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| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 155367 | (X2) MULTIPLE CONSTRUCTION A. BUILDING 00 B. WING _____ | (X3) DATE SURVEY COMPLETED 08/24/2011 |
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| NAME OF PROVIDER OR SUPPLIER GOLDEN LIVING CENTER-SYCAMORE VILLAGE | STREET ADDRESS, CITY, STATE, ZIP CODE 2905 W SYCAMORE ST KOKOMO, IN46901 |
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| F0000 | <p>This visit was for the Investigation of Complaint IN00094905.</p> <p>Complaint IN00094905 - Substantiated, Federal/State deficiencies related to the allegation are cited at F-282 and F-514.</p> <p>Survey dates: August 23 and 24, 2011</p> <p>Facility Number: 000258 Provider Number: 155367 AIM Number: 100289160</p> <p>Survey team: DeAnn Mankell, RN, TC</p> <p>Census bed type: SNF/NF: 90 Total: 90</p> <p>Census payor type: Medicare: 8 Medicaid: 67 Other: 15 Total: 90</p> <p>Sample: 3</p> <p>These deficiencies also reflect state findings cited in accordance with 410 IAC 16.2.</p> | F0000 | | |

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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| F0282 SS=D | <p>Quality review completed on August 29, 2011 by Bev Faulkner, RN</p> <p>The services provided or arranged by the facility must be provided by qualified persons in accordance with each resident's written plan of care.</p> <p>Based on record review and interview, the facility failed to obtain a physician's order before administration of an injection of Phenergan (an anti-nausea medication) for 1 of 1 resident with a Phenergan injection in a sample of 3. (Resident B)</p> <p>Findings include:</p> <p>1. Resident B's closed clinical record was reviewed on 8/23/2011 at 10:15 A.M.</p> <p>Resident B's diagnoses included, but were not limited to, hypertension, urinary retention, chronic UTI's (urinary tract infections) and depression.</p> <p>The Progress notes, dated 8/13/2011 1:36 A.M., indicated Resident B had "...vomit was brown in color, medium in size and thin liquid consistency. Notified AHA (medical service), new order received."</p> <p>Resident B's physician's, untimed, but</p> | F0282 | <p>Resident B no longer resides at facility. RN who administered medication without written order was counseled and received written disciplinary action.</p> <p>All other residents' current medication administration records were reviewed and no other resident found to have been affected by the deficient practice.</p> <p>Licensed nurses in-serviced on policy regarding medication administration and ensuring there is a physician's order present before administering a medication. UM/designee to review during clinical start up q business day nurses notes and new orders from previous day. UM/designee to also review MARS 3 times weekly x 4 weeks, 2 times weekly x 4 weeks, then weekly thereafter to ensure all meds given have a physician order present.</p> <p>Results of MAR audits to be reviewed at QA&A monthly x 6 months to track for any trends. If any trends regarding giving</p> | 09/23/2011 | |

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| | <p>dated 8/13/2011 order indicated "Promethazine HCL (Phenergan) Intramuscular (IM) 12.5 mg (milligrams). Give 12.5 mg IM now one time only."</p> <p>Resident B's August 2011 MAR (Medication Administration Record) indicated an order for "Promethazine HCL (Phenergan) Intramuscular (IM). Dose 12.5 mg (milligrams)." Order dated 8/13/2011. "Give 12.5 mg. IM now one time only." There were initials at 1:35 A.M., and at 5:40 P.M., on 8/13/2011 indicating the resident received the medication twice and not the one time only as the order was written.</p> <p>There was a Progress note, dated 8/14/2011 at 2:06 A.M., "...Resident has been refusing meals and has complaints of being nauseated. Writer gave resident a IM shot of Phenergan at 1730 (5:30 P.M.)...."</p> <p>During an interview with the Director of Nursing (DON) on 8/23/2011 at 12:45 P.M., she indicated she was unaware a nurse had given the resident the medication twice instead of the one time as it was ordered. She indicated the nurse should not have given the medication twice.</p> <p>Review of the policy provided by the Unit</p> | | <p>medications without an order are identified then audits to continue based on recommendation of QA&A. If no trends identified then will review on a prn basis.</p> | | | | |

