

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

PRINTED: 03/04/2015
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 14G295	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____		(X3) DATE SURVEY COMPLETED 02/10/2015
NAME OF PROVIDER OR SUPPLIER ADLOFF PLACE			STREET ADDRESS, CITY, STATE, ZIP CODE 50 ADLOFF LANE SPRINGFIELD, IL 62703		
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W 000	INITIAL COMMENTS	W 000			
W 153	<p>Annual Certification Survey- Fundamental Inspection of Care</p> <p>483.420(d)(2) STAFF TREATMENT OF CLIENTS</p> <p>The facility must ensure that all allegations of mistreatment, neglect or abuse, as well as injuries of unknown source, are reported immediately to the administrator or to other officials in accordance with State law through established procedures.</p> <p>This STANDARD is not met as evidenced by: Based on interview and record review the facility failed to report serious injuries to the Illinois Department of Public Health (IDPH) for 3 of 3 individuals outside the sample (R3, R8, R14) as required by state rule.</p> <p>Finding Include:</p> <p>1) The 11/5/2014 Person Centered Plan (PCP), identifies R1 as an individual who functions within the Moderate range of Individuals with Intellectual Disabilities (IID). R1 also has the diagnoses of Extrapyrimal movement disorder, Organic Brain Syndrome, Dementia with disturbance of behavior and possible psychosis, Depression, Bilateral hearing loss, Bipolar, OCD, Osteoporosis.</p> <p>The 11/3/2014, 1:30pm incident report from Day Training (DT) documents "staff witnessed R1 walking without walker ... when staff started to go to R1 and assister to the walker R1 began to get mad" ...The incident report documents that "R1 fell on the floor hitting face mostly top lip and two</p>	W 153			

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 that other safeguards provide sufficient protection to the patients. (See instructions.) Except for nursing homes, the findings stated above are disclosable 90 days 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 14 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 153	<p>Continued From page 1</p> <p>front teeth appear to be loose. R1 was taken home for observation as to incident report". The 11/10/14 facility Progress Note with an entry date of 11/3/14 documents; "R1 was walking without walker at DT, fell and hit face on floor. R1 was picked up from DT and taken to Express care with a diagnosis of facial contusion, chest contusion, and dental trauma". The 11/10/14 nursing note documents "her 2 front teeth were loose".</p> <p>On 2/3/15 at 11:00 AM E1 (Administrator) was interviewed. E1 confirmed that this injury had not been called into Illinois Department of Public Health, (IDPH). E1 stated "if there is no fax sheet they had not sent it into IDPH".</p> <p>On 2/4/15 at 2:45 PM E1 was interview. E1 confirmed "we call in (to IDPH) injuries of unknown origin, peer to peer, and Emergency Room, (ER), visits...we don't call in Prompt Care. We should probably call in more, the other buildings call in more and we are calling in less here. We are discussing it. I guess that we use Express care for the ER visits because it is quicker and more cost effective."</p> <p>2) The 5/22/14 Person Centered Plan (PCP) identifies R8 as functioning within the Profound range of Individuals with Intellectual Disabilities (IID). R8's is diagnosed with Obsessive Compulsive Disorder (OCD) with aggression, Tardive Dyskenesia, Dementia, Anxiety, Affective Disorder. The PCP includes R8 is on a Mechanical Soft Diet with ground meats and nectar thick liquids.</p> <p>The 11/23/14, 12:30pm Incident Report documents; "while eating lunch R8 started choking.....tapping on back until food was out and</p>	W 153			

