

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 155473	X2) MULTIPLE CONSTRUCTION A. BUILDING 00 B. WING _____	X3) DATE SURVEY COMPLETED 08/03/2015
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NAME OF PROVIDER OR SUPPLIER CHALET VILLAGE HEALTH AND REHABILITATION CENTER	STREET ADDRESS, CITY, STATE, ZIP CODE 1065 PARKWAY ST BERNE, IN 46711
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F 0000 Bldg. 00	<p>This visit was for a Recertification and State Licensure Survey.</p> <p>Survey dates: July 28, 29, 30,31, & August 3, 2015</p> <p>Facility number: 000546 Provider number: 155473 AIM number: 100267370</p> <p>Census bed type: SNF/NF: 32 Total: 32</p> <p>Census payor type: Medicare: 1 Medicaid: 31 Total: 32</p> <p>These deficiencies reflect state findings cited in accordance with 410 IAC 16.2-3.1.</p>	F 0000	<p>Submission of this plan ofCorrection does not constitute anadmission or agreement by theprovider of the truth of factsalleged or corrections set forth onthe statement of deficiencies.This plan of Correction isprepared and submitted becauseof requirements under State andFederal law. Please accept thisplan of correction as our credibleallegation of compliance.</p>	
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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 0244 SS=E Bldg. 00	<p>483.15(c)(6) LISTEN/ACT ON GROUP GRIEVANCE/RECOMMENDATION When a resident or family group exists, the facility must listen to the views and act upon the grievances and recommendations of residents and families concerning proposed policy and operational decisions affecting resident care and life in the facility.</p> <p>Based on interview and record review, the facility failed to act on the continuing concern of slow response time to answer call lights and extended time for residents to receive assistance by CNAs voiced during the Resident Council meetings potentially affecting 32 of 32 residents who resided in the facility.</p> <p>Findings include:</p> <p>Review of the monthly Resident Council Minutes on 8/3/15 at 10:33 a.m., indicated the following:</p> <p>On 9/30/14, the discussion of new business indicated the (Certified Nursing Assistants) CNAs were not answering the</p>	F 0244	<p>1. It is the goal of the facility toact on resident concerns voiced via residents meetings or otherwise. Theaffected residents were not identified within the business minutes listed,thus, the following corrective actions will be taken, applicable to all residents.</p> <p>2. In an effort to identify specificconcerns/patterns/trends relative to staff availability/response to call lights,individual resident interviews shall be conducted inquiring of timely responseto call lights, ice water availability, etc. Any specific patterns/trends in times of day, caregivers, etc., shall be addressed with applicablestaff/supervisors. As all residents have the potential to be affected, thefollowing corrective actions have been taken. Needs</p>	09/02/2015

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	<p>call lights and were always slow when they answered the call lights. The minutes also indicated the CNAs were standing around with their hands in their pockets. They would cancel call lights telling the resident they would be back, but never returned. The minutes further indicated the CNAs were late on serving the supper trays because they would be standing at the nurses station with the nurses.</p> <p>On 10/30/14, the discussion of new business indicated the CNAs could pick up the pace a little bit. The minutes also indicated they were still slow at answering call lights.</p> <p>On 12/30/14, the discussion of new business indicated the call lights were not being answered in a timely manner.</p> <p>On 2/20/15, the discussion of new business indicated ice water had not been passed, showers were not given, and a wait for call lights to be answered continued.</p> <p>On 4/28/15, the discussion of new business indicated it was taking the CNAs a long time to answer call lights. The minutes also indicated residents who had asked to be put to bed have waited a "good hour" until they were assisted to</p>		<p>and/or supervision that can be performed by non-direct caregivers shall be identified in an effort to identify tasks which could be performed by ancillary staff members, thus allowing nursing staff to be responsive to direct resident care needs. 3. Nursing staff shall be addressed in regard to timely response to call lights. Ancillary staff shall be addressed as to specific tasks which will be assigned and performed for the residents in an effort to ensure the direct caregivers are available to provide necessary direct resident care. The staff member responsible to log concerns of residents voiced during resident meetings shall be educated to attempt to gather as much detail as possible in regard to voiced concerns (e.g., involved staff member, applicable shift, etc.) and shall be advised to alert the Administrator and DON of specific concerns immediately following said meetings in an effort to initiate investigation and/or intervention in a timely manner. This shall also allow follow up with the specific resident relative to his/her specific concern. 4. As a means of quality assurance, and in an effort to ensure a sufficient amount of staff is present, the administrator or designee will complete at least 2 resident interviews daily on scheduled days of work specific to staff availability and responsiveness to care needs (i.e., call light response) for two</p>		

