

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

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER 15G599	(X2) MULTIPLE CONSTRUCTION A. BUILDING <u>00</u> B. WING _____	(X3) DATE SURVEY COMPLETED 11/25/2024
NAME OF PROVIDER OR SUPPLIER REM-INDIANA INC		STREET ADDRESS, CITY, STATE, ZIP COD 860 W 65TH LN MERRILLVILLE, IN 46410		
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W 0000 Bldg. 00	<p>This visit was for the investigation of complaint #IN00444923.</p> <p>Complaint #IN00444923: No deficiencies related to the allegation(s) were cited.</p> <p>Unrelated deficiencies cited.</p> <p>Survey Dates: November 22 and 25, 2024.</p> <p>Facility Number: 001113 Provider Number: 15G599 Aims Number: 100245610</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 12/6/24.</p>	W 0000		
W 0249 Bldg. 00	<p>483.440(d)(1) PROGRAM IMPLEMENTATION</p> <p>Based on observation, record review, and interview for 1 of 3 sample clients (A), the facility failed to implement client A's health risk plans.</p> <p>Findings include:</p> <p>An observation was conducted at the facility owned and operated day program on 11/22/24 from 8:50 am to 10:00 am. Client A was present in the day program throughout the observation period.</p> <p>On 11/22/24 at 8:56 am, client A's nasal cannula was in place, but her portable oxygen machine was not turned on. Client A used a wheelchair for</p>	W 0249	<p>The facility has established comprehensive practices for the development and implementation of Individual Program Plans (IPPs) to ensure that clients receive continuous, active treatment programs tailored to their unique needs. Each client's Risk Protocols are carefully designed to address their specific health and safety requirements and are collaboratively reviewed and approved by the Interdisciplinary Team (IDT).</p>	01/02/2025

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

TITLE

(X6) DATE

Lindsey Van Dyken

Area Director

12/31/2024

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>ambulation. The wheelchair's seat belt was not buckled. When client A was asked about the seat belt, client A stated, "I don't think this one has a seat belt." Client A asked the surveyor to look for the seat belt. The surveyor gave client A both ends of the seat belt. Client A attempted to fasten the seat belt but was unable to do so without assistance.</p> <p>1. Client A's record was reviewed on 11/22/24 at 10:50 am. Client A's Low Oxygen Protocol dated 4/3/24 indicated the following: "Oxygen is to be set at 3 liters."</p> <p>Client A was interviewed on 11/22/24 at 8:58 am. When asked if her oxygen was turned on, client A stated, "It's not? I don't know." Client A held the nasal cannula to her lip and stated, "I don't feel anything."</p> <p>Day Program Supervisor (DPS) #1 was interviewed on 11/22/24 at 9:07 am. DPS #1 looked at client A's oxygen machine and stated, "It's not on. It should have been turned on when she got here. The house staff should have done that. She came in like this. We just put her in a room."</p> <p>House Manager (HM) #1 was interviewed by phone on 11/22/24 at 10:13 am and stated, "[Client A] uses oxygen all the time. It should be turned on. It is automatically programmed. Staff just put it on. They do not adjust any settings. They should make sure it is charged and powered on."</p> <p>Area Director (AD) #1 was interviewed by phone on 11/22/24 at 11:11 am and stated, "[Client A] uses oxygen all the time. It should be turned on."</p> <p>2. Client A's Fall Protocol dated 10/14/24 indicated</p>		<p>These protocols outline, in clear and detailed terms, the necessary interventions and services required to safeguard each client's well-being while promoting their independence and empowerment. By aligning care practices with individualized goals, the facility ensures that clients not only receive the support they need to remain safe but also experience personal growth and success in achieving their objectives.</p> <p>Management staff will participate in a re-training session focused on Client A's risk protocols and ensuring that staff understand the importance of following risk protocols. The re-training will underscore the critical significance of High-Risk Protocols and the necessity for staff to possess a thorough understanding and consistently adhere to these procedures.</p> <p>The goal of this Management re-training is to ensure that the staff in both the group home and day program consistently assist and educate individuals on their safety and risks ; as well as adaptive equipment, such as eyeglasses, to promote independence and functionality. RN Wendy Dieott will lead a specialized training session for all</p>	

