

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

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER 15G377	(X2) MULTIPLE CONSTRUCTION A. BUILDING 00 B. WING _____	(X3) DATE SURVEY COMPLETED 02/15/2023
NAME OF PROVIDER OR SUPPLIER CORVILLA INC		STREET ADDRESS, CITY, STATE, ZIP COD 52549 MYRTLE ST SOUTH BEND, IN 46637		
(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 recertification and state licensure survey.</p> <p>Dates of Survey: February 13, 14, and 15, 2023.</p> <p>Facility Number: 000891 Provider Number: 15G377 AIMS Number: 100244320</p> <p>These deficiencies reflect state findings in accordance with 460 IAC 9.</p> <p>Quality Review of this report completed by #27547 on 2/22/23.</p>	W 0000		
W 0104 Bldg. 00	<p>483.410(a)(1) GOVERNING BODY</p> <p>The governing body must exercise general policy, budget, and operating direction over the facility.</p> <p>Based on record review and interview for 2 of 3 sample clients (#2 and #3), the facility failed to provide sufficient oversight for client's #2 and #3's finances.</p> <p>Findings include:</p> <p>1. Client #2's record was reviewed on 2/14/23 at 12:00 pm. Client #2's financial record dated 11/29/22 indicated a cash withdrawal in the amount of \$2,000. A hand written receipt dated 11/29/22 indicated the following: "Corvilla purchased (sic) shower chair for [client #2] - [client #2] to reimburse Corvilla for for amount of \$1,996. 35."</p>	W 0104	<p>1. QIDP and/or Director of residential services will ensure that all purchases made for clients over \$250 will have an Interdisciplinary Team Meeting form will be completed with written approval from the guardian, if applicable.</p> <p>2. Client will be refunded for all \$2 bank charges. QIDP and/or Director of residential services will work with billing department to ensure bank fees are reimbursed for all clients. This will include QIDP looking at monthly bank statements, ensuring no bank fees ensued, and if so, client will be</p>	03/10/2023

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

TITLE

(X6) DATE

Dara Mabie

QIDP

03/07/2023

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

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	<p>An order from an online retailer dated 1/9/23 indicated the following:</p> <p>"Shower Buddy SB3R roll in bath shower commode chair with tilt. Adjustable height with swing away foot rests and armrests. \$1,865.75.</p> <p>Shipping and Handling: \$0.00.</p> <p>Estimated tax to be collected: \$0.00.</p> <p>Grand Total: \$1,865.75."</p> <p>Residential Director #1 was interviewed on 2/15/23 at 12:00 pm and stated, "[Client #2] already had a shower chair. There was nothing wrong with it. We still have it. He needed to do a spend down. We'd talked about a recliner, and the parents suggested a new shower chair. The old one, he laid flat. It didn't tilt. We worked with his parents on getting the shower chair instead of putting the money in [an account]." Residential Director #1 stated, "We do not have documentation of an IDT (Interdisciplinary Team) meeting to discuss it. It was just a phone call with the parent. I have a text message. It wasn't a sit down with the IDT to decide how to spend his money."</p> <p>2. Client #3's record was reviewed on 2/14/23 at 12:30 pm.</p> <p>Client #3's bank statements indicated the following charges for banking fees:</p> <p>7/31/22 -\$2.00. 8/31/22 -\$2.00. 9/29/22 -\$2.00. 10/31/22 -\$2.00. 11/30/22 -\$2.00. 12/31/22 -\$2.00.</p> <p>- The facility failed to address the \$2.00 monthly service fee charged by the bank.</p> <p>Residential Director #1 was interviewed on 2/15/23 at 12:00 pm and stated, "We would refund the fees</p>		<p>reimbursed by Corvilla. QIDP will follow up with CFO and billing specialists when clients will need reimbursed.</p>	