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W 153	<p>Continued From page 2</p> <p>airway was clear. Investigation noted on Incident form R8 was eating too rapidly Q (Qualified Intellectual Disabilities Professional) should do random checks to ensure compliance with pacing program".</p> <p>The 1/12/15 Quarterly Nursing Systems Assessment documented; "On 1-23-14 R8 choked while eating...".</p> <p>The 4/25/14 Choking Risk Assessment completed E9 (Registered Nurse (RN)), entry dated on 11/23/14 "Choked on lunch. Coughing. Back thrust resulted in R8 spitting out food. R8 needs to be closely monitored at meals. Is on a pacing program".</p> <p>The 4/16/14 Speech-Language Pathology Evaluation confirms R8 has history of rapid eating patterns and participates in pacing program. Due to rapid feeding style and dentition status, mechanical soft solids with ground meat is recommended.</p> <p>The 11/24/14 facility Progress Note with entry date of 11/23/14 documents, per E9 (RN), documented "R8 choked while eating lunch. R8 was coughing. Staff gave back thrust and R8 spit out food".</p> <p>The 11/24/14 Quarterly Nutritional Assessment by Z2 (Dietician) documents "Watch closely. Feeds self with supervision....."</p> <p>On 2/3/15 at 11:00 AM E1 (Administrator) was interviewed. E1 confirmed that this injury had not been called into Illinois Department of Public Health, (IDPH). E1 stated "if there is no fax sheet they had not sent it into IDPH".</p> <p>3) The 1/5/14 Physicians Order Sheet (POS), identifies R14 as functioning within the Profound range of Individuals with Intellectual Disabilities (IID), Cervical Myelopathy with significant Cervical Stenosis and muscle wasting.</p>	W 153			

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W 153	Continued From page 3 The 11/9/14, 8:30pm Incident Report documents; "picked up R14 and put in shower chair and saw blood coming from right toe." The 11/9/14, 10:58am discharge report from Express Care documents; "You have an infection of the skin known as cellulitis.....This is a serious condition. It must be watched closely.....". On 2/3/15 at 11:00 AM E1 (Administrator) was interviewed. E1 confirmed that this injury had not been called into Illinois Department of Public Health, (IDPH). E1 stated "if there is no fax sheet they had not sent it into IDPH". On 2/4/15 at 2:45 PM E1 was interview. E1 confirmed "we call in (to IDPH) injuries of unknown origin, peer to peer, and Emergency Room, (ER), visits...we don't call in Prompt Care. We should probably call in more, the other buildings call in more and we are calling in less here. We are discussing it. I guess that we use Express care for the ER visits because it is quicker and more cost effective."	W 153			
W 156	3.401 REPORTING INDIVIDUAL UNUSUAL INCIDENTS POLICY, Effective April 1, 2014, documents "An unusual incident includes, but is not limited to ... Injury of an individual and or any activity which could cause injury (i.e. falls.....)". Operating Procedure 3.402, Abuse and Neglect documents;. "Upon being notified of any incident involving serious or suspicious injury B. Notify the Public Health Department in Springfield, IL with-in 24 hours....." 483.420(d)(4) STAFF TREATMENT OF CLIENTS The results of all investigations must be reported to the administrator or designated representative or to other officials in accordance with State law	W 156			

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W 156	<p>Continued From page 4 within five working days of the incident.</p> <p>This STANDARD is not met as evidenced by: Based on interview and record review the facility failed to report the results of investigations of serious injuries to the Illinois Department of Public Health for 3 of 3 individuals (R1, R8, R14). R3 fell resulting in chest contusions, facial contusions, and dental contusions; R8 had a choking incident; and R14 had injury to right toe requiring medical treatment.</p> <p>Finding Include:</p> <p>1) The 11/5/2014 Person Centered Plan (PCP), identifies R1 as an individual who functions within the Moderate range of Individuals with Intellectual Disabilities (IID). R1 also has the diagnoses of Extrapyrimal movement disorder, Organic Brain Syndrome, Dementia with disturbance of behavior and possible psychosis, Depression, Bilateral hearing loss, Bipolar, OCD, Osteoporosis.</p> <p>The 11/3/2014, 1:30pm incident report from Day Training (DT) documents "staff witnessed R1 walking without walker ... when staff started to go to R1 and assister to the walker R1 began to get mad" ...The incident report documents that "R1 fell on the floor hitting face mostly top lip and two front teeth appear to be loose. R1 was taken home for observation as to incident report". On 2/4/15 @ 2:45pm E1 confirmed "we call in (to IDPH) injuries of unknown origin, peer to peer, and Emergency Room, (ER), visits...we don't call in Prompt Care. We should probably call in more, the other buildings call in more and we are calling in less here. We are discussing it. I</p>	W 156			

