

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

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER 15G507	(X2) MULTIPLE CONSTRUCTION A. BUILDING 00 B. WING _____	(X3) DATE SURVEY COMPLETED 12/01/2022
NAME OF PROVIDER OR SUPPLIER VOCA CORPORATION OF INDIANA		STREET ADDRESS, CITY, STATE, ZIP COD 2900 KENTUCKY AVE MADISON, IN 47250		
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W 0000 Bldg. 00	<p>This visit was for the investigation of complaint #IN00393832.</p> <p>Complaint #IN00393832: Substantiated, Federal and state deficiencies related to the allegation(s) are cited at W149 and W157.</p> <p>Date of Survey: 12/1/22</p> <p>Facility Number: 001021 Provider Number: 15G507 AIMS Number: 100245130</p> <p>These deficiencies also reflect state findings in accordance with 460 IAC 9.</p> <p>Quality Review of this report completed by #15068 on 12/16/22.</p>	W 0000		
W 0149 Bldg. 00	<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 for 3 of 3 sampled clients (A, B and C), the facility failed to implement its written policy and procedure to prevent financial exploitation of clients A, B and C's personal funds and to develop and implement effective corrective measures to prevent financial exploitation of clients A, B and C's personal funds.</p> <p>Findings include:</p> <p>The facility's BDDS (Bureau of Developmental Disabilities Services) reports and Investigations were reviewed on 12/1/22 at 11:33 AM. The review</p>	W 0149	<p>W149: The facility must develop and implement written policies and procedures that prohibit mistreatment, neglect or abuse of the client.</p> <p>Corrective Action:</p> <ul style="list-style-type: none"> · All staff trained on the Abuse and Neglect and Exploitation Policy monthly at house meeting. · All staff trained on finance policy and procedures. 	12/30/2022

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

TITLE

(X6) DATE

Anna Brison

Program Director

12/30/2022

Any deficiency statement ending with an asterisk (*) denotes a deficiency which the institution may be excused from correcting providing it is determined other safeguards provide sufficient protection to the patients. (see instructions.) Except for nursing homes, the findings stated above are disclosable 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 disclosed 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>indicated the following:</p> <p>Investigation Summary dated 11/2/22 indicated the following:</p> <p>- "[ED (Executive Director)] received a fraud alert from use of the gas card associated with the [group home address] on 10/18/22, within minutes of each other. [AS (Area Supervisor) #1] was suspended pending investigation into purchases made on the gas card and P-Card (agency credit card) assigned to the site."</p> <p>- "In conclusion, it can be substantiated that [AS #1] misused client personal funds and the P-card for personal gain."</p> <p>The Investigation Summary dated 11/2/22 indicated AS #1 misused clients A, B and C's personal funds. Client A's personal funds were used to purchase food items at a fast food restaurant on 9/30/22 in the amount of \$14.52. Client B's personal funds were used to purchase fast food items on 9/29/22; the amount was unspecified. Client C's personal funds were used to purchase fast food items on 9/30/22 in the amount of \$15.05.</p> <p>The Investigation Summary indicated AS #1's job responsibilities included financial oversight of a second agency group home.</p> <p>The Investigation Summary indicated AS #1 was recommended to be terminated from employment with the agency. The Investigation Summary did not indicate additional documentation of recommendations to prevent recurrence. The Investigation Summary did not indicate documentation of an expanded scope of investigation regarding other agency clients'</p>		<p>(Attachment B)</p> <ul style="list-style-type: none"> Area Supervisor was terminated for failing to follow proper policy and procedures and misuse of client funds. <p>(Attachment C)</p> <ul style="list-style-type: none"> Rescare reimbursed client A for missing money. (Attachment D) Rescare reimbursed client C for missing money. (Attachment E) The purchases for client B was purchased on the Rescare purchasing card but had been signed as it was intended for a consumer who did not eat the meal. (Attachment F) Observations are being conducted by Rescare Management 3 times weekly to audit all financials. (Attachment G) Residential Lead will conduct a weekly audit on all finances. (Attachment H) Area Supervisor will conduct a weekly audit on all finances. (Attachment I) All Rescare Purchasing card receipts are sent the Business Manager weekly. Business Manager ensures all purchases have receipts provided for all transactions on the Rescare Purchasing Card. Rescare Management meets weekly and will review all purchases for the prior week during this meeting. 	

