

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 155741	X2) MULTIPLE CONSTRUCTION A. BUILDING 00 B. WING _____	X3) DATE SURVEY COMPLETED 09/05/2013
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NAME OF PROVIDER OR SUPPLIER FRIENDSHIP HEALTHCARE	STREET ADDRESS, CITY, STATE, ZIP CODE 2630 S KEYSTONE AVE INDIANAPOLIS, IN 46203
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F000000	<p>This visit was for the Investigation of Complaints IN00135579 and IN00134664.</p> <p>This visit was in conjunction with a Post Survey Revisit (PSR) to the Recertification and State Licensure Survey completed on 7/30/13.</p> <p>Complaint IN00134664 - Substantiated. No deficiencies related to the allegations are cited.</p> <p>Complaint IN00135579 - Substantiated. Federal/state deficiencies related to the allegations are cited at F241 and F242.</p> <p>Survey dates: September 3, 4, & 5, 2013</p> <p>Facility number: 004700 Provider number: 155741 AIM number: 100266630</p> <p>Survey team: Marcy Smith, RN-TC Leia Alley, RN Patti Allen, SW</p> <p>Census bed type: SNF/NF: 40 Total: 40</p>	F000000	<p>This plan of correction is the center's credible allegation of compliance. Preparation and/or completion of this plan of correction does not constitute admission or agreement by the provider of the facts alleged or conclusions set forth in the statement of the deficiencies. The Plan of correction is prepared and/or executed solely because it is required by state and federal law.</p>	

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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	<p>Census Payor type: Medicare: 11 Medicaid: 29 Total: 40</p> <p>Sample: 4</p> <p>These deficiencies reflect state findings in accordance with 410 IAC 16.2.</p> <p>Quality review completed on September 13, 2013; by Kimberly Perigo, RN.</p>			

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F000241 SS=D	<p>483.15(a) DIGNITY AND RESPECT OF INDIVIDUALITY</p> <p>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 interview and record review, the facility failed to ensure 1 resident was treated with dignity and respect in a sample of 4 residents reviewed for dignity and respect. This had the potential to affect 27 incontinent residents of 40 residents residing in the facility. (Resident #A)</p> <p>Findings include:</p> <p>During an interview with Resident #A on 9/04/13 at 11:00 a.m., Resident #A indicated the facility started to run low of adult briefs. They ran out of briefs on 8/26/13. A Certified Nursing Assistant (CNA) came and informed Resident #A she would have to remain in bed until some briefs came in because residents could not be in the wheel chair or out in the facility without incontinence protection. Resident #A indicated she stayed in the bed 8/26 & 8/27/13. Resident #A indicated she could not attend activities of her choice, as usual. She was required to eat all her meals in her room and she was really upset</p>	F000241	<p>The Director of Nursing and QA Nurse were informed that briefs were needed prior to the survey. Both checked the supply closet at the time they were informed, and found that plenty of briefs were available. Resident A was interviewed by the Administrator, and was assured that she may come out of her room any time she wishes, and that her participation in activities or attendance of meals in the dining room are not dependent upon the availability of nursing supplies. Resident A expressed understanding. During the discussion between the Administrator and Resident A, Resident A laughed about the situation. Resident A is a long term resident at this facility. She consistently participates in Resident Council. She makes her own decisions and historically has not hesitated to tell management if she has a concern or complaint. Regarding Resident B and Resident C, the facility keeps an assortment of different sizes of incontinent briefs to meet the needs of the residents. All nursing staff will be inserviced on 9/30/2013 and</p>	10/05/2013			

