

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  155561	X2) MULTIPLE CONSTRUCTION A. BUILDING 00 B. WING _____	X3) DATE SURVEY COMPLETED  08/29/2013
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NAME OF PROVIDER OR SUPPLIER  GOOD SAMARITAN HOME & REHABILITATIVE CENTER	STREET ADDRESS, CITY, STATE, ZIP CODE 231 N JACKSON ST OAKLAND CITY, IN 47660
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F000000	<p>This visit was for the Investigation of Complaint IN00133590, Complaint IN00134302, and Complaint IN00135089.</p> <p>Complaint IN00133590 - Substantiated, Federal/State deficiencies related to the allegations are cited at F323 and F353.</p> <p>Complaint IN00134302 - Unsubstantiated due to lack of evidence.</p> <p>Complaint IN00134089 - Substantiated, Federal/State deficiencies related to the allegations are cited at F323 and F353.</p> <p>Survey dates: August 27 and 29, 2013</p> <p>Facility number: 000327 Provider number: 155561 AIM number: 100273920</p> <p>Survey team: Anne Marie Crays RN</p> <p>Census bed type: SNF/NF: 86 Total: 86</p>	F000000	The creation and submission of this Plan of Correction does not constitute an admission by this provider of any conclusion set forth in the statement of deficiencies, or of any violation of regulation. This provider respectfully requests that the 2567L Plan of Correction be considered the Letter of Credible Allegation and requests a desk review on or after September 13, 2013	

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: 8 Medicaid: 55 Other: 23 Total: 86</p> <p>Sample: 7</p> <p>These deficiencies reflect state findings cited in accordance with 410 IAC 16.2.</p> <p>Quality review completed on August 30, 2013, by Jodi Meyer, RN</p>			

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F000323 SS=D	<p>483.25(h) FREE OF ACCIDENT HAZARDS/SUPERVISION/DEVICES The facility must ensure that the resident environment remains as free of accident hazards as is possible; and each resident receives adequate supervision and assistance devices to prevent accidents. Based on observation, interview, and record review, the facility failed to provide supervision to prevent falls for 2 of 4 residents reviewed for falls and wandering, in a sample of 7. Residents A and F</p> <p>Findings include:</p> <p>1. The clinical record of Resident A was reviewed on 8/27/13 at 10:10 A.M. Diagnoses included, but were not limited to, Alzheimer's disease.</p> <p>A Minimum Data Set (MDS) assessment, dated 6/17/13, indicated Resident A scored a 6 out of 15 for cognition, with 15 indicating no memory impairment. Resident A required extensive assistance of two+ staff for transfer, and supervision of one staff for ambulating in the corridor. A test for balance indicated, "Not steady, but able to stabilize without staff assistance."</p> <p>Progress Notes included the following notations:</p>	F000323	<p>It is the practice of this facility to ensure that the resident environment remains as free of accident hazards as is possible and each resident receives adequate supervision and assistance devices to prevent accidents. F323 What corrective action(s) will be accomplished for those residents found to have been affected by the deficient practice Resident A was moved to Cottage 2 to better meet her needs. Resident A is currently is receiving PT services for strengthening Resident A care plan was updated to reflect effective fall interventions. Resident F care plan has been updated to reflect effective fall interventions. How will you identify other residents having the potential to be affected by the same deficient practice and what corrective action will be taken Residents who are at risk for falls have the potential to be affected by the alleged deficient practice. Nursing staff have been re-educated related to fall prevention and wandering interventions/redirections by Education Coordinator/Designee by September 13, 2013 an</p>	09/13/2013			