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	<p>funds under AS #1's financial funds responsibility.</p> <p>Investigation Peer Review dated 11/2/22 indicated the following:</p> <p>-"In conclusion, it can be substantiated that [AS (Area Supervisor) #1] misused client personal funds and the P-Card (agency credit card) for personal gain. It was undetermined if [AS #1] used the gas card for personal gain. It is recommended that [AS #1] be terminated on misuse of client and P-Card funds for personal gain despite proper training."</p> <p>-The 11/2/22 Investigation Peer Review did not indicate documentation of additional recommendations to prevent recurrence of exploitation of client funds.</p> <p>Operations Manager (OM) was interviewed on 12/1/22 at 11:15 AM. OM indicated the agency was made aware of allegations of AS #1 stealing fuel/gas on the agency's P-card. OM indicated the agency began investigating AS #1's financial activities and determined he had utilized clients A, B and C's personal funds to make fast food purchases. OM indicated clients A, B and C were reimbursed and AS #1 was terminated from employment with the agency. OM indicated AS #1's job responsibilities included oversight of another agency operated group home. OM indicated the Investigation did not make recommendations regarding AS #1's financial transactions at the other agency group home. OM indicated the Investigation Summary and Peer Review did not include documentation of additional recommendations for retraining or oversight to prevent recurrence of financial exploitation of clients A, B and C's personal</p>		<p>(Attachment J)</p> <ul style="list-style-type: none"> Area Supervisor collects all client personal finance receipts monthly and turns those into Program Manager for review and accuracy at the monthly Area Supervisor meeting that is held the third Thursday of each month. Quality Assurance Manager trained to ensure a thorough investigation is completed on all investigations including prevention of further incidents. (Attachment K) <p>Monitoring of Corrective Action:</p> <ul style="list-style-type: none"> The Area Supervisor will send monthly house meeting inservice to Program Manager to ensure completion. Residential Lead submits weekly check to the Area Supervisor and Program Manager to ensure completion. Area Supervisor submits weekly check to the Program Manager to ensure completion. Rescare Management will send finance audits to the Program Manager and Program Director for monitoring, follow up and to ensure completion. Program Manager reviews all client personal finances and tracks them in the tracking 	

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W 0157 Bldg. 00	<p>funds.</p> <p>The facility's Policy and Procedures were reviewed on 12/1/22 at 1:00 PM. The facility's Abuse, Neglect and Exploitation policy dated 7/18/11 indicated the following:</p> <p>-"CASC (Community Alternatives South Central) staff actively advocate for the rights and safety of all individuals."</p> <p>-"An investigative peer review committee chosen by the Executive Director will meet to discuss the outcome of the investigation and to ensure that a thorough investigation has been completed."</p> <p>This federal tag relates to complaint #IN00393832.</p> <p>9-3-2(a)</p> <p>483.420(d)(4)</p> <p>STAFF TREATMENT OF CLIENTS</p> <p>If the alleged violation is verified, appropriate corrective action must be taken.</p> <p>Based on record review and interview for 3 of 3 sampled clients (A, B and C), the facility failed to develop and implement effective corrective measures to prevent financial exploitation of clients A, B and C's personal funds.</p> <p>Findings include:</p> <p>The facility's BDDS (Bureau of Developmental Disabilities Services) reports and Investigations were reviewed on 12/1/22 at 11:33 AM. The review indicated the following:</p> <p>Investigation Summary dated 11/2/22 indicated the following:</p>	W 0157	<p>spreadsheet monthly upon receipt.</p> <ul style="list-style-type: none"> Weekly Finance audits will be sent to the Program Manager for review and to ensure completion. Quality Assurance Manager will ensure a thorough peer review is conducted thoroughly with Rescare Management following the completed investigation. <p>Completion Date: 12/30/22</p> <p>W157: Staff treatment of clients.</p> <p>Corrective Action:</p> <ul style="list-style-type: none"> Rescare reimbursed client A for missing money. (Attachment D) Rescare reimbursed client C for missing money. (Attachment E) The purchases for client B was purchased on the Rescare purchasing card but had been signed as it was intended for a consumer who did not eat the 	12/30/2022

