

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

PRINTED: 05/18/2023

FORM APPROVED

OMB NO. 0938-039

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER  15G676		X2) MULTIPLE CONSTRUCTION A. BUILDING 00 B. WING		X3) DATE SURVEY COMPLETED 03/28/2023	
NAME OF PROVIDER OR SUPPLIER  MOSAIC				STREET ADDRESS, CITY, STATE, ZIP COD 1703 WOODMONT DR SOUTH BEND, IN 46614			
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIE (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 a pre-determined full annual recertification and state licensure survey.</p> <p>Dates of Survey: 3/15, 3/16, 3/17, 3/20, 3/21, 3/22, 3/23, 3/24, 3/27 and 3/28/23.</p> <p>Facility Number: 009969 Provider Number: 15G676 AIMS Number: 200129000</p> <p>These federal deficiencies also reflect state findings in accordance with 460 IAC 9. Quality Review of this report completed by #15068 and #27547 on 4/4/23.</p>			W 0000			
W 0102  Bldg. 00	<p>483.410 GOVERNING BODY AND MANAGEMENT The facility must ensure that specific governing body and management requirements are met.</p> <p>Based on observation, record review, and interview for 3 of 3 sample clients (#1, #2 and #3), plus 2 additional clients (#4 and #5), the facility failed to meet the Condition of Participation: Governing Body. The governing body failed to exercise general policy, budget, and operating direction over the facility to ensure the home was in good repair, and there was sufficient oversight for clients #3, #4 and #5's finances. The governing body failed to effectively integrate, coordinate, and monitor clients #1, #2, #3, #4 and #5's program plans, to develop and implement clients #1, #2, #3, #4 and #5's Individual Support Plans (ISPs) and Behavior Support Plans (BSPs), and to ensure a sanitary environment in the group home was maintained.</p>			W 0102	<p>Mosaic will ensure that all Individual Support plans and Behavior Support Plans are updated and reviewed annually. Staff training will be conducted on updated plans. Annual plans will be updated regularly by the QIDP by all residents to prevent lapses in the future. This will be assessed and tracked by Quality Coordinator for all Mosaic individuals. A maintenance person has been hired and has started his role to help oversight of Mosaic homes 4/17. An Associate Director was also hired to help manage the homes and monitor</p>		04/28/2023

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

TITLE

(X6) DATE

Kirsten Terrell

Quality Coordinator

05/15/2023

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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W 0104  Bldg. 00	<p>The governing body failed to meet the Condition of Participation: Active Treatment Services for clients #1, #2, #3, #4 and #5.</p> <p>The governing body failed to meet the Condition of Participation: Physical Environment for clients #1, #2, #3, #4 and #5.</p> <p>Findings include:</p> <p>1. The governing body failed to exercise general policy, budget, and operating direction over the facility to ensure the home was in good repair for clients #1, #2, #3, #4 and #5 and to provide sufficient oversight for clients #3, #4 and #5's finances. Please see W104.</p> <p>2. The governing body failed to meet the Condition of Participation: Active Treatment Services for clients #1, #2, #3, #4 and #5. The governing body failed to effectively integrate, coordinate, and monitor clients #1, #2, #3, #4 and #5's program plans, and to develop and implement clients #1, #2, #3, #4 and #5's ISPs and BSPs. Please see W195.</p> <p>3. The governing body failed to meet the Condition of Participation: Physical Environment for clients #1, #2, #3, #4 and #5. The governing body failed to ensure a sanitary environment was maintained in the home. Please see W406.</p> <p>9-3-1(a)</p> <p>483.410(a)(1) GOVERNING BODY The governing body must exercise general policy, budget, and operating direction over the facility.</p>			W 0104	<p>the DSSs 4/10.</p> <p>1.The smell of urine has been</p>		04/28/2023

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	<p>Based on observation, record review and interview for 3 of 3 sampled clients (#1, #2 and #3), plus 2 additional clients (#4 and #5), the governing body failed to exercise general policy, budget, and operating direction over the facility to ensure the home was in good repair and sufficient oversight for clients #3, #4 and #5's finances. The governing body failed to ensure clients #1, #2, #3, #4 and #5 received a continuous and aggressive active treatment program. The governing body failed to ensure a sanitary environment was maintained in the home for clients #1, #2, #3, #4 and #5.</p> <p>Findings include:</p> <p>A. Observations were conducted in the group home on 3/15/23 from 3:31 pm to 6:45 pm, 3/16/23 from 6:00 am to 9:52 am, 3/16/23 from 1:33 pm to 3:15 pm and 3/17/23 from 10:30 am to 12:15 pm. Clients #1, #2, #3, #4 and #5 were present throughout the observations. The following environmental issues were noted affecting clients #1, #2, #3, #4 and #5:</p> <p>1. Clients #3 and #5's bedrooms had a strong smell of urine. The odor of urine could be detected before the bedroom door was opened.</p> <p>On 3/15/23 at 6:24 pm the House Manager (HM) stated, "That smell is urine. [Client #5] has a habit of peeing in his drawers. Staff check the drawers and wash clothes 3-4 times a day. [Client #3] doesn't get up at night and will urinate in his room. Staff sweep and mop in his room daily."</p> <p>2. The laminate floor in the kitchen and dining room was sticky.</p> <p>3. The chest freezer in the garage had open</p>				<p>eliminated. Both beds and dressers where individuals were urinating were replaced. This will increase the sanitization of the facility.</p> <p>2. The floor was cleaned in the kitchen and dining room to remove the sticky residue. The sticky floor may be caused from the garage ramp and will be power washed when it warms up to see if this helps prevent it.</p> <p>3. The sausage patties inside the chest freezer have been discarded. The fridge in the garage has been cleaned of the brown and blue substance.</p> <p>4. Cabinets will be assessed to be fixed or removed.</p> <p>5. The entryway table with the broken leg was discharged.</p> <p>6. The bedroom door will be replaced. The outlet will have a cover on it. The blue chair has been disposed of. A new bed frame has been purchased. The blinds will be removed and replaced with curtains and the windows will be covered with an opaque feature.</p> <p>7. Sliding door has been removed and disposed of.</p> <p>8. All trash has been taken care of and a dumpster will be rented the week of 4/24 to remove larger items.</p> <p>9. The vents have been replaced</p> <p>10. Couch will be replaced.</p> <p>11. The curtain rod has been reattached to the wall.</p>		

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	<p>sausage patties inside it. In the garage refrigerator there was a brown and blue substance on the shelf.</p> <p>4. The cabinet doors in the laundry room were hanging down, were not secure on the hinges and did not close correctly.</p> <p>5. In the entryway on the right side was a single drawer table with a broken leg.</p> <p>On 3/16/23 at 2:30 pm client #5 stated, "I broke that table. I slammed it down."</p> <p>6. In client #3's bedroom the bedroom door was cracked. An outlet beside the dresser did not have a cover on it. A blue chair was loose and wobbled when touched and had a circular white stain in the middle of it. The bed frame was loose and did not stand up. The blinds were missing the bottom half of the blind slats.</p> <p>7. The sliding glass door screen on the back deck was not attached to the door and could not be used properly.</p> <p>8. Beside the right side of the house there were 4 dirty mops and a mop bucket, a broken round table, cardboard boxes, pudding and TV boxes, empty milk jugs and plastic, a broken bed frame and a mattress.</p> <p>9. The two vents on the floor in the kitchen were brown and rusty in color. The vent in the dining room was missing paint and rusty in color.</p> <p>10. The couch cushions in the living room were cracked and split.</p> <p>11. The curtain rod in the dining room was coming</p>				<p>12. The ramp has been cleared of the items and will be powerwashed</p> <p>13. Covers will be purchased for radiators or radiators will be removed.</p> <p>14. A new table will be bought for the home. Chairs have already been replaced.</p> <p>15. Wall will be repaired and painted.</p> <p>16. Toilet was flushed and the bathroom was cleaned. The shower curtain has been replaced.</p> <p>17. Walls will be painted.</p> <p>18. The walls will be painted.</p> <p>19. The dishwasher has a part that has been ordered and staff have cleaning product available to assist in handwashing and sanitizing in the meantime.</p> <p>20. Clients were reimbursed for pharmacy charges. Staff was provided with retraining of the new pharmacy billing methods which caused the 1 time error.</p> <p>This will be monitored by the maintenance staff and QIDP during site visits occurring regularly to prevent this from happening again. The Rep Payee team who handles finances will be monitoring client billing ongoing.</p>		

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	<p>off the wall and leaning down.</p> <p>12. The ramp going into the garage had several empty plastic bottles and cardboard boxes on it.</p> <p>13. In client #2's bedroom the radiator and the light switch did not have covers. The closet doors did not have knobs.</p> <p>14. The dining room tabletop was loose and not secured to the table legs. The finish of the table was worn off.</p> <p>15. In client #5's bedroom the wall behind the recliner was missing paint. There was a hole measuring 3 1/2 inches by 2 inches.</p> <p>16. The first bathroom on the right down the hallway had feces in the toilet from 3/15/23 to 3/16/23. The shower curtain was missing hooks and the bottom of the shower stall had a brown and yellow substance.</p> <p>17. There were several patches on the living room wall that were not painted.</p> <p>18. The bedroom walls in clients #1, #3, #4 and #5's walls had discolored areas where an unknown substance left marks.</p> <p>On 3/15/23 at 6:24 pm house manager (HM) stated, "If [client #5] is mad he will urinate on the walls and the floor."</p> <p>19. The dishwasher did not work.</p> <p>On 3/16/23 at 6:56 am, staff #2 stated, "Dishwasher doesn't work, it needs fixed. It's been broken since November 2022. I know someone came and attempted to fix it."</p>						

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	<p>An interview with the Qualified Intellectual Disabilities Professional (QIDP) was conducted on 3/21/23 at 12:37 pm. The QIDP stated, "The home should be clean and in good order and meet state regulations. We don't tolerate a strong smell of urine anywhere in the house. After every individual uses the bathroom staff should go in and clean and sanitize it." The QIDP indicated when an item breaks staff should notify their supervisor and complete a maintenance request. The QIDP stated, "The outside space should be clean with no trash lying outside. The refrigerator should be cleaned at least twice a week. Food inside the freezer should be in a container. Outlets and light switches should have covers on them. Radiators should have covers on them. All closet doors should have knobs. The table should be sturdy, and tabletop should not be worn off."</p> <p>An interview with the Quality Coordinator (QC) was conducted on 3/21/23 at 2:49 pm. The QC stated, "The home should be clean, organized, clean path and the walls wiped down. There should not be a urine smell in the bedrooms. Bathrooms should be cleaned daily. Floors should be swept and mopped daily. The home is a health and safety risk to not be clean and it is about the quality of life. Food in the freezer should be in Ziploc bags with instructions and expiration date. Refrigerators should be cleaned and wiped down weekly. Outlet covers and light switches should be clean and not cracked. Nothing should be broken in the house. It should be fixed or moved out of the house. The mark on the walls is due to one individual in the home. He likes to urinate on the walls. He goes in all the bedrooms and pees on walls and in the vents. The blinds should be operable or have privacy glass on it. The outside of the house should be clean and trash free."</p>						

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	<p>B. 1) Client 3's record was reviewed on 3/16/23 at 11:49 am. Client 3's bank statement dated 3/16/23 indicated the following: 2/21/23 - [Name] Pharmacy, Medicine Non-Prescription, \$22.56</p> <p>Review of client #3's financial records indicated the facility failed to address the \$22.56 pharmacy fees charged to client #3.</p> <p>2. Client #4's bank statement dated 3/16/23 indicated the following: 2/21/23 - [Name] Pharmacy, Medicine Non-Prescription, \$12.43</p> <p>Review of client #4's financial records indicated the facility failed to address the \$12.43 pharmacy fees charged to client #4.</p> <p>3. Client #5's bank statement dated 3/16/23 indicated the following: 2/21/23 - [Name] Pharmacy, Medicine Non-Prescription, \$5.02</p> <p>Review of client #5's financial records indicated the facility failed to address the \$5.02 pharmacy fees charged to client #5.</p> <p>An interview with the Qualified Intellectual Disabilities Professional (QIDP) was conducted on 3/21/23 at 12:37 pm. The QIDP stated, "Medications are covered by Medicaid. Any out of pocket for medication, Mosaic is responsible."</p> <p>An interview with the Quality Coordinator (QC) was conducted on 3/21/23 at 2:49 pm. The QC stated, "Individuals should not paying for their medications."</p>						

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W 0159  Bldg. 00	<p>C. The governing body failed to ensure clients #1, #2, #3, #4 and #5 received a continuous and aggressive active treatment program. Please see W196.</p> <p>D. The governing body failed to ensure a sanitary environment was maintained in the home for clients #1, #2, #3, #4 and #5. Please see W454.</p> <p>9-3-1(a)</p> <p>483.430(a)</p> <p>QIDP</p> <p>Each client's active treatment program must be integrated, coordinated and monitored by a qualified intellectual disability professional who-</p> <p>Based on observation, record review and interview for 3 of 3 sampled clients (#1, #2 and #3) plus 2 additional clients (#4 and #5), the Qualified Intellectual Disability Professional (QIDP) failed to effectively integrate, coordinate and monitor clients #1, #2, #3, #4 and #5's active treatment programs. The QIDP failed to develop, implement, and monitor aggressive active treatment programs to meet clients #1, #2, #3, #4 and #5's specific needs, and to ensure clients #1, #2, #3, #4 and #5's formal training objectives were implemented at all opportunities. The QIDP failed to update a Comprehensive Functional Assessment (CFA) for client #1 and active treatment schedules for clients #1, #2, #3, #4 and #5. The QIDP failed to ensure Human Rights Committee (HRC) and guardian consent were obtained for restrictive programs for clients #1 and #2.</p> <p>Findings include:</p> <p>1. Client #1's record was reviewed on 3/16/23 at</p>			W 0159	<p>Mosaic will ensure each client's active treatment program and comprehensive functional assessment will be integrated, coordinated, and monitored by the QIDP by assessing information from Therap quarterly. An active treatment schedule will be edited for the home needs and be monitored by the QIDP. All plans will be reviewed and monitored by the QIDP.</p> <p>The QIDP and Quality review team will be looking at each home to ensure these items are in place</p> <p>The AD and QIDP will be monitoring active treatments schedules to ensure engagement is offered.</p>		04/29/2023



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	<p>11:00 am. Client #1's ISP (Individual Support Plan) dated 8/1/22 indicated the following goals: "Finance, Medication administration, Domestic Tasks and Behavior Tracking." There was no documentation to show the QIDP reviewed client #1's goals in December 2022, January 2023 and February 2023.</p> <p>Client #2's record was reviewed on 3/16/23 at 12:25 pm. Client #2's ISP dated 10/25/22 indicated the following goals: "Body Checks, Bathing, Medication Administration, Brushing Teeth, Finance, Communication, Dressing and Behavior Tracking." There was no documentation to show the QIDP reviewed client #2's goals in December 2022, January 2023 and February 2023.</p> <p>Client #3's record was reviewed on 3/16/23 at 11:49 am. Client #3's ISP dated 6/15/22 indicated the following goals: "Hygiene, Finances and Behavior Tracking." There was no documentation to show the QIDP reviewed client #3's goals in December 2022, January 2023 and February 2023.</p> <p>2. The QIDP failed to implement a consistent, aggressive active program for clients #1, #2, #3, #4 and #5. Please see W196.</p> <p>3. The QIDP failed to ensure staff implemented clients #1, #2, #3, #4 and #5's program plans as written. Please see W249.</p> <p>4. The QIDP failed to ensure active treatment schedules were updated for clients #1, #2, #3, #4 and #5. Please see W250.</p> <p>5. The QIDP failed to update a CFA for client #1 after his admission to the hospital and return to</p>						

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W 0195  Bldg. 00	<p>the group home. Please see W259.</p> <p>6. The QIDP failed to ensure the Human Rights Committee (HRC) reviewed and approved restrictive programs for clients #1 and #2. Please see W262.</p> <p>7. The QIDP failed to ensure written informed consent from the the clients' legal representatives prior to implementation of restrictive programs for clients #1 and #2. Please see W263.</p> <p>9-3-3(a)</p> <p>483.440</p> <p>ACTIVE TREATMENT SERVICES</p> <p>The facility must ensure that specific active treatment services requirements are met.</p> <p>Based on observation, record review, and interview for 3 of 3 sampled clients (#1, #2 and #3), and 2 additional clients (#4 and #5), the facility failed to meet the Condition of Participation: Active Treatment Services. The facility failed to ensure clients #1, #2, #3, #4 and #5 received a consistent, aggressive active treatment program. The facility failed to ensure staff implemented the clients' program plans. The facility failed to ensure active treatment schedules were updated for clients #1, #2, #3, #4 and #5. The facility failed to ensure client #1's comprehensive functional assessment (CFA) was updated when client #1 returned home from the hospital. The facility failed to ensure the Human Rights Committee (HRC) reviewed and approved restrictive programs for clients #1 and #2. The facility to ensure written informed consent from the the clients' legal representatives prior to implementation of restrictive programs for clients #1 and #2.</p>			W 0195	<p>A. What corrective action(s) will be accomplished for these residents found to have been affected by the deficient practice;</p> <p>1.Mosaic will implement and ensure each client's specific active treatment services requirements are met.</p> <p>B. How the facility will identify other residents having the potential to be affected by the same deficient practice, and what corrective action will be taken;</p> <p>1.This deficiency has the potential to affect all residents. Mosaic will implement and ensure each client's specific active treatment services requirements are met.</p> <p>C. THE PROCEDURE FOR</p>		04/28/2023