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	<p>7/4/13 at 9:08 P.M.: "...Found resident in another patients [sic] room trying to crawl underneath her bed and crying...."</p> <p>7/24/13 at 10:37 A.M.: "Resident exit seeking early this am. Redirection worked for only short periods. When resident hears doors open she walks very fast to get there becoming unsteady at times...."</p> <p>A Physical Therapy Plan of Care, dated 7/25/13, included: "Reason for Referral: Pt. [patient] has decreased ambulation independence and safety...Current Level of Function: Gait Tasks: The patient demonstrates muscle weakness causing festinating gait and shuffling steps during gait training with hand held physical assist and contact guard assist (contact with patient due to unsteadiness) for 150 feet...Pt demonstrates decreased balance over last week, with decreased gait independence and distance noted. Pt demonstrates decreased safety awareness, attempting to sit during ambulation with no chair present. Pt requires extensive safety cuing [sic]...."</p> <p>Progress Notes continued:</p>		<p>Audit of residents charts has been conducted by DNS/Designee to ensure fall interventions are effective and in place. What measures will be put into place or what systemic changes you will make to ensure that the deficient practice does not recur Residents on the Cottages have been reassessed for appropriateness of placement to ensure resident needs are being met. Residents fall interventions have been reviewed for effectiveness. Resident falls will be reviewed the next business day by the IDT to develop effective fall interventions. Licensed nurses will round no less than q shift to ensure that resident interventions are in place and functioning. Week end manager will review falls for immediate intervention. Immediate interventions will be communicated to staff per hot charting and a verbal report to charge nurse. Activity assistant has been hired to assist with programming and supervision. Nurse managers will round daily to ensure compliance. DNS/designee will monitor for compliance.How the corrective action(s) will be monitored to ensure the deficient practice will not recur, i.e., what quality assurance program will be put into place? A fall CQI tool will be utilized weekly x 4, monthly x 6 and quarterly to maintain compliance for two consecutive</p>		

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	<p>7/26/13 at 10:17 A.M.: "Resident roommate came to nurse and stated resident was on floor. Found resident in room on floor lying on back...."</p> <p>7/29/13 at 10:58 A.M.: "IDT [interdisciplinary team] met to review fall...Resident has undergone recent med changes...IDT suspects root cause of fall was related to recent med changes...Current fall interventions include: call light in reach, personal items in reach, non skid footwear...will continue to monitor."</p> <p>8/16/13 at 10:08 P.M.: "...resident then began following another resident, wanting in her room and climbing in her bed. When the other resident told her to leave her room, resident became upset and began to cry...."</p> <p>8/18/13 at 4:41 P.M.: "Resident developing propulsive gait and seems to be shuffling with ambulation. Resident assisted by staff and feet observed to be outwardly turned during ambulation...."</p> <p>8/19/13 at 12:06 A.M.: "Resident having much difficulty ambulating tonight. Appears to be walking on tiptoes and leaning forward. Resident</p>		<p>quarters. If threshold of 95% is not achieved. the CQI committee will develop an action plan to ensure compliance. What is the date by which the systemic changes will be completed 9/13/13</p>	

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	<p>attempted to sit in a chair that was 2-3 feet away. Gait is very unsteady and requires assistance. Placed resident in a wheelchair for safety...."</p> <p>8/19/13 at 10:25 A.M.: "Resident was sitting in chair in dining room. Got up from chair and shuffled feet. Fell on floor on right side...."</p> <p>8/22/13 at 8:30 A.M.: "Resident experienced witnessed fall as she was attempting to sit down on two separate residents walkers. Resident was then re-directed and resident instead attempted to sit on hand rail and then food service cart...Resident fell back onto buttocks during attempt to sit down...seems to be shuffling with ambulation...."</p> <p>A Physical Therapy note, dated 8/22/13 indicated, "...Amb [ambulated] 185 ft x 1 [assist]...with forward lean with small baby steps with v/cs [verbal cues]...to increase posture and step length. Pt attempted to sit down x 2 while walking. After therapy this AM pt had a fall...Required rest breaks in between walks."</p> <p>Progress Notes continued:</p> <p>8/23/13 at 3:47 P.M.: "...Resident was</p>						

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	<p>ambulating with a very unsteady gait while exit seeking. Resident was in another resident's room sitting on the bed and slid off the bed onto the floor...Will continue to monitor."</p> <p>8/23/13 at 6:48 P.M.: "Observed res. [resident] fall in DR [dining room], res attempted to stand and sit back down missing chair, very unsteady gait noted, falling on bottom, no injured noted...AID state [sic] that res is having increased weakness and confusion...."</p> <p>8/23/13 at 11:36 P.M.: "Observed res fall in DR very unsteady gait, weak knees, did not hit head, no injured noted...assisted res to seat with pad alarm in place."</p> <p>8/24/13 at 4:01 P.M.: "Multiple falls noted last few days, and continues on follow up...Resident requires constant reminder not to attempt to walk by self...Resident extensive assist with toileting, bed mobility and ambulating with two assist. Gait remains slow, unsteady, with shuffling motion...."</p> <p>8/25/13 at 8:57 A.M.: "Res was found to have slid out of bed onto buttocks...."</p> <p>8/26/13 at 4:41 P.M.: "IDT met to</p>			

