

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

PRINTED: 11/07/2019

FORM APPROVED

OMB NO. 0938-039

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  15G157		X2) MULTIPLE CONSTRUCTION A. BUILDING 00 B. WING		X3) DATE SURVEY COMPLETED 10/01/2019	
NAME OF PROVIDER OR SUPPLIER  RES CARE COMMUNITY ALTERNATIVES SE IN				STREET ADDRESS, CITY, STATE, ZIP CODE 3011 APACHE DR JEFFERSONVILLE, IN 47130			
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCY (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 the investigation of complaint #IN00307043.</p> <p>Complaint # IN00307043: Substantiated, federal and state deficiencies related to the allegations were cited at: W149 and W154.</p> <p>Dates of Survey: 9/30/19 and 10/1/19.</p> <p>Facility Number: 000693 Provider Number: 15G157 AIMS Number: 100234510</p> <p>These deficiencies reflect state findings in accordance with 460 IAC 9.</p> <p>Quality review of this report completed October 24, 2019 by #09182.</p>			W 0000			
W 0149  Bldg. 00	<p>483.420(d)(1) STAFF TREATMENT OF CLIENTS</p> <p>The facility must develop and implement written policies and procedures that prohibit mistreatment, neglect or abuse of the client. Based on record review and interview for 3 of 4 incident reports reviewed affecting a former client E and clients A and D, the facility failed to implement its policies and procedures for conducting thorough investigations into the allegations of 1) criminal activity resulting in a former client's placement in jail and 2) client to client sexual abuse.</p> <p>Findings include:</p> <p>On 9/30/19 at 2:30 PM, a review of the Bureau of Developmental Disabilities Services (BDDS)</p>			W 0149	<p>1.The facility will ensure all incidents of client to client sexual abuse regardless the of location of the incident will be thoroughly investigated by the facility</p> <p>2.The facility will ensure all incidents resulting in the incarceration of a client regardless the of location of the incident will be thoroughly investigated by the facility</p> <p><b>Persons Responsible:</b> QA</p>		10/31/2019

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

TITLE

(X6) DATE

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 disclosable 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>incident reports was completed. The reports indicated:</p> <p>1) -BDDS report dated 9/18/19 indicated, "It was reported [former client E] became agitated while reading narrative notes staff had written throughout the day concerning [former client E]. [Former client E] then went outside, pushed staff, then ran to staff's car, grabbing a large rock throwing it at staff's window and breaking it. Police were called and arrived at the home and [former client E] was transported to jail. [Former client E] is scheduled to go before the judge on 9/19/19". No investigation was available for review.</p> <p>2) -BDDS report dated 9/5/19 indicated, "[Client A] was at [name] football practice when she reported to her coach another player/peer on the team was touching her breast and [buttocks] and talking to her in a sexual manner. [Client A] also reported this made her feel uncomfortable". No investigation was available for review.</p> <p>3)-BDDS report dated 7/29/19 indicated, "[Client B] and [client D] were in the van when [client B] reached over and began to rub [client D] on her thigh. Staff used You're Safe I'm Safe (behavior technique) as well as verbal redirection. No injuries were reported and no further incidents occurred". No investigation was available for review.</p> <p>On 9/30/19 at 3:13 PM, the Quality Coordinator (QC) was interviewed. The QC was asked if investigations could be provided for the above mentioned incidents. The QC indicated the investigations could be on the Qualified Intellectual Disability Professional's (QIDP's) computer, who was on vacation and not available.</p>				<p>Manager, QA Coordinator, QIDP, Residential Manager, Area Supervisor, and Program Manager.</p>		