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STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER  15G676		X2) MULTIPLE CONSTRUCTION A. BUILDING 00 B. WING		X3) DATE SURVEY COMPLETED 03/28/2023	
NAME OF PROVIDER OR SUPPLIER  MOSAIC				STREET ADDRESS, CITY, STATE, ZIP COD 1703 WOODMONT DR SOUTH BEND, IN 46614			
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W 0196  Bldg. 00	<p>Findings include:</p> <ol style="list-style-type: none"> <li>1. The facility failed to ensure clients #1, #2, #3, #4 and #5 received a continuous, aggressive and consistent active treatment program including the implementation of the clients' program plans. Please see W196.</li> <li>2. The facility failed to ensure clients #1, #2 and #3's formal training objectives were implemented during formal and informal training opportunities and clients A and C's Behavior Support Plans were implemented as written. Please see W249.</li> <li>3. The facility failed to ensure active treatment schedules were updated for clients #1, #2, #3, #4 and #5.</li> <li>4. The facility failed to ensure client #1's comprehensive functional assessment (CFA) was updated when client #1 returned home from the hospital. Please see W259.</li> <li>5. The facility failed to ensure the Human Rights Committee (HRC) reviewed and approved restrictive programs for clients #1 and #2. Please see W262.</li> <li>6. The facility to ensure written informed consent from the the clients' legal representatives prior to implementation of restrictive programs for clients #1 and #2. Please see W263.</li> </ol> <p>9-3-4(a)</p> <p>483.440(a)(1) ACTIVE TREATMENT Each client must receive a continuous active treatment program, which includes</p>				<p>IMPLEMENTING THE CORRECTIVE ACTION(S):</p> <p>1.Mosaic will implement and ensure each client's specific active treatment services requirements are met.</p> <p>D. What measures will be put into place or what systemic changes the facility will make to ensure that the deficient practice does not recur; How the corrective action(s) will be monitored to ensure the deficient practice will not recur, i.e., what quality assurance program will be put into place;</p> <p>1.Mosaic's team consisting of direct support supervisors, the quality coordinator, the associate director, and the quality intellectual disabilities professional will do daily checks to ensure the treatment plans are being implemented.</p> <p>E. THE TITLE OF THE PERSON RESPONSIBLE FOR ENSURING THE FACILITY REMAINS IN COMPLIANCE WITH THE CITED DEFICIENCY: (Do not put the staff names).</p> <p>Administrator</p>		

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	<p>aggressive, consistent implementation of a program of specialized and generic training, treatment, health services and related services described in this subpart, that is directed toward:</p> <p>(i) The acquisition of the behaviors necessary for the client to function with as much self determination and independence as possible; and</p> <p>(ii) The prevention or deceleration of regression or loss of current optimal functional status.</p> <p>Based on observation, record review and interview for 3 of 3 sampled clients (#1, #2 and #3), plus 2 additional clients (#4 and #5), the facility failed to ensure clients #1, #2, #3, #4 and #5 received a continuous and aggressive active treatment program.</p> <p>Findings include:</p> <p>Observations were conducted at the group home on 3/15/23 from 3:31 pm to 5:45 pm, 3/16/23 from 6:00 am to 9:52 am, 3/16/23 from 1:33 pm to 3:15 pm and 3/17/23 from 10:30 am to 12:15 pm. Clients #1, #2, #3, #4 and #5 were present during the observation periods.</p> <p>1. On 3/15/23 at 3:41 pm client #4 was sitting in his wheelchair in front of the front door looking outside. Client #5 was sitting at dining room table writing on paper and talking.</p> <p>At 3:45 pm client #5 walked into the kitchen and asked for a snack. He received a fruit bar from staff #1. Client #5 took the fruit bar to his room to eat it.</p> <p>At 3:55 pm client #2 was in his bedroom bouncing on his Yoga ball.</p> <p>At 4:23 pm client #4 in front of the front door</p>			W 0196	<p>A. What corrective action(s) will be accomplished for these residents found to have been affected by the deficient practice;</p> <p>1. Mosaic will implement and ensure each client's specific active treatment services requirements are met.</p> <p>B. How the facility will identify other residents having the potential to be affected by the same deficient practice, and what corrective action will be taken;</p> <p>1. This deficiency has the potential to affect all residents. Mosaic will implement and ensure each client's specific active treatment services requirements are met.</p> <p>C. THE PROCEDURE FOR IMPLEMENTING THE CORRECTIVE ACTION(S):</p> <p>1. Mosaic will implement and ensure each client's specific active treatment services requirements are met.</p>		04/28/2023

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	<p>sitting in his wheelchair looking outside. At 4:27 pm staff #1 asked client #1 if he needed to use the restroom. Client #1 said, "no".</p> <p>At 4:28 pm staff #1 gave client #3 a 16-ounce glass of iced tea. Client #3 drank it all in one sitting.</p> <p>At 4:29 pm staff #1 asked client #2 if he wanted a drink. Staff #1 gave client #2 a glass of tea. Client #2 drank it all in the kitchen and then walked into the laundry room.</p> <p>At 4:34 pm staff #3 arrived with bags from the grocery store. No clients assisted with carrying in the groceries, unpacking or putting them away.</p> <p>At 4:39 pm staff #3 washed his hands and began making dinner. Client #2 was walking around the house.</p> <p>At 5:06 pm client #4 was sitting in his wheelchair in front of the front door looking outside and falling asleep. Client #3 was sitting at the dining room table writing on paper and talking. Client #1 was sitting with staff #2 playing Uno. Staff #1 was sitting in living room. Staff #3 went around the house to every client and asked them what vegetables they wanted for dinner. Client #5 stated, "I want peanut butter."</p> <p>At 5:14 pm client #2 walked into the kitchen and staff #3 told client #2 the stove was hot and he needed to stay away from it.</p> <p>At 5:32 pm staff #3 asked each individual what drink mix they wanted in their water. Staff #3 put a drink mix packet in each water bottle and shook it up for them. Client #1's drink was mixed with thick-it by staff #3.</p> <p>At 5:46 pm staff #3 fixed a plate of sausage, pasta and broccoli. Staff #3 cut up all of the food and then gave it to client #3. Client #3 sat on a stool at the counter in the kitchen to eat.</p> <p>At 5:51 pm staff #3 fixed another plate with sausage, pasta and mixed vegetables. Staff #2 blended vegetables in a blender for clients #1 and</p>				<p>D. What measures will be put into place or what systemic changes the facility will make to ensure that the deficient practice does not recur; How the corrective action(s) will be monitored to ensure the deficient practice will not recur, i.e., what quality assurance program will be put into place;</p> <p>1. Mosaic's team consisting of direct support supervisors, the quality coordinator, the associate director, and the quality intellectual disabilities professional will do daily checks to ensure the treatment plans are being implemented.</p> <p>E. THE TITLE OF THE PERSON RESPONSIBLE FOR ENSURING THE FACILITY REMAINS IN COMPLIANCE WITH THE CITED DEFICIENCY: (Do not put the staff names).</p> <p>Administrator</p>		

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	<p>#4. Client #2 sat at the dining room table and staff #3 brought out his plate of food and set it down on the table.</p> <p>At 5:58 pm staff #3 made another plate of sausage, pasta and mixed vegetables. Client #5 sat at the table. Staff #3 brought client #5 his plate of food. Client #5 pushed plate away and stated, "Peanut Butter." Staff #3 took the plate away. Staff #1 brought the plate and offered it to client #5. Client #5 pushed it away again.</p> <p>At 6:02 pm staff #1, #2 and #3 were in the kitchen. Client #2 was sitting at the table eating his plate of food.</p> <p>At 6:04 pm staff #2 brought a plate of pureed sausage, pasta and mixed vegetables to client #1. Staff #1 brought a plate of pureed sausage, pasta and mixed vegetables for client #4. Staff #1 began feeding client #4 by the front door.</p> <p>On 3/16/23 at 6:00 am client #4 was sitting in his wheelchair by the front door. Client #3 was sitting at the dining room table writing on his paper and talking.</p> <p>At 6:07 am staff #2 went into the bathroom with client #1 and gave him a shower.</p> <p>At 6:14 am client #5 got up and poured himself a bowl of cereal and milk. Client #5 spilled milk on the kitchen counter. Client #5 took his bowl of cereal to the dining room table but then walked back into the kitchen with his bowl of cereal.</p> <p>At 6:31 pm client #5 was standing at kitchen counter and drinking the milk out of the bowl by tipping up the bowl. He was spilling milk and cereal on the floor and counter.</p> <p>At 6:56 pm client #4 was in his wheelchair sitting by the front door. Client #5 took his bowl to the kitchen and put it in the sink. Client #3 was sitting at the table writing on his paper.</p> <p>At 7:05 am staff #2 was in the living room folding laundry and then put it away.</p>						

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	<p>At 7:09 am client #1 was sitting in the recliner in the living room. Client #2 was in his bedroom and got up and went into the bathroom. There was no soap or shampoo in the bathroom when client #2 was taking his shower. Client #3 was at the dining room table writing and talking. Client #4 was sitting in his wheelchair by the front door and client #5 was in his bedroom.</p> <p>At 7:18 am client #3 yelled out, "I am f----- hungry." Staff #2 told him he would get breakfast soon. Client #3 got up and went into the kitchen and got a glass of water and drank the whole glass.</p> <p>At 7:48 am client #1 was sitting in a recliner in the living room. Client #2 took his dirty clothes to laundry room. Client #3 was sitting at the dining room table writing in his tablet and talking. Client #4 was sitting in his wheelchair in front of the front door. Client #5 was in his bedroom.</p> <p>At 8:05 am client #5 walked out of his bedroom and looked out the window in the kitchen then went back to his room. Client #4 was sitting in his wheelchair in front of the front door. Client #3 went into the kitchen and got a glass of water and drank it. Staff #2 was sitting in the living room.</p> <p>At 8:16 am client #3 walked outside and got the mail from the mailbox. Staff #2 followed him and then walked back inside with him. Staff #4 arrived to the house. Staff #4 assisted client #1 into his wheelchair and took him into the medication room for his medication.</p> <p>At 8:30 am the House Manager (HM) arrived. The HM went into the kitchen and began fixing breakfast. The HM made scrambled eggs, sausage and pancakes. Client #2 was walking around the house. Client #1 was sitting in his wheelchair in the living room. Client #4 was in his wheelchair by the front door. Client #5 was in his bedroom.</p> <p>At 9:00 am client #2 walked up to client #3 at the</p>						

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	<p>dining room table. Client #3 used his hand to motion client #2 to move away from him. Client #2 walked away from him.</p> <p>At 9:10 am staff #4 repositioned client #1 in his wheelchair. Staff #4 placed a small red pillow on his right side on his right arm.</p> <p>At 9:11 am client #3 was yelling curse words and walked outside. Staff #4 followed him and client #3 came back inside.</p> <p>At 9:18 am client #3 left with a skills coach from [Mental Health facility]. HM told client #3 his breakfast was ready. He stated he would eat it when he came back home.</p> <p>At 9:22 am The HM put pancakes and syrup, sausage links and scrambled eggs on two different plates and took the plates to the table. The HM called for client #2 and client #5 to come to table to eat. Client #5 picked up sausage off his plate and handed it to staff #4. Staff #4 took the sausage to the kitchen.</p> <p>At 9:30 am client #2 finished his food and took his plate to the kitchen. The HM made a glass of chocolate milk for client #5. HM was blending client #1 and #4's food.</p> <p>At 9:39 am the HM brought plates of food to the table for clients #1 and #4. Staff #4 was assisting client #4 to eat and the HM assisted client #1 to eat. They had pureed pancakes and scrambled eggs. The HM stated she messed up the sausage by putting too much water in it. The HM gave client #1 a glass of protein shake.</p> <p>On 3/16/23 at 1:33 pm client #4 was being pushed around the house in his wheelchair by a family friend. Client #1 was sleeping in the recliner in the living room. Client #2 was walking around the house. Client #3 was sitting at the dining room table writing on his paper. He was saying, "This is not a wh--- house, it is a group home." Staff did not respond to him. Client #5 was in his bedroom</p>						



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	<p>lying in his bed. Staff #1 was standing in the kitchen. Staff #4 was sitting in the living room. At 1:59 pm client #4's friend left the house. Client #4 was sitting in front of the front door. Client #3 was sitting at the dining room table writing on his paper and talking. Client #2 walked around the house and then went to his bedroom. Client #5 was in his bedroom. Staff #1 and #4 were sitting in the living room.</p> <p>At 2:05 pm staff #4 put away laundry. Staff #4 then asked client #5 to come to the medication room and she administered his medications. Client #1 was sitting in the recliner. Client #3 was sitting at the dining room table writing and talking. Client #2 was walking around the house and going in and out of his room.</p> <p>At 2:19 pm staff #4 was on the computer in the living room. Staff #1 was sitting in the living room. Client #1 was in the recliner sleeping. Client #2 was walking around the house. Client #3 was sitting at the dining room table writing and talking. Client #4 was sitting in his wheelchair by the front door.</p> <p>At 2:31 pm staff #1 went into the kitchen and was washing the dishes. Staff #4 was folding the laundry. Client #1 was sitting in the recliner in the living room. Client #2 was in his bedroom. Client #3 was sitting at dining room table writing and talking. Client #4 was in his wheelchair sitting in front of the front door. Client #5 was in his room.</p> <p>At 2:51 pm staff #1 was talking on his cell phone in the kitchen and starting to prepare dinner. Client #1 was sleeping in a recliner in the living room. Client #2 was walking around the house. Client #3 was sitting at the dining room table writing on his paper and talking. Client #4 was in his wheelchair sitting by the front door. Client #5 was in his bedroom.</p> <p>On 3/17/23 at 10:30 am client #4 was sitting in</p>						

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	<p>front of the door. Client #1 was sitting in a recliner with a pillow behind his head. Client #3 was sitting on a chair by the kitchen counter. Staff #1 was washing the dishes. Staff #5 was sitting on the couch in the living room. Client #3 was walking around the house. Client #5 was in his bedroom lying on his bed.</p> <p>At 10:52 am staff #5 carried blankets to client #3's bedroom. Staff #5 asked client #3 to come assist with making his bed. He did not respond. Staff #5 made his bed for him. Client #2 carried other clean laundry to his room. Staff #5 went into client #2's bedroom and assisted with folding his clothes. Client #1 was in a recliner sleeping. Client #4 was sitting in his wheelchair in front of the front glass door. Client #5 was in his bedroom.</p> <p>At 11:28 am client #3 stated he had not been doing much today.</p> <p>At 11:29 am staff #1 began preparing lunch.</p> <p>At 11:31 am staff #1 and staff #5 took client #4 to his bedroom to be changed.</p> <p>At 11:44 am client #2 was sitting in a chair in the living room. Client #3 was sitting at the table with his paper and was talking. Client #4 was sitting in his wheelchair at the front door. Client #5 was in his bedroom.</p> <p>An interview with staff #5 was conducted on 3/17/23 at 10:36 am. Staff #5 stated, "It's been a while since they have had a day program." Staff #5 indicated during the day they watch television, do laundry, play Uno and sometimes the individuals will fall asleep for a little while.</p> <p>An interview with the HM was conducted on 3/17/23 at 11:59 am. The HM stated, "The individuals were going to day program but that just recently closed. We are trying to get double staffed to do activities and take them out on outings. We can't do anything with being short</p>						

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	<p>staffed."</p> <p>Throughout the observation periods, staff did not engage clients in meaningful activities. Clients #1, #2, #3, #4 and #5 were not encouraged to participate in any activities throughout the day.</p> <p>1. Client #1's record was reviewed on 3/16/23 at 11:00 am. Client #1's ISP (Individual Support Plan) dated 8/1/22 indicated the following:</p> <p>- "Likes 1:1 (one on one) attention &amp; likes to smile; he is friendly &amp; enjoys watching TV. He likes to play UNO."</p> <p>- "Goal/Service: Finance: [Client #1] will purchase an item in the community when he goes shopping with 3 or less verbal prompts 100% of all trials in one month for 3 consecutive months or until this objective has been met."</p> <p>- "Goal/Service: Medication Administration: [Client #1], will learn about his medications starting with Calcium and Baclofen with three or less verbal prompts 100% of all trials in one month for three consecutive months or until this objective has been mastered."</p> <p>- "Goal/Service: Domestic Tasks: Given 1 or less verbal prompts, [client #1] will complete two domestic tasks 100% of all trials in one month for 3 consecutive months or until this objective has been completed."</p> <p>Client #1's record did not indicate documentation of QIDP (Qualified Intellectual Disabilities Professional) monthly review, monitoring or integration of client #1's active treatment program from December 2022 to February 2023.</p>						

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	<p>Client #1's Active Treatment Schedule 9-2022 indicated the following:</p> <p>Regarding Monday through Friday</p> <p>-6:30 am: Meds (Medication)</p> <p>7:30 am: Shower, Breakfast, assist with kitchen clean up.</p> <p>8:00 am: Brush Teeth, make bed, Put any house laundry away.</p> <p>8:30 am: Get Ready, Leave for Day Program</p> <p>9:30 am- 2:30 pm: Day Program</p> <p>3:30 pm: Get home from day program, put lunch bags away.</p> <p>4:00 pm: Relax.</p> <p>4:30 pm: Listen to music of choice, assist in making the drink for dinner, making the dessert, assist in setting the table.</p> <p>5:00 pm: Dinner, Put dishes in dishwasher.</p> <p>5:30 pm: Kitchen clean-up</p> <p>6:00 pm: Pack Lunch</p> <p>6:30 pm: Take trash out.</p> <p>7:00 pm: Assist in house laundry.</p> <p>7:30 pm: Assist in putting the house laundry away.</p> <p>8:30 pm: Get ready for bed, Brush Teeth</p> <p>9:00 pm: Meds</p> <p>9:30 pm: Bed."</p> <p>Regarding non-day program days/Saturday and Sunday</p> <p>-6:30 am: Sleep</p> <p>7:30 am: Meds, Breakfast, assist with kitchen clean up.</p> <p>8:00 am: Bath and Brush Teeth</p> <p>8:30 am: Make bed, Put any house laundry away.</p> <p>9:30 am: Clean and tidy bedroom</p> <p>10:00 am: Change his bed sheets.</p> <p>10:30 am: Assist in preparing lunch.</p> <p>11:00 am: Relax.</p> <p>11:30 am: Lunch time</p>						

