

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 155682	X2) MULTIPLE CONSTRUCTION A. BUILDING 00 B. WING _____	X3) DATE SURVEY COMPLETED 03/14/2013
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NAME OF PROVIDER OR SUPPLIER WOODMONT HEALTH CAMPUS	STREET ADDRESS, CITY, STATE, ZIP CODE 1325 ROCKPORT RD BOONVILLE, IN 47601
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F000000	<p>This visit was for the Investigation of Complaint IN00125482.</p> <p>Complaint IN00125482 Substantiated - Federal/State deficiencies related to the allegations are cited at F314.</p> <p>Survey dates: March 13 and 14, 2013</p> <p>Facility number: 002724 Provider number: 155682 AIM number: 200309330</p> <p>Survey team: Anne Marie Crays RN</p> <p>Census bed type: SNF: 11 SNF/NF: 39 Residential: 29 Total: 79</p> <p>Census payor type: Medicare: 13 Medicaid: 26 Other: 39 Total: 79</p> <p>Sample: 5</p> <p>This deficiency reflects state findings in</p>	F000000	<p>F 314 Resident A has current ulcer assessment and treatment orders in place with careplan updated as indicated to reflect current needs with staff that care for her inserviced on these. Completion Date 4-13-13</p> <p>Resident B has current ulcer assessments and treatment orders in place with careplan updated as indicated to reflect current needs with staff that care for him inserviced on these. Completion Date 4-13-13</p> <p>Resident C no longer resides at the facility. Completion Date 4-13-13 All residents have the potential to be affected by the alleged deficient practice therefore have had skin assessed to ensure all impairments are appropriately categorized and interventions and careplans are in place Complete Date 4-13-13 Directed wound inservice will be provided to ADON and DON as well MDS, medical records nurse and unit managers. Completion Date 3-29-13 Licensed nurses will have wound training including staging, assessment and documentation requirements. CNA's inserviced on pressure relieving interventions and skin care including communication to nurse when treatments dislodge or are refused. Completion Date 4-13-13 Systemic change is that</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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	<p>accordance with 410 IAC 16.2.</p> <p>Quality review completed on March 20, 2013, by Jodi Meyer, RN</p>		<p>skin impairment grids will be kept in Treatment record so that all nurses will know when a resident has a skin impairment.</p> <p>Completion Date 4-13-13</p> <p>Through inservices and audits will ensure that identification of areas and interventions/assessments are carried out timely, pressure relieving devices are in place, accurate staging and documentation of wounds occurs. Completion Date 4-13-13 DHS/Designee will conduct daily rounds to ensure that pressure reduction interventions are being carried out, grids and skilled documentation is accurate and complete, treatments are in place and proper staging for resident A and B and random sample of 5 residents/day x4 weeks, then 3 residents/day x4weeks, and 3/week thereafter. Skin sweep will be performed monthly by DHS/designee to determine if there are any unaccounted for skin impairments. Results of audit as well as full skin report will be forwarded to the QA committee monthly x12 months and suggestions/recommendations carried out as deemed necessary by committee.</p>		

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F000314 SS=E	<p>483.25(c) TREATMENT/SVCS TO PREVENT/HEAL PRESSURE SORES</p> <p>Based on the comprehensive assessment of a resident, the facility must ensure that a resident who enters the facility without pressure sores does not develop pressure sores unless the individual's clinical condition demonstrates that they were unavoidable; and a resident having pressure sores receives necessary treatment and services to promote healing, prevent infection and prevent new sores from developing.</p> <p>Based on observation, interview, and record review, the facility failed to ensure accurate assessment of pressure sores, in that the staging of pressure wounds was not accurate, documentation of pressure wounds was not accurate, and pressure relief was not observed [Resident C], for 3 of 3 residents reviewed with pressure areas, in a sample of 5. Residents A, B, and C</p> <p>Findings include:</p> <p>1. On 3/13/13 at 1:30 P.M., during the initial tour, the Assistant Director of Nursing [ADON] indicated Resident A had a pressure area on her coccyx. The ADON indicated the pressure area required a dressing on it. Resident A was observed lying on her right side. A skin</p>	F000314	F 314 Resident A has current ulcer assessment and treatment orders in place with careplan updated as indicated to reflect current needs with staff that care for her inserviced on these. Completion Date 4-13-13 Resident B has current ulcer assessments and treatment orders in place with careplan updated as indicated to reflect current needs with staff that care for him inserviced on these. Completion Date 4-13-13 Resident C no longer resides at the facility. Completion Date 4-13-13 All residents have the potential to be affected by the alleged deficient practice therefore have had skin assessed to ensure all impairments are appropriately categorized and interventions and careplans are in place Complete Date 4-13-13 Directed wound inservice will be provided to ADON and DON as well MDS, medical records nurse and unit	04/13/2013			