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	<p>over eating in her room. She indicated she enjoyed seeing the other residents but, "You don't eat where you sleep." She indicated she ate at the dining room table at home and always in the dining room at the facility. She indicated she could not understand why staff just did not go buy some briefs until the others came in.</p> <p>During an interview with Resident #B on 9/04/13 at 2:45 p.m., she indicated she ran out of briefs last week, the end of August. "The staff found me some though, I did not stay in my bed." "Some of the briefs were a little big some were my size." She indicated she was glad they found her some briefs.</p> <p>During an interview with Resident #C on 9/04/13 at 1:30 p.m., he indicated he had not ran out of briefs, but was low. The staff came in his room for couple of days and ask if he had any extra briefs. He indicated that he only had a few, just enough for him. Staff indicated other residents were out of briefs. This was the last week end of August.</p> <p>During an interview with CNA #1 on 9/04/13 at 2:00 p.m., she indicated the facility had ran out of briefs last</p>		<p>instructed not to share or use personal items of one resident for another resident. An inservice was presented on 9/13/2013 by the Administrator and Director of Nursing. The content of the inservice was to inform staff regarding supplies and ordering. Staff was instructed to notify manager when supplies are low. Any resident who wears an incontinent product is determined to have potential to be affected. The Medical Records Clerk has been instructed to check supplies twice weekly. All supplies will be inventoried at this time and needed supplies will be ordered routinely. Medical Records Clerk has been educated on supply inventory log. The Director of Nursing will check the supply log once weekly for no less than two months. When 100% compliance is achieved for eight consecutive weeks, DON will discontinue checking the supply log. Nursing supplies, including incontinent briefs, will be discussed at the QA meeting no less than quarterly to ensure compliance. This will continue on an ongoing basis.ADDENDUM When Medical Records Clerk checks incontinent brief supplies twice weekly, management will be notified if supplies are low. An order to replenish supplies will be made promptly. If a delivery will not arrive before the supply is depleted, incontinent briefs will be purchased locally to ensure that</p>				

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	<p>week 8/26 & 27/13, indicated they told the Director of Nursing (DON) when they were running low. She was told they were ordered, look in the closet for loose briefs and use them. CNA #1 indicated Resident #A stayed in her bed for two days and took her meals in her room. Staff indicated Resident #A appeared upset over having to take her meals in her room, she usually ate in the dining room. Resident #A was out of briefs.</p> <p>During an interview with CNA #2 on 9/04/13 at 2:20 p.m., she indicated she reported to the DON they were running low on briefs. She was told they were ordered to use the larger sizes if they needed to, the previous administrator went out and bought some but it was not enough. Staff indicated that if a resident seemed to have extra briefs then we would ask if we could use some of their briefs on other residents. She indicated she was not sure who to report shortage of supplies to, that is why she reported to the DON.</p> <p>During an interview with CNA #3 on 9/04/13 at 2:40 p.m., she indicated she reported to the DON they were running low on briefs. She was told they were ordered to use the larger</p>		briefs continue to be available. Completion Date 10/05/2013		

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	<p>size 3 XL if they needed to, the previous administrator went out and bought some but, we ran out again and the previous administrator no longer worked here. Staff indicated if a resident seemed to have extra briefs, then we would ask if we could use some of their briefs on other residents.</p> <p>During an interview with the DON on 9/04/13 at 3:50 p.m., she indicated staff had reported the supply of adult briefs was running low. Staff was informed to be sure and use all the ones in the closet including the larger sizes. The previous administrator went out and purchased some briefs. I was not aware of any resident running out and was kept in their room and/or bed.</p> <p>During an interview on 9/25/13 at 3:30 p.m., the Executive Director provided a document entitled, "Resident Care Policy: The Resident Comes First." She indicated it was placed in the Staff Handbook in early 2000 and reviewed annually for the staff to follow. The document indicated, "As leaders in the healthcare field, we have issued a statement of our responsibility to those whose care is in our hands: A Resident Rights Policy. This assures</p>						

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	<p>every resident that we will do everything in our power to guarantee the fundamental rights and individual dignity to which every human being is entitled."</p> <p>This Federal tag relates to Complaint IN00135579.</p> <p>3.1-3(t)</p>			