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W 0255 Bldg. 00	<p>to him with back pay. He should not have to pay those fees."</p> <p>9-3-1(a)</p> <p>483.440(f)(1)(i) PROGRAM MONITORING & CHANGE The individual program plan must be reviewed at least by the qualified intellectual disability professional and revised as necessary, including, but not limited to situations in which the client has successfully completed an objective or objectives identified in the individual program plan.</p> <p>Based on record review and interview for 1 of 3 sample client (#2), the facility failed to revise client #2's Individual Support Plan (ISP) objectives after they were consistently met.</p> <p>Findings include:</p> <p>Client #2's record was reviewed on 2/14/23 at 12:00 pm.</p> <p>Client #2's ISP dated 1/18/22 indicated the following goals: "Objective B: [Client #2] will attempt to assist putting a shirt on with 0 - 4 verbal cues for 60% of trials for 3 consecutive months (July - September 2022). - In August 2022, the goal was completed successfully 20/20 times for 100% success. - In September 2022, the goal was completed successfully 8/8 times for 100% success. Objective C: [Client #2] will attempt to assist putting a shirt on with 0 - 3 verbal cues for 70% of trials for 3 consecutive months (October 2022 - January 2023). - In October 2022, the goal was completed successfully 17/17 times for 100% success.</p>	W 0255	<p>QIDP will ensure that goals are appropriately created for all clients. QIDP will complete monthly progress reports by the 15th of each month. These will be sent to the Director of Residential Services for review. When a goal is being consistently met, QIDP will revise the goal in order to make the goal more appropriate for client. An IDT form will be completed and team will be notified for goal revision via phone call or email. All revisions will be sent to director of residential services for approval.</p>	03/15/2023

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	<p>- In November 2022, the goal was completed successfully 12/12 times for 100% success.</p> <p>- In December 2022, the goal was completed successfully 6/6 times for 100% success.</p> <p>- In January 2023, the goal was completed successfully 5/5 times for 100% success."</p> <p>Client #2's ISP dated 12/28/22 indicated the following goal: "Objective A: [Client #2] will attempt to assist putting a shirt on with 0 - 6 verbal cues for 40% of trials for 3 consecutive months (Jan - March 2023). Frequency: 1 time daily."</p> <p>- After client A achieved his dressing goal, the criteria for success was lowered from 70% to 40%, and the input from staff was increased from 3 verbal prompts to 6 verbal prompts. The goal was repeated for the next ISP.</p> <p>Client #2's ISP dated 1/18/22 indicated the following goals: "Objective B: [Client #2] will tolerate being changed every 2 hours or when needed with 0 - 4 verbal cues for 60% of trials for 3 consecutive months (July - September 2022).</p> <p>- In August 2022, the goal was completed 19/19 times for 100% success.</p> <p>- In September 2022, the goal was completed 9/9 times for 100% success.</p> <p>Objective C: [Client #2] will tolerate being changed every 2 hours or when needed with 0 - 3 verbal cues for 70% of trials for 3 consecutive months (October 2022 - January 2023)."</p> <p>- In October 2022, the goal was completed 18/18 times for 100% success.</p> <p>- In November 2022, the goal was completed 12/12 times for 100% success.</p> <p>- In December 2022, the goal was completed 6/6 times for 100% success.</p> <p>- In January 2022, the goal was completed 2/2</p>			

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	<p>times for 100% success."</p> <p>Client #2's ISP dated 12/28/22 indicated the following goals: "Objective A: [Client #2] will tolerate being changed every 2 hours or when needed with 0 - 6 verbal cues for 40% of trials for 3 consecutive months (January - March 2023)." - After client A achieved his toileting goal, the criteria for success was lowered from 70% to 40%, and the input from staff was increased from 3 verbal prompts to 6 verbal prompts. The goal was repeated for the next ISP.</p> <p>Client #2's ISP dated 1/18/22 indicated the following goals: "Objective B: [Client #2] will tolerate a shower or sponge bath 1 time daily with 0 - 4 verbal cues for 60% of trials for 3 consecutive months (July - September 2022). - In August 2022, the goal was completed successfully 16/16 times for 100% success. - In September 2022, the goal was completed successfully 8/8 times for 100% success.</p> <p>Objective C: [Client #2] will tolerate a shower or sponge bath 1 time daily with 0 - 3 verbal cues for 70% of trials for 3 consecutive months (October 2022 - January 2023)." - In October 2022, the goal was completed successfully 15/15 times for 100% success. - In November 2022, the goal was completed successfully 12/12 times for 100% success. - In December 2022, the goal was completed successfully 6/6 times for 100% success. - In January 2023, the goal was completed successfully 5/5 times for 100% success."</p> <p>Client #2's ISP dated 12/28/22 indicated the following goals: "Objective A: [Client #2] will tolerate a shower or</p>			