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	<p>the following:</p> <p>"Wheelchair - Seat belt should be used at all times."</p> <p>DPS #1 was interviewed on 11/22/24 at 9:07 am and stated, "Her seat belt should be buckled."</p> <p>HM #1 was interviewed by phone on 11/22/24 at 10:13 am and stated, "[Client A] does not use a seatbelt unless she is being transported. She refuses the seat belt."</p> <p>AD #1 was interviewed by phone on 11/22/24 at 11:11 am and stated, "If [client A's] plan says she needs a seatbelt, it should be fastened."</p> <p>9-3-4(a)</p>		<p>Day Program DSPs on Client A's Oxygen Management and Fall Avoidance Protocols. This session will also emphasize best practices for equipment maintenance, including ensuring that Client A's eyeglasses remain clean and functional throughout the day. In instances where the glasses are dirty, DSPs will provide assistance as needed to ensure Client A can see clearly and use her glasses effectively. To reinforce these protocols, a new daily tracking checklist will be developed and implemented while Client A is at the Day Program. This checklist will serve as a guide for staff to monitor and document the following three specific things:</p> <ul style="list-style-type: none"> 1.Verifying that Client A's oxygen is turned on and set to the correct level 2.Ensuring Client A's wheelchair seatbelt is securely fastened at all times, except during toileting. 3.Checking that Client A's eyeglasses are clean and in proper condition. <p>Staff will document these tasks three times daily on Client A's new daily tracking checklist—upon Client A's arrival around 8:30 am, at 12:00 PM, and at 3:00pm before she departs for the day. Staff will document and notify DP PS if Client A has any issues and if she refuses as this will be discussed by the IDT and</p>	

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			<p>further measures will be put into place.</p> <p>Additionally, Day Program DSPs will be re-trained on how to properly charge Client A's oxygen equipment if it begins to run low during the day. To reinforce these practices, RN Dieott will conduct hands-on demonstrations to verify staff comprehension and competence in performing these tasks.</p> <p>Group Home DSP Training: Group Home Program Supervisor will conduct a formal re-training session for Group Home DSPs on 1/2/2024 that will include review of the following: Client A's Oxygen Management and Fall Avoidance Protocols; re-training to ensure Client A's oxygen is on and functioning correctly prior to transporting her to the Day Program. and lastly emphasizing the importance of overnight charging to ensure Client A's oxygen is fully charged and ready for the transport to the Day program each morning.</p> <p>Oversight and Accountability: To maintain compliance and ensure the consistent implementation of these protocols, the Day Program Program Director (PD) and Program Supervisor (PS)</p>	

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W 0436 Bldg. 00	483.470(g)(2) SPACE AND EQUIPMENT Based on observation and interview for 1 of 3 sample clients (A), the facility failed to ensure client A's eyeglasses were clean. Findings include:	W 0436	<p>will oversee staff performance and adherence to the checklist.</p> <p>· The Day Program Program Director will complete weekly observations to confirm that staff are meeting expectations and properly documenting tasks.</p> <p>· The Day Program Program Supervisor will conduct at least two observations per week to monitor compliance with the checklist and reinforce newly implemented protocols.</p> <p>· The DP PD or PS will scan the checklist to the GH PD/QIDP, PS, and the Area Director. The team will review and discuss any issues/concerns during the weekly ICF/ADS meeting. (occurs every Friday)</p> <p>These measures aim to uphold the safety, health, and well-being of Client A while promoting accountability and consistent support from all staff involved in her care.</p> <p>Responsible Parties: Area Director, Nurse, Day Program PD, Group Home PD/QIDP, GH Program Supervisors, DSPs.</p>	01/02/2025

