

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	X2) MULTIPLE CONSTRUCTION A. BUILDING <u>00</u> B. WING _____	X3) DATE SURVEY COMPLETED 04/22/2015
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NAME OF PROVIDER OR SUPPLIER PRIMROSE OF ANDERSON	STREET ADDRESS, CITY, STATE, ZIP CODE 1118 W CROSS ST ANDERSON, IN 46011
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R 000 Bldg. 00	<p>This visit was for a State Residential Licensure Survey.</p> <p>Survey date: April 22, 2015</p> <p>Facility number: 011806 Provider number: 011806 AIM number: N/A</p> <p>Census bed type: Residential: 43 Total: 43</p> <p>Census payor type: Other: 43 Total: 43</p> <p>Sample: 8</p> <p>This state finding is cited in accordance with 410 IAC 16.2-5.</p>	R 000		
R 121 Bldg. 00	<p>410 IAC 16.2-5-1.4(f)(1-4) Personnel - Noncompliance (f) A health screen shall be required for each employee of a facility prior to resident contact. The screen shall include a tuberculin skin test, using the Mantoux method (5 TU, PPD), unless a previously positive reaction can be documented. The result shall be recorded in millimeters of induration with the date given, date read, and by whom administered. The facility must</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>assure the following:</p> <p>(1) At the time of employment, or within one (1) month prior to employment, and at least annually thereafter, employees and nonpaid personnel of facilities shall be screened for tuberculosis. The first tuberculin skin test must be read prior to the employee starting work. For health care workers who have not had a documented negative tuberculin skin test result during the preceding twelve (12) months, the baseline tuberculin skin testing should employ the two-step method. If the first step is negative, a second test should be performed one (1) to three (3) weeks after the first step. The frequency of repeat testing will depend on the risk of infection with tuberculosis.</p> <p>(2) All employees who have a positive reaction to the skin test shall be required to have a chest x-ray and other physical and laboratory examinations in order to complete a diagnosis.</p> <p>(3) The facility shall maintain a health record of each employee that includes reports of all employment-related health screenings.</p> <p>(4) An employee with symptoms or signs of active disease, (symptoms suggestive of active tuberculosis, including, but not limited to, cough, fever, night sweats, and weight loss) shall not be permitted to work until tuberculosis is ruled out.</p> <p>Based on record review and interview, the facility failed to ensure new employees had physical examinations prior to beginning work for 5 of 5 employee records reviewed for physical examinations. (CNA #1, Housekeeper #2, Administration Assistant #3, Maintenance Assistant #4 and LPN #5)</p>	R 121	<p>1. A healthscreen has been completed for C.N.A. #1, Housekeeper #2, AdministrationAssistant #3, Maintenance Assistant #4 and LPN #5.</p> <p>2. An audit of all personnel files was conducted to ensure that a health screen has been performed on each employee.</p> <p>3. The policy titled "Personnel</p>	05/05/2015			

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	<p>Findings include:</p> <p>During employee record review and finalization on 4/22/15 at 5:00 p.m., five of five new employee records were found to be lacking a pre-employment physical examination. The following 5 employees did not have a pre-employment physical examination in their employee records:</p> <ol style="list-style-type: none"> CNA #1- start date 11/17/14. Housekeeper #2 - start date 2/20/15. Administration Assistant #3 - start date 9/2/14. Maintenance Assistant #4 - start date 9/15/14. LPN #5 - start date 11/18/14. <p>During an interview on 4/22/15 at 5:17 p.m., the Administrator and the Director of Nursing indicated they had discussed the issue of no pre-employment physical exams and were under the impression they were not required. The Director of Nursing indicated the facility had not provided pre-employment physical exams for new employees since April, 2014.</p> <p>A review of an undated policy, titled "Personnel Files", indicated the policy lacked any provision for pre-employment physical examinations. The policy was provided by the Administrator on 4/22/15 at 5:46 p.m.</p>		<p>Files" was reviewed and revised to include a health screening for all employees upon hire and prior to their contact with residents. The "Personnel Files Checklist" has also been revised to ensure a health screening is completed for every employee on hire. All managers have been educated on the revised policy and procedure and the new checklist.</p> <ol style="list-style-type: none"> It will be the responsibility of the Director of Nursing to ensure that a health screen is completed for every new employee at hire. The Administrator or her representative will check all new hire paperwork to ensure that the health screen has been completed on an ongoing basis. A log of this audit will be reported to the QA X3 months to ensure compliance. Completed by May 5, 2015. 				

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	A review of a "Personnel Files Checklist", dated 5/20/2014, lacked any provision for pre-employment employee physical examinations. The checklist was provided by the Administrator on 4/22/15 at 5:46 p.m.						