

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 15G171	X2) MULTIPLE CONSTRUCTION A. BUILDING 00 B. WING _____	X3) DATE SURVEY COMPLETED 02/24/2023
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NAME OF PROVIDER OR SUPPLIER TRADEWINDS SERVICES INC	STREET ADDRESS, CITY, STATE, ZIP COD 8286 E 101ST AVE CROWN POINT, IN 46307
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W 0000 Bldg. 00	<p>This visit was for a pre-determined full annual recertification and state licensure survey. This visit included the investigation of complaint #IN00401034.</p> <p>Complaint #IN00401034: Substantiated: No deficiencies related to the allegation are cited.</p> <p>Survey dates: February 23 and 24, 2023.</p> <p>Facility Number: 000705 Provider Number: 15G171 AIMS Number: 100248690</p> <p>These deficiencies reflect state findings in accordance with 460 IAC 9.</p> <p>Quality Review of this report completed by #27547 on 3/1/23.</p>	W 0000		
W 0240 Bldg. 00	<p>483.440(c)(6)(i) INDIVIDUAL PROGRAM PLAN</p> <p>The individual program plan must describe relevant interventions to support the individual toward independence.</p> <p>Based on record review and interview for clients B and C, the facility failed to ensure clients B and C's Behavior Support Plans (BSPs) indicated their current psychotropic medications.</p> <p>Findings include:</p> <p>1. Client B's record was reviewed on 2/23/23 at 12:00 pm. Client B's physician's orders for February 2023 indicated the following psychotropic medications were prescribed to client B.</p>	W 0240	<p>The facility failed to ensure BSPs for clients B & C included updated psychotropic medications.</p> <p>To ensure systemic and ongoing compliance the facility worked with the outside provider Life Strategies to update BSPs with current psychotropic medications. Updated BSPs will be submitted to HRC for approval no later than 3/22/2023.</p> <p>To further ensure system and</p>	03/22/2023

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
Chasity Pacheco	Residential Coordinator	03/17/2023

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>"Aripiprazole Tab (tablet), 15 mg (milligrams), take one tablet by mouth every night at bedtime for mood disorder.</p> <p>Escitalopram Tab, 20 mg, take one tablet by mouth every day for mood disorder.</p> <p>Imipram HCL Tab, 50 mg, take one tablet by mouth every night at bedtime for mood disorder.</p> <p>Naltrexone Tab, 50 mg, take two tablets every night at bedtime for mood disorder.</p> <p>Propranolol Tab, 10 mg, take one tablet by mouth three times daily for schizoaffective disorder."</p> <p>Client B's BSP dated 3/1/22 indicated the following psychotropic medications: "Current Psychotropic Medications: Escitalopram (20 mg QD (daily) am). Ziprasidone (80 mg BID (twice daily)) (can be used to treat symptoms of psychotic disorders). Amitriptyline (50 mg QD, pm) (can be used as an antidepressant)." - Client B's BSP did not include his Aripiprazole tab 15 mg, Imipram HCL tab 20 mg, Naltrexone tab 50 mg, and Propranolol tab 10 mg as indicated in his physician's orders. Client B's BSP indicated Ziprasidone 80 mg and Amitriptyline 50 mg which were not indicated in his physician's orders.</p> <p>2. Client C's record was reviewed on 2/23/23 at 12:30 pm. Client C's physician's orders for February 2023 indicated the following psychotropic medications were prescribed to client C. "Atomoxetine cap (capsule) 80 mg, take one capsule by mouth every day for ADHD (Attention Deficit Hyperactivity Disorder). Busiprone tab 15 mg, take one tablet by mouth three times daily for depression. Invega Sustenna Inj (injection) 234 mg/1.5 ml (milliliters), intramuscularly every month for bipolar disorder.</p>		<p>ongoing compliance, QIDPs will review all BSPs for current medication lists, update and submit to HRC for approval. Life Strategies will be notified immediately of any psychotropic medication changes and update BSPs within a week and submit to HRC for approval. QIDPs will check for compliance on weekly and monthly site visits. Additionally, the Residential Coordinator will also check for compliance during unannounced site visits.</p>	

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W 0440 Bldg. 00	<p>Lithium Carbonate tab, 300 mg ER (extended release), take two tablets by mouth twice daily for mood instability. Trazodone tab, 50 mg, take one tablet by mouth every night at bedtime for bipolar disorder."</p> <p>Client C's BSP dated 6/1/22 indicated the following psychotropic medications: "Current Psychotropic Medications: Paliperidone (9 mg QD am) (used to treat the symptoms of psychotic disorders). Busiprone (30 mg BID). Lithium Carbonate (300 mg BID). Strattera (80 mg QD) (used to treat the symptoms of ADHD)." - Client C's BSP indicated a different dosage of his Busiprone from his physician's orders. Client C's BSP did not include his Invega Sustenna injection and Trazodone tab 50 mg as indicated in his physician's orders. Client C's BSP indicated Paliperidone 9 mg which was not indicated in his physician's orders.</p> <p>Residential Director #1 was interviewed on 2/23/23 at 12:10 pm and stated, "We contract with a company to write the BSPs. They were aware of the medication changes and sent them through HRC (human rights committee) for approval. The behaviorist didn't update the plans. It needs to be addressed and updated. The plans should match the physician orders."</p> <p>9-3-4(a) 483.470(i)(1) EVACUATION DRILLS at least quarterly for each shift of personnel. Based on record review and interview for 3 of 3 sample clients (A, B, and C), plus 4 additional clients (D, E, F, and G), facility failed to ensure</p>	W 0440	The facility failed to ensure evacuation drills were completed at least quarterly for each shift of	03/24/2023

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	<p>evacuation drills were conducted for clients A, B, C, D, E, F, and G at least quarterly for each shift of personnel.</p> <p>Findings include:</p> <p>Clients A, B, C, D, E, F, and G's evacuation drills were reviewed on 2/24/23 at 11:50 am.</p> <p>The record indicated the following shifts: 1st shift: 7:00 am to 3:00 pm. 2nd shift: 3:00 pm to 11:00 pm. 3rd shift: 11:00 pm to 7:00 am.</p> <p>The record indicated the most recent 1st shift fire drill was run on 10/15/22 at 8:30 am.</p> <p>The record indicated the most recent 2nd shift fire drill was run on 7/28/22 at 6:40 pm.</p> <p>The record indicated the most recent 3rd shift fire drill was run on 9/12/22 at 12:00 am.</p> <p>Residential Director #1 was interviewed on 2/24/23 at 12:00 pm and stated, "Fire drills should be run once per shift per quarter."</p> <p>9-3-7(a)</p>		<p>personnel for clients #1-7.</p> <p>To ensure systemic and ongoing compliance, the house manager will be retrained on evacuation procedures, frequency, and documentation during monthly house manager meeting on 3/24/2023. All staff were trained on proper evacuation procedures and documentation during house meeting on 3/8/2023.</p> <p>To further ensure systemic and ongoing compliance, all house managers will be retrained on evacuation procedures, frequency and documentation during monthly house manager meeting on 3/24/2023. Staff of all group homes will be retrained on evacuation procedures, frequency, and documentation by 3/23/2023. During weekly and monthly site checks, the QIDP will review evacuation logs to ensure compliance and will periodically alert the house of a drill to be performed immediately for additional compliance and practice. The Residential Coordinator will also spot check evacuation compliance during unannounced visits and may also initiate an evacuation drill to monitor compliance.</p>	