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	<p>review multiple falls...Resident has undergone multiple med changes...A UA [urinalysis] was ordered on 8/22/13 which was negative...Resident is currently on PT [physical therapy] caseload for gait disturbance...IDT recommends pad alarm in chair and in bed...."</p> <p>A Care Plan, dated 9/21/10, indicated: "Problem, Resident is at risk for fall due to dementia, altered mental status, diabetes, walks fast pace. Resident does not wear shoes." The Approaches included: "8/22/13 Education to ensure resident pathway clear. 9/21/10 Call light in reach."</p> <p>An additional Care Plan, dated 8/20/12, indicated: "Problem, Resident is at risk for fall due to: Dx [diagnosis] of alzheimers dementia, unsteady balance, incontinence, arthritis, past Hx [history] of falls." The Approaches included: "8/26/13 Pad alarm bed and chair...Call light in reach...."</p> <p>On 8/27/13 at 11:55 A.M., Resident A was observed up ambulating in the hallway with PT staff. Resident A's gait was observed to be slow and shuffling.</p>			

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	<p>2. On 8/27/13 at 9:35 A.M., Resident F was observed walking independently out of a resident room. Bruising was observed on the resident's left forehead, temple, and around the left eye. LPN # 1 immediately retrieved the resident's walker. LPN # 1 indicated at that time that Resident F had recently fallen. LPN # 1 indicated the room that Resident F was exiting was not the resident's room.</p> <p>The clinical record of Resident F was reviewed on 8/27/13 at 11:25 A.M. Diagnoses included, but were not limited to, senile dementia.</p> <p>A MDS assessment, dated 7/17/13, indicated the resident scored a 6 out of 15 for cognition, with 15 indicating no memory impairment. The resident required extensive assistance of two + staff for transfer, and extensive assist of one for walking in the room and corridor. A test for balance during surface-to surface transfer ("transfer between bed and chair or wheelchair") indicated "Not steady, only able to stabilize with staff assistance." A test for balance while walking and turning around indicated, "Not steady, but able to stabilize without staff assistance." The MDS assessment indicated the resident</p>			

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	<p>had had 2 falls since the previous MDS assessment.</p> <p>Progress Notes included the following notations:</p> <p>6/4/13 at 9:54 A.M.: "IDT met to review falls that occurred in the month of May. Resident experienced falls on 5/6/2013, 5/10/2013, and 5/21/2013. IDT suspects falls were related medication changes [sic] and a suspected UTI [urinary tract infection]...."</p> <p>6/18/13 at 3:06 P.M.: "Resident was sitting in dining room chair, when resident attempted to stand, resident stumbled backwards. Resident fell to floor, landing on her right side...Resident was encouraged to participate in activites."</p> <p>6/19/13 at 9:42 A.M.: "IDT met to review resident fall...IDT believes root cause may be orthostatic hypotension will request nursing monitor standing, sitting, and lying B/P...."</p> <p>7/9/13 at 9:44 P.M.: "...She walked away with her walker about 15 ft into the dining room and fell backward with her walker. Residents and visitors witnessed the fall and stated she did hit her head. Resident was</p>			

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	<p>responsive enough to state her name...Resident then became unresponsive, limp in all extremities...then vomited.....Resident picked up by ambulance and transported to hospital."</p> <p>7/10/13 at 4:26 A.M.: "Resident returned to facility @ midnight...CT [cat scan] shows no stroke...Will continue to monitor."</p> <p>8/16/13 at 7:36 P.M.: "Resident was walking through the dining room and around the tables, then resident began walking down the hallway toward her room, she got directly in front of the nurses station and fell to the floor. Resident was lying on her left side with her walker partly beneath her body. Resident had a hematoma on the left side of her forehead about 1 inch around and protruding outward...Orders are to administer ice pack to hematoma and monitor."</p> <p>8/17/13 at 9:00 A.M.: "Fall Follow Up: "Resident showing bruising to left orbit, forehead, and temple. Tissue surrounding eye black/brown in color...Resident re-directed from leaning on walker during ambulation. Gait imbalance corrected and</p>			