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STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  15G676		X2) MULTIPLE CONSTRUCTION A. BUILDING 00 B. WING		X3) DATE SURVEY COMPLETED 03/28/2023	
NAME OF PROVIDER OR SUPPLIER  MOSAIC				STREET ADDRESS, CITY, STATE, ZIP CODE 1703 WOODMONT DR SOUTH BEND, IN 46614			
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	<p>12:00 pm: Lunch time clean up. 12:30 pm: Quick nap 1:00 pm -3:00 pm: Movie Day!/ or game day! 3:30 pm: Snacks! 4:00 pm: Relax. 4:30 pm: Assist in making dinner. 5:00 pm: Dinner, Put dishes in dishwasher. 5:30 pm: Kitchen clean-up 6:00 pm: Pack Lunch on Sunday 6:30 pm: Sensory Activity/ Laundry 7:00 pm: Leisure Activity/ Laundry 7:30 pm: Leisure activity of choice/ Laundry 8:30 pm: Get ready for bed, Brush Teeth 9:00 pm: Meds 9:30 pm: Bed."</p> <p>Client #1's BSP dated 8/12/21 indicated the following: ...Target Behaviors: Physical aggression...Invasion of boundaries: ...The targeted behaviors are most likely to occur when [client #1] does not want to complete a task asked of him. When staff will not do something for [client #1] that they know he can do. When he has to share household items such as the television remote. When having to watch television with his housemates. When he has any extended time off from day program. ... Proactive Strategies: Staff should engage [client #1] in a variety of activity (sic) while working with him and run his goals, including his communication goals. [Client #1] will almost never turn down an activity when he has 1:1 staffing. ..."</p> <p>2. Client #2's records were reviewed on 3/16/23 at 12:45 pm. Client #2's ISP dated 10/25/22 indicated the following: "What's Most Important to the Individual: Going to his parents' house on the weekends. Having a</p>						

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	<p>yoga ball to bounce on. ... Goals:</p> <p>Bathing: Given 5 or less verbal prompts, [client #2] will bathe daily 100% of all trials per month for 3 consecutive months or until this objective has been mastered.</p> <p>Medication Administration: Given 1 verbal prompt or less, [client #2] will take his medications as prescribed by his physician 100% of all trials per month for 3 consecutive months or until this objective has been mastered.</p> <p>Brushing Teeth: With three or less verbal prompts, [client #2] will brush his teeth thoroughly for 1 minute after a meal 100% of all trials per month for 3 consecutive months or until this objective has been mastered.</p> <p>Finance: With three or less verbal prompts, [client #2] will purchase an item(s) 100% of trials per month for 3 consecutive months or until this objective has been mastered.</p> <p>Communication: [Client #2] will indicate his needs by answering yes and no questions 100% of all trials per month for 3 consecutive months or until this objective has been mastered.</p> <p>Dressing: With three or less verbal prompts, [client #2] will put on clean clothing after he takes a bath each day with 90% of trials per month for three consecutive months or until this objective is mastered.</p> <p>Client #2's Active Treatment Schedule 9-2022 indicated the following:</p> <p>Regarding Monday through Friday</p> <p>-6:30 am: Meds (Medication)</p> <p>7:30 am: Shower, Breakfast, assist with kitchen clean up.</p> <p>8:00 am: Brush Teeth, make bed, Put any house laundry away.</p> <p>8:30 am: Get Ready, Leave for Day Program</p> <p>9:30 am- 2:30 pm: Day Program</p>						

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	<p>3:30 pm: Get home from day program, put lunch bags away.</p> <p>4:00 pm: Relax.</p> <p>4:30 pm: Listen to music of choice, assist in making the drink for dinner, making the dessert, assist in setting the table.</p> <p>5:00 pm: Dinner, Put dishes in dishwasher.</p> <p>5:30 pm: Kitchen clean-up</p> <p>6:00 pm: Pack Lunch</p> <p>6:30 pm: Take trash out.</p> <p>7:00 pm: Assist in house laundry.</p> <p>7:30 pm: Assist in putting the house laundry away.</p> <p>8:30 pm: Get ready for bed, Brush Teeth</p> <p>9:00 pm: Meds</p> <p>9:30 pm: Bed."</p> <p>Regarding non-day program days/Saturday and Sunday</p> <p>-6:30 am: Sleep</p> <p>7:30 am: Meds, Breakfast, assist with kitchen clean up.</p> <p>8:00 am: Bath and Brush Teeth</p> <p>8:30 am: Make bed, Put any house laundry away.</p> <p>9:30 am: Clean and tidy bedroom</p> <p>10:00 am: Change his bed sheets.</p> <p>10:30 am: Assist in preparing lunch.</p> <p>11:00 am: Relax.</p> <p>11:30 am: Lunch time</p> <p>12:00 pm: Lunch time clean up.</p> <p>12:30 pm: Quick nap</p> <p>1:00 pm -3:00 pm: Movie Day!/ or game day!</p> <p>3:30 pm: Snacks!</p> <p>4:00 pm: Relax.</p> <p>4:30 pm: Assist in making dinner.</p> <p>5:00 pm: Dinner, Put dishes in dishwasher.</p> <p>5:30 pm: Kitchen clean-up</p> <p>6:00 pm: Pack Lunch on Sunday</p> <p>6:30 pm: Sensory Activity/ Laundry</p> <p>7:00 pm: Leisure Activity/ Laundry</p>						

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	<p>7:30 pm: Leisure activity of choice/ Laundry 8:30 pm: Get ready for bed, Brush Teeth 9:00 pm: Meds 9:30 pm: Bed."</p> <p>Client #2's BSP dated 10/22 indicated the following: ...Target Behaviors: Property Destruction...Stuffing the toilet with objects...Self-induced Vomiting...Refusal to eat...Purposeful urinating on the floor or objects...Purposeful throwing clothing, bedding and other items away... Common Triggers: These are things that staff should avoid as they likely will increase the chances that, [client #2] will have negative behaviors: Change of daily schedule, when too many requests are asked of him, when staff do not respond to him in a timely manner, Changes in staff or his expected routine at home or at day program, Transition (like from parents home back to home- or from community back to day program), Boredom-or not staying engaged in meaningful activity, Interacting or making demands of him when he is already angry or anxious, Loud, busy environments, Triggers words or phrases: 'give me', 'back', 'excuse me', and 'stay home', Being ignored when he is trying to communicate. ..."</p> <p>Client #2's record did not indicate documentation of goal data tracking. Client #2's record did not indicate documentation of QIDP's (Qualified Intellectual Disabilities Professional) monthly review, monitoring or integration of client #2's active treatment program from December 2022 to February 2023.</p> <p>3. Client #3's records were reviewed on 3/16/23 at 11:49 am. Client #3's ISP program dated 9/26/22 indicated</p>						



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	<p>the following:</p> <p>"Goals: Personal Hygiene: [Client #3] will be assisted with improving his personal hygiene and cleanliness.</p> <p>Finances: With three or less verbal prompts, [client #3] will purchase an item in the community 80% of all trials per month for three consecutive months or until this objective has been mastered."</p> <p>Client #3's Active Treatment Schedule 9-2022 indicated the following:</p> <p>Regarding Monday through Friday</p> <p>-6:30 am: Meds (Medication)</p> <p>7:30 am: Shower, Breakfast, assist with kitchen clean up.</p> <p>8:00 am: Brush Teeth, make bed, Put any house laundry away.</p> <p>8:30 am: Get Ready, Leave for Day Program</p> <p>9:30 am- 2:30 pm: Day Program</p> <p>3:30 pm: Get home from day program, put lunch bags away.</p> <p>4:00 pm: Relax.</p> <p>4:30 pm: Listen to music of choice, assist in making the drink for dinner, making the dessert, assist in setting the table.</p> <p>5:00 pm: Dinner, Put dishes in dishwasher.</p> <p>5:30 pm: Kitchen clean-up</p> <p>6:00 pm: Pack Lunch</p> <p>6:30 pm: Take trash out.</p> <p>7:00 pm: Assist in house laundry.</p> <p>7:30 pm: Assist in putting the house laundry away.</p> <p>8:30 pm: Get ready for bed, Brush Teeth</p> <p>9:00 pm: Meds</p> <p>9:30 pm: Bed."</p> <p>Regarding non-day program days/Saturday and Sunday</p> <p>-6:30 am: Sleep</p>						

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	<p>7:30 am: Meds, Breakfast, assist with kitchen clean up.</p> <p>8:00 am: Bath and Brush Teeth</p> <p>8:30 am: Make bed, Put any house laundry away.</p> <p>9:30 am: Clean and tidy bedroom</p> <p>10:00 am: Change his bed sheets.</p> <p>10:30 am: Assist in preparing lunch.</p> <p>11:00 am: Relax.</p> <p>11:30 am: Lunch time</p> <p>12:00 pm: Lunch time clean up.</p> <p>12:30 pm: Quick nap</p> <p>1:00 pm -3:00 pm: Movie Day!/ or game day!</p> <p>3:30 pm: Snacks!</p> <p>4:00 pm: Relax.</p> <p>4:30 pm: Assist in making dinner.</p> <p>5:00 pm: Dinner, Put dishes in dishwasher.</p> <p>5:30 pm: Kitchen clean-up</p> <p>6:00 pm: Pack Lunch on Sunday</p> <p>6:30 pm: Sensory Activity/ Laundry</p> <p>7:00 pm: Leisure Activity/ Laundry</p> <p>7:30 pm: Leisure activity of choice/ Laundry</p> <p>8:30 pm: Get ready for bed, Brush Teeth</p> <p>9:00 pm: Meds</p> <p>9:30 pm: Bed."</p> <p>Client #3's BSP dated 5/22 indicated the following: "...Target Behaviors: Threatening behavior: verbal or non-verbal...Physical Aggression... Inappropriate Comments...Overeating food or liquids...Wandering from current setting without informing staff...Urinating in his room or spreading feces on any surfaces in the bathroom. ...The targeted behaviors are most likely to occur during times of high stress, when being asked to do something that he does not want to do, when something is not available to use, when others provoke him, when not given a warning about a change in routine, and when not allowed a lot of choice in his day. Behaviors are more likely when: [client #3] is without a structured activity, [client</p>						

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	<p>#3] is agitated, [client #3] is anxious, [client #3's] routine is changed without letting him know in advance, When [client #3] does not want to do something that is asked of him, [client #3] is tired or over stimulated or wants more attention, When [client #3] feels threatened or afraid of what to do, or does not know what is expected of him."</p> <p>Client #3's record did not indicate documentation of goal data tracking. Client #3's record did not indicate documentation of QIDP's (Qualified Intellectual Disabilities Professional) monthly review, monitoring or integration of client #3's active treatment program from December 2022 to February 2023.</p> <p>4. Client #4's record was reviewed on 3/16/23 at 11:00 am. Client #4's ISP (Individual Support Plan) dated 1/1/23 indicated the following:</p> <p>- "Likes going to the mall, seeing [family friend] and going to church. ..."</p> <p>- "Goal/Service: Medication Administration: With unlimited physical assistance, [client #4] will assist with his medication administration 50% of all trials per month, for 3 consecutive months of until this goal is achieved."</p> <p>- "Goal/Service: Community Outing: [Client #4], will be more involved in community activities."</p> <p>Client #4's record did not indicate documentation of QIDP's (Qualified Intellectual Disabilities Professional) monthly review, monitoring or integration of client #4's active treatment program from December 2022 to February 2023.</p> <p>Client #4's Active Treatment Schedule 9-2022 indicated the following:</p>						

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	<p>Regarding Monday through Friday</p> <p>-6:30 am: Meds (Medication)</p> <p>7:30 am: Shower, Breakfast, Assist with clearing table.</p> <p>8:00 am: Brush Teeth, Make bed.</p> <p>8:30 am: Get Ready, Leave for Day Program</p> <p>9:30 am- 2:30 pm: Day Program</p> <p>3:30 pm: Get home from day program, put lunch bags away.</p> <p>4:00 pm: Relax.</p> <p>4:30 pm: Listen to music of choice, Range of Motion, make in (sic) making the dessert, assist in making dinner, assist in setting the table.</p> <p>5:00 pm: Dinner, Put dishes in dishwasher.</p> <p>5:30 pm: Kitchen clean-up</p> <p>6:00 pm: Pack Lunch</p> <p>6:30 pm: Time on the patio, Sensory activity, take trash out, Assist taking the trash out.</p> <p>7:00 pm: Assist in house laundry, Leisure activity of choice.</p> <p>7:30 pm: Get ready for bed, Brush Teeth</p> <p>8:00 pm: Meds</p> <p>8:30 pm: Bed."</p> <p>Regarding non-day program days/Saturday and Sunday</p> <p>-6:30 am: Sleep</p> <p>7:30 am: Meds, Breakfast, assist with kitchen clean up.</p> <p>8:00 am: Bath and Brush Teeth</p> <p>8:30 am: Make bed, Put any house laundry away.</p> <p>9:30 am: Clean and tidy bedroom</p> <p>10:00 am: Change his bed sheets.</p> <p>10:30 am: Assist in preparing lunch.</p> <p>11:00 am: Relax.</p> <p>11:30 am: Lunch time</p> <p>12:00 pm: Lunch time clean up.</p> <p>12:30 pm: Quick nap</p> <p>1:00 pm -3:00 pm: Movie Day!/ or game day!</p>						

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	<p>3:30 pm: Snacks!</p> <p>4:00 pm: Relax.</p> <p>4:30 pm: Assist in making dinner, walk in neighborhood.</p> <p>5:00 pm: Dinner, Put dishes in sink.</p> <p>5:30 pm: Kitchen clean-up</p> <p>6:00 pm: Pack Lunch on Sunday</p> <p>6:30 pm: Sensory Activity/ Laundry</p> <p>7:00 pm: Leisure Activity/ Laundry</p> <p>7:30 pm: Get ready for bed, Brush Teeth</p> <p>8:00 pm: Meds</p> <p>8:30 pm: Bed."</p> <p>Client #4's record did not indicate documentation of goal data tracking. Client #4's record did not indicate documentation of QIDP's (Qualified Intellectual Disabilities Professional) monthly review, monitoring or integration of client #4's active treatment program from December 2022 to February 2023.</p> <p>5. Client #5's record was reviewed on 3/17/23 at 9:00 am. Client #5's ISP dated 9/26/22 indicated the following:</p> <p>"Likes to go on vacation, movies and attending church functions."</p> <p>-"Goal/Service: Medication Administration: With 4 or less verbal prompts, [client #5] will use his prescribed mouth rinse twice a day at 50% accuracy for 3 consecutive months."</p> <p>Client #5's record did not indicate documentation of QIDP's (Qualified Intellectual Disabilities Professional) monthly review, monitoring or integration of client #5's active treatment program from December 2022 to February 2023.</p> <p>Client #5's Active Treatment Schedule 9-2022</p>						

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	<p>indicated the following:</p> <p>Regarding Monday through Friday</p> <p>-6:30 am: Meds (Medication)</p> <p>7:30 am: Shower, Breakfast, assist with kitchen clean up.</p> <p>8:00 am: Brush Teeth, make bed, Put any house laundry away.</p> <p>8:30 am: Get Ready, Leave for Day Program</p> <p>9:30 am- 2:30 pm: Day Program</p> <p>3:30 pm: Get home from day program, put lunch bags away.</p> <p>4:00 pm: Relax.</p> <p>4:30 pm: Listen to music of choice, assist in making the drink for dinner, making the dessert, assist in setting the table.</p> <p>5:00 pm: Dinner, Put dishes in dishwasher.</p> <p>5:30 pm: Kitchen clean-up</p> <p>6:00 pm: Pack Lunch</p> <p>6:30 pm: Take trash out, Sensory Activity, assist in taking out trash.</p> <p>7:00 pm: Assist in house laundry, leisure activity of choice.</p> <p>7:30 pm: Assist in putting the house laundry away, leisure activity of choice.</p> <p>8:30 pm: Get ready for bed, Brush Teeth</p> <p>9:00 pm: Meds</p> <p>9:30 pm: Bed."</p> <p>Regarding non-day program days/Saturday and Sunday</p> <p>-6:30 am: Sleep</p> <p>7:30 am: Meds, Breakfast, assist with kitchen clean up.</p> <p>8:00 am: Bath and Brush Teeth</p> <p>8:30 am: Make bed, Put any house laundry away.</p> <p>9:30 am: Clean and tidy bedroom</p> <p>10:00 am: Change his bed sheets.</p> <p>10:30 am: Assist in preparing lunch.</p> <p>11:00 am: Relax.</p> <p>11:30 am: Lunch time</p>						

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	<p>12:00 pm: Lunch time clean up. 12:30 pm: Quick nap 1:00 pm -3:00 pm: Movie Day!/ or game day! 3:30 pm: Snacks! 4:00 pm: Relax. 4:30 pm: Assist in making dinner. 5:00 pm: Dinner, Put dishes in dishwasher. 5:30 pm: Kitchen clean-up 6:00 pm: Pack Lunch on Sunday 6:30 pm: Sensory Activity/ Laundry 7:00 pm: Leisure Activity/ Laundry 7:30 pm: Leisure activity of choice/ Laundry 8:30 pm: Get ready for bed, Brush Teeth 9:00 pm: Meds 9:30 pm: Bed."</p> <p>Client #5's BSP dated 1/2022 indicated the following: "...Target Behaviors: Refusals ...Coping skills deficits ... Proactive Approaches: Staff should attempt to engage [client #5] in daily activities or leisure activities to prevent him from worrying about future activities such as when he will be going to see a physician- using calendars for 'fun' events and 'medical.' Staff should provide opportunities for [client #5] to be involved in new activities or events to help determine his preferences and dislikes. Staff should teach [client #5] with short instructions and as much visual training as possible. ..."</p> <p>The proactive approaches were not implemented during observations for client #5.</p> <p>An interview with the Qualified Intellectual Disabilities Professional (QIDP) was conducted on 3/21/23 at 12:37 pm. The QIDP stated, "We don't currently have a day program, but that does not mean individuals stay in bed. Staff should be</p>						

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W 0249  Bldg. 00	<p>doing activities with them. There should be a list of activities for indoor and outdoor to do active treatment. Goals should be tracked on every shift. The QIDP should be reviewing goals weekly and monthly. At the end of every month, we should do a monthly summary and include any recommendations."</p> <p>An interview with the Quality Coordinator (QC) was conducted on 3/21/23 at 2:49 pm. The QC stated, "Currently there are no daily activities planned at the house. The house manager should be planning daily activities to engage the individuals." The QC indicated goals should be completed as often as possible throughout the day. The QC stated, "The QIDP should be doing monthly summaries for every individual. Monthly summaries have not been completed since November of 2022."</p> <p>9-3-4(a)</p> <p>483.440(d)(1) PROGRAM IMPLEMENTATION</p> <p>As soon as the interdisciplinary team has formulated a client's individual program plan, each client must receive a continuous active treatment program consisting of needed interventions and services in sufficient number and frequency to support the achievement of the objectives identified in the individual program plan.</p> <p>Based on observation, interview and record review for 3 of 3 sampled clients (#1, #2 and #3), plus 2 additional clients (#4 and #5), the facility failed to ensure staff implemented the clients' program plans as written.</p> <p>Findings include:</p>			W 0249	<p>A. What corrective action(s) will be accomplished for these residents found to have been affected by the deficient practice;</p> <p>1. Mosaic will implement and ensure each client's specific active treatment services requirements are met.</p>		04/28/2023