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	<p>assessment was requested at that time. A pressure area was observed on the resident's coccyx. The pressure area had a pink and yellow wound bed. No dressing was present. The ADON indicated the dressing "must have come off when they changed her." The ADON indicated the wound was a "Stage II."</p> <p>The clinical record of Resident A was reviewed on 3/13/13 at 2:15 P.M. Diagnoses included, but were not limited to, vascular dementia.</p> <p>A Minimum Data Set [MDS] assessment, dated 11/29/12, indicated the resident was unable to complete an interview for cognition, required extensive assistance of two + staff for bed mobility and transfer, and had no pressure ulcers.</p> <p>A Pressure Ulcer Assessment indicated: "Date 1/20/13, Present on admission? N [no], Location: mid coccyx, Pressure, Stage/Thickness: II, Length 2, width 1, Depth <0.1, Exudate [none]...Tx [treatment]: Optifoam, Cleanse [with] wound cleanser, use skin prep, [change] Q [every] 3 days [and] PRN [as needed]..."</p> <p>The Pressure Ulcer Assessment indicated the pressure area was measured on 1/28, 2/4, and 2/13/13. An assessment dated</p>		<p>managers. Completion Date 3-29-13 Licensed nurses will have wound training including staging, assessment and documentation requirements. CNA's inserviced on pressure relieving interventions and skin care including communication to nurse when treatments dislodge or are refused. Completion Date 4-13-13 Systemic change is that skin impairment grids will be kept in Treatment record so that all nurses will know when a resident has a skin impairment. Completion Date 4-13-13 Through inservices and audits will ensure that identification of areas and interventions/assessments are carried out timely, pressure relieving devices are in place, accurate staging and documentation of wounds occurs. Completion Date 4-13-13 DHS/Designee will conduct daily rounds to ensure that pressure reduction interventions are being carried out, grids and skilled documentation is accurate and complete, treatments are in place and proper staging for resident A and B and random sample of 5 residents/day x4 weeks, then 3 residents/day x4weeks, and 3/week thereafter. Skin sweep will be performed monthly by DHS/designee to determine if there are any unaccounted for skin impairments. Results of</p>		

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	<p>2/18/13 indicated: "Type: II, L [length] 3.2, W [width] 1.5, D[depth] 0.1, Exudate, Color: Serous, Amount: Scant, Consistency: serosanguinous...Current treatment: Cleanse, skin prep, maxorb AG - Optifoam [change] QD [every day]...."</p> <p>A Nursing Assessment Acute Change from, dated 2/23/13 at 2:00 P.M., indicated, "... Skin...pressure wounds [with] tx [treatment] implemented, on, intact...Sent to ER for [evaluation and treatment]."</p> <p>A hospital flow sheet, dated 2/23/13 at 7:00 P.M., indicated, "...Coccyx, Wound Type...Press [pressure] stage 3...."</p> <p>A hospital Transfer Summary, dated 2/26/13, indicated, "...Discharge Diagnoses:...Stage III pressure ulcer present on admission...."</p> <p>A hospital transfer form, dated 2/26/13, indicated, "...Skin/Wound Care: Redness, Ulcers, Location: Ulcer on sacrum, Stag [stage] III, Treatment: [Change] drssg [sic] q [every] 3D [days]...float heels Stag I pressure ulcers...." The transfer form did not indicate a right foot area with eschar.</p> <p>Resident A was readmitted to the facility on 2/26/13. A Nursing Admission</p>		<p>audit as well as full skin report will be forwarded to the QA committee monthly x12 months and suggestions/recommendations carried out as deemed necessary by committee.</p>	

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	<p>Assessment, dated 2/26/13 at 5:00 P.M., indicated an anatomical drawing which had an "X" on the coccyx area, and the notation, "Open area 4 x 3 cm 0.1 cm." An additional notation indicated, "Rt [right] [illegible] ball of foot 1.3 x 1.3 eschar..."</p> <p>Physician orders, dated 2/26/13, included: "Ulcer on sacrum Stg [stage] III, clean [with] wound cleanser, apply medisorb... [change] drsg [every 3 days]."</p> <p>A "Weekly Follow Up," dated 2/28/13, included: "...Res [resident] has been out to hospital...Tx [treatment] to coccyx...hospital measured 2/25/13 4 x 3 x 0.1...Stage III...."</p> <p>A Pressure Ulcer Assessment, dated 3/5/13, indicated: "Pressure/Stage: II...Color: Serous...Wound Bed, Color/tissue/percent/location: red/yellow...."</p> <p>A MDS assessment, dated 3/5/13, indicated the resident had a short-term and long-term memory problem, and required total dependence of two + staff for bed mobility and transfer. The MDS assessment indicated the resident had "1" Stage 1, "1" Stage 2, and "1" Unstageable pressure areas.</p>			