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	<p>resident escorted by staff for safety when this occurs. Will continue to monitor."</p> <p>Resident F's chart was reviewed again on 8/29/13. Progress Notes included the following notations:</p> <p>8/28/13 at 6:15 P.M.: "Resident had gotten up from supper, and had walked to her room. Activity assistant was leaving to go home and motioned for this nurse...resident was sitting in doorway to bathroom with pants partially down...No apparent injuries noted...This nurse and another staff member assisted resident up and sat her on toilet. Resident was then assisted back to bed...."</p> <p>A care plan, dated 5/4/11, indicated: "Problem, Resident at risk for falling R/T [related to] psychotropic drug use, decreased mobility, CHF, Insomnia, Leg Cramps, Confusion, Osteoporosis." The approaches included: "Keep call light in reach at all times, 7/10/13 Encourage rest breaks when becomes fatigue [sic], 8/19/13 Therapy continue with working on gait and balance, 8/29/13 Staff to assist with toileting to ensure safety."</p> <p>3. On 8/29/13 at 1:30 P.M., the</p>						

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	<p>Corporate Nurse provided the current facility policy on the "Fall Management Program," revised 6/12. The policy included: "It is the policy...to ensure residents residing within the facility will maintain maximum physical functioning through the establishment of physical, environmental, and psychosocial guidelines to prevent injury related to falls...."</p> <p>This Federal tag relates to Complaint IN00133590 and Complaint IN00135089.</p> <p>3.1-45(a)(1)</p>			

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F000353 SS=E	<p>483.30(a) SUFFICIENT 24-HR NURSING STAFF PER CARE PLANS</p> <p>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> <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 observation, interview, and record review, the facility failed to ensure sufficient numbers of staff were scheduled on an Alzheimer's Unit, in that showers were not given twice weekly, ADL (activities of daily living) care was not always provided, and multiple falls and intrusive wandering had occurred, for 5 of 5 residents who resided on Cottage 1, in a sample of 7. This had the potential to affect 25 residents residing on Cottage 1. Residents A, C, D, F, G; Staff #5, #6, #7, #8, #9;</p>	F000353	<p>The facility has sufficient Nursing staff to maintain the highest practical physical mental and psychosocial well being of each resident as determined by resident assessments and individual plans of care. F353 What corrective action(s) will be accomplished for those residents found to have been affected by the deficient practice? Alzheimer's Unit has increased staff to ensure resident A, C, D, F, G receives care and services necessary to meet their needs. How will you identify other residents having the potential to</p>	09/13/2013

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	<p><b>Family members # 1 and # 2</b></p> <p>Findings include:</p> <p>1. On 8/27/13 at 8:10 A.M., during the initial tour, the Director of Nursing (DON) indicated "Cottage 1" was a locked Alzheimer's unit. The DON indicated residents who were "higher functioning" resided on that unit. The DON indicated LPN # 1, CNA # 1, and CNA # 2 were working that day.</p> <p>On 8/27/13 at 8:45 A.M., the DON provided a CNA assignment sheet for Cottage 1. The document indicated there were 23 residents residing on that unit. 21 residents required "ADL assist," 13 residents were either on a toileting program and/or were incontinent, and 6 residents were documented as requiring assistance with mobility and/or transfers. 14 residents had documented behaviors.</p> <p>On 8/27/13 at 8:45 A.M., the DON provided a nursing schedule for the previous week. The schedule indicated the following on Cottage 1: Day shift: 1 nurse, 1-2 CNAs; Evening shift: 1 nurse, 1-2 CNAs; Night shift: 1 nurse, 1 CNA.</p> <p>On 8/27/13 at 9:30 A.M., 14 residents were observed in the activity/dining</p>		<p>be affected by the same deficient practice and what corrective action will be taken Residents who reside on Cottage 1 have the potential to be affected by the alleged deficient practice. hired. DNS/Designee will review staffing to ensure adequate staffing is scheduled. Nursing Schedule has been reviewed to ensure consistent staffing for the Cottage 1. Nurse Managers will conduct rounds each shift to ensure fall interventions are in place, showers are given as scheduled, and residents are provided activities of choice. Nursing managers has been in re-educated by Scheduler Specialist to ensure adequate staff is scheduled and staffing schedules nursing scheduler/DNS/Designee are met on the Alzheimer's Unit. Nursing staff has been re-educated regarding fall prevention, redirection/activities and provision of care by the Education Coordinator by 9-13-13. How the corrective action(s) will be monitored to ensure the deficient practice will not recur, i.e., what quality assurance program will be put into placeED/DNS will monitor for compliance. The CQI committee will review staffing daily x 2 weeks and weekly x 2 and monthly x 6 to ensure that adequate supervision and care are provided. What is the date by which the systemic changes will be completed? 9/13/13</p>				

