him until he is calm. If his physical aggression continues staff... will then us (sic) the Primary Restraint Technique per company policy. Once he is calm encourage [client #2] to apologize to the targeted individual...." Client #2's BSP did not describe the specific restraint/squeeze. The BSP did not indicate or specify if the squeeze was performed differently than a restraint. The BSP did not indicate how staff were to perform the restraint/squeeze. Client #2's BSP did not indicate if staff were to attempt to lift client #2 up when he dropped to the ground during a behavior or during a restraint (PRT)/squeeze, or if the staff were to continue to attempt to restrain/squeeze him when/if he dropped to the ground. Client #2's BSP did not indicate why client #2 could not remain on the ground/floor if he was not endangering himself or others.</p> <p>An interview was conducted with Direct Care Staff (DCS) #1 on 1/9/13 at 7:30 A.M.. DCS #1 stated, "He (client #2) cycles, sometimes we have to restrain him a couple times a week. Other times it might go weeks in between restraints, or</p>			

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	<p>sometimes it's everyday. He (client #2) tries to bite staff. We face him (client #2) against the wall, put our weight against him."</p> <p>The Residential Coordinator (RC) was interviewed on 1/10/13 at 12:39 P.M.. The RC stated, "The use of PRT is included in (client #2's) BSP." The RC indicated the PRT was a technique to apply pressure using their body weight against the back of client #2. This was to assist client #2 with his sensory needs and transition times which were reportedly the most difficult times for client #2. The RC indicated the PRTs were not reported to BDDS.</p> <p>The Program Specialist (PS) was interviewed on 1/10/13 at 12 :27 P.M.. The PC stated "PRT is not really a restraint but an applied pressure to help calm [client #2] when he has sensory overload and cannot process." The PS stated, "The injuries to [client #2] were not from the staff doing the PRT, but from [client #2's] behaviors of struggling and trying to get out and away from staff." The PS stated, "The PRTs are not reported to BDDS because they are a sensory technique, and do not need to be reported."</p> <p>The Area Residential Coordinator (ARC)</p>						

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	<p>was interviewed on 1/9/13 at 11:28 A.M.. When asked about the PRT technique, the ARC stated, "The client is held from the back, and pushed up to face the wall with the staff's body weight against his back to apply pressure for his sensory need to feel in control." The ARC indicated incidences of staff using the PRT for client #2 were not reported to BDDS since it is used as a sensory restraint technique.</p> <p>9-3-1(b)</p>			