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W 156	<p>Continued From page 5</p> <p>guess that we use Express care for the ER visits because it is quicker and more cost effective." No investigation was submitted to IDPH.</p> <p>2) The 5/22/14 Person Centered Plan (PCP) identifies R8 as functioning within the Profound range of Individuals with Intellectual Disabilities (IID). R8's is diagnosed with Obsessive Compulsive Disorder (OCD) with aggression, Tardive Dyskenesia, Dementia, Anxiety, Affective Disorder. The PCP includes R8 is on a Mechanical Soft Diet with ground meats and nectar thick liquids.</p> <p>Incident Report dated on 11/23/14 at 12:30 PM states "while eating lunch R8 started choking....tapping on back until food was out and airway was clear. 2/4/15 @ 2:45pm E1 (Administrator) was interviewed. E1 stated that the Investigation/s are documented in "Section 5 of the INDIVIDUAL UNUSUAL INCIDENT REPORT". Investigation noted on Incident form R8 was eating too rapidly Q (Qualified Intellectual Disabilities Professional) should do random checks to ensure compliance with pacing program. On 2/3/15 at 11:00 AM E1 (Administrator) was interviewed. E1 confirmed that this injury had not been called into Illinois Department of Public Health, (IDPH). E1 stated "if there is no fax sheet they had not sent it into IDPH". No investigation was submitted to IDPH.</p> <p>3) The 1/5/14 Physicians Order Sheet (POS), identifies R14 as functioning within the Profound range of Individuals with Intellectual Disabilities (IID), Cervical Myelopathy with significant Cervical Stenosis and muscle wasting. The 11/9/14, 8:30pm Incident Report documents;</p>	W 156			

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W 156	Continued From page 6 "picked up R14 and put in shower chair and saw blood coming from right toe." The 11/9/14, 10:58am discharge report from Express Care documents; "You have an infection of the skin known as cellulitis.....This is a serious condition. It must be watched closely.....". On 2/4/15 at 2:45 PM E1 was interview. E1 confirmed "we call in (to IDPH) injuries of unknown origin, peer to peer, and Emergency Room, (ER), visits...we don't call in Prompt Care. We should probably call in more, the other buildings call in more and we are calling in less here. We are discussing it. I guess that we use Express care for the ER visits because it is quicker and more cost effective." No investigation was submitted to IDPH.	W 156			
W 159	483.430(a) QUALIFIED MENTAL RETARDATION PROFESSIONAL Each client's active treatment program must be integrated, coordinated and monitored by a qualified mental retardation professional. This STANDARD is not met as evidenced by: Based on observation, interview and record review the facility has failed to consistently coordinate and monitor each client's active treatment program/s to assure service delivery is appropriate for 2 individual within the sample (R7 & R11) and 1 individual outside the sample (R14) 1) The 05/21/14 Person Centered Plan (PCP) documents R7 as a 49 year old male who functions within the Profound range of Individuals with Intellectual Disabilities (IID). R7 is also diagnosed with Autistic Disorder, SIB and congenital hydrocephalus.	W 159			

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W 159	<p>Continued From page 7</p> <p>R7 has a Program Objective Outcome to identify money from other objects. On 02/05/15 @ 12:00pm E2 was interviewed in the staff office. E2 was asked why R7's goal was kept in a separate book from his other goals. E2 stated that R7's money goal was considered an "educational goal, and kept in a separate book". E2 stated that "educational goals would be run at 4:00pm Monday through Saturday". Data sheets for R7's money program from the Educational Program Book documents that this goal was only attempted on 02/03/15, but not completed.</p> <p>E1 brought in a data sheet for R7's money program and stated it was January's data. This data sheet documents R7's money program was attempted 9 days (seven scheduled days and 2 unscheduled days (Sunday)) out of 27 times, but not completed.</p> <p>Another data sheet for R7's money program stamp dated "JAN--2015" documents R7's money program was attempted 14 scheduled days out of 27 days, but not completed.</p> <p>On 02/04/15 @ 4:30pm E3 (QIDP) was interviewed in the staff office. When E3 was asked how program implementation is monitored, E3 stated this would be done "in the monthly Q notes". When asked if the monthly Q notes could be reviewed, E3 stated "they're not available". E3 was asked who was responsible for changing a program when objectives were not being met. E3 replied "I am".</p> <p>2) The 03/06/14 Person Centered Plan (PCP) documents that R11 is a 70 male who functions within the Profound range of Individuals with</p>	W 159			