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	<p>room. A TV was on. LPN # 1 was passing medication. No other staff was with the residents. LPN # 1 indicated the CNAs were giving morning care and an activity aide worked from 10:00 A.M. until 6:00 P.M.</p> <p>Resident F was observed walking out of Room 308 at that time. Bruising was observed on the resident's left forehead and around the left eye. LPN # 1 indicated the resident had fallen recently. LPN # 1 indicated Room 308 was not the resident's room. CNA # 2 brought the resident's walker to her.</p> <p>On 8/27/13 at 12:00 P.M., the Activity Director (AD) was observed on Cottage 1 passing out drinks. The AD indicated there was usually an activity aide on that unit, but that she had "called in" that day. It was observed that Resident F, Resident A, and Resident D had uncombed hair. One random resident, hair uncombed, was wandering in the hallways.</p> <p>On 8/27/13 at 1:35 P.M., during interview with Family # 1, she indicated her family member resided on Cottage 1. She indicated she was concerned, because she had soaked her family member's feet recently, and "the toenails were so long they</p>			

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	<p>were curling under," and the feet were "scaly and dirty." Family # 1 indicated she had noticed her family member wearing the same clothes "for awhile." Family # 1 indicated, "There's not enough help. They have their hands full."</p> <p>On 8/27/13 at 3:15 P.M., during interview with RN # 1, she indicated she was the nurse working the evening shift, and CNA # 3 had run out to her car. She indicated she was supposed to have an activity aide until 6:00 P.M., but that she was in a meeting. The Memory Care Facilitator was observed ambulating with a resident in the hallway. 13 residents were observed sitting in the activity/dining room. LPN # 3 entered the unit at that time. She indicated she was supposed to be on Cottage 2, but had been asked to assist on Cottage 1.</p> <p>On 8/29/13 at 10:05 A.M., during interview with Family # 2, she indicated her family member resided on Cottage 1. She indicated, "It's horrible sometimes; the clothes don't match and she looks like an orphan." She indicated her family member had always looked real nice at home, and it was hard to see her with her hair uncombed and dirty.</p>			

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	<p>The following staff interviews indicated the following:</p> <p>Staff # 5: " I always get out late; usually 1 hr-1 hr and 15 min after the shift ends. It's hard to get everything done. There's behaviors and falls."</p> <p>Staff # 6: "We can usually do it with 2 CNAs, but there are hardly ever 2 scheduled. With just 1 CNA, you can't get all of the showers and care done. It makes you want to cry. They try to staff better, but people call in, and no one will come in. We don't get lunch."</p> <p>Staff # 7: "You can't do all of the care with just one CNA, it can't get done. Showers and toileting can't always get done. I don't always get my lunch."</p> <p>Staff # 8: "Real concerned with staffing. Toileting and showers just aren't getting done. 1 CNA can't do it. There have been multiple falls. I don't get lunch, but can't leave the floor."</p> <p>Staff # 9: "We try for 2 CNAs but it doesn't always get done. It's real hard with only 1 CNA. Even with 2 CNAs, it's hard to get done. Our behaviors have been increasing lately, and our falls are up."</p>			

