

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 155669	X2) MULTIPLE CONSTRUCTION A. BUILDING 00 B. WING _____		X3) DATE SURVEY COMPLETED 06/27/2013
NAME OF PROVIDER OR SUPPLIER RIVERVIEW TCU			STREET ADDRESS, CITY, STATE, ZIP CODE 395 WESTFIELD RD TCU NOBLESVILLE, IN 46060		
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F000000	<p>This visit was for a Recertification and State Licensure Survey.</p> <p>Survey dates: June 24, 25, 26, and 27, 2013</p> <p>Facility number : 011046 Provider number : 155669 AIM number : N/A</p> <p>Survey team: Michelle Hosteter, RN-TC Gloria Bond, RN</p> <p>Census bed type: SNF: 14 Total : 14</p> <p>Census payor type : Medicare : 13 Other : 1 Total : 14</p> <p>These deficiencies reflect state findings cited in accordance with 410 IAC 16.2.</p> <p>Quality Review was completed by Tammy Alley RN on July 1, 2013.</p>	F000000			

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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F000279 SS=D	<p>483.20(d), 483.20(k)(1) DEVELOP COMPREHENSIVE CARE PLANS A facility must use the results of the assessment to develop, review and revise the resident's comprehensive plan of care.</p> <p>The facility must develop a comprehensive care plan for each resident that includes measurable objectives and timetables to meet a resident's medical, nursing, and mental and psychosocial needs that are identified in the comprehensive assessment.</p> <p>The care plan must describe the services that are to be furnished to attain or maintain the resident's highest practicable physical, mental, and psychosocial well-being as required under §483.25; and any services that would otherwise be required under §483.25 but are not provided due to the resident's exercise of rights under §483.10, including the right to refuse treatment under §483.10(b)(4).</p> <p>Based on record review and interview, the facility failed to develop a care plan for anxiety for 2 of 23 residents reviewed for care plans in a sample of 23. (Resident #114 and Resident #122)</p> <p>Findings include:</p> <p>1. The record review for Resident #114 was completed on 6/25/13 at 3 P.M.</p> <p>Diagnoses included, but were not limited to, Dementia, depression,</p>	F000279	<p>Preparation and/or execution of this plan of correction in general,</p> <p>or this corrective action in particular, does not constitute an</p> <p>admission or agreement by this facility of the facts alleged or</p> <p>conclusions set forth in this statement of deficiencies. The plan</p> <p>of correction and specific corrective actions are prepared and/or</p>	07/19/2013	

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	<p>osteoporosis, anxiety, acid reflux disease, congestive heart failure, debility, urinary retention, and anemia.</p> <p>The physician orders for 6/15/13 indicated an order for Xanax (antianxiety medication) 0.5 milligrams by mouth every evening as needed for anxiety.</p> <p>The Medication Administration Record in the computer for June indicated : 6/15/13, 6/18/13, 6/22/13, and 6/23/13 the resident received the as needed medication Xanax 0.5 milligrams.</p> <p>In an interview with the Director of Nursing at 1 P.M., on 6/26/13, she indicated there were no documented non pharmacological interventions in the clinical record prior to the administration of the Xanax. The care plan dated 6/24/13 indicated, "...Treat resident primary mood disorder depression with Cymbalta and anxiety with Xanax...."</p> <p>2. Record review for Resident #122 was completed on 6/26/13 at 2 P.M.</p> <p>Diagnoses included, but were not limited to, cellulitis, atrial fibrillation, end stage renal disease, chronic leg</p>		<p>executed in compliance with state and federal laws.</p> <p>The plan of correction constitutes our Credible Allegation of</p> <p>Compliance with all regulatory requirements. This provider requests</p> <p>A Desk Review in lieu of a Post Survey revisit. Our date of compliance is:</p> <p>7/19/2013.</p> <p>F 279 DEVELOP COMPREHENSIVE CARE PLANS: It is the practice of this provider to ensure Comprehensive Care Plans are provided for each Patient.</p> <p>1. WHAT CORRECTIVE ACTIONS(S) WILL BE ACCOMPLISHED FOR THOSE</p> <p>PATIENTS FOUND TO HAVE BEEN AFFECTED BY THE DEFICIENT PRACTICE;</p> <p>Patient # 114 was admitted on 6/13/2013 and discharged on 6/27/2013. Patient #122 was admitted on 6/21/2013 and discharged on 6/26/2013</p> <p>discharged 6/26. Both patients were discharged by end of this survey on 6/27/2013.</p>				