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	<p>bed.</p> <p>On 6/25/15, the discussion of new business indicated a resident wanted ice water every 2 hours. The CNA would tell him to just be patient, but would never come back. The minutes also indicated call lights stayed on for a long time, and the CNAs talked too much at the nurses station when lights needed to be answered. The minutes further indicated 2 residents waited on the toilet for 20 minutes until staff came to assist.</p> <p>On 7/28/15, the discussion of new business indicated it took a long time to answer call lights. The CNA would answer the light, leave the resident's room, and not come back.</p> <p>Social Service was interviewed on 8/3/15 at 4:00 p.m. During the interview she indicated she attended the Resident Council meetings and would write down any concerns the residents voiced. She also indicated after the meeting she would share the residents' concerns with the Administrator. She further indicated the Administrator would then discuss any concerns involving nursing with the nursing department and the nursing department was to address the residents' concerns. She also indicated the concerns voiced by the residents during</p>		<p>weeks, then 3 resident interviews weekly for four weeks, then 2resident interviews weekly ongoing . TheAdministrator or designee will complete at least one family interview weeklyongoing in regard to sufficient staffing/response to direct resident careneeds. Corrective action shall be taken, if warranted, on the basis of saidinterviews. Interview response andcorrective actions taken shall be reported to the Quality Assurance Committeeduring quarterly meetings and the plan revise,if warranted. The above corrective action will becompleted on or before 9-2-2015.</p>		

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F 0353 SS=E Bldg. 00	<p>the Resident Council meeting were discussed at the following month's meeting to determine if the concerns were resolved.</p> <p>3.1-3(l)</p> <p>483.30(a) SUFFICIENT 24-HR NURSING STAFF PER CARE PLANS The facility must have sufficient nursing staff to provide nursing and related services to attain or maintain the highest practicable physical, mental, and psychosocial well-being of each resident, as determined by resident assessments and individual plans of care.</p>			

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	<p>The facility must provide services by sufficient numbers of each of the following types of personnel on a 24-hour basis to provide nursing care to all residents in accordance with resident care plans:</p> <p>Except when waived under paragraph (c) of this section, licensed nurses and other nursing personnel.</p> <p>Except when waived under paragraph (c) of this section, the facility must designate a licensed nurse to serve as a charge nurse on each tour of duty.</p> <p>Based on interview and record review, the facility failed to ensure sufficient staffing to meet the needs of the residents per 13 of 19 confidential resident interviews and 1 of 3 confidential family interviews potentially affecting 32 of 32 residents who resided in the facility.</p> <p>Findings include:</p> <p>1. During resident interviews conducted on 7/28/15 and 7/29/15, 13 residents interviewed indicated there were not enough staff in the facility to meet their needs. Their confidential comments included the following:</p> <p>On 7/28/15 at 11:09 a.m., an anonymous resident interview indicated the facility needed more staff in general, especially on the weekends. The resident also</p>	F 0353	<p>1. It is the goal of the facility to provide services to its residents to allow the resident to attain or maintain their highest practicable physical and psychosocial well-being. The affected residents were not identified, thus, the following corrective actions will be taken, applicable to all residents. 2. In an effort to identify specific concerns/patterns/trends relative to staff availability/response, resident interviews shall be conducted inquiring of timely response to call lights, ice water availability, meal assistance, bath/shower assistance, etc. Any specific patterns/trends in times of day, caregivers, etc., shall be addressed with applicable staff/supervisors. As all residents have the potential to be affected, the following corrective actions have been taken. Needs and/or supervision that can be performed</p>	09/02/2015

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	<p>indicated a wait of up to 40 minutes for the call light to be answered. The resident further indicated meal service had been delayed due to not enough staff to pass the trays. The resident also indicated staff just stood around the nurse's station talking.</p> <p>On 7/28/15 at 11:34 a.m., an anonymous resident interview indicated a wait of 20 minutes for the call light to be answered.</p> <p>On 7/28/15 at 1:35 p.m., an anonymous resident interview indicated the facility needed more staff at mealtime.</p> <p>On 7/28/15 at 1:45 p.m., an anonymous resident interview indicated the facility needed more staff. The resident also indicated meal service was delayed due to not enough staff.</p> <p>On 7/28/15 at 2:03 p.m., an anonymous resident interview indicated it took 5 hours to get fresh water one day.</p> <p>On 7/28/15 at 2:36 p.m., an anonymous resident interview indicated a wait of 30 minutes to 45 minutes on the bedpan waiting for staff assistance. The resident also indicated the wait caused discomfort.</p> <p>On 7/28/15 at 3:29 p.m., an anonymous resident interview indicated the facility</p>		<p>by non-direct caregivers shall be identified in an effort to identify tasks which could be performed by ancillary staff members, thus allowing nursing staff to be responsive to direct resident care needs. 3. Administration and nursing administration will meet to review current acuity and staffing patterns in an effort to ensure staff are best utilized in response to residents' plans of care. Nursing management shall be re-educated on assessing the need for a sufficient amount of staff to care for the residents. Nursing staff shall be addressed in regard to ensuring the correct number of caregivers is secured for resident transfer as per plan of care, timely response to call lights, procedure in response to staff call-ins, and of the need to notify administration should unexpected staffing vacancies be such to prohibit the meeting of resident needs per plan of care. Ancillary staff shall be addressed as to specific tasks which will be assigned and performed for the residents in an effort to ensure the direct caregivers are available to provide necessary direct resident care. 4. As a means of quality assurance, and in an effort to ensure a sufficient amount of staff is present, the administrator or designee will complete at least 2 resident interviews daily on scheduled days of work specific</p>		