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	<p>2. On 8/27/13 at 8:15 A.M., during the initial tour, the DON indicated Resident G had recently been transferred from Cottage 1 to Cottage 2 and was being monitored for "sexual behaviors."</p> <p>The clinical record of Resident G was reviewed on 8/27/13 at 1:50 P.M. Diagnoses included, but were not limited to, dementia.</p> <p>A Minimum Data Set [MDS] assessment, dated 6/29/13, indicated the resident scored a 4 out of 15 for cognition, with 15 indicating no memory impairment. The MDS assessment indicated the resident did not ambulate.</p> <p>Progress Notes included the following notations:</p> <p>8/24/13 at 3:35 A.M.: "Res. [resident] has had exit seeking behaviors noted on this shift. Res confused about where hes [sic] supposed to be...Had to be redirected several times before laying down to go to sleep...Redirected res away from door multiple times. Will continue to monitor."</p> <p>8/25/13 at 10:13 P.M.: "This nurse entered female resident [Resident D]</p>			

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	<p>room, and found male resident lying on female resident's bed with his genital area exposed. Female [Resident D] was in bed with night gown pulled up past her knees with no genital area exposed...Male resident got up and dressed without difficulty...assisted to his old room...."</p> <p>On 8/29/13 at 9:20 A.M., during interview with the Memory Care Facilitator, she indicated Resident G was able to ambulate with his walker, and his room had been changed as on the same hall as Resident D.</p> <p>3. The clinical record of Resident A was reviewed on 8/27/13 at 10:10 A.M. Diagnoses included, but were not limited to, Alzheimer's disease. Resident A resided on Cottage 1.</p> <p>A Minimum Data Set (MDS) assessment, dated 6/17/13, indicated Resident A scored a 6 out of 15 for cognition, with 15 indicating no memory impairment. Resident A required extensive assistance of two+ staff for transfer, and supervision of one staff for ambulating in the corridor. A test for balance indicated, "Not steady, but able to stabilize without staff assistance."</p> <p>Progress Notes included the following</p>			

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	<p>notations:</p> <p>7/4/13 at 9:08 P.M.: "...Found resident in another patients [sic] room trying to crawl underneath her bed and crying...."</p> <p>7/26/13 at 10:17 A.M.: "Resident roommate came to nurse and stated resident was on floor. Found resident in room on floor lying on back...."</p> <p>8/16/13 at 10:08 P.M.: "...resident then began following another resident, wanting in her room and climbing in her bed. When the other resident told her to leave her room, resident became upset and began to cry...."</p> <p>8/18/13 at 4:41 P.M.: "Resident developing propulsive gait and seems to be shuffling with ambulation. Resident assisted by staff and feet observed to be outwardly turned during ambulation...."</p> <p>8/19/13 at 12:06 A.M.: "Resident having much difficulty ambulating tonight. Appears to be walking on tiptoes and leaning forward. Resident attempted to sit in a chair that was 2-3 feet away. Gait is very unsteady and requires assistance. Placed resident in a wheelchair for safety...."</p>			

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	<p>8/19/13 at 10:25 A.M.: "Resident was sitting in chair in dining room. Got up from chair and shuffled feet. Fell on floor on right side...."</p> <p>8/22/13 at 8:30 A.M.: "Resident experienced witnessed fall as she was attempting to sit down on two separate residents walkers. Resident was then re-directed and resident instead attempted to sit on hand rail and then food service cart...Resident fell back onto buttocks during attempt to sit down...seems to be shuffling with ambulation...."</p> <p>8/23/13 at 3:47 P.M.: "...Resident was ambulating with a very unsteady gait while exit seeking. Resident was in another resident's room sitting on the bed and slid off the bed onto the floor...Will continue to monitor."</p> <p>8/23/13 at 6:48 P.M.: "Observed res. [resident] fall in DR [dining room], res attempted to stand and sit back down missing chair, very unsteady gait noted, falling on bottom, no injured noted...AID state [sic] that res is having increased weakness and confusion...."</p> <p>8/23/13 at 11:36 P.M.: "Observed res fall in DR very unsteady gait, weak</p>			