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W 159	<p>Continued From page 8</p> <p>Intellectual Disabilities (IID). R11 is also diagnosed with Compulsive Disorder, Autism, Constipation and Hemorrhoids.</p> <p>R11 has a Service Objective that documents "R11 will be provided medicated Tucks following Bowel Movement for treatment of hemorrhoids to reduce episodes of rectal digging". The most recent completed data sheet for this Service Objective is stamp dated "SEP--2014" and indicates R11 had three bowel movements the entire month for which the Service Objective was completed (09/01/14; 09/13/14; and 09/29/14).</p> <p>The most recent data collection sheet in the "program book" has no Month or Year documented. E3 (QIDP) stated that the "data sheets in the program books are for the current month (February, 2015)". This data sheet indicates that R11 has had no bowel movement for the month (02/01/15; 02/02/15; 02/03/15 & 02/04/15) and that no Service Objectives have been completed.</p> <p>The February, 2015 Bowel Movement Record for R11 documents that R11 did have a bowel movement on 02/03/15 which was not recorded on R11's Service Objective data sheet.</p> <p>On 02/04/15 @ 4:30pm E3 (QIDP) was interviewed in the staff office. When E3 was asked who reconciles the BM record from the Vitals Book -with- the service objective data from the Program Book, E3 stated "I do". When asked where this would be found E3 stated "in the monthly Q notes". When asked if the monthly Q notes could be reviewed, E3 stated "they're not available".</p> <p>3) The January, 2015 Physician's Order Sheet</p>	W 159			

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W 159	<p>Continued From page 9</p> <p>documents R14 as a 53 year old male who functions within the Profound range of Individuals with Intellectual Disabilities (IID) and is diagnosed with Congenital Hydrocephalus, Spastic Quadraparesis and Bells Palsy.</p> <p>On 02/03/15 @ 12:30pm R14 Day Training (DT) Person Centered Plan (PCP) was reviewed. It was noted that R14 was on an eating program to feed himself a Regular Pureed diet with Honey thickened liquids using adaptive equipment (a nosey cup, a high divided plate, a built up spoon, and a Dycem blue mat). DT staff stated that they feed R14, and that his program is to use a napkin.</p> <p>R14's PCP dated 02/21/14 - B) My Nutritional Status states R14: "likes to be fed by staff. Staff encourages R14 to feed himself at the beginning of each meal" ... "utilize adaptive equipment, encourage self feeding" ... "Continue to utilize adaptive equipment, encourage self feeding and follow speech therapy guidelines for consistency. I (R14) continue to use my adaptive equipment; divided plate on top of dycem mat, built-up handled angled spoon to use in the Lt. (left) hand and nosey cups for liquids" ... "I (R14) prefer to have the staff feed me with manipulation (hand-over-hand) and have regressed in terms of feeding self independently". R14's PCP Program Objective Outcome documents: "R14 will continue his formal training program of picking up his spoon". R14's Service Objective Outcome documents: "Staff will encourage R14 to independently drink from 'nosey' cup during snack and meal times".</p> <p>On 02/03/15 @ 5:36pm the facility evening meal was observed in the Dining area. R14's place was observed to have a divided plate and three nosey cups. The facility staff at the table picked</p>	W 159			

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W 159	Continued From page 10 up the adaptive built-up angled spoon and was feeding R14. Staff would use the spoon to scoop honey-thickened liquids from R14's nosey cups and feed R14. Staff frequently reminded R14 to swallow, however, did not assist or encouraging R14 to eat independently. On 02/04/15 @ 4:30pm E3 (QIDP) was interviewed in the staff office. When E3 was asked how program implementation is monitored, E3 stated this would be done "in the monthly Q notes". When asked if the monthly Q notes could be reviewed, E3 stated "they're not available". E3 was asked who was responsible for changing a program when objectives were not being met. E3 replied "I am".	W 159			
W 249	483.440(d)(1) PROGRAM IMPLEMENTATION 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. This STANDARD is not met as evidenced by: Based on observation, interview and record review the facility failed to implement Person Centered Program (PCP) service and program objectives for 2 individuals within the sample (R7 & R11) and 1 individual outside the sample (R14). Findings Include: 1) The 05/21/14 Person Centered Plan (PCP) for	W 249			