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	<p>was short staffed on the the evenings after 3:00 p.m. until the next morning. The resident also indicated a wait of up to 30 minutes for the call light to be answered.</p> <p>On 7/29/15 at 9:27 a.m., an anonymous resident interview indicated the facility was short of staff usually in the evening. The resident also indicated the "young girls ignore the buzzer."</p> <p>On 7/29/15 at 9:32 a.m., an anonymous resident interview indicated the facility needed more help in the morning, particularly from 4:00 a.m. to 8:00 a.m. The resident indicated a shower schedule of 3 times a week, but did not always get their shower due to short staffing.</p> <p>On 7/29/15 at 9:42 a.m., an anonymous resident interview indicated the amount of staff depended on how lazy the staff were or if the staff wanted to help. The resident also indicated two staff took their breaks at the same time. The resident further indicated while the staff took their breaks, the call lights would go off and there were no (Certified Nursing Assistants) CNAs to answer them.</p> <p>On 7/29/15 at 10:48 a.m., an anonymous resident interview indicated a wait of at least 30 minutes for the call light to be</p>		<p>to staff availability andresponsiveness to care needs for two weeks, then 3 resident interviews weeklyfor four weeks, then 2 resident interviews weekly ongoing . The Administrator or designee will completeat least one family interview weekly ongoing in regard to sufficientstaffing/response to direct resident care needs. Corrective action shall betaken, if warranted, on the basis of said interviews. Interview response andcorrective actions taken shall be reported to the Quality Assurance Committeeduring quarterly meetings and the plan revise,if warranted. The above corrective action will becompleted on or before 9-2-2015.</p>		

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	<p>answered.</p> <p>On 7/29/15 at 11:11 a.m., an anonymous resident interview indicated call lights were on a long time before being answered.</p> <p>On 7/29/15 at 1:41 p.m., an anonymous resident interview indicated some facility staff had quit and the facility was short of staff.</p> <p>2. During family interviews conducted on 7/28/15 and 7/29/15, one family interviewed on 7/29/15 at 9:40 a.m., indicated there was not enough staff to care for the residents. The family also indicated they were usually in the facility 1 day a week for 3-4 hours and call lights were on for a long time. The family further indicated their loved one would be on the bedpan when they arrived in the facility and it would take staff over 30 minutes to answer the call light to assist the resident off the bedpan.</p> <p>The Resident Census and Conditions of Residents, provided by the Director of Nursing on 7/28/15 at 11:34 a.m., indicated:</p> <p>Thirty residents required the assist of one or two staff for bathing, and two residents were dependent on staff.</p>			

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	<p>Twenty-two residents required the assistance of one or two staff for dressing, and three residents were dependent on staff.</p> <p>Nineteen residents required the assist of one or two staff for transferring, and six residents were dependent on staff.</p> <p>Twenty-eight residents required the assist of one or two staff for toilet use, and 2 residents were dependent on staff.</p> <p>Thirty residents required the assist of one or two staff for eating, and 2 residents were dependent on staff.</p> <p>Information provided by the Administrator on 8/3/15 at 10:40 a.m., indicated seven residents in the facility required the use of a Hoyer lift (requiring the assistance of 2 staff) for transfers.</p> <p>A facility Daily Schedule, provided by the Director of Nursing on 7/28/15 at 11:19 a.m., indicated the following:</p> <p>On Tuesday, July 28, 2015, there were 3 CNAs and 1 Hostess on 1st shift, 2 CNAs and 1 Hostess on 2nd shift, and 1 CNA on 3rd shift.</p> <p>On Wednesday, July 29, 2015, there were</p>			