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	<p>sponge bath 1 time daily with 0 - 6 verbal cues for 40% of trials for 3 consecutive months (Jan - March 2023). Frequency: 1 time daily."</p> <p>- After client A achieved his bathing, the criteria for success was lowered from 70% to 40%, and the input from staff was increased from 3 verbal prompts to 6 verbal prompts. The goal was repeated for the next ISP.</p> <p>Client #2's ISP dated 1/18/22 indicated the following goals:</p> <p>"Objective B: [Client #2] will tolerate his mouth being cleaned with a dental swab 2 times daily with 0 - 4 verbal cues for 60% of trials for 3 consecutive months (July - September 2022).</p> <p>- In August 2022, the goal was completed successfully 20/20 times for 100% success.</p> <p>- In September 2022, the goal was completed successfully 9/9 times for 100% success.</p> <p>Objective C: [Client #2] will tolerate his mouth being cleaned with a dental swab 2 times daily with 0 - 3 verbal cues for 70% of trials for 3 consecutive months (October 2022 - January 2023).</p> <p>- In October 2022, the goal was completed successfully 19/19 times for 100% success.</p> <p>- In November 2022, the goal was completed successfully 13/13 times for 100% success.</p> <p>- In December 2022, the goal was completed successfully 6/6 times for 100% success.</p> <p>- In January 2023, the goal was completed successfully 4/4 times for 100% success."</p> <p>Client #2's ISP dated 12/28/22 indicated the following goals:</p> <p>"Objective A: [Client #2] will tolerate his mouth being cleaned with a dental swab 2 times daily with 0 - 6 verbal cues for 40% of trials for 3 consecutive months (Jan - March 2023).</p> <p>Frequency 1 time daily.</p>			

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	<p>- After client #2 achieved his oral hygiene goal, the criteria for success was lowered from 70% to 40%, and the input from staff was increased from 3 verbal prompts to 6 verbal prompts. The goal was repeated for the next ISP.</p> <p>Client #2's ISP dated 1/18/22 indicated the following goals:</p> <p>"Objective B: [Client #2] will attempt to relax his stomach when given food or medications with 0 - 4 verbal cues for 60% of trials for 3 consecutive months (July - September 2022).</p> <ul style="list-style-type: none"> - In August 2022, the goal was completed successfully 19/19 times for 100% success. - In October 2022, the goal was completed successfully 8/9 times for 88.89% success. <p>Objective C: [Client #2] will attempt to relax his stomach when given food or medications with 0 - 3 verbal cues for 70% of trials for 3 consecutive months (October 2022 - January 2023).</p> <ul style="list-style-type: none"> - In November 2022, the goal was completed successfully 11/12 times for 91.67% success. - In December 2022, the goal was completed successfully 6/6 times for 100% success. - In January 2023, the goal was completed successfully 5/5 times for 100% success." <p>Client #2's ISP dated 12/28/22 indicated the following goals:</p> <p>"Objective A: [Client #2] will attempt to relax his stomach when given food or medications with 0 - 6 verbal cues for 40% of trials for 3 consecutive months (Jan - March). Frequency: 1 time daily."</p> <ul style="list-style-type: none"> - After client #2 achieved his medication goal, the criteria for success was lowered from 70% to 40%, and the input from staff was increased from 3 verbal prompts to 6 verbal prompts. The goal was repeated for the next ISP. <p>Residential Director #1 was interviewed on 2/15/23</p>			