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	<p>On 9/30/19 at 4:58 PM, the Residential Manager (RM) was interviewed. The RM was asked if an investigation into the above mentioned incidents had occurred. The RM indicated she did not believe so. The RM was asked if interviews with client A and client D had been completed. The RM stated, "No, we reported it and I told the girls (clients) to come to us if something happens so we can address it. One time [client B] did it (inappropriate touching of a peer) on the van. Her (client D) grandmother came from [city]". The RM was asked who was inappropriately touched. The RM stated, "[Client D], she was extremely upset. Her mom and grandmother came here to be with her due to the things that happened to her in the past". The RM was asked if client D was emotionally bothered by that experience. The RM stated, "Yes, she was crying over it".</p> <p>On 10/1/19 at 11:06 AM, a follow up interview with the Quality Coordinator (QC) was completed. The QC was asked if the 9/18/19 incident for a former client placed in jail was investigated. The QC stated, "Just a BDDS report. It dealt with staff pretty much". The QC was asked how long the former client was in jail. The QC stated, "I think she was in jail 2 days". The QC indicated the QIDP might have documentation for investigations, but she was not available. The QC was asked if investigations into the 9/5/19 allegation of client A being inappropriately touched during a [name's] football practice, and the 7/29/19 incident of client D inappropriately touched by client B were available for review. The QC indicated the QIDP might have documentation for investigation, but no investigations could be provided for review.</p> <p>On 10/1/19 at 11:32 AM, the Reporting and</p>						

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W 0154  Bldg. 00	<p>Investigating Abuse, Neglect, Exploitation, Mistreatment or a Violation of Individual's Rights policy dated 7/10/19 was reviewed. The policy indicated, "ResCare strictly prohibits abuse, neglect, exploitation, mistreatment, or violation of an individual's rights". The procedures indicated, "4. The Program Manager will assign an investigative team. A full investigation will be conducted by investigators who have received training from Labor Relations Association and ResCare's internal procedures on investigations....One of the investigators will complete a detailed investigative case summary based on witness statements and other evidence collected. The report will be maintained in a confidential, secured file at the office". No investigative documentation of the above mentioned incidents was provided for review.</p> <p>This federal tag relates to complaint #IN00307043.</p> <p>9-3-2(a)</p> <p>483.420(d)(3)</p> <p><b>STAFF TREATMENT OF CLIENTS</b></p> <p>The facility must have evidence that all alleged violations are thoroughly investigated. Based on record review and interview for 3 of 4 incident reports reviewed affecting a former client E and clients A and D, the facility failed to conduct thorough investigations into incidents of 1) criminal activity resulting in a former client's placement in jail and 2) client to client sexual abuse.</p> <p>Findings include:</p> <p>On 9/30/19 at 2:30 PM, a review of the Bureau of Developmental Disabilities Services (BDDS) incident reports was completed. The reports</p>			W 0154	<p>1.The facility will ensure all incidents of client to client sexual abuse regardless the of location of the incident will be thoroughly investigated by the facility</p> <p>2.The facility will ensure all incidents resulting in the incarceration of a client regardless the of location of the incident will be thoroughly investigated by the facility</p> <p><b>Persons Responsible:</b> QA</p>		10/31/2019

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	<p>indicated:</p> <p>1) -BDDS report dated 9/18/19 indicated, "It was reported [former client E] became agitated while reading narrative notes staff had written throughout the day concerning [former client E]. [Former client E] then went outside, pushed staff, then ran to staff's car, grabbing a large rock throwing it at staff's window and breaking it. Police were called and arrived at the home and [former client E] was transported to jail. [Former client E] is scheduled to go before the judge on 9/19/19". No investigation was available for review.</p> <p>2) -BDDS report dated 9/5/19 indicated, "[Client A] was at [name] practice when she reported to her coach another player/peer on the team was touching her breast and [buttocks] and talking to her in a sexual manner. [Client A] also reported this made her feel uncomfortable". No investigation was available for review.</p> <p>3)-BDDS report dated 7/29/19 indicated, "[Client B] and [client D] were in the van when [client B] reached over and began to rub [client D] on her thigh. Staff used You're Safe I'm Safe (behavior technique) as well as verbal redirection. No injuries were reported and no further incidents occurred". No investigation was available for review.</p> <p>On 9/30/19 at 3:13 PM, the Quality Coordinator (QC) was interviewed. The QC was asked if investigations could be provided for the above mentioned incidents. The QC indicated the investigations could be on the Qualified Intellectual Disability Professional's (QIDP's) computer, who was not available and on vacation.</p>				Manager, QA Coordinator, QIDP, Residential Manager, Area Supervisor, and Program Manager.		

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