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	<p>On 3/15/23 at 3:41 pm client #4 was sitting in his wheelchair in front of the front door looking outside. Client #5 was sitting at dining room table writing on paper and talking.</p> <p>At 3:45 pm client #5 walked into the kitchen and asked for a snack. He received a fruit bar from staff #1. Client #5 took the fruit bar to his room to eat it.</p> <p>At 3:55 pm client #2 was in his bedroom bouncing on his Yoga ball.</p> <p>At 4:23 pm client #4 in front of the front door sitting in his wheelchair looking outside. At 4:27 pm staff #1 asked client #1 if he needed to use the restroom. Client #1 said, "no".</p> <p>At 4:28 pm staff #1 gave client #3 a 16-ounce glass of iced tea. Client #3 drank it all in one sitting.</p> <p>At 4:29 pm staff #1 asked client #2 if he wanted a drink. Staff #1 gave client #2 a glass of tea. Client #2 drank it all in the kitchen and then walked into the laundry room.</p> <p>At 4:34 pm staff #3 arrived with bags from the grocery store. No clients assisted with carrying in the groceries, unpacking or putting.</p> <p>At 4:39 pm staff #3 washed his hands and began making dinner. Client #2 was walking around the house.</p> <p>At 5:06 pm client #4 sitting in his wheelchair in front of the front door looking outside and falling asleep. Client #3 was sitting at the dining room table writing on paper and talking. Client #1 was sitting with staff #2 playing Uno. Staff #1 was sitting in living room. Staff #3 went around the house to every client and asked them what vegetables they wanted for dinner. Client #5 stated, "I want peanut butter."</p> <p>At 5:14 pm client #2 walked into the kitchen and staff #3 told client #2 the stove was hot and he needed to stay away from it.</p>				<p>B. How the facility will identify other residents having the potential to be affected by the same deficient practice, and what corrective action will be taken; 1. This deficiency has the potential to affect all residents. Mosaic will implement and ensure each client's specific active treatment services requirements are met.</p> <p>C. THE PROCEDURE FOR IMPLEMENTING THE CORRECTIVE ACTION(S): 1. Mosaic will implement and ensure each client's specific active treatment services requirements are met.</p> <p>D. What measures will be put into place or what systemic changes the facility will make to ensure that the deficient practice does not recur; How the corrective action(s) will be monitored to ensure the deficient practice will not recur, i.e., what quality assurance program will be put into place; 1. Mosaic's team consisting of direct support supervisors, the quality coordinator, the associate director, and the quality intellectual disabilities professional will do daily checks to ensure the treatment plans are being implemented.</p>		

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	<p>At 5:32 pm staff #3 asked each individual what drink mix they wanted in their water. Staff #3 put drink packet in each water bottle and shook it up for them. Client #1's drink was mixed with thick-it by staff #3.</p> <p>At 5:46 pm staff #3 fixed a plate of sausage, pasta and broccoli. Staff #3 cut up all of the food and then gave it to client #3. Client #3 sat on a stool at the counter in the kitchen to eat.</p> <p>At 5:51 pm staff #3 fixed another plate with sausage, pasta and mixed vegetables. Staff #2 blended vegetables in a blender for clients #1 and #4. Client #2 sat at dining room table and staff #3 brought out his plate of food and sat it down on the table.</p> <p>At 5:58 pm staff #3 made another plate of sausage, pasta and mixed vegetables. Client #5 sat at the table. Staff #3 brought client #5 his plate of food. Client #5 pushed plate away and stated, "Peanut Butter." Staff #3 took the plate away. Staff #1 brought the plate and offered it to client #5. Client #5 pushed it away again.</p> <p>At 6:02 pm staff #1, #2 and #3 were in the kitchen. Client #2 was sitting at the table eating his plate of food.</p> <p>At 6:04 pm staff #2 brought a plate of pureed sausage, pasta and mixed vegetables to client #1. Staff #1 brought a plate of pureed sausage, pasta and mixed vegetable for client #4. Staff #1 began feeding client #4 by the front door.</p> <p>On 3/16/23 at 6:00 am client #4 was sitting in his wheelchair by the front door. Client #3 was sitting at the dining room table writing on his paper and talking.</p> <p>At 6:07 am staff #2 went into the bathroom with client #1 and gave him a shower.</p> <p>At 6:14 am client #5 got up and poured himself bowl of cereal and milk. Client #5 spilled milk on the kitchen counter. Client #5 took his bowl of</p>				<p>E. THE TITLE OF THE PERSON RESPONSIBLE FOR ENSURING THE FACILITY REMAINS IN COMPLIANCE WITH THE CITED DEFICIENCY: (Do not put the staff names).</p> <p>Administrator</p>		

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	<p>cereal to the dining room table but then walked back into the kitchen with his bowl of cereal.</p> <p>At 6:31 pm client #5 was standing at kitchen counter and drinking the milk out of the bowl by tipping up the bowl. He was spilling milk and cereal on the floor and counter.</p> <p>At 6:56 pm client #4 was in his wheelchair sitting by the front door. Client #5 took his bowl to the kitchen and put it in the sink. Client #3 was sitting at the table writing on his paper.</p> <p>At 7:05 am staff #2 was in the living room folding laundry and then put it away.</p> <p>At 7:09 am client #1 was sitting in the recliner in the living room. Client #2 was in his bedroom and got up and went into the bathroom. There was no soap or shampoo in the bathroom when client #2 was taking his shower. Client #3 was at the dining room table writing and talking. Client #4 was sitting in his wheelchair by the front door and client #5 was in his bedroom.</p> <p>At 7:18 am client #3 yelled out, "I am f----- hungry." Staff #2 told him he would get breakfast soon. Client #3 got up and went into the kitchen and got a glass of water and drank the whole glass.</p> <p>At 7:48 am client #1 was sitting in a recliner in the living room. Client #2 took his dirty clothes to the laundry room. Client #3 was sitting at the dining room table writing in his tablet and talking. Client #4 was sitting in his wheelchair in front of the front door. Client #5 was in his bedroom.</p> <p>At 8:05 am client #5 walked out of his bedroom and looked out the window in the kitchen then went back to his room. Client #4 was sitting in his wheelchair in front of the front door. Client #3 went into the kitchen and got a glass of water and drank it. Staff #2 was sitting in the living room.</p> <p>At 8:16 am client #3 walked outside and got the mail from the mailbox. Staff #2 followed him and then walked back inside with him. Staff #4 arrived</p>						

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	<p>to the house. Staff #4 assisted client #1 into his wheelchair and took him into the medication room for his medication.</p> <p>At 8:30 am the House Manager (HM) arrived. The HM went into the kitchen and began fixing breakfast. The HM made scrambled eggs, sausage and pancakes. Client #2 was walking around the house. Client #1 was sitting in his wheelchair in the living room. Client #4 was in his wheelchair by the front door. Client #5 was in his bedroom.</p> <p>At 9:00 am client #2 walked up to client #3 at the dining room table. Client #3 used his hand to motion client #2 to move away from him. Client #2 walked away from him.</p> <p>At 9:10 am staff #4 repositioned client #1 in his wheelchair. Staff #4 placed a small red pillow on his right side on his right arm.</p> <p>At 9:11 am client #3 was yelling curse words and walked outside. Staff #4 followed him and client #3 came back inside.</p> <p>At 9:18 am client #3 left with a skills coach from [Mental Health facility]. HM told client #3 his breakfast was ready. He stated he would eat it when he came back home.</p> <p>At 9:22 am the HM put pancakes and syrup, sausage links and scrambled eggs on two different plates and took the plates to the table. The HM called for client #2 and client #5 to come to table to eat. Client #5 picked up sausage off his plate and handed it to staff #4. Staff #4 took the sausage to the kitchen.</p> <p>At 9:30 am client #2 finished his food and took his plate to the kitchen. The HM made a glass of chocolate milk for client #5. HM was blending client #1 and #4's food.</p> <p>At 9:39 am the HM brought plates of food to the table for clients #1 and #4. Staff #4 was assisting client #4 to eat and the HM assisted client #1 to eat. They had pureed pancakes and scrambled eggs. The HM stated she messed up the sausage</p>						

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	<p>by putting too much water in it. The HM gave client #1 a glass of protein shake.</p> <p>On 3/16/23 at 1:33 pm client #4 was being pushed around the house in his wheelchair by a family friend. Client #1 was sleeping in the recliner in the living room. Client #2 was walking around the house. Client #3 was sitting at the dining room table writing on his paper. He was saying, "This is not a wh--- house, it is a group home." Staff did not respond to him. Client #5 was in his bedroom lying in his bed. Staff #1 was standing in the kitchen. Staff #4 was sitting in the living room. At 1:59 pm client #4's friend left the house. Client #4 was sitting in front of the front door. Client #3 was sitting at the dining room table writing on his paper and talking. Client #2 walked around the house and then went to his bedroom. Client #5 was in his bedroom. Staff #1 and #4 were sitting in the living room.</p> <p>At 2:05 pm staff #4 put away laundry. Staff #4 then asked client #5 to come to the medication room and she administered his medications. Client #1 was sitting in a recliner. Client #3 was sitting at the dining room table writing and talking. Client #2 was walking around the house and going in and out of his room.</p> <p>At 2:19 pm staff #4 was on the computer in the living room. Staff #1 was sitting in the living room. Client #1 was in the recliner sleeping. Client #2 was walking around the house. Client #3 was sitting at the dining room table writing and talking. Client #4 was sitting in his wheelchair by the front door.</p> <p>At 2:31 pm staff #1 went into the kitchen and was washing the dishes. Staff #4 was folding the laundry. Client #1 was sitting in recliner in the living room. Client #2 was in his bedroom. Client #3 was sitting at dining room table writing and talking. Client #4 was in his wheelchair sitting in</p>						

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	<p>front of the front door. Client #5 was in his room. At 2:51 pm staff #1 was talking on his cell phone in the kitchen and starting to prepare dinner. Client #1 was sleeping in a recliner in the living room. Client #2 was walking around the house. Client #3 was sitting at the dining room table writing on his paper and talking. Client #4 was in his wheelchair sitting by the front door. Client #5 was in his bedroom.</p> <p>On 3/17/23 at 10:30 am client #4 was sitting in front of the door. Client #1 was sitting in a recliner with a pillow behind his head. Client #3 was sitting on a chair by the kitchen counter. Staff #1 was washing the dishes. Staff #5 was sitting on couch in living room. Client #3 was walking around the house. Client #5 was in his bedroom lying on his bed.</p> <p>At 10:52 am staff #5 carried blankets to client #3's bedroom. Staff #5 asked client #3 to come assist with making his bed. He did not respond. Staff #5 made his bed for him. Client #2 carried other clean laundry to his room. Staff #5 went into client #2's bedroom and assisted with folding his clothes. Client #1 was in a recliner sleeping. Client #4 was sitting in his wheelchair in front of the front glass door. Client #5 was in his bedroom.</p> <p>At 11:28 am client #3 stated he had not been doing much today.</p> <p>At 11:29 am staff #1 began preparing lunch.</p> <p>At 11:31 am staff #1 and staff #5 took client #4 to his bedroom to be changed.</p> <p>At 11:44 am client #2 was sitting in chair in the living room. Client #3 was sitting at the table with his paper and was talking. Client #4 was sitting in his wheelchair at the front door. Client #5 was in his bedroom.</p> <p>Throughout the observation periods, staff did not engage clients in meaningful activities. Clients</p>						

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	<p>were not encouraged to participate in any activities throughout the day.</p> <p>1. Client #1's record was reviewed on 3/16/23 at 11:00 am. Client #1's Individual Support Plan (ISP) dated 8/1/22 indicated the following: "...What's important to the individual: Likes 1:1(one to one) attention &amp; likes to smile; he is friendly &amp; enjoys watching TV. He likes to play UNO. ... Supports Needed: [Client #1] needs staff to administer his medications as prescribed. [Client #1] needs staff to assist him in performing most domestic tasks such as cooking, laundry, leaning, etc. ... Goals: Finance: [Client #1] will purchase an item in the community when he goes shopping with 3 or less verbal prompts 100% of all trials in one month for 3 consecutive. Medication Administration: [Client #1] will learn about his medications starting with Calcium and Baclofen with three or less verbal prompts 100% of all trials in one month for three consecutive months or until this objective has been mastered. Domestic: Given 1 or less verbal prompts, [client #1] will complete two domestic tasks 100% of all trials in one month for 3 consecutive months or until this objective has been completed. "</p> <p>Client #1's BSP dated 8/12/21 indicated the following: ...Target Behaviors: Physical aggression...Invasion of boundaries: ...The targeted behaviors are most likely to occur when [client #1] does not want to complete a task asked of him. When staff will not do something for [client #1] that they know he can do. When he has</p>						

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	<p>to share household items such as the television remote. When having to watch television with his housemates. When he has any extended time off from day program. ... Proactive Strategies: Staff should engage [client #1] in a variety of activity (sic) while working with him and run his goals, including his communication goals. [Client #1] will almost never turn down an activity when he has 1:1 staffing. ..."</p> <p>2. Client #2's records were reviewed on 3/16/23 at 12:45 pm. Client #2's ISP dated 10/25/22 indicated the following: " What's Most Important to the Individual: Going to his parents' house on the weekends. Having a yoga ball to bounce on. ... Goals: Bathing: Given 5 or less verbal prompts, [client #2] will bathe daily 100% of all trials per month for 3 consecutive months or until this objective has been mastered. Medication Administration: Given 1 verbal prompt or less, [client #2] will take his medications as prescribed by his physician 100% of all trials per month for 3 consecutive months or until this objective has been mastered. Brushing Teeth: With three or less verbal prompts, [client #2] will brush his teeth thoroughly for 1 minute after a meal 100% of all trials per month for 3 consecutive months or until this objective has been mastered. Finance: With three or less verbal prompts, [client #2] will purchase an item(s) 100% of trials per month for 3 consecutive months or until this objective has been mastered. Communication: [Client #2] will indicate his needs by answering yes and no questions 100% of all trials per month for 3 consecutive months or until this objective has been mastered. Dressing: With three or less verbal prompts,</p>						



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	<p>[client #2] will put on clean clothing after he takes a bath each day with 90% of trials per month for three consecutive months or until this objective is mastered."</p> <p>Client #2's BSP dated 10/22 indicated the following: ...Target Behaviors: Property Destruction...Stuffing the toilet with objects...Self-induced Vomiting...Refusal to eat...Purposeful urinating on the floor or objects...Purposeful throwing clothing, bedding and other items away... Common Triggers: These are things that staff should avoid as they likely will increase the chances, that [client #2] will have negative behaviors: Change of daily schedule, when too many requests are asked of him, when staff do not respond to him in a timely manner, Changes in staff or his expected routine at home or at day program, Transition (like from parents home back to home- or from community back to day program), Boredom-or not staying engaged in meaningful activity, Interacting or making demands of him when he is already angry or anxious, Loud, busy environments, Triggers words or phrases: 'give me', 'back', 'excuse me', and 'stay home', Being ignored when he is trying to communicate. ..."</p> <p>3. Client #3's records were reviewed on 3/16/23 at 11:49 am. Client #3's ISP program dated 9/26/22 indicated the following: "Goals: Personal Hygiene: [Client #3] will be assisted with improving his personal hygiene and cleanliness. Finances: With three or less verbal prompts, [client #3] will purchase an item in the community 80% of all trials per month for three consecutive months or until this objective has been mastered."</p>						

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	<p>Client #3's BSP dated 5/22 indicated the following: "...Target Behaviors: Threatening behavior: verbal or non-verbal...Physical Aggression... Inappropriate Comments...Overeating food or liquids...Wandering from current setting without informing staff...Urinating in his room or spreading feces on any surfaces in the bathroom. ...The targeted behaviors are most likely to occur during times of high stress, when being asked to do something that he does not want to do, when something is not available to use, when others provoke him, when not given a warning about a change in routine, and when not allowed a lot of choice in his day. Behaviors are more likely when: [client #3] is without a structured activity, [client #3] is agitated, [client #3] is anxious, [client #3's] routine is changed without letting him know in advance, When [client #3] does not want to do something that is asked of him, [client #3] is tired or over stimulated or wants more attention, When [client #3] feels threatened or afraid of what to do, or does not know what is expected of him."</p> <p>4. Client #4's record was reviewed on 3/16/23 at 11:00 am. Client #4's ISP (Individual Support Plan) dated 1/1/23 indicated the following:</p> <p>- "Likes going to the mall, seeing [family friend] and going to church. ..."</p> <p>- "Goal/Service: Medication Administration: With unlimited physical assistance, [client #4] will assist with his medication administration 50% of all trials per month, for 3 consecutive months of until this goal is achieved."</p> <p>- "Goal/Service: Community Outing: [Client #4], will be more involved in community activities."</p>						

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	<p>5. Client #5's record was reviewed on 3/17/23 at 9:00 am. Client #5's ISP dated 9/26/22 indicated the following:</p> <p>"Likes to go on vacation, movies and attending church functions."</p> <p>-"Goal/Service: Medication Administration: With 4 or less verbal prompts, [client #5] will use his prescribed mouth rinse twice a day at 50% accuracy for 3 consecutive months."</p> <p>Client #5's BSP dated 1/2022 indicated the following: "...Target Behaviors: Refusals ...Coping skills deficits ... Proactive Approaches: Staff should attempt to engage [client #5] in daily activities or leisure activities to prevent him from worrying about future activities such as when he will be going to see a physician- using calendars for 'fun' events and 'medical.' Staff should provide opportunities for [client #5] to be involved in new activities or events to help determine his preferences and dislikes. Staff should teach [client #5] with short instructions and as much visual training as possible. ..."</p> <p>The proactive approaches were not implemented during observations for client #5.</p> <p>An interview with house manager (HM) was conducted on 3/17/23 at 11:59 am. HM stated, "The individuals were going to day program but that just recently closed. We are trying to get double staffed to do activities and take them out on outings. We can't do anything with being short staffed."</p> <p>An interview with the Qualified Intellectual</p>						