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	<p>3 CNAs (1 CNA from 9:00 a.m. to 5:00 p.m.) and 2 Hostess (1 Hostess from 7:00 a.m. to 10:00 a.m. and 1 Hostess from 10:00 a.m. to 3:00 p.m.) on 1st shift, 3 CNAs and 1 Hostess on 2nd shift, and 2 CNAs on 3rd shift.</p> <p>On Thursday, July 30, 2015, there were 3 CNAs (1 CNA from 7:00 a.m. to 5:00 p.m.) and 1 Hostess on 1st shift, 2 CNAs and 2 Hostess (1 Hostess from 1:00 p.m. to 5:00 p.m. and 1 Host from 4:00 p.m. to 8:00 p.m.) on 2nd shift, and 1 CNA on 3rd shift.</p> <p>On Friday, July 31, 2015, there were 2 CNAs and 1 Hostess on 1st shift, 2 CNAs and 1 Hostess on 2nd shift, and 1 CNA on 3rd shift.</p> <p>On Saturday, August 1, 2015, there were 3 CNAs and 1 Hostess on 1st shift, 2 CNAs and 1 Hostess on 2nd shift, and 1 CNA on 3rd shift</p> <p>On Sunday, August 2, 2015, there were 3 CNAs (1 CNA from 6:00 a.m. to 6:00 p.m.) and 1 Hostess on 1st shift, 2 CNAs (1 CNA the same as on the 1st shift from 6:00 a.m. to 6:00 p.m.) and 1 Hostess on 2nd shift, and 1 CNA on 3rd shift.</p> <p>On Monday, August 3, 2015, there were 2 CNAs and 2 Hostess (1 Hostess from</p>			

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	<p>7:00 a.m. to 11:00 a.m. and 1 Hostess from 11:00 a.m. to 3:00 p.m.) on 1st shift, 2 CNAs and 1 Hostess on 2nd shift, and 1 CNA on 3rd shift</p> <p>The Job Description of the Host/Hostess, provided by the Director of Nursing on 8/3/15 at 1:15 p.m., indicated "...Purpose: To assist nursing services with non-physical contact related activities for the residents. Will perform non-direct resident care tasks in the resident care area...Answer call lights to inquire and communicate needs to appropriate staff...."</p> <p>Review of the monthly Resident Council Minutes on 8/3/15 at 10:33 a.m., indicated the following:</p> <p>On 9/30/14, the discussion of new business indicated the CNAs were not answering the call lights and were always slow when they answered the call lights. The minutes also indicated the CNAs were standing around with their hands in their pockets. They would cancel call lights telling the resident they would be back, but never returned. The minutes further indicated the CNAs were late on serving the supper trays because they would be standing at the nurses station with the nurses.</p>				

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	<p>On 10/30/14, the discussion of new business indicated the CNAs could pick up the pace a little bit. The minutes also indicated they were still slow at answering call lights.</p> <p>On 12/30/14, the discussion of new business indicated the call lights were not being answered in a timely manner.</p> <p>On 2/20/15, the discussion of new business indicated ice water had not been passed, showers were not given, and a wait for call lights to be answered continued.</p> <p>On 4/28/15, the discussion of new business indicated it was taking the CNAs a long time to answer call lights. The minutes also indicated residents who had asked to be put to bed have waited a "good hour" until they were assisted to bed.</p> <p>On 6/25/15, the discussion of new business indicated a resident wanted ice water every 2 hours. The CNA would tell him to just be patient, but would never come back. The minutes also indicated call lights stayed on for a long time, and the CNAs talked too much at the nurses station when lights needed to be answered. The minutes further indicated 2 residents waited on the toilet</p>			

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NAME OF PROVIDER OR SUPPLIER CHALET VILLAGE HEALTH AND REHABILITATION CENTER	STREET ADDRESS, CITY, STATE, ZIP CODE 1065 PARKWAY ST BERNE, IN 46711
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(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
	<p>for 20 minutes until staff came to assist.</p> <p>On 7/28/15, the discussion of new business indicated it took a long time to answer call lights. The CNA would answer the light, leave the resident's room, and not come back.</p> <p>The Administrator was interviewed on 8/3/15 at 2:55 p.m. During the interview she indicated the facility shift hours were 6:00 a.m. - 2:00 p.m. for 1st shift, 2:00 p.m. - 10:00 p.m. for 2nd shift, and 10:00 p.m. - 6:00 a.m. for 3rd shift. She also indicated the facility started a Host/Hostess program in May 2015. The position was developed to assist the CNAs with non-direct resident care.</p> <p>3.1-17(a)</p>			

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

PRINTED: 08/21/2015
FORM APPROVED
OMB NO. 0938-0391

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