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	<p>A "Skilled Nursing Assessment and Data Collection, dated 3/6/13 at 12:00 P.M., indicated, "...Skin...History of resolved ulcer(s): N [no]...Currently has skin impairment: N [no]...Other skin issues: N [no]...."</p> <p>A Pressure Ulcer Assessment, dated 3/12/13, indicated: "Pressure/Stage: [left blank]...Exudate, Color: Serous...Wound Bed...red/yellow...."</p> <p>On 3/13/13 at 3:45 P.M., a right foot wound assessment was requested. On the right ball of the foot was a small, hard black pressure area.</p> <p>On 3/13/13 at 9:20 A.M., a skin assessment was again requested. The resident had been sitting up, and was being transferred to bed. A dressing was removed from her coccyx area. The dressing had a moderate amount of tannish drainage. The pressure area had 2 distinct yellow areas, and yellow material was scattered throughout the pink wound bed. QMA # 1 indicated the area "usually had drainage." The ADON indicated at that time that "we talked about putting Santyl [a debriding agent] on it."</p> <p>On 3/14/13 at 10:40 A.M., during interview with the MDS Coordinator, she indicated she obtains the pressure area</p>			

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	<p>information from the ADON and the skin sheets. The MDS Coordinator indicated she had noted documentation that the resident was readmitted on 2/26/13 with a Stage III pressure ulcer, and so she asked the ADON, who informed her it was a Stage II.</p> <p>The clinical record of Resident A was reviewed again on 3/14/13 at 2:10 P.M. A Physician's order, dated 3/14/13, indicated, "D/C [discontinue] current tx [treatment] to coccyx wound. Start - Cleanse, apply Santyl to wound bed...."</p> <p>2. On 3/13/13 at 1:30 P.M., during the initial tour, the ADON indicated Resident B had a "real small" Stage II pressure area on his right buttock. The ADON indicated the pressure area "may even be a Stage I; it's almost healed." The ADON indicated the resident did not require a dressing to the area. Resident B was observed sitting up in a wheelchair at that time, asleep.</p> <p>On 3/14/13 at 9:15 A.M., the DON was requested to let the nursing staff know that a wound assessment was requested whenever feasible. At 9:20 A.M., QMA # 1 indicated they would be lying Resident B down in bed soon.</p> <p>On 3/14/13 at 9:55 A.M., the clinical record of Resident B was reviewed.</p>			
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	<p>Diagnoses included, but were not limited to, dementia.</p> <p>A Minimum Data Set [MDS] assessment, dated 2/18/13, indicated the resident scored an 11 out of 15 for cognition, with 15 indicating no memory impairment. The resident required extensive assistance of two + staff for bed mobility and transfer. The MDS assessment indicated the resident had "1" Stage II pressure area.</p> <p>The most recent Pressure Ulcer Assessment, dated 3/12/13, indicated: "...Location: Lt [left] buttock, Pressure...Type: I visualized, L 0.3, W 0.1, D -...Wound Bed...Color/tissue type/percent Red/pink...Surrounding tissue: red/pink...."</p> <p>On 3/14/13 at 10:00 A.M., QMA # 1 indicated Resident B's wife was visiting, and requested to leave the resident up in the chair.</p> <p>On 3/14/13 at 10:30 A.M., the door to Resident B's room was observed to be closed. After knocking and entering, Resident B was observed to be lying in bed. The DON, ADON, QMA # 1, RN # 1, and CNA # 1 were all at the bedside. The resident's wife was also in the room. The DON indicated they were measuring the resident's wounds. The resident's</p>						

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	<p>bilateral buttocks were observed to be very reddened and excoriated. The right lower buttock had a pressure area, red and drying. The right inner buttock had a small open and red area. The left upper buttock had a large open area, and appeared dark red. The DON indicated the resident's bottom "didn't look like this a couple of days ago." The DON indicated staff would call the physician and obtain different treatment orders.</p> <p>On 3/14/13 at 11:55 A.M., QMA # 1 obtained Pressure Ulcer Assessment sheets for Resident B. The sheets included: "Date: 3/14/13, Present on admission? N [no], Location, [Left] upper buttock, Pressure, Stage/Thickness: II, Length 8, Width 5.8, Depth 0.1...Color R [red]...Surrounding tissue: R [red]..."</p> <p>"3/14/13, Present on admission? N, Location: [Right] inner buttock, Pressure, Stage/Thickness: II, Length 0.7, Width 0.6, Depth <0.1...Color R..."</p> <p>"3/14/13, Present on admission? N, Location : [Right] buttock, Pressure, Stage/Thickness: I, Length 7, Width 6.6, Depth -...Color: R...."</p> <p>3. On 3/13/13 at 1:30 P.M., during the initial tour, the ADON indicated Resident C was admitted with a pressure area on</p>			