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W 0250  Bldg. 00	<p>Disabilities Professional (QIDP) was conducted on 3/21/23 at 12:37 pm. The QIDP stated, "We don't currently have a day program, but that does not mean individuals stay in bed. Staff should be doing activities with them. There should be a list of activities for indoor and outdoor to do active treatment. Goals should be tracked on every shift."</p> <p>An interview with the Quality Coordinator (QC) was conducted on 3/21/23 at 2:49 pm. The QC stated, "Currently there are no daily activities planned at the house. The house manager should be planning daily activities to engage the individuals." The QC indicated goals should be completed as often as possible throughout the day.</p> <p>9-3-4(a)</p> <p>483.440(d)(2) PROGRAM IMPLEMENTATION</p> <p>The facility must develop an active treatment schedule that outlines the current active treatment program and that is readily available for review by relevant staff.</p> <p>Based on observation, record review and interview for 3 of 3 sampled clients (#1, #2 and #3), plus 2 additional clients (#4 and #5), the facility failed to update client #1, #2, #3, #4 and #5's active treatment schedules.</p> <p>Findings include:</p> <p>Observations were conducted at the group home on 3/15/23 from 3:31 pm to 5:45 pm, 3/16/23 from 6:00 am to 9:52 am, 3/16/23 from 1:33 pm to 3:15 pm and 3/17/23 from 10:30 am to 12:15 pm. Clients #1, #2, #3, #4 and #5 were present during the observation periods.</p>			W 0250	<p>A. What corrective action(s) will be accomplished for these residents found to have been affected by the deficient practice;</p> <p>1. Mosaic will implement and ensure each client's specific active treatment services requirements are met.</p> <p>B. How the facility will identify other residents having the potential to be affected by the same deficient practice, and what corrective action will be taken;</p>		04/28/2023

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	<p>1. On 3/15/23 at 3:41 pm client #4 was sitting in his wheelchair in front of the front door looking outside. Client #5 was sitting at dining room table writing on paper and talking.</p> <p>At 3:45 pm client #5 walked into the kitchen and asked for a snack. He received a fruit bar from staff #1. Client #5 took the fruit bar to his room to eat it.</p> <p>At 3:55 pm client #2 was in his bedroom bouncing on his Yoga ball.</p> <p>At 4:23 pm client #4 was in front of the front door sitting in his wheelchair looking outside. At 4:27 pm staff #1 asked client #1 if he needed to use the restroom. Client #1 said, "no".</p> <p>At 4:28 pm staff #1 gave client #3 a 16-ounce glass of iced tea. Client #3 drank it all in one sitting.</p> <p>At 4:29 pm staff #1 asked client #2 if he wanted a drink. Staff #1 gave client #2 a glass of tea. Client #2 drank it all in the kitchen and then walked into the laundry room.</p> <p>At 4:34 pm staff #3 arrived with bags from the grocery store. No clients assisted with carrying in the groceries, unpacking or putting them away.</p> <p>At 4:39 pm staff #3 washed his hands and began making dinner. Client #2 was walking around the house.</p> <p>At 5:06 pm client #4 sitting in his wheelchair in front of the front door looking outside and falling asleep. Client #3 was sitting at the dining room table writing on paper and talking. Client #1 was sitting with staff #2 playing Uno. Staff #1 was sitting in the living room. Staff #3 went around the house to every client and asked them what vegetables they wanted for dinner. Client #5 stated, "I want peanut butter."</p> <p>At 5:14 pm client #2 walked into the kitchen and staff #3 told client #2 the stove was hot and he needed to stay away from it.</p>				<p>1. This deficiency has the potential to affect all residents. Mosaic will implement and ensure each client's specific active treatment services requirements are met.</p> <p>C. THE PROCEDURE FOR IMPLEMENTING THE CORRECTIVE ACTION(S):</p> <p>1. Mosaic will implement and ensure each client's specific active treatment services requirements are met.</p> <p>D. What measures will be put into place or what systemic changes the facility will make to ensure that the deficient practice does not recur; How the corrective action(s) will be monitored to ensure the deficient practice will not recur, i.e., what quality assurance program will be put into place;</p> <p>1. Mosaic's team consisting of direct support supervisors, the quality coordinator, the associate director, and the quality intellectual disabilities professional will do daily checks to ensure the treatment plans are being implemented.</p> <p>E. THE TITLE OF THE PERSON RESPONSIBLE FOR ENSURING THE FACILITY REMAINS IN COMPLIANCE WITH THE CITED DEFICIENCY: (Do not put the staff names).</p>		

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	<p>At 5:32 pm staff #3 asked each individual what drink mix they wanted in their water. Staff #3 put a drink packet in each water bottle and shook it up for them. Client #1's drink was mixed with thick-it by staff #3.</p> <p>At 5:46 pm staff #3 fixed a plate of sausage, pasta and broccoli. Staff #3 cut up all of the food and then gave it to client #3. Client #3 sat on a stool at the counter in the kitchen to eat.</p> <p>At 5:51 pm staff #3 fixed another plate with sausage, pasta and mixed vegetables. Staff #2 blended vegetables in a blender for clients #1 and #4. Client #2 sat at dining room table and staff #3 brought out his plate of food and sat it down on the table.</p> <p>At 5:58 pm staff #3 made another plate of sausage, pasta and mixed vegetables. Client #5 sat at the table. Staff #3 brought client #5 his plate of food. Client #5 pushed the plate away and stated, "Peanut Butter." Staff #3 took the plate away. Staff #1 brought the plate and offered it to client #5. Client #5 pushed it away again.</p> <p>At 6:02 pm staff #1, #2 and #3 were in the kitchen. Client #2 was sitting at the table eating his plate of food.</p> <p>At 6:04 pm staff #2 brought a plate of pureed sausage, pasta and mixed vegetables to client #1. Staff #1 brought a plate of pureed sausage, pasta and mixed vegetable for client #4. Staff #1 began feeding client #4 by the front door.</p> <p>On 3/16/23 at 6:00 am client #4 was sitting in his wheelchair by the front door. Client #3 was sitting at the dining room table writing on his paper and talking.</p> <p>At 6:07 am staff #2 went into the bathroom with client #1 and gave him a shower.</p> <p>At 6:14 am client #5 got up and poured himself a bowl of cereal and milk. Client #5 spilled milk on the kitchen counter. Client #5 took his bowl of</p>				Administrator		

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	<p>cereal to the dining room table but then walked back into the kitchen with his bowl of cereal.</p> <p>At 6:31 pm client #5 was standing at the kitchen counter and drinking the milk out of the bowl by tipping up the bowl. He was spilling milk and cereal on the floor and counter.</p> <p>At 6:56 pm client #4 was in his wheelchair sitting by the front door. Client #5 took his bowl to the kitchen and put it in the sink. Client #3 was sitting at the table writing on his paper.</p> <p>At 7:05 am staff #2 was in the living room folding laundry and then put it away.</p> <p>At 7:09 am client #1 was sitting in the recliner in the living room. Client #2 was in his bedroom and got up and went into the bathroom. There was no soap or shampoo in the bathroom when client #2 was taking his shower. Client #3 was at the dining room table writing and talking. Client #4 was sitting in his wheelchair by the front door and client #5 was in his bedroom.</p> <p>At 7:18 am client #3 yelled out, "I am f----- hungry." Staff #2 told him he would get breakfast soon. Client #3 got up and went into the kitchen and got a glass of water and drank the whole glass.</p> <p>At 7:48 am client #1 was sitting in a recliner in the living room. Client #2 took his dirty clothes to the laundry room. Client #3 was sitting at the dining room table writing in his tablet and talking. Client #4 was sitting in his wheelchair in front of the front door. Client #5 was in his bedroom.</p> <p>At 8:05 am client #5 walked out of his bedroom and looked out the window in the kitchen then went back to his room. Client #4 was sitting in his wheelchair in front of the front door. Client #3 went into the kitchen and got a glass of water and drank it. Staff #2 was sitting in living room.</p> <p>At 8:16 am client #3 walked outside and got the mail from the mailbox. Staff #2 followed him and then walked back inside with him. Staff #4 arrived</p>						

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	<p>to the house. Staff #4 assisted client #1 into his wheelchair and took him into the medication room for his medication.</p> <p>At 8:30 am the House Manager (HM) arrived. The HM went into the kitchen and began fixing breakfast. The HM made scrambled eggs, sausage and pancakes. Client #2 was walking around the house. Client #1 was sitting in his wheelchair in the living room. Client #4 was in his wheelchair by the front door. Client #5 was in his bedroom.</p> <p>At 9:00 am client #2 walked up to client #3 at the dining room table. Client #3 used his hand to motion client #2 to move away from him. Client #2 walked away from him.</p> <p>At 9:10 am staff #4 repositioned client #1 in his wheelchair. Staff #4 placed a small red pillow on his right side on his right arm.</p> <p>At 9:11 am client #3 was yelling curse words and walked outside. Staff #4 followed him and client #3 came back inside.</p> <p>At 9:18 am client #3 left with a skills coach from [Mental Health facility]. HM told client #3 his breakfast was ready. He stated he would eat it when he came back home.</p> <p>At 9:22 am the HM put pancakes and syrup, sausage links and scrambled eggs on two different plates and took the plates to the table. The HM called for client #2 and client #5 to come to table to eat. Client #5 picked up sausage off his plate and handed it to staff #4. Staff #4 took the sausage to the kitchen.</p> <p>At 9:30 am client #2 finished his food and took his plate to the kitchen. The HM made a glass of chocolate milk for client #5. HM was blending client #1 and #4's food.</p> <p>At 9:39 am the HM brought plates of food to the table for clients #1 and #4. Staff #4 was assisting client #4 to eat and the HM assisted client #1 to eat. They had pureed pancakes and scrambled</p>						



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	<p>eggs. The HM stated she messed up the sausage by putting too much water in it. The HM gave client #1 a glass of protein shake.</p> <p>On 3/16/23 at 1:33 pm client #4 was being pushed around the house in his wheelchair by a family friend. Client #1 was sleeping in the recliner in the living room. Client #2 was walking around the house. Client #3 was sitting at the dining room table writing on his paper. He was saying, "This is not a wh--- house, it is a group home." Staff did not respond to him. Client #5 was in his bedroom lying in his bed. Staff #1 was standing in the kitchen. Staff #4 was sitting in the living room. At 1:59 pm client #4's friend left the house. Client #4 was sitting in front of the front door. Client #3 was sitting at the dining room table writing on his paper and talking. Client #2 walked around the house and then went to his bedroom. Client #5 was in his bedroom. Staff #1 and #4 were sitting in the living room.</p> <p>At 2:05 pm staff #4 put away laundry. Staff #4 then asked client #5 to come to the medication room and she administered his medications. Client #1 was sitting in a recliner. Client #3 was sitting at the dining room table writing and talking. Client #2 was walking around the house and going in and out of his room.</p> <p>At 2:19 pm staff #4 was on the computer in the living room. Staff #1 was sitting in the living room. Client #1 was in the recliner sleeping. Client #2 was walking around the house. Client #3 was sitting at the dining room table writing and talking. Client #4 was sitting in his wheelchair by the front door.</p> <p>At 2:31 pm staff #1 went into the kitchen and was washing the dishes. Staff #4 was folding the laundry. Client #1 was sitting in a recliner in the living room. Client #2 was in his bedroom. Client #3 was sitting at the dining room table writing and</p>						

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	<p>talking. Client #4 was in his wheelchair sitting in front of the front door. Client #5 was in his room. At 2:51 pm staff #1 was talking on his cell phone in the kitchen and starting to prepare dinner. Client #1 was sleeping in a recliner in the living room. Client #2 was walking around the house. Client #3 was sitting at the dining room table writing on his paper and talking. Client #4 was in his wheelchair sitting by the front door. Client #5 was in his bedroom.</p> <p>On 3/17/23 at 10:30 am client #4 was sitting in front of the door. Client #1 was sitting in a recliner with a pillow behind his head. Client #3 was sitting on a chair by the kitchen counter. Staff #1 was washing the dishes. Staff #5 was sitting on the couch in living room. Client #3 was walking around the house. Client #5 was in his bedroom lying on his bed.</p> <p>At 10:52 am staff #5 carried blankets to client #3's bedroom. Staff #5 asked client #3 to come assist with making his bed. He did not respond. Staff #5 made his bed for him. Client #2 carried other clean laundry to his room. Staff #5 went into client #2's bedroom and assisted with folding his clothes. Client #1 was in a recliner sleeping. Client #4 was sitting in his wheelchair in front of the front glass door. Client #5 was in his bedroom.</p> <p>At 11:28 am client #3 stated he had not been doing much today.</p> <p>At 11:29 am staff #1 began preparing lunch.</p> <p>At 11:31 am staff #1 and staff #5 took client #4 to his bedroom to be changed.</p> <p>At 11:44 am client #2 was sitting in a chair in the living room. Client #3 was sitting at the table with his paper and was talking. Client #4 was sitting in his wheelchair at the front door. Client #5 was in his bedroom.</p> <p>An interview with staff #5 was conducted on</p>						

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	<p>3/17/23 at 10:36 am. Staff #5 stated, "It's been a while since they have had a day program." Staff #5 indicated during the day they watch television, do laundry, play Uno and sometimes the individuals will fall asleep for a little while.</p> <p>An interview with the HM was conducted on 3/17/23 at 11:59 am. The HM stated, "The individuals were going to day program but that just recently closed. "</p> <p>1. Client #1's record was reviewed on 3/16/23 at 11:00 am. Client #1's Active Treatment Schedule 9-2022 indicated the following: Regarding Monday through Friday -6:30 am: Meds (Medication) 7:30 am: Shower, Breakfast, assist with kitchen clean up. 8:00 am: Brush Teeth, make bed, Put any house laundry away. 8:30 am: Get Ready, Leave for Day Program 9:30 am- 2:30 pm: Day Program 3:30 pm: Get home from day program, put lunch bags away. 4:00 pm: Relax. 4:30 pm: Listen to music of choice, assist in making the drink for dinner, making the dessert, assist in setting the table. 5:00 pm: Dinner, Put dishes in dishwasher. 5:30 pm: Kitchen clean-up 6:00 pm: Pack Lunch 6:30 pm: Take trash out. 7:00 pm: Assist in house laundry. 7:30 pm: Assist in putting the house laundry away. 8:30 pm: Get ready for bed, Brush Teeth 9:00 pm: Meds 9:30 pm: Bed."</p> <p>Regarding non-day program days/Saturday and</p>						

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	<p>Sunday</p> <p>-6:30 am: Sleep</p> <p>7:30 am: Meds, Breakfast, assist with kitchen clean up.</p> <p>8:00 am: Bath and Brush Teeth</p> <p>8:30 am: Make bed, Put any house laundry away.</p> <p>9:30 am: Clean and tidy bedroom</p> <p>10:00 am: Change his bed sheets.</p> <p>10:30 am: Assist in preparing lunch.</p> <p>11:00 am: Relax.</p> <p>11:30 am: Lunch time</p> <p>12:00 pm: Lunch time clean up.</p> <p>12:30 pm: Quick nap</p> <p>1:00 pm -3:00 pm: Movie Day!/ or game day!</p> <p>3:30 pm: Snacks!</p> <p>4:00 pm: Relax.</p> <p>4:30 pm: Assist in making dinner.</p> <p>5:00 pm: Dinner, Put dishes in dishwasher.</p> <p>5:30 pm: Kitchen clean-up</p> <p>6:00 pm: Pack Lunch on Sunday</p> <p>6:30 pm: Sensory Activity/ Laundry</p> <p>7:00 pm: Leisure Activity/ Laundry</p> <p>7:30 pm: Leisure activity of choice/ Laundry</p> <p>8:30 pm: Get ready for bed, Brush Teeth</p> <p>9:00 pm: Meds</p> <p>9:30 pm: Bed."</p> <p>2. Client #2's records were reviewed on 3/16/23 at 12:45 pm. Client #2's Active Treatment Schedule 9-2022 indicated the following: Regarding Monday through Friday</p> <p>-6:30 am: Meds (Medication)</p> <p>7:30 am: Shower, Breakfast, assist with kitchen clean up.</p> <p>8:00 am: Brush Teeth, make bed, Put any house laundry away.</p> <p>8:30 am: Get Ready, Leave for Day Program</p> <p>9:30 am- 2:30 pm: Day Program</p> <p>3:30 pm: Get home from day program, put lunch bags away.</p>						

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	<p>4:00 pm: Relax.</p> <p>4:30 pm: Listen to music of choice, assist in making the drink for dinner, making the dessert, assist in setting the table.</p> <p>5:00 pm: Dinner, Put dishes in dishwasher.</p> <p>5:30 pm: Kitchen clean-up</p> <p>6:00 pm: Pack Lunch</p> <p>6:30 pm: Take trash out.</p> <p>7:00 pm: Assist in house laundry.</p> <p>7:30 pm: Assist in putting the house laundry away.</p> <p>8:30 pm: Get ready for bed, Brush Teeth</p> <p>9:00 pm: Meds</p> <p>9:30 pm: Bed."</p> <p>Regarding non-day program days/Saturday and Sunday</p> <p>- "6:30 am: Sleep</p> <p>7:30 am: Meds, Breakfast, assist with kitchen clean up.</p> <p>8:00 am: Bath and Brush Teeth</p> <p>8:30 am: Make bed, Put any house laundry away.</p> <p>9:30 am: Clean and tidy bedroom</p> <p>10:00 am: Change his bed sheets.</p> <p>10:30 am: Assist in preparing lunch.</p> <p>11:00 am: Relax.</p> <p>11:30 am: Lunch time</p> <p>12:00 pm: Lunch time clean up.</p> <p>12:30 pm: Quick nap</p> <p>1:00 pm -3:00 pm: Movie Day!/ or game day!</p> <p>3:30 pm: Snacks!</p> <p>4:00 pm: Relax.</p> <p>4:30 pm: Assist in making dinner.</p> <p>5:00 pm: Dinner, Put dishes in dishwasher.</p> <p>5:30 pm: Kitchen clean-up</p> <p>6:00 pm: Pack Lunch on Sunday</p> <p>6:30 pm: Sensory Activity/ Laundry</p> <p>7:00 pm: Leisure Activity/ Laundry</p> <p>7:30 pm: Leisure activity of choice/ Laundry</p> <p>8:30 pm: Get ready for bed, Brush Teeth</p>						