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	<p>-"[ED (Executive Director)] received a fraud alert from use of the gas card associated with the [group home address] on 10/18/22, within minutes of each other. [AS (Area Supervisor) #1] was suspended pending investigation into purchases made on the gas card and P-Card (agency credit card) assigned to the site."</p> <p>-"In conclusion, it can be substantiated that [AS #1] misused client personal funds and the P-card for personal gain."</p> <p>The Investigation Summary dated 11/2/22 indicated AS #1 misused clients A, B and C's personal funds. Client A's personal funds were used to purchase food items at a fast food restaurant on 9/30/22 in the amount of \$14.52. Client B's personal funds were used to purchase fast food items on 9/29/22; the amount was unspecified. Client C's personal funds were used to purchase fast food items on 9/30/22 in the amount of \$15.05.</p> <p>The Investigation Summary indicated AS #1's job responsibilities included financial oversight of a second agency group home.</p> <p>The Investigation Summary indicated AS #1 was recommended to be terminated from employment with the agency. The Investigation Summary did not indicate additional documentation of recommendations to prevent recurrence. The Investigation Summary did not indicate documentation of an expanded scope of investigation regarding other agency clients' funds under AS #1's financial funds responsibility.</p> <p>Investigation Peer Review dated 11/2/22 indicated the following:</p>		<p>meal. (Attachment F)</p> <ul style="list-style-type: none"> Observations are being conducted by Rescare Management 3 times weekly to audit all financials. (Attachment G) Area Supervisor was terminated for failing to follow proper policy and procedures and misuse of client funds. (Attachment C) Residential Lead will conduct a weekly audit on all finances. (Attachment H) Area Supervisor will conduct a weekly audit on all finances. (Attachment I) All Rescare Purchasing card receipts are sent the Business Manager weekly. Business Manager ensures all purchases have receipts provided for all transactions on the Rescare Purchasing Card. Rescare Management meets weekly and will review all purchases for the prior week during this meeting. (Attachment J) Area Supervisor collects all client personal finance receipts monthly and turns those into Program Manager for review and accuracy at the monthly Area Supervisor meeting that is held the third Thursday of each month. Quality Assurance Manager trained to ensure a thorough investigation is completed on all investigations including prevention of further incidents. (Attachment 	

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	<p>- "In conclusion, it can be substantiated that [AS (Area Supervisor) #1] misused client personal funds and the P-Card (agency credit card) for personal gain. It was undetermined if [AS #1] used the gas card for personal gain. It is recommended that [AS #1] be terminated on misuse of client and P-Card funds for personal gain despite proper training."</p> <p>- The 11/2/22 Investigation Peer Review did not indicate documentation of additional recommendations to prevent recurrence of exploitation of client funds.</p> <p>Operations Manager (OM) was interviewed on 12/1/22 at 11:15 AM. OM indicated the agency was made aware of allegations of AS #1 stealing fuel/gas on the agency's P-card. OM indicated the agency began investigating AS #1's financial activities and determined he had utilized clients A, B and C's personal funds to make fast food purchases. OM indicated clients A, B and C were reimbursed and AS #1 was terminated from employment with the agency. OM indicated AS #1's job responsibilities included oversight of another agency operated group home. OM indicated the Investigation did not make recommendations regarding AS #1's financial transactions at the other agency group home. OM indicated the Investigation Summary and Peer Review did not include documentation of additional recommendations for retraining or oversight to prevent recurrence of financial exploitation of clients A, B and C's personal funds.</p> <p>This federal tag relates to complaint #IN00393832.</p> <p>9-3-2(a)</p>		<p>K)</p> <ul style="list-style-type: none"> QIDP completed consumer monthly summary that includes financial balances of client personal funds. (Attachment L) <p>Monitoring of Corrective Action:</p> <ul style="list-style-type: none"> The Area Supervisor will send monthly house meeting inservice to Program Manager to ensure completion. Residential Lead submits weekly check to the Area Supervisor and Program Manager to ensure completion. Area Supervisor submits weekly check to the Program Manager to ensure completion. Rescare Management will send finance audits to the Program Manager and Program Director for monitoring, follow up and to ensure completion. Program Manager reviews all client personal finances and tracks them in the tracking spreadsheet monthly upon receipt. Weekly Finance audits will be sent to the Program Manager for review and to ensure completion. Quality Assurance Manager will ensure a thorough peer review is conducted thoroughly with Rescare Management following 	

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			<p>the completed investigation.</p> <ul style="list-style-type: none"> QIDP submits monthly summary to the Program Manager monthly for review and to ensure completion. <p>Completion Date: 12/30/22</p>	