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W 249	<p>Continued From page 11</p> <p>R7 describes R7 as a 49 year old male who functions within the Profound range of Individuals with Intellectual Disabilities (IID). R7 is also diagnosed with Autistic Disorder, SIB and congenital hydrocephalus.</p> <p>R7 has a Program Objective Outcome to identify money from other objects. On 02/05/15 @ 12:00pm E2 was interviewed in the staff office. E2 was asked why R7's goal was kept in a separate book from his other goals. E2 stated that R7's money goal was considered an "educational goal, and kept in a separate book". E2 stated that "educational goals would be run at 4:00pm Monday through Saturday". Data sheets for R7's money program from the Educational Program Book documents that this goal was only attempted on 02/03/15, but not completed.</p> <p>E1 brought in a data sheet for R7's money program and stated it was January's data. This data sheet documents R7's money program was attempted 9 days (seven scheduled days and 2 unscheduled days (Sunday)) out of 27 times, but not completed.</p> <p>Another data sheet for R7's money program stamp dated "JAN--2015" documents R7's money program was attempted 14 scheduled days out of 27 days, but not completed.</p> <p>2) The Person Centered Plan (PCP) dated 03/06/14 documents that R11 is a 70 male who functions within the Profound range of Individuals with Intellectual Disabilities (IID). R11 is also diagnosed with Compulsive Disorder, Autism, Constipation and Hemorrhoids.</p> <p>R11 has a Service Objective that documents "R11</p>	W 249			

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W 249	<p>Continued From page 12</p> <p>will be provided medicated Tucks following Bowel Movement for treatment of hemorrhoids to reduce episodes of rectal digging".</p> <p>The most recent completed data sheet for this Service Objective is stamp dated "SEP--2014" and indicates R11 had three bowel movements the entire month for which the Service Objective was completed (09/01/14; 09/13/14; and 09/29/14).</p> <p>The most recent data collection sheet in the "program book" has no Month or Year documented. E3 (QIDP) stated that the "data sheets in the program books are for the current month (February, 2015)". This data sheet indicates that R11 has had no bowel movement for the month (02/01/15; 02/02/15; 02/03/15 & 02/04/15) and that no Service Objectives have been completed.</p> <p>The February, 2015 Bowel Movement Record for R11 documents that R11 did have a bowel movement on 02/03/15 which was not recorded and inconsistent with R11's Service Objective data sheet.</p> <p>On 02/04/15 @ 4:30pm E3 (QIDP) was interviewed in the staff office. When E3 was asked who reconciles the BM record from the Vitals Book -with- the service objective data from the Program Book, E3 stated "I do". When asked where this information would be found E3 stated "in the monthly Q notes". When asked if the monthly Q notes could be reviewed, E3 stated "they're not available".</p> <p>3) The January, 2015 Physician's Order Sheet for R14 describes R14 as a 53 year old male who functions within the Profound range of Individuals with Intellectual Disabilities (IID) and is diagnosed with Congenital Hydrocephalus, Spastic</p>	W 249			

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W 249	Continued From page 13 Quadraparesis and Bells Palsy. On 02/03/15 @ 12:30pm R14 Day Training (DT) PCP was reviewed. It was noted that R14 was on an eating program to feed himself a Regular Pureed diet with Honey thickened liquids using adaptive equipment (nosey cup/s, a divided plate, a built up spoon, and a Dycem blue mat). DT staff stated that they feed R14, and that his program is to use a napkin following meals. The January, 2015 Physician's Order Sheet for R14 documents his diet orders as "May have seconds. Divided Plate, Dycem, Built up spoon, Regular/pureed W/ Honey thick liquids". On 02/03/15 @ 5:36pm the facility's evening meal was observed in the Dining area. R14's place was observed to have a divided plate and three nosey cups. The facility staff at the table picked up the adaptive built-up spoon and was feeding R14. Staff would use the spoon to scoop honey-thickened liquids from R14's nosey cups and feed R14. Staff frequently reminded R14 to swallow, however, did not assist or encouraging R14 to eat independently. R14's PCP dated 02/21/14 B) My Nutritional Status states R14: "likes to be fed by staff. Staff encourages R14 to feed himself at the beginning of each meal" ... "utilize adaptive equipment, encourage self feeding". R14's PCP Program Objective Outcome documents: "R14 will continue his formal training program of picking up his spoon". R14's Service Objective Outcome documents: "Staff will encourage R14 to independently drink from 'nosey' cup during snack and meal times".	W 249			
W 257	483.440(f)(1)(iii) PROGRAM MONITORING & CHANGE	W 257			

