

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 155521	X2) MULTIPLE CONSTRUCTION A. BUILDING 00 B. WING _____	X3) DATE SURVEY COMPLETED 03/17/2014
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NAME OF PROVIDER OR SUPPLIER ALEXANDRIA CARE CENTER	STREET ADDRESS, CITY, STATE, ZIP CODE 1912 S PARK AVE ALEXANDRIA, IN 46001
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F000000	<p>This visit was for the Investigation of Complaint IN00145761.</p> <p>Complaint IN00145761- Unsubstantiated due to lack of evidence.</p> <p>Unrelated deficiencies are cited at F241 and F441.</p> <p>Survey date: March 17, 2014</p> <p>Facility number: 000518 Provider number: 155521 AIM number: 100266670</p> <p>Survey Team: Shelley Reed, RN TC</p> <p>Census bed type: SNF/NF: 55 Total: 55</p> <p>Census payor type: Medicare: 6 Medicaid: 46 Other: 3 Total: 55</p> <p>Sample: 4</p> <p>These deficiencies reflect state findings in accordance with 410 IAC</p>	F000000		
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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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F000241 SS=D	<p>16.2.</p> <p>Quality review completed by Debora Barth, RN.</p> <p>483.15(a) DIGNITY AND RESPECT OF INDIVIDUALITY The facility must promote care for residents in a manner and in an environment that maintains or enhances each resident's dignity and respect in full recognition of his or her individuality. Based on observation, interview and record review, the facility failed to provide personal dignity related to removing pants and/or undergarments while in bed for 3 of 4 residents observed for dignity (Residents B, D and E).</p> <p>Findings include:</p> <p>1. On 3/17/14 at 11:40 a.m., during observation of a topical ointment application of the lower extremities, Resident (B) was observed to have no brief and/or pants on while laying in bed.</p> <p>The clinical record for Resident (B) was reviewed on 3/17/14 at 10:40 a.m. Diagnoses for the resident included, but were not limited to, hospice care, dementia, head/neck</p>	F000241	Response /POC faxed to ISDH as system is not (funtoig) functioning correctly Test 1234	04/07/2014	

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	<p>aphasia, cardiovascular accident and hypertension.</p> <p>The quarterly Minimum Data Set (MDS) assessment, dated 2/7/14, indicated Resident (B) was severely cognitively impaired. Resident (B) received the following Activities of Daily Living (ADL) assistance; transfer-total dependence with two person assist, ambulation-did not occur, dressing, hygiene and bathing-total dependence with one person assist, range of motion-impairment of both upper and lower extremities. Resident (B) was incontinent of bowel and bladder.</p> <p>During review of the clinical records, a health care problem plan indicated Resident (B) indicated daily preferences for customary routine as "somewhat important while in this facility". One of the interventions for the problem indicated "encourage family/friend's involvement in care discussions and decisions according to preferences".</p> <p>2. During an attempted interview on 3/17/14 at 3:40 p.m., Resident (D) was awake in bed. When asked how she was doing, she indicated she was "very mad". She indicated</p>				

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	<p>staff put her in bed without pants or briefs on. She indicated she was not ready to lay down because she was a "visitor". Resident (D) indicated to observe her lower extremities and she did not have any brief or pants on.</p> <p>During an interview at 3:45 p.m., CNA #1 indicated it was the policy of the facility that resident's pants and briefs be removed when they are in bed.</p> <p>The clinical record for Resident (D) was reviewed on 3/17/14 at 12:30 p.m. Diagnoses for Resident (D) included, but were not limited to, diabetes mellitus, congestive heart failure, dementia, emphysema and acute respiratory failure.</p> <p>The quarterly Minimum Data Set (MDS) assessment, dated 12/6/13, indicated Resident (D) was moderately cognitively impaired. Resident (D) received the following Activities of Daily Living (ADL) assistance; transfer-total dependence with two person assist, ambulation-did not occur, dressing, hygiene and bathing-total dependence with one person assist. Resident (D) was incontinent of bowel and bladder.</p>						

