

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 155359	X2) MULTIPLE CONSTRUCTION A. BUILDING 00 B. WING _____	X3) DATE SURVEY COMPLETED 03/04/2016
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NAME OF PROVIDER OR SUPPLIER RIVERBEND HEALTH CARE CENTER	STREET ADDRESS, CITY, STATE, ZIP CODE 7519 WINCHESTER RD FORT WAYNE, IN 46819
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F 0000 Bldg. 00	<p>This visit was for the Investigation of Complaint IN00193940 and IN00194545.</p> <p>Complaint IN00193940-Substantiated, Federal/State deficiencies cited at F-241. Complaint IN00194545-Substantiated, Federal/State deficiencies cited at F-241.</p> <p>Survey Dates: March 2, 3 & 4, 2016.</p> <p>Facility number: 000250 Provider number: 155359 AIM number: 100289980</p> <p>Census bed type: SNF/NF: 38 Total: 38</p> <p>Census payor type: Medicare: 2 Medicaid: 34 Other: 2 Total: 38</p> <p>Sample: 5</p> <p>These deficiencies also reflects state findings in accordance with 410 IAC 16.2-3.1.</p> <p>QR completed by 17934 on March 8,</p>	F 0000		
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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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F 0241 SS=E Bldg. 00	<p>2016.</p> <p>483.15(a) DIGNITY AND RESPECT OF INDIVIDUALITY The facility must promote care for residents in a manner and in an environment that maintains or enhances each resident's dignity and respect in full recognition of his or her individuality.</p> <p>Based on resident interview and staff interview the facility failed to ensure staffing was adequate to meet resident needs for 5 of 17 alert and oriented residents. (Residents A, B, C, D & E)</p> <p>Findings include:</p> <p>Confidential interviews with residents on 3/4/16 from 10 a.m. through 2:00 p.m. indicated the following:</p> <p>1. Resident (A) indicated he waits for his call light to be answered anywhere from 1/2 hour to 45 minutes on 3rd shift. Resident (A) indicated he felt staffing was short on all shifts on the weekends</p>	F 0241		

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	<p>and was upset especially when he needed a pain pill.</p> <p>2. Resident (B) indicated a concern of staffing on the weekends. Resident (B) indicated she often has to wait to get up in the morning and indicated on 3rd shift it can take up to 1/2 hour to get her call light answered.</p> <p>3. Resident (C) indicated a concern with no staff on the floor during meals. Resident (C) indicated she eats in her room but all of the staff go to the dining room during meals and it is hard to get her light answered..</p> <p>4. Resident (D) indicated he had a concern with staffing. Resident (D) indicated "Last night I was wet, the staff came in and said they would be back but never came. I woke up in the morning still wet."</p> <p>5. Resident (E) indicated her concern of not having enough staff. Resident (E) indicated she has had to wait 30-45 minutes on 3rd shift to get her light answered.</p> <p>Confidential interviews with facility staff on 3/2 and 3/3/16 indicated the following:</p>			

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	<p>1. Staff #2 indicated the facility had been short but they have been hiring. She indicated they try to have 3 CNA'S (certified nursing assistants) on 1st and 2nd shift.</p> <p>2. Staff #3 indicated she felt staffing had gotten better but last Saturday on 2nd shift there were 2 CNA'S scheduled. One CNA called off and the other CNA left. She indicated there were 2 nurses in the building, and the Director of Nursing worked until 8:00 p.m.</p> <p>3. Staff #4 indicated "They try to staff with what they have."</p> <p>4. Staff #5 indicated she felt the problem was when people called off work.</p> <p>5. Staff #6 indicated she felt staffing was getting better. She indicate last Saturday a CNA called off and the other CNA who was scheduled left. She indicate the CNA who called off did come in later and there were nurses who stayed over and helped.</p> <p>Interview with the Scheduler on 3/4/16 at 10:20 a.m. indicated since the end of January the facility is on a 4/2 schedule which is work 4 days and off 2 days. She indicated staff have quit due to the schedule. She also indicated they have</p>			

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	<p>hired 6 new staff in the last 3 weeks which were all CNA'S. Further interview indicated if there is a call off staff have to stay over to cover. Further interview indicated the facility schedules 3 CNA's on 1st and 2nd shift, 2 CNA's on 3rd shift and 2 nurses on very shift.</p> <p>This federal tag is related to complaint IN00193940 and IN00194545.</p> <p>3.1-17(a)</p>			