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W 257	<p>Continued From page 14</p> <p>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>This STANDARD is not met as evidenced by: Based on observation, interview and record review the facility failed to review and revise the Person Centered Plan (PCP) for 1 of 1 individuals within the sample (R7) and 1 of 1 individuals outside the sample (R14) when they consistently failed to progress toward identified Program and Service Outcome Objectives.</p> <p>Findings Include:</p> <p>1) The 05/21/14 Person Centered Plan (PCP) for R7 describes R7 as a 49 year old male who functions within the Profound range of Individuals with Intellectual Disabilities (IID). R7 is also diagnosed with Autistic Disorder, SIB and congenital hydrocephalus.</p> <p>R7 has a Program Objective Outcome to identify money from other objects. On 02/05/15 @ 12:00pm E2 was interviewed in the staff office. E2 was asked why R7's goal was kept in a separate book from his other goals. E2 stated that R7's money goal was considered an "educational goal, and kept in a separate book". E2 stated that "educational goals would be run at 4:00pm Monday through Saturday". Data sheets for R7's money program from the Educational Program Book documents that this goal was only attempted on 02/03/15, but not completed.</p>	W 257			

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W 257	<p>Continued From page 15</p> <p>E1 brought in a data sheet for R7's money program and stated it was January's data. This data sheet documents R7's money program was attempted 9 days (seven scheduled days and 2 unscheduled days (Sunday)) out of 27 times, but not completed.</p> <p>Another data sheet for R7's money program stamp dated "JAN--2015" documents R7's money program was attempted 14 scheduled days out of 27 days, but not completed.</p> <p>On 02/04/15 @ 4:30pm E3 (QIDP) was interviewed in the staff office. When E3 was asked how program implementation is monitored, E3 stated this would be done "in the monthly Q notes". When asked if the monthly Q notes could be reviewed, E3 stated "they're not available". E3 was asked who was responsible for changing a program when objectives were not being met. E3 replied "I am".</p> <p>2) The January, 2015 Physician's Order Sheet for R14 describes R14 as a 53 year old male who functions within the Profound range of Individuals with Intellectual Disabilities (IID) and is diagnosed with Congenital Hydrocephalus, Spastic Quadraparesis and Bells Palsy.</p> <p>On 02/03/15 @ 12:30pm R14 Day Training (DT) PCP was reviewed. It was noted that R14 was on an eating program to feed himself a Regular Pureed diet with Honey thickened liquids using adaptive equipment (a nosey cup, a high divided plate, a built up spoon, and a Dycem blue mat). DT staff stated that they feed R14, and that his program is to use a napkin.</p> <p>The January, 2015 Physician's Order Sheet documents R14's diet orders as; "May have seconds, Divided Plate, Dycem, Built up spoon,</p>	W 257			

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W 257	Continued From page 16 Regular/pureed W/ Honey thick liquids". R14's PCP Program Objective Outcome documents: "R14 will continue his formal training program of picking up his spoon". R14's Service Objective Outcome documents: "Staff will encourage 14 to independently drink from 'nosey' cup during snack and meal times". R14's IPP dated 02/21/14 - B) My Nutritional Status states R14: "likes to be fed by staff. Staff encourages R14 to feed himself at the beginning of each meal" ... "utilize adaptive equipment, encourage self feeding" ..."Continue to utilize adaptive equipment, encourage self feeding and follow speech therapy guidelines for consistency. I (R14) continue to use my adaptive equipment; divided plate on top of dycem mat, built-up handled angled spoon to use in the Lt. (left) hand and nosey cups for liquids" ... "I (R14) prefer to have the staff feed me with manipulation (hand-over-hand) and have regressed in terms of feeding self independently". On 02/03/15 @ 5:36pm the facility evening meal was observed in the Dining area. R14's place was observed to have a divided plate and three nosey cups. The facility staff at the table picked up the adaptive built-up angled spoon and was feeding R14. Staff would use the spoon to scoop honey-thickened liquids from R14's nosey cups and feed R14. Staff frequently reminded R14 to swallow, however, did not assist or encouraging R14 to eat independently.	W 257			
W 369	483.460(k)(2) DRUG ADMINISTRATION The system for drug administration must assure that all drugs, including those that are self-administered, are administered without error.	W 369			