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	<p>9:00 pm: Meds 9:30 pm: Bed."</p> <p>3. Client #3's records were reviewed on 3/16/23 at 11:49 am. Client #3's Active Treatment Schedule 9-2022 indicated the following: Regarding Monday through Friday -"6:30 am: Meds (Medication) 7:30 am: Shower, Breakfast, assist with kitchen clean up. 8:00 am: Brush Teeth, make bed, Put any house laundry away. 8:30 am: Get Ready, Leave for Day Program 9:30 am- 2:30 pm: Day Program 3:30 pm: Get home from day program, put lunch bags away. 4:00 pm: Relax. 4:30 pm: Listen to music of choice, assist in making the drink for dinner, making the dessert, assist in setting the table. 5:00 pm: Dinner, Put dishes in dishwasher. 5:30 pm: Kitchen clean-up 6:00 pm: Pack Lunch 6:30 pm: Take trash out. 7:00 pm: Assist in house laundry. 7:30 pm: Assist in putting the house laundry away. 8:30 pm: Get ready for bed, Brush Teeth 9:00 pm: Meds 9:30 pm: Bed."</p> <p>Regarding non-day program days/Saturday and Sunday -"6:30 am: Sleep 7:30 am: Meds, Breakfast, assist with kitchen clean up. 8:00 am: Bath and Brush Teeth 8:30 am: Make bed, Put any house laundry away. 9:30 am: Clean and tidy bedroom 10:00 am: Change his bed sheets.</p>						

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	<p>10:30 am: Assist in preparing lunch.</p> <p>11:00 am: Relax.</p> <p>11:30 am: Lunch time</p> <p>12:00 pm: Lunch time clean up.</p> <p>12:30 pm: Quick nap</p> <p>1:00 pm -3:00 pm: Movie Day!/ or game day!</p> <p>3:30 pm: Snacks!</p> <p>4:00 pm: Relax.</p> <p>4:30 pm: Assist in making dinner.</p> <p>5:00 pm: Dinner, Put dishes in dishwasher.</p> <p>5:30 pm: Kitchen clean-up</p> <p>6:00 pm: Pack Lunch on Sunday</p> <p>6:30 pm: Sensory Activity/ Laundry</p> <p>7:00 pm: Leisure Activity/ Laundry</p> <p>7:30 pm: Leisure activity of choice/ Laundry</p> <p>8:30 pm: Get ready for bed, Brush Teeth</p> <p>9:00 pm: Meds</p> <p>9:30 pm: Bed."</p> <p>4. Client #4's record was reviewed on 3/16/23 at 11:00 am. Client #4's Active Treatment Schedule 9-2022 indicated the following: Regarding Monday through Friday -"6:30 am: Meds (Medication) 7:30 am: Shower, Breakfast, Assist with clearing table. 8:00 am: Brush Teeth, Make bed. 8:30 am: Get Ready, Leave for Day Program 9:30 am- 2:30 pm: Day Program 3:30 pm: Get home from day program, put lunch bags away. 4:00 pm: Relax. 4:30 pm: Listen to music of choice, Range of Motion, make in (sic) making the dessert, assist in making dinner, assist in setting the table. 5:00 pm: Dinner, Put dishes in dishwasher. 5:30 pm: Kitchen clean-up 6:00 pm: Pack Lunch 6:30 pm: Time on the patio, Sensory activity, take trash out, Assist taking the trash out.</p>						

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	<p>7:00 pm: Assist in house laundry, Leisure activity of choice.</p> <p>7:30 pm: Get ready for bed, Brush Teeth</p> <p>8:00 pm: Meds</p> <p>8:30 pm: Bed."</p> <p>Regarding non-day program days/Saturday and Sunday</p> <p>- "6:30 am: Sleep</p> <p>7:30 am: Meds, Breakfast, assist with kitchen clean up.</p> <p>8:00 am: Bath and Brush Teeth</p> <p>8:30 am: Make bed, Put any house laundry away.</p> <p>9:30 am: Clean and tidy bedroom</p> <p>10:00 am: Change his bed sheets.</p> <p>10:30 am: Assist in preparing lunch.</p> <p>11:00 am: Relax.</p> <p>11:30 am: Lunch time</p> <p>12:00 pm: Lunch time clean up.</p> <p>12:30 pm: Quick nap</p> <p>1:00 pm -3:00 pm: Movie Day!/ or game day!</p> <p>3:30 pm: Snacks!</p> <p>4:00 pm: Relax.</p> <p>4:30 pm: Assist in making dinner, walk in neighborhood.</p> <p>5:00 pm: Dinner, Put dishes in sink.</p> <p>5:30 pm: Kitchen clean-up</p> <p>6:00 pm: Pack Lunch on Sunday</p> <p>6:30 pm: Sensory Activity/ Laundry</p> <p>7:00 pm: Leisure Activity/ Laundry</p> <p>7:30 pm: Get ready for bed, Brush Teeth</p> <p>8:00 pm: Meds</p> <p>8:30 pm: Bed."</p> <p>5. Client #5's record was reviewed on 3/17/23 at 9:00 am. Client #5's Active Treatment Schedule 9-2022 indicated the following:</p> <p>Regarding Monday through Friday</p> <p>- "6:30 am: Meds (Medication)</p> <p>7:30 am: Shower, Breakfast, assist with kitchen</p>						



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	<p>clean up.</p> <p>8:00 am: Brush Teeth, make bed, Put any house laundry away.</p> <p>8:30 am: Get Ready, Leave for Day Program</p> <p>9:30 am- 2:30 pm: Day Program</p> <p>3:30 pm: Get home from day program, put lunch bags away.</p> <p>4:00 pm: Relax.</p> <p>4:30 pm: Listen to music of choice, assist in making the drink for dinner, making the dessert, assist in setting the table.</p> <p>5:00 pm: Dinner, Put dishes in dishwasher.</p> <p>5:30 pm: Kitchen clean-up</p> <p>6:00 pm: Pack Lunch</p> <p>6:30 pm: Take trash out, Sensory Activity, assist in taking out trash.</p> <p>7:00 pm: Assist in house laundry, leisure activity of choice.</p> <p>7:30 pm: Assist in putting the house laundry away, leisure activity of choice.</p> <p>8:30 pm: Get ready for bed, Brush Teeth</p> <p>9:00 pm: Meds</p> <p>9:30 pm: Bed."</p> <p>Regarding non-day program days/Saturday and Sunday</p> <p>- "6:30 am: Sleep</p> <p>7:30 am: Meds, Breakfast, assist with kitchen clean up.</p> <p>8:00 am: Bath and Brush Teeth</p> <p>8:30 am: Make bed, Put any house laundry away.</p> <p>9:30 am: Clean and tidy bedroom</p> <p>10:00 am: Change his bed sheets.</p> <p>10:30 am: Assist in preparing lunch.</p> <p>11:00 am: Relax.</p> <p>11:30 am: Lunch time</p> <p>12:00 pm: Lunch time clean up.</p> <p>12:30 pm: Quick nap</p> <p>1:00 pm -3:00 pm: Movie Day! or game day!</p> <p>3:30 pm: Snacks!</p>						

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W 0259  Bldg. 00	<p>4:00 pm: Relax. 4:30 pm: Assist in making dinner. 5:00 pm: Dinner, Put dishes in dishwasher. 5:30 pm: Kitchen clean-up 6:00 pm: Pack Lunch on Sunday 6:30 pm: Sensory Activity/ Laundry 7:00 pm: Leisure Activity/ Laundry 7:30 pm: Leisure activity of choice/ Laundry 8:30 pm: Get ready for bed, Brush Teeth 9:00 pm: Meds 9:30 pm: Bed."</p> <p>An interview with the Qualified Intellectual Disabilities Professional (QIDP) was conducted on 3/21/23 at 12:37 pm. The QIDP stated, "We don't currently have a day program, but that does not mean individuals stay in bed. Staff should be doing activities with them. There should be a list of activities for indoor and outdoor to do active treatment. Goals should be tracked on every shift. The QIDP should be reviewing goals weekly and monthly. At the end of every month, we should do a monthly summary and include any recommendations."</p> <p>An interview with the Quality Coordinator (QC) was conducted on 3/21/23 at 2:49 pm. The QC stated, "Currently there are no daily activities planned at the house. The house manager should be planning daily activities to engage the individuals."</p> <p>9-3-4(a)</p> <p>483.440(f)(2)</p> <p>PROGRAM MONITORING &amp; CHANGE</p> <p>At least annually, the comprehensive functional assessment of each client must be reviewed by the interdisciplinary team for relevancy and updated as needed.</p>						

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	<p>Based on record review and interview for 1 of 3 clients in the sample (#1), the facility failed to ensure client #1's comprehensive functional assessment (CFA) was completed and updated as needed.</p> <p>Findings include:</p> <p>On 3/16/23 at 11:00 am, client #1's record was reviewed.</p> <p>Client #1 had a CFA completed on 9/30/22. Client #1's record indicated from 2/16/23 to 2/22/23 client #1 was hospitalized due to pressure ulcers, abnormal weight loss, difficulty swallowing and dehydration. Previously to the hospitalization client #1 was able to walk. Currently he was using a wheelchair and was unable to walk on his own. There was no documentation client #1's skills had been assessed after his hospital discharge on 2/22/23.</p> <p>On 3/16/23 at 6:06 pm, staff #2 stated, "[Client #1] was a mechanical soft diet but he wasn't chewing, so we found he did better with pureed."</p> <p>An interview with the Qualified Intellectual Disabilities Professional (QIDP) was conducted on 3/21/23 at 12:37 pm. The QIDP stated, "Plans and assessments should be updated as soon as an individual is discharged from the hospital and staff should be updated on the changes of the condition."</p> <p>An interview with the Quality Coordinator (QC) was conducted on 3/21/23 at 2:49 pm. The QC stated, "Individual Support Plan (ISP), Functional Assessments and Risk plans should all be updated if an individual's condition changes. [Client #1] used to be able to feed himself but now</p>			W 0259	<p>A. What corrective action(s) will be accomplished for these residents found to have been affected by the deficient practice; 1. Mosaic will implement and ensure each client's specific active treatment services requirements are met.</p> <p>B. How the facility will identify other residents having the potential to be affected by the same deficient practice, and what corrective action will be taken; 1. This deficiency has the potential to affect all residents. Mosaic will implement and ensure each client's specific active treatment services requirements are met.</p> <p>C. THE PROCEDURE FOR IMPLEMENTING THE CORRECTIVE ACTION(S): 1. Mosaic will implement and ensure each client's specific active treatment services requirements are met.</p> <p>D. What measures will be put into place or what systemic changes the facility will make to ensure that the deficient practice does not recur; How the corrective action(s) will be monitored to ensure the deficient practice will not recur, i.e., what quality assurance program will be put into place; 1. Mosaic's team consisting of</p>		04/28/2023

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W 0262  Bldg. 00	<p>he can't."</p> <p>9-3-4(a)</p> <p>483.440(f)(3)(i) PROGRAM MONITORING &amp; CHANGE The committee should review, approve, and monitor individual programs designed to manage inappropriate behavior and other programs that, in the opinion of the committee, involve risks to client protection and rights. Based on record review and interview for 2 of 3 sampled clients (#1 and #2) with restrictive programs, the facility's specially constituted committee (Human Rights Committee) failed to review, approve and monitor client #1 and #2's restriction program plans.</p> <p>Findings include:</p> <p>1. Client #1's record was reviewed on 3/16/23 at 11:00 am.</p>			W 0262	<p>direct support supervisors, the quality coordinator, the associate director, and the quality intellectual disabilities professional will do daily checks to ensure the treatment plans are being implemented.</p> <p>E. THE TITLE OF THE PERSON RESPONSIBLE FOR ENSURING THE FACILITY REMAINS IN COMPLIANCE WITH THE CITED DEFICIENCY: (Do not put the staff names).</p> <p>Administrator</p> <p>A. What corrective action(s) will be accomplished for these residents found to have been affected by the deficient practice; 1.Mosaic will implement and ensure each client's specific active treatment services requirements are met.</p> <p>B. How the facility will identify other residents having the potential to be affected by the</p>		04/28/2023

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	<p>Client #1's 8/12/21 Behavior Support Plan (BSP) indicated client #1 had targeted behaviors of Physical Aggression and Invasion of boundaries. The Rights Restriction Review dated 8/12/21 indicated the restrictive components of locked medications, locked money, locked basement, Door Alarm at Day Program, Behavior Support Plan, Medications given for Negative Behaviors, Door Alarm at [group home name] and Adult incontinence products.</p> <p>Client #1's BSP dated 8/12/21 indicated the following psychotropic medications: "Invega Extended Release 9 mg (milligrams) (used to intermittent explosive disorder). Olanzapine 10 mg (used to treat mood conditions). Olanzapine 5 mg (used to treat mood conditions)."</p> <p>There was no documentation the facility's Human Rights Committee reviewed, approved and monitored client #1's restrictive BSP.</p> <p>2. Client #2's record was reviewed on 3/16/23 at 12:45 pm.</p> <p>Client #2's BSP dated 10/2022 indicated client #2 had target behaviors of Property Destruction (Breaking items), Stuffing the toilets with objects, Self-induced Vomiting, Refusal to eat, Purposeful urinating on the floor or objects and Purposeful throwing clothing, bedding, and other items away. The Rights Restriction Review dated 12/10/21 indicated the restrictive components of Locked Medications, Locked Money, Locked Basement, Door Alarm at day program, Behavior Support Plan, Medications given for Negative Behaviors, Door Alarm on doors at [previous home].</p> <p>Client #2's BSP dated 10/2022 indicated the following psychotropic medications:</p>				<p>same deficient practice, and what corrective action will be taken; 1. This deficiency has the potential to affect all residents. Mosaic will implement and ensure each client's specific active treatment services requirements are met.</p> <p>C. THE PROCEDURE FOR IMPLEMENTING THE CORRECTIVE ACTION(S): 1. Mosaic will implement and ensure each client's specific active treatment services requirements are met.</p> <p>D. What measures will be put into place or what systemic changes the facility will make to ensure that the deficient practice does not recur; How the corrective action(s) will be monitored to ensure the deficient practice will not recur, i.e., what quality assurance program will be put into place; 1. Mosaic's team consisting of direct support supervisors, the quality coordinator, the associate director, and the quality intellectual disabilities professional will do daily checks to ensure the treatment plans are being implemented.</p> <p>E. THE TITLE OF THE PERSON RESPONSIBLE FOR ENSURING THE FACILITY REMAINS IN COMPLIANCE WITH THE CITED</p>		

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STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER  15G676		X2) MULTIPLE CONSTRUCTION A. BUILDING 00 B. WING		X3) DATE SURVEY COMPLETED 03/28/2023	
NAME OF PROVIDER OR SUPPLIER  MOSAIC				STREET ADDRESS, CITY, STATE, ZIP COD 1703 WOODMONT DR SOUTH BEND, IN 46614			
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W 0263  Bldg. 00	<p>"Abilify 20 mg (used to treat obsessive compulsive disorder). Clonazepam 0.5 mg (used to obsessive compulsive disorder). Invega Sustenna 156 mg (used to treat mood conditions). Topamax 50 mg (used to treat mood conditions). Propranolol 10 mg (used to treat Anxiety). Naltrexone 50 mg (used to treat obsessive compulsive disorder)."</p> <p>There was no documentation the facility's HRC reviewed, approved, and monitored client #2's restrictive BSP.</p> <p>An interview with the Qualified Intellectual Disabilities Professional (QIDP) was conducted on 3/21/23 at 12:37 pm. The QIDP stated, "Any restrictions have to be approved by HRC."</p> <p>An interview with the Quality Coordinator (QC) was conducted on 3/21/23 at 2:49 pm. The QC stated, "If something is restricted, HRC should have approved."</p> <p>9-3-4(a)</p> <p>483.440(f)(3)(ii) PROGRAM MONITORING &amp; CHANGE The committee should insure that these programs are conducted only with the written informed consent of the client, parents (if the client is a minor) or legal guardian.</p> <p>Based on record review and interview for 2 of 2 sampled clients (#1 and #2) with restrictive programs, the facility's Human Rights Committee (HRC) failed to ensure written informed consent was obtained from the clients' legal representatives prior to the implementation of the</p>			W 0263	<p>DEFICIENCY: (Do not put the staff names).</p> <p>Administrator</p> <p>A. What corrective action(s) will be accomplished for these residents found to have been affected by the deficient practice; 1.Mosaic will ensure each client's restrictive program will be sent through the human rights</p>		04/28/2023

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	<p>restrictive programs.</p> <p>Findings include:</p> <p>1. Client #1's record was reviewed on 3/16/23 at 11:00 am.</p> <p>Client #1's 8/12/21 Behavior Support Plan (BSP) indicated client #1 had targeted behaviors of Physical Aggression and Invasion of boundaries. The Rights Restriction Review dated 8/12/21 indicated the restrictive components of locked medications, locked money, locked basement, Door Alarm at Day Program, Behavior Support Plan, Medications given for Negative Behaviors, Door Alarm [Name] and Adult incontinence products.</p> <p>Client #1's BSP dated 8/12/21 indicated the following psychotropic medications: "Invega Extended Release 9 mg (milligrams) (used to intermittent explosive disorder). Olanzapine 10 mg (used to treat mood conditions). Olanzapine 5 mg (used to treat mood conditions)."</p> <p>Client #1's Individual Support Plan (ISP) dated 8/1/22 indicated client #1's guardian was his mother.</p> <p>Client #1's record indicated there was no written informed consent from client #1's guardian for the restrictive interventions.</p> <p>2. Client #2's record was reviewed on 3/16/23 at 12:45 pm.</p> <p>Client #2's BSP dated 10/2022 indicated client #2 had target behaviors of Property Destruction (Breaking items), Stuffing the toilets with objects, Self-induced Vomiting, Refusal to eat and</p>				<p>committee and approved with written consent before being implemented.</p> <p>B. How the facility will identify other residents having the potential to be affected by the same deficient practice, and what corrective action will be taken; 1. This deficiency has the potential to affect all residents. Mosaic will implement and ensure each client's specific active treatment services require Mosaic will ensure each client's restrictive program will be sent through the human rights committee and approved with written consent before being implemented.</p> <p>C. THE PROCEDURE FOR IMPLEMENTING THE CORRECTIVE ACTION(S): 1. Mosaic will ensure each client's restrictive program will be sent through the human rights committee and approved with written consent before being implemented.</p> <p>D. What measures will be put into place or what systemic changes the facility will make to ensure that the deficient practice does not recur; How the corrective action(s) will be monitored to ensure the deficient practice will not recur, i.e., what quality assurance program will be put into place;</p>		

