STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	14G287	A. BUILDING ______ B. WING ______	C 04/19/2013

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
GROUP HOME #6	320 BACHMAN LANE GODFREY, IL 62035

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (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 000	INITIAL COMMENTS INCIDENT INVESTIGATION Incident of 03/02/13/ IL62585	W 000		
W 111	483.410(c)(1) CLIENT RECORDS The facility must develop and maintain a recordkeeping system that documents the client's health care, active treatment, social information, and protection of the client's rights. This STANDARD is not met as evidenced by: Based on record review and interview the facility failed to ensure thorough documentation in residents records of inappropriate touch for 1 of 3 individuals (R2) in the sample. Findings Include: Individual Support Plan/ ISP (dated 3/6/13) identifies R2 as a 58 year old individual who functions at the Mild range of Mental Retardation. In review of R2's ISP there is no documentation of the 1/21/13 incident of R2 inappropriately touching a peer. Incident Review (dated 1/28/13) states: Allegation/ Incident Complaint: "This is a review of an incident that occurred January 23, 2013 , R6 reported R2 touched his genitals." Under the Summary of Evidence: Witnesses: E7/ Supervisor states, "R2 admitted to me that he touched R6's penis. He stated they were playing and tickling each other."	W 111		

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE   TITLE   (X6) DATE

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W 111	Continued From page 1 Under the Analysis of Evidence states, "R6 asked R2 not to touch him because it made he feel uncomfortable. When R2 did not listen R6 separated himself from the situation and reported the incident to staff." In review of R2's Nurses Notes 10/5/12- 3/5/13 or Interdisciplinary Notes 1/11/13- 4/7/13 there was no documentation of the incident of R2 touching a peer's penis. In review of 1/20/13- 2/17/13 Monthly QMRP (Qualified Mental Retardation Professional) Review Notes,there was no documentation of R2 inappropriately touching a peers penis. In review of Behavior Recording Documentation (dated 1/21/13- 2/17/13/ provided to surveyor per fax on 4/19/13 at 10:40 AM) states, 1/21/13 R2 engaged in inapproiet toching (spelled as written) while horse playing." In review of R2"s Incident - Injury Report (dated 1/21/13) there is no documentation of R2 touching R6's penis or of the tickling that led up to the inappropriate touching. In an interview with R6 on 4/12/13 at 1:10 PM, R6 stated, "R2 was tickling me and put his hands (points to genital area). I told him to stop. He didn't so I yelled for staff." In interviews with E2/ QIDP (Qualified Intellectual disability Professional) on 4/18/13 at 3:20 PM and 4/19/13 at 9:05 AM, E2 confirmed that the incident of R2 touching R6's penis was not in the current ISP (dated 3/6/13). E2 stated, "It was not in the ISP because it was an isolated incident."	W 111		

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W 111	Continued From page 2 E2 stated that Incident Reports (Caspers/ electronic reports) are not kept in the resident records. E2 further stated , " The Q reviews tells me that I would look at the Caspers Incidents and Reviews." The facility provided no further written evidence of thorough documentation of R2's inappropriate touch on 1/21/13. In an interview with E1/ Administrator on 4/19/13 at 9:00 AM, E1 confirmed that she was unable to provide me with a policy that identifies the facility's use of Casper Incident/ Injury reports in the accurate documentation of behavior/ incidents that occur.	W 111		
W 154	483.420(d)(3) STAFF TREATMENT OF CLIENTS The facility must have evidence that all alleged violations are thoroughly investigated. This STANDARD is not met as evidenced by: Based on record review and interview the facility failed to provide thorough investigations for 3 of 3 individuals (R1, R2 and R6) who made allegations of inappropriate touch. Findings Include: Facility roster identifies R1, R2 and R6 function in the Mild Range of Mental Retardation. Incident Review (dated 1/28/13) states, "This is a review of an incident that occurred January 23, 2013, R6 reported R2 touched his genitals. R2 reported R1 touched his breast." Under the Analysis of Evidence states, "R6 asked R2 not to touch him because it made he feel uncomfortable. When R2 did not listen R6	W 154		

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W 154	Continued From page 3	W 154		

separated himself from the situation and reported the incident to staff. R6 said R1 was playing when he was flicking his ear and he did not get upset. R1 was not touching R2 in a sexual manner. R1 reported he "twisted R2's nipple" because R2 touched his (R1) groin. R1 stated he told R2 if he touched him he would twist his nipple. R1 stated they were playing around. Initially R1 did not report being touched by anyone. Staff report the residents horse play a lot and they have to redirect the residents."

In review of the 1/21/13 incident the facility obtained statements from staff with the following statements made by staff interviews:

E7/ PM Shift Supervisor - "They (the) guys horse play and tickle each other a lot but it has never previously been sexual."

E8/ Direct Support Person - "Usually the residents are horse playing and staff have to redirect the residents. The residents don't get upset and thinks it's funny."

E9/ Direct Support Person - "The residents do horse play and tickle each other but they have never reported being touched inappropriately."

E5/ Direct Support Person - "R1 likes to mess with people especially R2. R6 sometimes jokes around. R1 will tap people on the shoulder or put his hand on other head, it's never inappropriate. Usually the residents are okay and enjoy joking around. "

E4/ Direct Support Person - "The residents horse play a lot. R1 usually gets it started by moving

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people heads."