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	<p>An observation was conducted at the facility owned and operated day program on 11/22/24 from 8:50 am to 10:00 am. Client A was present in the day program throughout the observation period.</p> <p>On 11/22/24 at 8:58 am, client A's eye glasses lenses were dirty and had an unknown substance smeared across both lenses.</p> <p>Client A was interviewed on 11/22/24 at 8:58 am and stated, "They're dirty." When asked if she cleaned her own eye glasses, client A stated, "I don't have anything to clean them with."</p> <p>Day Program Supervisor (DPS) #1 was interviewed on 11/22/24 at 9:07 am. When asked to look at client A's glasses, DPS #1 stated, "[Client A], your glasses are dirty." DPS #1 cleaned client A's glasses. DPS #1 stated, "She came in like this. We just put her in a room."</p> <p>House Manager (HM) #1 was interviewed by phone on 11/22/24 at 10:13 am and stated, "[Client A] should be cleaning her own glasses. If she cannot, we should offer her hand over hand assistance."</p> <p>Area Director (AD) #1 was interviewed by phone on 11/22/24 at 11:11 am and stated, "Staff should be checking [client A's] glasses in the morning. They should assist her with cleaning them if needed."</p> <p>9-3-7(a)</p>		<p>all times. This includes, but is not limited to, eyeglasses, dentures, communication devices and other assistive adaptive equipment identified by the IDT as necessary for each client. The facility also has practices in place for educating clients on the proper use of these devices, empowering them to make informed decisions regarding their utilization. These efforts are aimed at promoting independence, enhancing quality of life, and supporting each client's specific needs.</p> <p>Management staff will participate in a re-training session focused on Client A's risk protocols and best practices for adaptive equipment maintenance. The goal of this Management re-training is to ensure that the staff in both the group home and day program consistently assist and educate individuals on maintaining their personal adaptive equipment, such as eyeglasses, to promote independence and functionality. RN Wendy Dieott will lead a specialized training session for all Day Program DSPs on Client A's Oxygen Management and Fall Avoidance Protocols. This session will also emphasize best practices for equipment maintenance, including ensuring that Client A's eyeglasses remain clean and functional throughout</p>	

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			<p>the day. In instances where the glasses are dirty, DSPs will provide assistance as needed to ensure Client A can see clearly and use her glasses effectively. To reinforce these protocols, a new daily tracking checklist will be developed and implemented while Client A is at the Day Program. This checklist will serve as a guide for staff to monitor and document the following three specific things:</p> <ul style="list-style-type: none"> 1.Verifying that Client A's oxygen is turned on and set to the correct level 2.Ensuring Client A's wheelchair seatbelt is securely fastened at all times, except during toileting. 3.Checking that Client A's eyeglasses are clean and in proper condition. <p>Staff will document these tasks three times daily on Client A's new daily tracking checklist—upon Client A's arrival around 8:30 am, at 12:00 PM, and at 3:00pm before she departs for the day. Staff will document and notify DP PS if Client A has any issues and if she refuses as this will be discussed by the IDT and further measures will be put into place.</p> <p>Additionally, Day Program DSPs will be re-trained on how to properly charge Client A's oxygen equipment if it begins to run low during the day. To reinforce these</p>	

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			<p>practices, RN Dieott will conduct hands-on demonstrations to verify staff comprehension and competence in performing these tasks.</p> <p>Group Home DSP Training: Group Home Program Supervisor will conduct a formal re-training session for Group Home DSPs on 1/2/2024 that will include review of the following: Client A's Oxygen Management and Fall Avoidance Protocols; re-training to ensure Client A's oxygen is on and functioning correctly prior to transporting her to the Day Program. and lastly emphasizing the importance of overnight charging to ensure Client A's oxygen is fully charged and ready for the transport to the Day program each morning.</p> <p>Oversight and Accountability: To maintain compliance and ensure the consistent implementation of these protocols, the Day Program Program Director (PD) and Program Supervisor (PS) will oversee staff performance and adherence to the checklist.</p> <ul style="list-style-type: none"> · The Day Program Program Director will complete weekly observations to confirm that staff are meeting expectations and properly documenting tasks. · The Day Program Program 	

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			<p>Supervisor will conduct at least two observations per week to monitor compliance with the checklist and reinforce newly implemented protocols.</p> <p>· The DP PD or PS will scan the checklist to the GH PD/QIDP, PS, and the Area Director. The team will review and discuss any issues/concerns during the weekly ICF/ADS meeting. (occurs every Friday)</p> <p>These measures aim to uphold the safety, health, and well-being of Client A while promoting accountability and consistent support from all staff involved in her care.</p> <p>Responsible Parties: Area Director, Nurse, Day Program PD, Group Home PD/QIDP, GH Program Supervisors, DSPs.</p>	