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	<p>Purposeful urinating on the floor or objects, Purposeful throwing clothing, bedding, and other items away. The Rights Restriction Review dated 12/10/21 indicated the restrictive components of Locked Medications, Locked Money, Locked Basement, Door Alarm at day program, Behavior Support Plan, Medications given for Negative Behaviors and Door Alarm on doors at [Name of previous group home].</p> <p>Client #2's BSP dated 10/2022 indicated the following psychotropic medications: "Abilify 20 mg (used to treat obsessive compulsive disorder). Clonazepam 0.5 mg (used to obsessive compulsive disorder). Invega Sustenna 156 mg (used to treat mood conditions). Topamax 50 mg (used to treat mood conditions). Propranolol 10 mg (used to treat Anxiety). Naltrexone 50 mg (used to treat obsessive compulsive disorder)."</p> <p>Client #2's ISP dated 10/19/22 indicated client #2's guardians were his parents.</p> <p>Client #2's record indicated there was no written informed consent from client #2's guardians for the restrictive interventions.</p> <p>An interview with the Qualified Intellectual Disabilities Professional (QIDP) was conducted on 3/21/23 at 12:37 pm. The QIDP stated, "Any restrictions have to be approved by the HRC and the guardian."</p> <p>An interview with the Quality Coordinator (QC) was conducted on 3/21/23 at 2:49 pm. The QC stated, "If something is restricted, HRC should have approved and guardian consented to it."</p>				<p>1. Mosaic will form a human rights committee, where the qualified intellectual disabilities professional and the quality coordinator will present the restrictive programs to be reviewed and approved with written consent.</p> <p>E. THE TITLE OF THE PERSON RESPONSIBLE FOR ENSURING THE FACILITY REMAINS IN COMPLIANCE WITH THE CITED DEFICIENCY: (Do not put the staff names).</p> <p>Administrator</p>		



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W 0288  Bldg. 00	<p>9-3-4(a)</p> <p>483.450(b)(3) MGMT OF INAPPROPRIATE CLIENT BEHAVIOR</p> <p>Techniques to manage inappropriate client behavior must never be used as a substitute for an active treatment program.</p> <p>Based on observation, record review, and interview for 1 of 3 sampled clients (#3) and one additional client (#5), the facility failed to ensure techniques to manage inappropriate behavior not be used as a substitute for an active treatment program in regard to client #3's clothing restriction and client #5's toilet paper restriction.</p> <p>Findings include:</p> <p>Observations were conducted at the group home on 3/15/23 from 3:31 pm to 6:45 pm, 3/16/23 from 6:00 am to 9:52 am, 3/16/23 from 1:33 pm to 3:15 pm and 3/17/23 from 10:30 am to 12:15 pm. Clients #3 and #5 were present in the group home for the duration of the observation period.</p> <p>1. On 3/15/23 at 3:41 pm, client #3's closet did not have clothes in it. Client #3's dresser drawers did not have clothes in them. Client #3's clothes were on a shelf in the laundry room.</p> <p>On 3/16/23 at 3:04 pm staff #4 stated, "If [client #3] has clothes in his room he will throw them around and pee on them."</p> <p>On 3/17/23 at 10:45 am client #3 stated, "No, my clothes are not in my room, over there (he pointed in the direction of laundry room)." When asked why, client #3 stated, "I don't know."</p>			W 0288	<p>Clothes will be moved back into client's room. A storage hanger was purchased to prevent urination in drawers. A new dresser was also purchased.</p> <p>Toilet paper and personal hygiene supplies were put into the bathroom. A toilet paper holder was purchased for the home.</p> <p>QIDP will monitor the home for rights restrictions and availability of supplies.</p> <p>Quality Coordinator and AD will be monitor homes for safety, rights, and hygiene.</p>		04/28/2023

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	<p>An interview with the House manager (HM) was conducted on 3/17/23 at 11:50 am. The HM stated, "When I started [client #3's] clothes were in the laundry room. I assume it's so he doesn't pee on them or throw them away. I don't see it in his plan. I may not be looking in the right spot."</p> <p>An interview with the Qualified Intellectual Disability Professional (QIDP) was conducted on 3/21/23 at 12:37 pm. The QIDP stated, "[Client #3] does not have his clothes restricted from him. He should access his clothes in his room."</p> <p>An interview with the Quality Coordinator (QC) was conducted on 3/21/23 at 2:49 pm. The QC stated, "[Client #3's] clothes should be in his dresser or closet, unless it is in a plan to be elsewhere. It is not in his plan for his clothes to be in the laundry room. If something is restricted Human Rights Committee (HRC) should have approved and guardian should have consented to it."</p> <p>2. Throughout the observation periods, there was no toilet paper in the first bathroom in the hallway on the left side of the house.</p> <p>Client #5's record was reviewed on 3/17/23 at 9:00 am.</p> <p>Client #5's ISP (Individual Support Plan) dated 2/25/22 did not indicate a program to address misuse of toilet paper. Client #5's BSP (Behavior Support Plan) dated 1/22 did not list toilet paper misuse as a targeted behavior.</p> <p>An interview with the House Manager (HM) was conducted on 3/17/23 at 11:50 am. The HM stated, "We keep toilet paper in the back bathroom. [Client #5] likes to tear it up. I am not sure if it is in his plan. The toilet paper is in the</p>						

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W 0323  Bldg. 00	<p>back bathroom so they all have access to toilet paper."</p> <p>An interview with the Qualified Intellectual Disability Professional (QIDP) was conducted on 3/21/23 at 12:37 pm. The QIDP stated, "There should be toilet paper in every bathroom with a spare roll in the cabinet. No one in this home has a restriction for toilet paper."</p> <p>An interview with the Quality Coordinator (QC) was conducted on 3/21/23 at 2:49 pm. The QC stated, "I am not aware of any restriction for toilet paper in this home. If anything is restricted there should be HRC approval."</p> <p>9-3-5(a)</p> <p>483.460(a)(3)(i) PHYSICIAN SERVICES</p> <p>The facility must provide or obtain annual physical examinations of each client that at a minimum includes an evaluation of vision and hearing.</p> <p>Based on record review and interview for 3 of 3 sampled clients (#1, #2 and #3), the facility failed to ensure clients #1, #2 and #3 had follow up hearing exams as recommended by the doctor.</p> <p>Findings include:</p> <p>1) Client #1's record was reviewed on 3/16/23 at 11:00 am. Client #1's most recent hearing exam was dated 2/22/22. The report indicated to follow up in 1 year. No follow up report was available for review.</p> <p>2) Client #2's record was reviewed on 3/16/23 at 12:45 pm. Client #2's most recent hearing exam was dated 11/14/19. The report indicated to return in 2</p>			W 0323	<p>A medical audit will be conducted and all outstanding appointments will be scheduled.</p> <p>Medical appointments will be scheduled in regulation timing</p> <p>A Health Service Associate was hired to assist in medical appointments and to ensure timeliness of medical needs.</p> <p>Nursing will oversee medical appointments on a tracking sheet that Quality Coordinator will also monitor.</p>		04/28/2023

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W 0336  Bldg. 00	<p>years. No follow up report was available for review.</p> <p>3) Client #3's record was reviewed on 3/16/23 at 11:49 am. Client #3's most recent hearing exam was dated 4/23/18. The report indicated a referral to an ENT- Ear Nose and Throat doctor for mixed hearing loss of the left ear was recommended. No follow up report was available for review.</p> <p>An interview with the Registered Nurse (RN) was conducted on 3/21/23 at 1:45 pm. The RN stated, "Recommendations made from doctors should be followed up in a timely fashion."</p> <p>An interview with the Qualified Intellectual Disabilities Professional (QIDP) was conducted on 3/21/23 at 12:37 pm. The QIDP stated, "A recommendation from a doctor should be follow up on in timely fashion."</p> <p>An interview with the Quality Coordinator (QC) was conducted on 3/21/23 at 2:49 pm. The QC stated, "We should follow all doctors' recommendations. All recommendations should be followed up within at least 6 months."</p> <p>9-3-6(a)</p> <p>483.460(c)(3)(iii) NURSING SERVICES</p> <p>Nursing services must include, for those clients certified as not needing a medical care plan, a review of their health status which must be on a quarterly or more frequent basis depending on client need.</p> <p>Based on record review and interview for 3 of 3 sampled clients (#1, #2 and #3), the facility failed to ensure clients #1, #2 and #3's nursing</p>			W 0336	<p>The nurse responsible for missed assessments has been terminated.</p> <p>The new RN will monitor and</p>		04/28/2023

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	<p>quarterlies were available for review.</p> <p>Findings include:</p> <p>1) Client #1's record was reviewed on 3/16/23 at 11:00 am. The review indicated nursing quarterly reviews for April, May and June 2022 (Quarter 2), July, August and September 2022 (Quarter 3), and October, November, and December 2022 (Quarter 4) were not available for review.</p> <p>2) Client #2's record was reviewed on 3/16/23 at 12:45 pm. The review indicated nursing quarterly reviews for April, May and June 2022 (Quarter 2), July, August and September 2022 (Quarter 3), and October, November, and December 2022 (Quarter 4) were not available for review.</p> <p>3) Client #3's record was reviewed on 3/16/23 at 11:49 am. The review indicated nursing quarterly reviews for April, May and June 2022 (Quarter 2), July, August and September 2022 (Quarter 3), and October, November, and December 2022 (Quarter 4) were not available for review.</p> <p>An interview with the Registered Nurse (RN) was conducted on 3/21/23 at 1:45 pm. The RN stated, "Nursing assessments should be completed once a quarter at minimum."</p> <p>An interview with the Qualified Intellectual Disability Professional (QIDP) was conducted on 3/21/23 at 12:37 pm. The QIDP stated, "The nurse should be assessing individuals every quarter at least, and again if the individuals' condition changes."</p> <p>An interview with the Quality Coordinator (QC) was conducted on 3/21/23 at 2:49 pm. The QC stated, "Nurses should be completing</p>				<p>assess individuals as required and ensure assessments are completed quarterly.</p> <p>Nursing assessments will be completed in compliance with all individuals.</p> <p>This will also be monitored during our medical meetings with ED and RN</p>		

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W 0382  Bldg. 00	<p>assessments monthly and update as conditions change."</p> <p>9-3-6(a)</p> <p>483.460(l)(2) DRUG STORAGE AND RECORDKEEPING The facility must keep all drugs and biologicals locked except when being prepared for administration. Based on observation and interview for 3 of 3 sampled clients (#1, #2 and #3) plus 2 additional clients (#4 and #5), the facility failed to ensure the clients' medications were stored in a secure manner.</p> <p>Findings include:</p> <p>Observations were conducted in the group home on 3/15/23 from 3:31 pm to 6:45 pm, 3/16/23 from 6:00 am to 9:52 am and 3/16/23 from 1:33 pm to 3:15 pm. Clients #1, #2, #3, #4 and #5 were present in the group home for the duration of the observation period.</p> <p>On 3/15/23 at 4:14 pm staff #2 administered client #1's medications. When finished staff #2 took client #1 back into the living room leaving the medication cart unlocked. Staff was not able to see the medication cart from the living room. Staff #2 then walked down the hallway and went to client #5's bedroom. Staff #2 was not able to see the medication room from client #5's bedroom. Staff #2 asked client #5 to come to the medication room. The medication cart was left unlocked for 3 minutes.</p> <p>On 3/16/23 at 8:19 am staff #4 brought client #1 into the medication room and administered his medications. After administering the medications,</p>			W 0382	<p>Medication carts will be locked at all times</p> <p>Staff will be retrained on locked medication procedures</p> <p>QIDP and Quality Coordinator will ensure meds are properly stored.</p> <p>Nursing will assess proper medication storage during visits as well.</p>		04/28/2023

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	<p>staff #4 took client #1 into the living room and left the medication cart keys hanging from the lock and the drawer for the medication open. The medication cart was left unattended for 2 minutes.</p> <p>On 3/16/23 at 2:07 pm staff #4 administered client #5's medication. Client #5 walked back to his bedroom. Staff #4 walked out of medication room and left the medication cart unlocked.</p> <p>At 2:22 pm the medication cart remained unlocked and staff #4 was in the living room folding clothes and putting the clothes away. Staff #4 was not able to see the medication cart from the living room. Staff #1 was in the kitchen doing dishes. Staff #1 was not able to see the medication cart from the kitchen.</p> <p>At 2:38 pm staff #4 was in client #2's bedroom making his bed. The medication cart remained unlocked.</p> <p>An interview with staff #4 was conducted on 3/16/23 at 3:07 pm. Staff #4 stated, "Medication should be locked."</p> <p>At 3:08 pm staff #4 locked the medication cart.</p> <p>An interview with the Registered Nurse (RN) was conducted on 3/21/23 at 1:45 pm. The RN stated, "I just started two days ago, but I would think medication should be in a locked cabinet."</p> <p>An interview with the Qualified Intellectual Disabilities Professional (QIDP) was conducted on 3/21/23 at 12:37 pm. The QIDP stated, "Medications are stored in a locked cabinet and controls (controlled medications) are double locked. After every medication administration the cabinet should be locked."</p> <p>An interview with the Quality Coordinator (QC)</p>						

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W 0383  Bldg. 00	<p>was conducted on 3/21/23 at 2:29 pm. The QC stated, "Medications should be stored organized and locked."</p> <p>9-3-6(a)</p> <p>483.460(l)(2) DRUG STORAGE AND RECORDKEEPING Only authorized persons may have access to the keys to the drug storage area.</p> <p>Based on observation and interview for 3 of 3 sampled clients (#1, #2 and #3) plus 2 additional clients (#4 and #5), the facility failed to ensure clients did not have access to medication cart keys.</p> <p>Findings include:</p> <p>Observation was conducted in the group home on 3/16/23 from 6:00 am to 9:52 am. Clients #1, #2, #3, #4 and #5 were present in the group home for the duration of the observation period.</p> <p>On 3/16/23 at 8:19 am staff #4 brought client #1 into the medication room and administered his medications. After administering the medication staff #4 took client #1 into the living room and left the medication cart keys hanging from the lock and the drawer for the medication open. The medication cart was left unattended for 2 minutes.</p> <p>An interview with the Registered Nurse (RN) was conducted on 3/21/23 at 1:45 pm. The RN stated, "Staff should have the medication cart keys on them."</p> <p>An interview with the Qualified Intellectual Disabilities Professional (QIDP) was conducted on 3/21/23 at 12:37 pm. The QIDP stated, "The</p>			W 0383	<p>Medication carts will be locked at all times</p> <p>Staff will be retrained on locked medication procedures</p> <p>QIDP and Quality Coordinator will ensure meds are properly stored.</p> <p>Nursing will assess proper medication storage during visits as well.</p>		04/28/2023



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W 0406  Bldg. 00	<p>keys need to be kept put away for the next person. After every medication administration the cabinet should be locked, and the keys put away."</p> <p>An interview with the Quality Coordinator (QC) was conducted on 3/21/23 at 2:29 pm. The QC stated, "Medications should be stored organized and locked. The keys should be kept on staff, so clients don't have access to them."</p> <p>9-3-6(a)</p> <p>483.470</p> <p><b>PHYSICAL ENVIRONMENT</b></p> <p>The facility must ensure that specific physical environment requirements are met. Based on observation, record review and interview for 3 of 3 sampled clients (#1, #2 and #3) plus 2 additional clients (#4 and #5), the facility failed to meet the Condition of Participation: Physical Environment. The facility failed to ensure a sanitary environment was maintained in the home. The facility failed to ensure the home was in good repair. The facility failed to conduct evacuation drills from March 2022 to March 2023.</p> <p>Findings include:</p> <p>1) Please refer to W104. For 3 of 3 sampled clients (#1, #2 and #3), plus 2 additional clients (#4 and #5), the facility failed to ensure the home was in good repair.</p> <p>2) Please refer to W440. The facility failed to conduct quarterly evacuation drills for each shift of personnel from March 2022 to March 2023 for clients #1, #2, #3, #4 and #5.</p> <p>3) Please refer to W454. The facility failed to ensure a sanitary environment was maintained in</p>			W 0406	<p>A training of drill completion will be conducted by Quality Coordinator. Staff will document on drills. Home will be brought to good sanitary conditions and home repairs completed.</p> <p>Maintenance staff will complete visits and updates to the home weekly. Staff will be using a cleaning checklist ongoing.</p> <p>Checklists will be monitored by QIDP and Quality Coordinator in homes.</p>		04/28/2023

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W 0440  Bldg. 00	<p>the home for clients #1, #2, #3, #4 and #5.</p> <p>9-3-7(a)</p> <p>483.470(i)(1) EVACUATION DRILLS at least quarterly for each shift of personnel.</p> <p>Based on record review and interview for 3 of 3 sampled clients (#1, #2 and #3), plus 2 additional clients (#4 and #5), the facility failed to conduct quarterly evacuation drills for each shift of personnel.</p> <p>Findings include:</p> <p>The facility's evacuation drills were reviewed on 3/15/23 at 4:52 pm for clients #1, #2, #3, #4 and #5 and indicated there were no evacuation drills to review from March 2022 to March 2023.</p> <p>An interview with staff #2 was conducted on 3/15/23 at 4:47 pm. Staff #2 stated, "I am not sure where the previous manager put the fire drills, we have new management. We have not done any fire drills recently. Last month we did one I don't know where it is located."</p> <p>An interview with the house manager (HM) was conducted on 3/15/23 at 6:09 pm. The HM stated, "I have no clue if we have any fire drills."</p> <p>An interview with the Qualified Intellectual Disabilities Professional (QIDP) was conducted on 3/21/23 at 12:37 pm. The QIDP stated, "Fire drills should be completed every month."</p> <p>An interview with the Quality Coordinator (QC) was conducted on 3/21/23 at 2:49 pm. The QC stated, "Fire drills should be completed once a</p>			W 0440	<p>Mosaic will ensure that fire drills will be completed at least quarterly for each shift. Documentation of drills will be kept/made available for review onsite. Mosaic will conduct monthly drills to practice safety during natural disasters. Paperwork will be turned in monthly to the quality coordinator and kept in the Mosaic has a "Fire/Sprinkler System outage and Continuous Fire Watch" policy that will be followed as needed and kept in the documentation records onsite available for viewing.s in the home. A drill schedule has already been created for the agency.</p> <p>QIDP and Quality Coordinator will ensure drills are being completed and staf are trained on the EPP.</p>		04/28/2023