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W 369	<p>Continued From page 17</p> <p>This STANDARD is not met as evidenced by: Based on observation, interview, and record review; the facility failed to administer medications without error for 1 individual outside the sample (R1) and two individuals within the sample (R6 and R11).</p> <p>Findings Include:</p> <p>1) R1 is a 59 year old female who functions within the Moderate range of Individuals with Intellectual Disabilities (IID). R1 is also diagnosed with Osteoporosis, Bipolar Disorder and Dementia. On 02/04/15 the 8:00am medication administration was observed from 7:00am -to- 8:45am. It was noted during the observation that R1 received two Calcium supplements. E10 (Direct Support Staff) was asked if R1 received two calcium supplements, and E10 shook her head verifying this was correct. R1's Medication Administration Record (MAR) documents that R1's Oyster Shell 500w/D 200 was "D/C (discontinued) 2-2-15". R1's MAR also documents that Calcium 600/Vit d 400Units was to be started on 02/03/15. The Physician's Telephone Order dated 2-0-15 confirms that R1's Attending Physician "Discontinue Oyster Shell 500 w/D200 1 tab po 8am daily". The 2/02/15 Electronic Order from the Pharmacy confirms that Calcium-D 600-400mg-UNIT was ordered to begin 02/02/15.</p> <p>2) The Person Centered Plan (PCP) dated 03/06/14 documents that R11 is a 70 male who functions within the Profound range of Individuals with Intellectual Disabilities (IID). R11 is also diagnosed with Compulsive Disorder, Autism, and</p>	W 369			

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W 369	<p>Continued From page 18</p> <p>Seizures Disorder.</p> <p>On 02/03/15 @ 2:00pm E3 (QIDP) was asked how the facility reconciled the 2-2-15 discrepancy in R11's Phenobarbital 15ML (60mg). R3 replied "this was my error and I called the Nurse who signed off on it".</p> <p>On 02/04/15 @ 10:08am E9 (Registered Nurse-Trainer) was asked why R11's Phenobarbital 15ML (60mg) count went up instead of down. E9 stated "I don't know...I looked at the bottle and thought it was 100cc".</p> <p>On 02/04/15 @ 2:00pm E9 informed surveyors that "the actual error had occurred on 01/29/15 when R11's Phenobarbital 15ML (60mg) had not been given and was documented incorrectly as 30ml". When asked if she (E9) was notified of the missed dose when it occurred, E9 said "no". When asked if she (E9) should have been notified, E9 stated "yes they should have contacted me".</p> <p>3) The 2/1/15 Medication Administration Record (MAR) indicates R6 is a 20 year female who functions within the Mild range of Individuals with Intellectual Disabilities (IID). R6 is also diagnosed with Psychosis.</p> <p>R6 is prescribed Ziprasidone HCL 60 milligrams (mg), at 6:00am and 8:00pm for Psychosis. The Unit dose bubble pack specifies that this medication should be "taken with food". The MAR also specifies that this medication should be "taken with food".</p> <p>On 2/5/15 at 9:40am E9 (Registered Nurse (RN) Trainer) was interviewed. E9 confirmed that only applesauce is given to R6 with her PM medication not a snack.</p> <p>In a 02/04/15 at 4:15 PM a telephone interview</p>	W 369			

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W 369	Continued From page 19 was conducted with Z1 (Pharmacist). Z1 confirmed that Ziprasidone should be be given with food. On 2/4/15 at 4:05 PM an interview was conducted with E2 (Residential Manager). E2 was asked if R6 was given a snack at 8:00pm. E2 stated "no only if she asks for one, she is on a 1500 calorie diet."	W 369			