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	<p>his toe, and also had a reddened Stage I on his left heel. Resident C was observed sitting up in a wheelchair, eating lunch.</p> <p>The clinical record of Resident C was reviewed on 3/13/13 at 4:05 P.M. Diagnoses included, but were not limited to, renal failure and peripheral vascular disease. The resident was admitted to the facility on 3/6/13.</p> <p>A hospital transfer form, dated 3/6/13, indicated, "Skin/Wound Care: Fragile...."</p> <p>A Nursing Admission Assessment, dated 3/6/13 at 3:45 P.M., indicated, "Foot problems present: infection of the foot, diabetic foot ulcer, or open lesions of the foot? Y [yes] Left big toe -scab...Skin Plan of Care...Elevate heels off surface...Provide pressure relieving device in chair, to bed...no shoes...."</p> <p>A Pressure Ulcer Assessment, dated 3/6/13, indicated: "...Location: Lt [left] big toe, Pressure, Stage/Thickness: E [non-stageable]...."</p> <p>A Skilled Nursing Assessment, dated 3/7/13 at 7:15 A.M., indicated, "...Currently has skin impairment: N [no]...."</p> <p>A Skilled Nursing Assessment, dated</p>			

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	<p>3/7/13, indicated: " Time: 10-6...Currently has skin impairment: N [no]...."</p> <p>A Skilled Nursing Assessment, dated 3/8/13 at 12:15 A.M., indicated, "...Currently has skin impairment: N [no]...."</p> <p>A Pressure Ulcer Assessment indicated, "Date: 3-11-13, Present on admission? N [no], Location: [Left] heel, Pressure, Stage/Thickness: I, Length 2.5, Width 1.8, Depth 0...Color purple...."</p> <p>A Physician's order, dated 3/11/13, indicated, "Pt [patient] to wear Z flo boot to [left] foot while in bed, utilize bed cradle @ foot of bed. Float heels, apply skin prep to [left] heel q [every] shift."</p> <p>On 3/14/13 at 11:30 A.M., Resident C was observed sitting in a wheelchair. He was wearing slipper socks, and both of his feet were pressing on the floor. A skin assessment was requested at that time. Both feet appeared slightly swollen. The resident's left great toe had a small intact black area. Both of the resident's heels were dark and soft. Resident C indicated, "They had not been putting that stuff on it lately." The resident's pressure relieving boot was observed on a chair. Resident C indicated he didn't like wearing it, and he "only had to wear it in bed." Resident C</p>			

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	<p>indicated he had been to therapy that morning, and had been sitting up. QMA # 1 indicated at that time that maybe they should get the resident some leg rests for the wheelchair.</p> <p>4. On 3/14/13 at 2:10 P.M., the Director of Nursing provided the current facility policy on "Wound Staging and Identification Education Information," undated. The policy included, "...Only pressure ulcers should be 'staged.' All other wounds should be described as partial or full thickness wounds...Stage I, a. Redness, without skin breakdown, which does not resolve within 30 minutes of relief of cause...2. Stage II, a. Partial thickness wound, involving loss of epidermis and partial loss of dermis. Does not extend into subcutaneous tissue...Wound bed is moist, pink and painful. A Stage II pressure ulcer cannot have or ever have had slough or eschar (necrotic tissue)...3. Stage III, a. Full thickness wound, involving loss of epidermis and dermis and extending into subcutaneous tissue...Will present as a crater wound and may include slough or eschar, exudates (drainage)...Goal - Remove all nonviable tissue, protect site, and maintain a moist wound environment...Unstageable pressure ulcer, a. Unable to visualize wound depth to determine exact stage due to presence</p>				

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 155682	X2) MULTIPLE CONSTRUCTION A. BUILDING 00 B. WING _____		X3) DATE SURVEY COMPLETED 03/14/2013
NAME OF PROVIDER OR SUPPLIER WOODMONT HEALTH CAMPUS			STREET ADDRESS, CITY, STATE, ZIP CODE 1325 ROCKPORT RD BOONVILLE, IN 47601		
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	<p>of thick slough or eschar...."</p> <p>At that time, the Director of Nursing also provided the current facility policy on "General Wound and Skin Care Guidelines," undated. The policy included: "...Evaluate the need for a pressure reduction surface for bed/chair and the need for the elbow protectors and/or heel floats...Perform the wound treatment...Reevaluate the wound's response to the prescribed treatment...Inform MD of wound status...Document type of wound, location, stage (if applicable), length, width, depth...and treatment of the wound weekly...."</p> <p>This federal tag relates to Complaint IN00125482.</p> <p>3.1-40(a)(2)</p>				

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