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W 0257 Bldg. 00	<p>at 12:00 pm and stated, "When someone is achieving a goal, it should be changed. It should be changed mid-year if they've met the goal. I would expect a new goal."</p> <p>9-3-4(a)</p> <p>483.440(f)(1)(iii) PROGRAM MONITORING & CHANGE The individual program plan must be reviewed at least by the qualified mental retardation professional and revised as necessary, including, but not limited to situations in which the client is failing to progress toward identified objectives after reasonable efforts have been made.</p> <p>Based on record review and interview for 1 of 3 sample clients (#3), the facility failed to revise client #3's Individual Support Plan (ISP) objectives after he failed to make progress.</p> <p>Findings include:</p> <p>1. Client #3's record was reviewed on 2/14/23 at 12:30 pm. Client #3's ISP dated 8/8/22 indicated the following goals and objectives:</p> <p>1A. "Objective A: [Client #3] will clean his room 1x (time) a week with 0 - 10 verbal prompts at 35% for 3/4 months (August/October 2022). - In August and September, and October 2022, this goal was run 0 times.</p> <p>Objective B: [Client #3] will clean his room 1x a week with 0 - 10 verbal prompts at 40% for 3/4 months (November - January). - In November 2022, this goal was run unsuccessfully 8 times for 0% success. - In December 2022, this goal was run unsuccessfully 4 times for 0% success.</p>	W 0257	QIDP will ensure that goals are appropriately created for all clients. QIDP will complete monthly progress reports by the 15th of each month. These will be sent to the Director of Residential Services for review. When a goal is not being met, QIDP will revise the goal in order to make the goal more appropriate for client. An IDT form will be completed and team will be notified for goal revision via phone call or email. All revisions will be sent to director of residential services for approval.	03/15/2023

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	<p>- In January 2022, this goal was run unsuccessfully 2 times for 0% success.</p> <p>- The review indicated client #3's goal was not revised when he failed to make progress.</p> <p>1B. "Objective A: [Client #3] will complete a laundry routine 1x a week with 0 - 10 verbal prompts at 35% for 3/4 months. (August - October 2022).</p> <p>- In August, September, and October 2022, this goal was run 0 times.</p> <p>Objective B: [Client #3] will complete a laundry routine 1x a week with 0 - 10 verbal prompts at 40% for 3/4 months (November 2022 - January 2023).</p> <p>- In November 2022, this goal was run successfully 1/7 times for 12.5% success.</p> <p>- In December 2022, this goal was run successfully 0/4 times for 0% success.</p> <p>- In January 2022, this goal was run successfully 0/2 times for 0% success.</p> <p>- The review indicated client #3's goal was not revised when he failed to make progress.</p> <p>1C. Objective A: [Client #3] will brush his teeth 2x daily with 0 - 10 verbal prompts at 35% for 3/4 months (August - October 2022).</p> <p>- In August, September, and October 2022, this goal was run 0 times.</p> <p>Objective B: [Client #3] will brush his teeth 2x daily with 0 - 10 verbal prompts at 40% for 3/4 months (November 2022 - January 2023).</p> <p>- In November 2022, this goal was run successfully 1/6 times for 14.29% success.</p> <p>- In December 2022, this goal was run successfully 0/2 times for 0% success.</p>			