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	<p>During review of the clinical records, a health care problem plan indicated Resident (D) indicated daily preferences for customary routine as "somewhat important while in this facility". One of the interventions for the problem indicated "encourage family/friend's involvement in care discussions and decisions according to preferences".</p> <p>3. On 3/17/14 at 4:00 p.m., while observing the 300 Hall with CNA #2, Resident (E) was observed to be asleep in her room. CNA #2 was asked if Resident (E) was put to bed without briefs or pants on. CNA #2 observed Resident (E) and indicated she did not have any briefs or pants on while in bed.</p> <p>The clinical record for Resident (E) was reviewed on 3/17/14 at 4:10 p.m. Diagnoses for the resident included, but were not limited to, Alzheimer's disease, non-Alzheimer's dementia, persistent mental disorder and dysphagia.</p> <p>The quarterly Minimum Data Set (MDS) assessment, dated 11/28/13, indicated Resident (E) was severely cognitively impaired. Resident (E)</p>						

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	<p>received the following Activities of Daily Living (ADL) assistance; transfer-total dependence with two person assist, ambulation-did not occur, dressing, hygiene and bathing-total dependence with one person assist. Resident (E) was incontinent of bowel and bladder.</p> <p>During review of the clinical records, a health care problem plan indicated Resident (E) indicated daily preferences for customary routine as "somewhat important while in this facility". One of the interventions for the problem indicated "encourage family/friend's involvement in care discussions and decisions according to preferences".</p> <p>During an interview, CNA #2 indicated it was the policy of the facility residents to have pants and briefs removed while in bed.</p> <p>4. During an interview on 3/17/14 at 4:05 p.m., the Assistant Director of Nursing (ADoN) indicated family and residents were informed on admission of the facility policy, but it was not kept in writing. The daily preference worksheet did not contain an area of preference to have pants and/or brief removed while in bed.</p>			

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F000441 SS=F	<p>483.65 INFECTION CONTROL, PREVENT SPREAD, LINENS</p> <p>The facility must establish and maintain an Infection Control Program designed to provide a safe, sanitary and comfortable environment and to help prevent the development and transmission of disease and infection.</p> <p>(a) Infection Control Program The facility must establish an Infection Control Program under which it - (1) Investigates, controls, and prevents infections in the facility; (2) Decides what procedures, such as isolation, should be applied to an individual resident; and (3) Maintains a record of incidents and corrective actions related to infections.</p> <p>(b) Preventing Spread of Infection (1) When the Infection Control Program determines that a resident needs isolation to prevent the spread of infection, the facility must isolate the resident. (2) The facility must prohibit employees with a communicable disease or infected skin lesions from direct contact with residents or their food, if direct contact will transmit the disease. (3) The facility must require staff to wash their hands after each direct resident contact for which hand washing is indicated by accepted professional practice.</p> <p>(c) Linens Personnel must handle, store, process and transport linens so as to prevent the spread of infection.</p> <p>Based on observation, interview and record review, the facility failed to</p>	F000441	POC faxed to ISDH as system not functioning correctly	04/07/2014	

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	<p>track and trend potential skin infections in regard to maintaining a complete and accurate infection control book. This failure had the potential to affect 55 of 55 residents who resided in the facility.</p> <p>Findings include:</p> <p>During review of the 100 Hall treatment book on 3/17/14 at 2:45 p.m., 12 of 23 residents had received a topical treatment during the month of March. A resident in Room 106/2 received Triamcinolone (a topical corticosteroid) for 10 days for an abdominal rash. The medication had been discontinued on 3/2/14 and reordered 3/13/14. A resident in Room 107/1 received Flucanide (a topical corticosteroid) on 3/13/14. The resident in Room 108/2 received Flucanide (a topical corticosteroid) on 3/12/14. Other topical treatments on the 100 Hall included Betadine, Lachydrin, Calazyme, Efudex, Lotrisone cream and Nystatin.</p> <p>During review of the 300 Hall treatment book, 3 of 17 residents had received a topical treatment during the month of March. A resident in Room 303/1 received Diprolene (a topical corticosteroid).</p>			

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	<p>Residents in Room 304/2 and room 312/1 also received Diprolene.</p> <p>During an interview on 3/17/14 at 10:15 a.m., the Director of Nursing (DoN) indicated she had 5 employees who indicated they had developed a type of rash that varied in size, area and location. She indicated 1 of the 5 employees had a skin scraping for scabies with a positive result approximately 3 weeks ago. One other employee received a topical medication for a rash without a skin scraping. The DoN indicated no other employee or resident had a skin scraping for scabies.</p> <p>During an interview on 3/17/14 at 3:15 p.m., the DoN indicated the infection control book had not been updated since December 2013. She indicated because the skin conditions varied from rashes, bumps, healed scabs and scaly skin, she did not track or trend the skin conditions in the book.</p> <p>3.1-18(b)(1)(A)</p>				