

DEPARTMENT OF HEALTH AND HUMAN SERVICES  
CENTERS FOR MEDICARE & MEDICAID SERVICES

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: <b>15G130</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING <u>00</u> B. WING _____	(X3) DATE SURVEY COMPLETED <b>01/31/2017</b>
NAME OF PROVIDER OR SUPPLIER <b>NORMAL LIFE OF INDIANA</b>		STREET ADDRESS, CITY, STATE, ZIP CODE <b>4477 FOXMOOR DR NEWBURGH, IN 47630</b>		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED 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
W 0000  Bldg. 00	<p>This visit was for an investigation of Complaint #IN00217892.</p> <p>Complaint #IN00217892: Substantiated. Federal/State deficiency related to the allegation was cited at W149.</p> <p>Dates of Survey: January 18, 19, 20 and 31, 2017.</p> <p>Facility Number: 000667 AIM Number: 100234360 Provider Number: 15G130</p> <p>This deficiency also reflects state findings in accordance with 460 IAC 9. Quality Review of this report completed by #15068 on 2/14/17.</p>	W 0000		
W 0149  Bldg. 00	<p>483.420(d)(1) <b>STAFF TREATMENT OF CLIENTS</b> The facility must develop and implement written policies and procedures that prohibit mistreatment, neglect or abuse of the client.</p> <p>Based on record review and interview for 1 of 2 sampled clients (A), the facility failed to implement their policy and procedures on preventing exploitation (financial) of a client.</p> <p>Findings include:</p>	W 0149	<p>Plan of Corrections Community Alternatives Southwest 4477 Foxmoor Dr Evansville, IN 47630</p> <p>Facility Number: 000667 Provider Number: 15G130</p>	03/02/2017

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

Any deficiency statement ending with an asterisk (\*) denotes a deficiency which the institution may be excused from correcting providing it is determined that other safeguards provide sufficient protection to the patients. (see instructions.) Except for nursing homes, the findings stated above are disclosable 90 days following the date of survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosable 14 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.

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	<p>During review of the facility's BDDS (Bureau of Developmental Disabilities Services) reportables and investigations on 1/18/17 at 11:00 AM, a BDDS report dated 12/15/2016 indicated "it was reported today that [client A's] wallet came up missing from his room on 12/15/16 and that it had \$17.00 in it. Wallet was found in the glove box of the van on Saturday, 12/17/16, but money is missing."</p> <p>An investigation completed on 12/21/16 indicated: "Factual findings:</p> <ul style="list-style-type: none"> <li>--[Client A] keeps his wallet in his room at night and on his person during the day.</li> <li>--[Client A] did not know how much money was missing, but when staff last counted it, he had \$17.00.</li> <li>--All staff and individuals were interviewed and no one witnessed the money being taken.</li> <li>--[Client A's] wallet was found by staff in the glove box of the van, but there was no money in it."</li> </ul> <p>The investigation included a copy of a check made out to client A dated 1/17/17 in the amount of \$17.</p> <p>The Quality Assurance (QA) manager was interviewed on 1/20/17 at 11:45 AM. She stated "I conducted an investigation as to what happened to [client A's] missing money. It was never determined who took his money. [Client A's] wallet was found in the group home van's glove box however the money was not in there. We determined from the last audit, it was approximately \$17.00. [Name of Facility] recently reimbursed him the \$17.00."</p> <p>The facility's 8/17/15 "Operation Standard - Reporting and Investigating Abuse, Neglect,</p>			<p>AIMS Number: 100234360</p> <p>W149-The facility must develop and implement written policies and procedures that prohibit mistreatment, neglect or abuse of the client.</p> <p>In order to correct the deficiency with W149:</p> <ul style="list-style-type: none"> <li>-The facility has a policy regarding abuse and neglect that remains accurate and appropriate.</li> <li>- The Area supervisor will be retrained by the Program Supervisor regarding the abuse, neglect, and exploitation policy and procedure.</li> <li>- The QIDP will be retrained by the Area Supervisor regarding the abuse, neglect, and exploitation policy and procedure.</li> <li>- The Residential Manager will be retrained by the QIDP regarding the abuse, neglect, and exploitation policy and procedure.</li> <li>- All staff will be retrained by the Residential Manager regarding the abuse, neglect, and exploitation policy and procedure.</li> <li>- The Residential Manager will monitor through daily observations in the group home that the abuse, neglect, and exploitation policy and procedure</li> </ul>	

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	<p>Exploitation, Mistreatment or Violation of an Individual's Rights" was reviewed on 1/31/17 at 4:30 PM. The policy indicated "[Name of Facility] staff actively advocate for the rights and safety of all individuals. All allegations or occurrences of abuse, neglect, exploitation, mistreatment or violation of an individual's rights shall be reported to the appropriate authorities through the appropriate supervisory channels and will be thoroughly investigated under the policies of [Name of Facility's] local, state and federal guidelines. Although [Name of Facility] staff are instructed and encouraged to use the internal reporting system outlined below, any staff has the right to contact Adult Protective Services directly, should they suspect abuse, neglect, exploitation, mistreatment or violation of an individual's rights. [Name of Facility] strictly prohibits abuse, neglect, exploitation, mistreatment or violation of an individual's rights. Abuse, neglect, exploitation, mistreatment or violation of an individual's rights may also be defined as forcing an individual to complete chores benefiting others without pay. All employees receive training upon hire regarding definitions/causes of different types of and how to identify and how to report abuse, neglect, exploitation, mistreatment or violation of an individual's rights, as well as what time expect from an investigation. All employees receive this training upon hire and annually, thereafter."</p> <p>This federal tag relates to complaint #IN00217892.</p> <p>9-3-2(a)</p>			<p>is being followed appropriately.</p> <p>- The QIDP will monitor through weekly observations in the group home that the abuse, neglect, and exploitation policy and procedure is being followed appropriately.</p> <p>- The Area Supervisor will monitor through monthly observations in the group home that the abuse, neglect, and exploitation policy and procedure is being followed appropriately.</p> <p>- The Program Manager will monitor through monthly observations in the group home that the abuse, neglect, and exploitation policy and procedure is being followed appropriately.</p> <p>Persons Responsible: Executive Director, Program manager, Area supervisor, QIDP, Residential manager, Staff</p>	