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W 0454  Bldg. 00	<p>month on different shifts."</p> <p>9-3-7(a)</p> <p>483.470(l)(1) INFECTION CONTROL</p> <p>The facility must provide a sanitary environment to avoid sources and transmission of infections.</p> <p>Based on observation and interview for 3 of 3 sampled clients (#1, #2 and #3) plus 2 additional clients (#4 and #5), the facility failed to ensure a sanitary environment was maintained in the home.</p> <p>Findings include:</p> <p>Observations were conducted at the group home on 3/15/23 from 3:31 pm to 6:45 pm, 3/16/23 from 6:00 am to 9:52 am, 3/16/23 from 1:33 pm to 3:15 pm and 3/17/23 from 10:30 am to 12:15 pm.</p> <p>On 3/15/23 at 3:41 pm there was a smell of urine when walking into client #3's and #5's bedroom. The first bathroom on the right side of the hallway had feces in the toilet. The feces was still in the toilet on 3/16/23 at 6:00 am. The bathroom did not have soap or toilet paper. On the floor of the shower there was a brown and yellow substance. Several walls in clients #1, #3, #4 and #5 bedrooms had a substance that appeared to be an unknown liquid on them. In the freezer in the garage there was food lying inside that was not in any container. The shelf in the refrigerator freezer in the garage had a brown substance on it. The kitchen and dining room floor was sticky when walking on it.</p> <p>On 3/16/23 at 7:33 am, client #2 took a shower without any soap or shampoo. This affected clients #1, #2, #3, #4 and #5.</p>			W 0454	<p>A. What corrective action(s) will be accomplished for these residents found to have been affected by the deficient practice;</p> <p>1. The smell of urine has been eliminated. Both beds and dressers where individuals were urinating were replaced. This will increase the sanitization of the facility.</p> <p>2. The sausage patties inside the chest freezer have been discarded. The fridge in the garage has been cleaned of the brown and blue substance.</p> <p>3. Toilet was flushed and the bathroom was cleaned. The shower curtain has been replaced.</p> <p>B. How the facility will identify other residents having the potential to be affected by the same deficient practice, and what corrective action will be taken;</p> <p>1. This deficiency has the potential to affect all residents. The smell of urine has been eliminated. Both beds and dressers where individuals were urinating were replaced. This will increase the sanitization of the</p>		04/28/2023

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	<p>On 3/16/23 at 7:35 am, staff #2 indicated client #2 did not have soap or shampoo when he took his shower.</p> <p>An interview with the Registered Nurse (RN) was conducted on 3/21/23 at 1:45 pm. The RN stated, "It is a safety concern to have a smell of urine in the home and to have sticky floors." The RN stated, "Individuals should have shampoo, soap, clean clothes, lotion and towels to take a shower."</p> <p>An interview with the Qualified Intellectual Disabilities Professional (QIDP) was conducted on 3/21/23 at 12:37 pm. The QIDP stated, "The home should be clean and in good order and meet state regulations. We don't tolerate a strong smell of urine anywhere in the house. After every individual uses the bathroom staff should go in and clean and sanitize it." The QIDP stated, "The refrigerator should be cleaned at least twice a week. Food inside the freezer should be in a container. It is a health issue and safety risk having feces in a toilet overnight."</p> <p>An interview with the Quality Coordinator (QC) was conducted on 3/21/23 at 2:49 pm. The QC stated, "The home should be clean ... and the walls wiped down. There should not be a urine smell in the bedrooms. Bathrooms should be cleaned daily. Floors should be swept and mopped daily. The home is a health and safety risk to not be clean and it is about the quality of life. Food in the freezer should be in Ziploc bags with instructions and expiration date. Refrigerators should be cleaned and wiped down weekly. The mark on the walls is due to one individual in the home likes to urinate on the walls. He goes in all the bedrooms and pees on walls and in the vents. The home is a health and</p>				<p>facility.</p> <p>2.This deficiency has the potential to affect all residents. The sausage patties inside the chest freezer have been discarded. The fridge in the garage has been cleaned of the brown and blue substance.</p> <p>3.This deficiency has the potential to affect all residents. The toilet was flushed and the bathroom was cleaned. The shower curtain has been replaced.</p> <p>C. THE PROCEDURE FOR IMPLEMENTING THE CORRECTIVE ACTION(S):</p> <p>1.The smell of urine has been eliminated. Both beds and dressers where individuals were urinating were replaced. This will increase the sanitization of the facility.</p> <p>2.The sausage patties inside the chest freezer have been discarded. The fridge in the garage has been cleaned of the brown and blue substance.</p> <p>3.Toilet was flushed and the bathroom was cleaned. The shower curtain has been replaced.</p> <p>D. What measures will be put into place or what systemic changes the facility will make to ensure that the deficient practice does not recur; How the corrective action(s) will be monitored to ensure the deficient practice will not recur, i.e., what</p>		

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W 0474  Bldg. 00	<p>safety risk not being clean. It is about the quality of life."</p> <p>9-3-7(a)</p> <p>483.480(b)(2)(iii) MEAL SERVICES Food must be served in a form consistent with the developmental level of the client.</p> <p>Based on observation, record review, and interview for 1 of 3 sample clients (#1), the facility</p>	W 0474	<p>quality assurance program will be put into place;</p> <p>1.Mosaic's team consisting of direct support supervisors, the quality coordinator, the associate director, and the quality intellectual disabilities professional will do daily checks to ensure the house is a sanitary environment.</p> <p>2.Mosaic's team consisting of direct support supervisors, the quality coordinator, the associate director, and the quality intellectual disabilities professional will do daily checks to ensure the house is a sanitary environment.</p> <p>3.Mosaic's team consisting of direct support supervisors, the quality coordinator, the associate director, and the quality intellectual disabilities professional will do daily checks to ensure the house is a sanitary environment.</p> <p>E. THE TITLE OF THE PERSON RESPONSIBLE FOR ENSURING THE FACILITY REMAINS IN COMPLIANCE WITH THE CITED DEFICIENCY: (Do not put the staff names).</p> <p>Administrator</p> <p>Dining plan will be updated based on medical assessment of swallowing needs.</p>	04/28/2023	

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	<p>failed to ensure client #1's plan for choking was consistent with his assessment.</p> <p>Findings include:</p> <p>Observations were conducted on 3/15/23 from 3:31 pm to 6:45 pm and 3/16/23 from 6:00 am to 9:52 am. Client #1 was present in the home for the duration of the observation period.</p> <p>On 3/16/23 at 9:39 am client #1 was fed pureed pancakes and scrambled eggs. The House Manager stated she "messed up" the sausage by putting too much water in it. The HM gave client #1 a glass of protein shake.</p> <p>An interview with staff #2 was conducted on 3/16/23 at 6:06 pm. Staff #2 stated, "[Client #1's] dining plan is mechanical soft, but he hasn't been chewing so we find it better to do pureed with him."</p> <p>An interview with staff #5 was conducted on 3/17/23 at 10:36 am. Staff #5 stated, "[Client #1] has a problem with swallowing since he moved in on 2/22/23. If we give him mechanical soft he would throw it up, so now we give him pureed and he is okay."</p> <p>Client #1's record was reviewed on 3/16/23 at 11:00 am.</p> <p>Client #1's Dining/ Choking Risk Management Plan dated 6/22 indicated the following: "...[Client #1] needs to cut his food into bite size pieces and he requires staff assistance to do this. [Client #1] had a swallow study done on 8/26/2020. Thick it nectar thick liquids were recommended. No mixed texture food items were also recommended. So this means no soup or cereal!"</p>				<p>Staff will be trained on this plan. Staff will be trained on documentation in instances of issues with dining plan</p> <p>Nursing staff will assist with ensuring staff are educating in food consistencies.</p> <p>QIDP will monitor this during home visits.</p>		

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	<p>Client #1's discharge summary from [Hospital name] dated 2/22/23 indicated the following: "...Discharge diet: Resume home diet or diet as instructed...."</p> <p>Client #1's Primary Doctor note dated 3/14/23 indicated the following: "...Patient presents for evaluation of swallow (sic). Patient's been having episodes where he is sometimes choking. There are other times when he has emesis after eating. He is being given honey thick liquids with pureed foods. He is kept upright 20 to 30 minutes after eating as well. He has episodes of choking with white phlegm that can occur hours later. Seems to be better if he is sitting in a recliner. He has also been with family being fed slowly in restaurants and he seems to tolerate that okay. He is also able to essentially (sic) a clean his plate during those times. On review of the hospital records the speech therapist was recommending honey thick liquids with off (sic) small bites and fine chop. ...Notes: Order swallow study again... Notes: Recommend honey thick liquids with mechanical soft diet. I do recommend speech evaluation due to further questions about possible decline."</p> <p>An interview with the Registered Nurse (RN) was conducted on 3/21/23 at 1:45 pm. The RN stated, "When an individual leaves the hospital you would have new physician orders and possibly new dining orders. Those orders should all be updated."</p> <p>An interview with the Qualified Intellectual Disabilities Professional (QIDP) was conducted on 3/21/23 at 12:37 pm. The QIDP stated, "I am not sure what his dining plan states. The staff should be following his dining plan."</p>						

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W 0488  Bldg. 00	<p>An interview with the Quality Coordinator (QC) was conducted on 3/21/23 at 2:49 pm. The QC stated, "[Client #1] used to be able to feed himself but he can't right now. I don't know what his plan currently states in regard to mechanical soft or pureed."</p> <p>9-3-8(a)</p> <p>483.480(d)(4) DINING AREAS AND SERVICE</p> <p>The facility must assure that each client eats in a manner consistent with his or her developmental level.</p> <p>Based on observation and interview for 3 of 3 sampled clients (#1, #2, and #3) plus 2 additional clients (#4 and #5), the facility failed to ensure the clients assisted with meal preparation and served themselves at dinner and breakfast.</p> <p>Findings include:</p> <p>Observations were conducted in the group home on 3/15/23 from 3:31 pm to 6:45 pm and 3/16/23 from 6:00 am to 9:52 am. Clients #1, #2, #3, #4 and #5 were present throughout the observation period.</p> <p>On 3/15/23 at 4:34 pm staff #3 arrived with bags from the grocery store. No clients assisted with carrying in the groceries, unpacking or putting them away.</p> <p>At 4:39 pm staff #3 washed her hands and began making dinner. Client #2 was walking around the house.</p> <p>At 5:06 pm client #4 was sitting in his wheelchair in front of the front door looking outside and falling asleep. Client #3 was sitting at the dining</p>			W 0488	<p>A. What corrective action(s) will be accomplished for these residents found to have been affected by the deficient practice;</p> <p>1.Mosaic will ensure the clients assist with meal preparation and serving themselves at dinner and breakfast.</p> <p>B. How the facility will identify other residents having the potential to be affected by the same deficient practice, and what corrective action will be taken;</p> <p>1.This deficiency has the potential to affect all residents. Mosaic will ensure the clients assist with meal preparation and serving themselves at dinner and breakfast.</p> <p>C. THE PROCEDURE FOR IMPLEMENTING THE CORRECTIVE ACTION(S):</p> <p>1.Mosaic will ensure the clients</p>		04/28/2023



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	<p>room table writing on paper and talking. Client #1 was sitting with staff #2 playing Uno. Staff #1 was sitting in the living room. Staff #3 went around the house to every client and asked them what vegetables they wanted for dinner. Client #5 stated, "I want peanut butter."</p> <p>At 5:14 pm client #2 walked into the kitchen and staff #3 told client #2 the stove was hot and he needed to stay away from it.</p> <p>At 5:32 pm staff #3 asked each individual what drink mix they wanted in their water. Staff #3 put a drink packet in each water bottle and shook it up for them. Client #1's drink was mixed with thick-it.</p> <p>At 5:46 pm staff #3 fixed a plate of sausage, pasta and broccoli. Staff #3 cut up all the food and then gave it to client #3.</p> <p>At 5:51 pm staff #3 fixed another plate with sausage, pasta and mixed vegetables. Staff #2 blended vegetables in the blender for client #1 and #4. Client #2 sat at dining room table and staff #3 brought out his plate of food and set it down on the table.</p> <p>At 5:58 pm staff #3 made another plate of sausage, pasta and mixed vegetables. Client #5 sat at the table. Staff #3 brought client #5 his plate of food. Client #5 pushed the plate away and stated, "Peanut Butter." Staff #3 took the plate away. Staff #1 brought the plate and offered it to client #5. Client #5 pushed it away again.</p> <p>At 6:04 pm staff #2 brought a plate of pureed sausage, pasta and mixed vegetables to client #1. Staff #1 brought a plate of pureed sausage, pasta and mixed vegetables for client #4. Staff #1 began feeding him by the front door.</p> <p>On 3/16/23 at 8:30 am The House Manager (HM) arrived at the house. The HM went into the kitchen and began fixing breakfast. The HM made scrambled eggs, sausage and pancakes. Client #2 was walking around the house. Client #1 was</p>				<p>assist with meal preparation and serving themselves at dinner and breakfast.</p> <p>D. What measures will be put into place or what systemic changes the facility will make to ensure that the deficient practice does not recur; How the corrective action(s) will be monitored to ensure the deficient practice will not recur, i.e., what quality assurance program will be put into place;</p> <p>1. Mosaic's team consisting of direct support supervisors, the quality coordinator, the associate director, and the quality intellectual disabilities professional will do daily checks to ensure the clients assist with meal preparation and are serving themselves at dinner and breakfast.</p> <p>E. THE TITLE OF THE PERSON RESPONSIBLE FOR ENSURING THE FACILITY REMAINS IN COMPLIANCE WITH THE CITED DEFICIENCY: (Do not put the staff names).</p> <p>Administrator</p>		

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

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FORM APPROVED  
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	<p>sitting in his wheelchair in the living room. Client #4 was in his wheelchair by the front door. Client #5 was in his bedroom.</p> <p>At 9:22 am the HM put pancakes and syrup, sausage links and scrambled eggs on two different plates and took the plates to the table. The HM called for client #2 and client #5 to come to table to eat. Client #5 picked up the sausage off his plate and handed it to staff #4. Staff #4 took sausage to the kitchen.</p> <p>At 9:30 am client #2 finished his food and took his plate to the kitchen. HM made a glass of chocolate milk for client #5. HM was blending client #1 and #4's food.</p> <p>At 9:39 am HM brought plates of food to the table for clients #1 and #4. Staff #4 was feeding client #4 and HM began feeding client #1. They had pureed pancakes and scrambled eggs. The HM stated she messed up the sausage by putting too much water in it. The HM gave client #1 a glass of protein shake.</p> <p>Clients #1, #2, #3, #4, and #5 were not prompted to assist with cooking or to serve themselves.</p> <p>An interview with the HM was conducted on 3/17/23 at 11:50 am. The HM stated, "Staff cook and prepare the food. Staff then plate up the food and bring it to the table for each client. Clients don't assist with meal preparation or serving."</p> <p>An interview with the Qualified Intellectual Disabilities Professional (QIDP) was conducted on 3/21/23 at 12:37 pm. The QIDP stated, "Staff should prepare meals according to the menu with clients assisting with the preparation as they are able. Meals should be served family style, food and condiments should be on the table and staff should assist as needed."</p>						

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W 9999  Bldg. 00	<p>An interview with the Quality Coordinator (QC) was conducted on 3/21/23 at 2:49 pm. The QC stated, "Clients should be assisting with preparing meals. They should have choice and help prepare options. We prefer that meals are served family style, by putting food on the table and assist with serving. Staff should be sitting at the table assisting clients as needed."</p> <p>9-3-8(a)</p> <p>STATE FINDINGS:</p> <p>The following Community Residential Facilities for Persons with Developmental Disabilities Rule was not met.</p> <p>460 IAC 9-3-3 Facility Staffing (e) Prior to assuming residential job duties and annually thereafter, each residential staff person shall submit written evidence that a Mantoux (STU, PPD) tuberculosis skin (TB) test or chest x-ray was completed. The result of the Mantoux shall be recorded in millimeter of induration with the date given, date read, and by whom administered. If the skin test result is significant (ten (10) millimeters or more), then a chest film shall be done with other physical and laboratory examinations as necessary to complete a diagnosis. Prophylactic treatment shall be provided as per diagnosis for the length of time prescribed by the physician.</p> <p>This state rule is not met as evidenced by:</p> <p>Based on record review and interview for 1 of 3</p>			W 9999	<p>A. What corrective action(s) will be accomplished for these residents found to have been affected by the deficient practice; 1.Mosaic Woodmont staff will have Mantoux tuberculosis skin test or chest x-ray before they assume residential job duties and annually thereafter.</p> <p>B. How the facility will identify other residents having the potential to be affected by the same deficient practice, and what corrective action will be taken; 1.This deficiency has the potential to affect all residents. Mosaic Woodmont staff will have Mantoux tuberculosis skin test or chest x-ray before they assume residential job duties and annually thereafter.</p> <p>C. THE PROCEDURE FOR IMPLEMENTING THE CORRECTIVE ACTION(S): 1.Mosaic Woodmont staff will</p>		04/28/2023

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	<p>personnel records reviewed (House Manager), the facility failed to obtain a PPD and/or a chest x-ray for the House Manager upon hire.</p> <p>Findings include:</p> <p>On 3/16/23 at 8:08 pm, the facility staff personnel records were reviewed and indicated the following:</p> <p>The House Manager (HM) was hired on 5/3/21. There was not a Mantoux skin test available for review for the HM since being hired.</p> <p>An interview with the Quality Coordinator (QC) was conducted on 3/21/23 at 2:49 pm. The QC stated, "TB tests are completed within the 1st week of being hired and then the 2nd one is done within the next 2 weeks. It is a 2-step process. [House Manager] should have already had it completed."</p> <p>9-3-3(e)</p>				<p>have Mantoux tuberculosis skin test or chest x-ray before they assume residential job duties and annually thereafter.</p> <p>D. What measures will be put into place or what systemic changes the facility will make to ensure that the deficient practice does not recur; How the corrective action(s) will be monitored to ensure the deficient practice will not recur, i.e., what quality assurance program will be put into place;</p> <p>1.Human Resources will ensure Mosaic Woodmont staff have Mantoux tuberculosis skin test or chest x-ray before they assume residential job duties and annually thereafter. Periodic record review of employee files will be completed to ensure compliance.</p> <p>E. THE TITLE OF THE PERSON RESPONSIBLE FOR ENSURING THE FACILITY REMAINS IN COMPLIANCE WITH THE CITED DEFICIENCY: (Do not put the staff names).</p> <p>Administrator</p>		