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	<ul style="list-style-type: none"> - In January 2023, this goal was run successfully 0/2 times for 0% success. - The review indicated client #3's goal was not revised when he failed to make progress. <p>1D. Objective A: [Client #3] will shower at least 3x a week with 0 - 10 verbal prompts at 35% for 3/4 months (August - October 2022).</p> <ul style="list-style-type: none"> - In August, September, and October 2022, this goal was run 0 times. <p>Objective B: [Client #3 will shower at least 3x a week with 0 - 10 verbal prompts at 40% for 3/4 months (November 2022 - January 2023).</p> <ul style="list-style-type: none"> - In November 2022, this goal was run successfully 1/5 times for 16.67% success. - In December 2022, this goal was run successfully 0/1 time for 0% success. - In January 2023, this goal was run successfully 0/1 time for 0% success. <ul style="list-style-type: none"> - The review indicated client #3's goal was not revised when he failed to make progress. <p>1E. Objective A: [Client #3] will budget his checkbook 1x a week with 0 - 10 verbal prompts at 35% for 3/4 months (August - October 2022).</p> <ul style="list-style-type: none"> - In August, September, and October 2022, this goal was run 0 times. <p>Objective B: [Client #3] will budget his checkbook 1x a week with 0 - 10 verbal prompts at 40% for 3/4 months (November 2022 - January 2023).</p> <ul style="list-style-type: none"> - In November 2022, this goal was run 0 times. - In December 2022, this goal was run successfully 0/1 times, for 0% success. - In January 2022, this goal was run successfully 0/1 times for 0% success. 			

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W 0436 Bldg. 00	<p>- The review indicated client #3's goal was not revised when he failed to make progress.</p> <p>Client #3 was interviewed on 2/15/23 at 8:46 am and stated, "My goals are hygiene, eating with everyone else, interacting with people, and cleaning my room. I don't feel like doing them. Staff remind me, but I don't do it."</p> <p>Qualified Intellectual Disabilities Professional (QIDP) #1 was interviewed on 2/15/23 at 11:30 am and stated, "[Client #3] is capable of all of his goals, but he needs a lot of prompting and reminding. It's more of an issue of of him complying."</p> <p>Residential Director #1 was interviewed on 2/15/23 at 12:00 pm and stated, "If a client isn't progressing on a goal, I would expect a different goal."</p> <p>9-3-4(a)</p> <p>483.470(g)(2) SPACE AND EQUIPMENT The facility must furnish, maintain in good repair, and teach clients to use and to make informed choices about the use of dentures, eyeglasses, hearing and other communications aids, braces, and other devices identified by the interdisciplinary team as needed by the client.</p> <p>Based on record review and interview for 1 of 3 sample clients (#2), the facility failed to provide client #2 with a standing frame as recommended by his physical therapist.</p> <p>Findings include:</p> <p>Client #2's record was reviewed on 2/14/23 at 12:00</p>	W 0436	All required medical equipment that is recommended by a medical personnel will be covered by Corvilla if not covered by insurance. Corvilla's LPN will review all appointments and make note of equipment recommendation if applicable. The	03/10/2023

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

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER 15G377	(X2) MULTIPLE CONSTRUCTION A. BUILDING 00 B. WING _____	(X3) DATE SURVEY COMPLETED 02/15/2023
NAME OF PROVIDER OR SUPPLIER CORVILLA INC		STREET ADDRESS, CITY, STATE, ZIP COD 52549 MYRTLE ST SOUTH BEND, IN 46637		
(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
	<p>pm.</p> <p>A staff note dated 8/30/21 indicated the following: "[Client #2] went to his physical therapy appointment. This is his last scheduled appointment. There will be one appointment scheduled after his standing frame is in to train staff how to use it."</p> <p>Residential Director #1 was interviewed on 2/15/23 at 12:00 pm and stated, "The standing frame was not covered by insurance. I don't know why it wasn't followed up on afterwards. I don't have any documentation. We don't have a Medicaid denial letter." Residential Director #1 stated, "If it's a required medical equipment, we will cover it." Residential Director #1 stated, "[Client #2] had one when he was a child. It was useful for giving him time out of his chair. It was intended to get him out of his wheelchair and to let him stretch." Residential Director #1 stated, "I would expect follow up."</p> <p>9-3-7(a)</p>		<p>Director of Residential Services will be notified of any necessary medical equipment recommendations, and if denied, will work with the financial department on purchasing this equipment as it is required. Director of residential services or LP</p>	