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F000242 SS=D	<p>483.15(b) SELF-DETERMINATION - RIGHT TO MAKE CHOICES</p> <p>The resident has the right to choose activities, schedules, and health care consistent with his or her interests, assessments, and plans of care; interact with members of the community both inside and outside the facility; and make choices about aspects of his or her life in the facility that are significant to the resident.</p> <p>Based on interview and record review, the facility failed to ensure 1 resident was given the right to choose activities of their interest and make choices about aspects of their life in the facility that are significant to the resident, in sample of 4 residents reviewed. This had the potential to affect 40 of 40 residents residing in the facility. (Resident # A)</p> <p>Findings include:</p> <p>During an interview with Resident #A on 9/04/13 at 11:00 a.m., Resident #A indicated the facility started to run low on adult briefs. They ran out of briefs on 8/26/13, and a CNA came and informed Resident #A she would have to remain in bed until some briefs came in, because residents could not be in the wheel chair or out in the facility without incontinence protection. Resident #A indicated she stayed in the bed 8/26 & 27/13. Resident #A indicated she could not</p>	F000242	<p>The Director of Nursing and QA Nurse were informed that briefs were needed prior to the survey. Both checked the supply closet at the time they were informed, and found that plenty of briefs were available. An inservice was presented on 9/13/2013 by the Administrator and Director of Nursing. The content of the inservice was to inform staff regarding supplies and ordering. Staff was instructed to notify manager when supplies are low. Resident A was interviewed by the Administrator, and was assured that she may come out of her room any time she wishes, and that her participation in activities or attendance of meals in the dining room are not dependent upon the availability of nursing supplies. Resident A expressed understanding. Resident A is a long term resident at this facility. She consistently participates in Resident Council. She makes her own decisions and historically has not hesitated to tell management if she has a</p>	10/05/2013	

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	<p>attend activities of her choice as usual. She was required to eat all her meals in her room and she was really up set over eating in her room. She indicated she enjoyed seeing the other residents, but you don't eat where you sleep. She indicated she ate at the dining room table at home and always in the dining room at the facility. She indicated she could not understand why staff just did not go buy some briefs until the others came in.</p> <p>During an interview with CNA #1 on 9/04/13 at 2:00 p.m., she indicated the facility had ran out of briefs last week 8/26 & 27/13, indicated they told the Director of Nursing (DON) when they were running low. She was told they were ordered, look in the closet for loose briefs and use them. CNA #1 indicated Resident #A stayed in her bed for two days and took her meals in her room. Staff indicated Resident #A appeared upset over having to take her meals in her room, she usually ate in the dining room. Resident #A was out of briefs.</p> <p>During an interview on 9/25/13 at 3:30 p.m., the Executive Director provided a document entitled, "Resident Care Policy: The Resident</p>		<p>concern or complaint. All residents in the facility are identified as having potential to be affected. The Medical Records Clerk has been instructed to check supplies twice weekly. All supplies will be inventoried at this time and needed supplies will be ordered routinely. Medical Records Clerk has been educated on supply inventory log. The Director of Nursing will check the supply log once weekly for no less than two months. When 100% compliance is achieved for eight consecutive weeks, DON will discontinue checking the supply log. Nursing supplies, including incontinent briefs, will be discussed at the QA meeting no less than quarterly to ensure compliance. This will continue on an ongoing basis. ADDENDUM When Medical Records Clerk checks incontinent brief supplies twice weekly, management will be notified if supplies are low. An order to replenish supplies will be made promptly. If a delivery will not arrive before the supply is depleted, incontinent briefs will be purchased locally to ensure that briefs continue to be available. Completion Date 10/05/2013</p>				

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	<p>Comes First." She indicated it was place in the Staff Handbook in early 2000 and review annually for the staff to follow. The document indicated, "As leaders in the healthcare field, we have issued a statement of our responsibility to those whose care is in our hands: A Resident Rights Policy. This assures every resident that we will do everything in our power to guarantee the fundamental rights and individual dignity to which every human being is entitled."</p> <p>This Federal tag relates to Complaint IN00135579.</p> <p>3.1-3(u)(3)</p>				