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| F0514 SS=D | <p>Manager on 8/23/2011 at 12:45 P.M., dated May 2001, for "Medications, Administering" indicated "A designated staff member will give medications only per physician's orders."</p> <p>This federal tag relates to Complaint IN00094905.</p> <p>3.1-35(g)(2)</p> <p>The facility must maintain clinical records on each resident in accordance with accepted professional standards and practices that are complete; accurately documented; readily accessible; and systematically organized.</p> <p>The clinical record must contain sufficient information to identify the resident; a record of the resident's assessments; the plan of care and services provided; the results of any preadmission screening conducted by the State; and progress notes.</p> <p>Based on record review,, the facility failed to maintain accurate and organized records for 1 of 1 resident who was sent to the hospital in a sample of 3 residents. (Resident B)</p> <p>Findings include:</p> <p>1. Resident B's closed clinical record was reviewed on 8/23/2011 at 10:15 A.M.</p> | F0514 | <p>Resident B no longer resides at facility.</p> <p>All residents have the potential to be affected by the deficient practice.</p> <p>Licensed staff in-serviced on documentation regarding nurses notes and what must be included when documenting. UM/designee to review nurses notes every business day during clinical start up and check for proper documentation. If any</p> | 09/23/2011 | |

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| | <p>Resident B's diagnoses included, but were not limited to, hypertension, urinary retention, chronic UTI's (urinary tract infections), and depression.</p> <p>The hospital emergency room notes, located in the clinical record, indicated Resident B arrived in the hospital at 2220 (10:20 P.M.) on 8/13/2011. The hospital emergency room notes indicated the discharge summary was printed on 8/14/2011 at 0135 (1:35 A.M.). The discharge orders included an order for Bactrim DS (an antibiotic), 1 tablet daily for prevention of UTI. This order was transcribed onto a physician's order in Resident B's clinical record on 8/14/2011, but there was a lack of the time the order had been written.</p> <p>There was an untimed physician's order written on 8/14/2011 for "Resident to be taken to (name of hospital) for evaluation and treatment."</p> <p>Resident B's progress notes indicated on 8/14/2011 at 2:06 A.M., "Resident was nonresponsive when CNA entered the room.... Resident was sent by ambulance to (name of hospital)Physician was notified and family was notified. Family was going to send over someone to be with the resident in the ER."</p> | | <p>issues are identified regarding documentation they are placed on the clinical follow up form and will be addressed by end of day. DNS/designee to review follow up form q business day for previous days issue to ensure they were addressed.</p> <p>Results of clinical follow up forms to be reviewed monthly at QA&A x 6 months to track for any trends. If any trends identified regarding documentation than will continue to review results based on QA&A recommendations. If no trends identified then will review on a prn basis.</p> | | | | |

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| | <p>The Physician's orders indicated an order written on 8/14/2011 at 9:15 A.M., indicating "Send to ER for eval (evaluation) and tx (treatment)."</p> <p>Resident B's progress notes indicated: 8/14/2011 at 15:35 (3:35 P.M.), "Res. continues to be extremely lethargic, not responding to name this AM.... Res was sent to (name of hospital) ER for eval and treat last NOC (night). Res returned with PO orders for ATB (antibiotic) d/t (due to urinary sepsis.... AHA stated is ok to send res back to (name of hospital) for eval and treat."</p> <p>8/14/2011 at 15:45 (3:45 P.M.) "....Ambulance here, approx 9:30 AM to transport res to (name of hospital) ER for eval and treat...."</p> <p>Resident B's progress notes indicated late entries: 8/13/2011 01:59 "Residents (sic) family notified of condition change and new orders received" written on 8/17/2011 at 3:01 P.M. 8/14/2011 04:09 "Resident returned from ER with new orders..." written on 8/17/2011 at 3:11 P.M.</p> <p>This federal tag relates to Complaint IN00094905.</p> <p>3.1-50(a)(1)</p> | | | | | | |

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

PRINTED: 09/12/2011

FORM APPROVED

OMB NO. 0938-0391

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| | 3.1-50(a)(2) 3.1-50(a)(4) | | | | |