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	<p>knees, did not hit head, no injured noted...assisted res to seat with pad alarm in place."</p> <p>8/24/13 at 4:01 P.M.: "Multiple falls noted last few days, and continues on follow up...Resident requires constant reminder not to attempt to walk by self...Resident extensive assist with toileting, bed mobility and ambulating with two assist. Gait remains slow, unsteady, with shuffling motion...."</p> <p>8/25/13 at 8:57 A.M.: "Res was found to have slid out of bed onto buttocks...."</p> <p>8/26/13 at 4:41 P.M.: "IDT met to review multiple falls...Resident has undergone multiple med changes...A UA [urinalysis] was ordered on 8/22/13 which was negative...Resident is currently on PT [physical therapy] caseload for gait disturbance...IDT recommends pad alarm in chair and in bed...."</p> <p>On 8/27/13 at 11:55 A.M., Resident A was observed up ambulating in the hallway with PT staff holding on to the resident with a gait belt. Resident A's gait was observed to be slow and shuffling.</p> <p>4. On 8/27/13 at 9:35 A.M., during</p>			

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	<p>observation on Cottage 1, Resident F was observed walking independently out of a resident room. Bruising was observed on the resident's left forehead, temple, and around the left eye. LPN # 1 indicated at that time that Resident F had recently fallen. LPN # 1 indicated the room that Resident F was exiting was not the resident's room.</p> <p>The clinical record of Resident F was reviewed on 8/27/13 at 11:25 A.M. Diagnoses included, but were not limited to, senile dementia.</p> <p>A MDS assessment, dated 7/17/13, indicated the resident scored a 6 out of 15 for cognition, with 15 indicating no memory impairment. The resident required extensive assistance of two + staff for transfer, and extensive assist of one for walking in the room and corridor. A test for balance during surface-to surface transfer ("transfer between bed and chair or wheelchair") indicated "Not steady, only able to stabilize with staff assistance." A test for balance while walking and turning around indicated, "Not steady, but able to stabilize without staff assistance." The MDS assessment indicated the resident had had 2 falls since the previous MDS assessment.</p>			

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	<p>Progress Notes included the following notations:</p> <p>6/4/13 at 9:54 A.M.: "IDT met to review falls that occurred in the month of May. Resident experienced falls on 5/6/2013, 5/10/2013, and 5/21/2013. IDT suspects falls were related medication changes [sic] and a suspected UTI [urinary tract infection]...."</p> <p>6/18/13 at 3:06 P.M.: "Resident was sitting in dining room chair, when resident attempted to stand, resident stumbled backwards. Resident fell to floor, landing on her right side...Resident was encouraged to participate in activites."</p> <p>7/9/13 at 9:44 P.M.: "...She walked away with her walker about 15 ft into the dining room and fell backward with her walker. Residents and visitors witnessed the fall and stated she did hit her head. Resident was responsive enough to state her name...Resident then became unresponsive, limp in all extremities...then vomited.....Resident picked up by ambulance and transported to hospital."</p>			

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	<p>7/10/13 at 4:26 A.M.: "Resident returned to facility @ midnight...CT [cat scan] shows no stroke...Will continue to monitor."</p> <p>8/16/13 at 7:36 P.M.: "Resident was walking through the dining room and around the tables, then resident began walking down the hallway toward her room, she got directly in front of the nurses station and fell to the floor. Resident was lying on her left side with her walker partly beneath her body. Resident had a hematoma on the left side of her forehead about 1 inch around and protruding outward...Orders are to administer ice pack to hematoma and monitor."</p> <p>8/17/13 at 9:00 A.M.: "Fall Follow Up: "Resident showing bruising to left orbit, forehead, and temple. Tissue surrounding eye black/brown in color...Resident re-directed from leaning on walker during ambulation. Gait imbalance corrected and resident escorted by staff for safety when this occurs. Will continue to monitor."</p> <p>Resident F's chart was reviewed again on 8/29/13. Progress Notes included the following notations:</p>						

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	<p>8/28/13 at 6:15 P.M.: "Resident had gotten up from supper, and had walked to her room. Activity assistant was leaving to go home and motioned for this nurse...resident was sitting in doorway to bathroom with pants partially down...No apparent injuries noted...This nurse and another staff member assisted resident up and sat her on toilet. Resident was then assisted back to bed...."</p> <p>This Federal tag relates to Complaint IN00133590 and Complaint IN00135089.</p> <p>3.1-17(a)</p>				

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