In review of statements obtained from residents, only R1, R2 and R6 were interviewed regarding the incident. There was no written evidence that any of the other residents were interviewed to ensure no other incidents of inappropriate touch had occurred within the facility related to the 1/21/13 incident investigation.

Incident Review (dated 3/7/13) states the following:

Allegation/ Incident Complaint: "This is a review of an incident on March 2, 2013, R2 alleged R1 blew in his ear and touched his genitals."

Analysis of Evidence: "The residents (R1 and R2) are ambulatory and building independent. R2 and R1 are not roommates. R2 and R1's functional sexuality/ relationship assessments states the residents are able to protect themselves from unwanted touching. R2 was aggressive towards staff on 3/1/3. Sometimes he will point the finger at others to divert attention from his behaviors. R2 reported the incident happened at Saturday morning at approximately 8:30 am around shower time. R2 was with staff throughout the day, but did not report the incident until 1:30 PM. R1 did not report any incident until after staff asked did he touched R2. .....R3 is R1's roommate and he would have report any issues on Saturday. Other residents in Group Home 6 did not see any touching. "

Residents statements obtained by E6/ Human Rights Coordinator /Facility Investigator state the following:

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W 154	Continued From page 5 (Dated 3/5/13) E6 spoke with R3/ Group Home 6 resident. E6 asked how was the weekend. R3 said good. E6 asked did he see anything happen between his roommate (R1) and R2. R3 said no. R3 did not report any issues on Saturday. (Dated 3/4/13) E6 followed up with E5. He did not provide any information regarding the incident. On 4/19/13 at 10:45 AM per fax, E1/ Administrator confirmed that the Incident Review (dated 1/28/13) was investigating an incident that occured on 1/21/13. In an interview with E6 on 4/16/13 at 10:15 AM, confirmed she had no further written evidence of her interviews of residents related to facility's investigation of the allegations of inappropriate touch made on 1/21/13 or 3/2/13. E6 was unable to provide evidence that facility had interviewed all verbal residents who reside at Group home 6 to ensure there had been no inappropriate touch.	W 154		
W 227	483.440(c)(4) INDIVIDUAL PROGRAM PLAN The individual program plan states the specific objectives necessary to meet the client's needs, as identified by the comprehensive assessment required by paragraph (c)(3) of this section. This STANDARD is not met as evidenced by: Based on record review and interview the facility failed to develop specific objectives for 1 of 1 individual (R1) who has inappropriate touch and horseplay identified.	W 227		

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Findings Include:

Individual Support Plan/ ISP (dated 8/23/12) states R1 was admitted to the facility on 9/2/11. The ISP identifies R1 as a 21 year old individual who functions at the Mild range of Mental Retardation. The ISP states R1's has maladaptive behaviors of " becoming upset when his routine changes, being bossy and other inappropriate social behaviors (this may cover a wide range of behaviors; the purpose of the behavior program at this stage is to evaluate problematic behaviors that may emerge)."

Incident Review (dated 1/28/13) states, "This is a review of an incident that occurred January 23, 2013, R2 reported R1 touched his breast." Under the Analysis of Evidence states, "R6 said R1 was playing when he was flicking his ear and he did not get upset. R1 was not touching R2 in a sexual manner. R1 reported he "twisted R2's nipple" because R2 touched his (R1) groin. R1 stated he told R2 if he touched him he would twist his nipple. R1 stated they were playing around. Initially R1 did not report being touched by anyone. Staff report the residents horse play a lot and they have to redirect the residents."

Staff statements made in the 1/21/13 allegation of inappropriate touch are as follows:

E5/ Direct Support Person - "R1 likes to mess with people especially R2. R1 will tap people on the shoulder or put his hand on other head, it's never inappropriate. Usually the residents are okay and enjoy joking around. "

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E4/ Direct Support Person - "The residents horse play a lot. R1 usually gets it started by moving people heads."

Monthly QMRP (Qualified Mental Retardation Professional) Review Notes states, "R1 had 2 incidents of inappropriate touching."

Functional Sexuality/ Relationship Assessment (dated 2/4/13) states "Read each statement and check yes or no as the statement applies to the resident being evaluated." Listed below the Objective column states, "Does not display affection to others who are resistive or ask the individual to stop." The hand written response by E2/ QIDP/ Qualified Intellectual Disability Professional is marked "No" and under comment is written "will often get carried away when playing horseplay."

Interdisciplinary Team Decisions/ IDT meeting (dated (3/12/13) states, "The IDT team met 3/12/13 on following recommendation from the IRC(Internal Review Committee) due to allegation of inappropriate physical contact between R1 and another resident. It Was reviewed with R1 that inappropriate touching was not acceptable and that he needed to remember to keep his hands to himself."

In interviews with E2/ QIDP on 4/18/13 at 11:15 AM and 1:15 PM, E2 confirmed R1 'S objectives does not specifically identify his inappropriate social behaviors. E2 confirmed that R1's objectives had not be revised since it was identified in the investigations of 1/21/13 and 3/2/13 of R1 exhibiting inappropriate touching and horseplay.

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