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	<p>edema, high blood pressure, gout, and high cholesterol.</p> <p>The physician order dated 6/23/13 indicated an order for Xanax 0.25 milligrams by mouth twice daily as needed for anxiety.</p> <p>The Medication Administration Record in the computer for June indicated the resident received the as needed medication Xanax 0.25 milligrams on 6/22- in the morning, 6/23- in the morning and evening and 6/24/13- in the morning.</p> <p>The interim care plan dated 6/21/13 did not have any indications related to anxiety, anxiety symptoms, or any non-pharmacological interventions to be attempted prior to the administration of the Xanax.</p> <p>3.1-35(a)</p>		<p>Staff will be educated on adding information on the interim care plan regarding use of anxiety interventions.</p> <p>2. HOW OTHER PATIENTS HAVING THE POTENTIAL TO BE AFFECTED BY THE SAME DEFICIENT PRACTICE WILL BE IDENTIFIED AND WHAT CORRECTIVE ACTION (S) WILL BE TAKEN; All patients with PRN anxiety medication have the potential to be affected. Each new patient interim care plan will be reviewed on admission to ensure adequate indication related to anxiety.</p> <p>3. WHAT MEASURES WILL BE PUT INTO PLACE OR WHAT SYSTEMIC CHANGES WILL BE MADE TO ENSURE THT THE DEFICIENT PRACTICE DOES NOT RECUR;</p> <p>Staff will be instructed to update current Interim Care Plans</p>	

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			<p>to include interventions for anxiety PRN medications.</p> <p>· D.O.N. or designee will review Interim Care Plans on new admissions</p> <p>to be sure that PRN anxiety medication is addressed with interventions.</p> <p>4. HOW THE CORRECTIVE ACTION(S) WILL BE MONITORED TO ENSURE THE DEFICIENT PRACTICE WILL NOT RECURE, i.e., WHAT QUALITY ASSURANCE PROGRAM WILL PE BUT INTO PLACE;</p> <p>The DON or designee will audit patient Care Plans 5 times per week for 30 days, then 5 times per month for 150 days, then 3 times per month for 180 day to total 12 months. Results of report findings will be reported to the</p>	

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			<p>QA committee monthly for 12 months. After 100% compliance is reached</p> <p>The QA committee will determine the frequency of continued monitoring.</p> <p>5. WHAT DATE THE SYSTEMIC CHANGES WILL BE COMPLETED. Systemic Changes will be completed by July 19,2013</p>	

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F000329 SS=D	<p>483.25(I) DRUG REGIMEN IS FREE FROM UNNECESSARY DRUGS</p> <p>Each resident's drug regimen must be free from unnecessary drugs. An unnecessary drug is any drug when used in excessive dose (including duplicate therapy); or for excessive duration; or without adequate monitoring; or without adequate indications for its use; or in the presence of adverse consequences which indicate the dose should be reduced or discontinued; or any combinations of the reasons above.</p> <p>Based on a comprehensive assessment of a resident, the facility must ensure that residents who have not used antipsychotic drugs are not given these drugs unless antipsychotic drug therapy is necessary to treat a specific condition as diagnosed and documented in the clinical record; and residents who use antipsychotic drugs receive gradual dose reductions, and behavioral interventions, unless clinically contraindicated, in an effort to discontinue these drugs.</p> <p>Based on record review and interview, the facility failed to show non-pharmacological interventions attempted prior to giving an as needed medication for anxiety for 2 of 10 resident's reviewed for unnecessary medications in a sample of 10. (Resident #114 and #122)</p> <p>Findings include:</p> <p>1. The record review for Resident #114 was completed on 6/25/13 at 3</p>	F000329	<p>F 329 DRUG REGIMEN IS FREE FROM UNNECESSARY DRUGS: It is the practice of this</p> <p>provider to ensure that patients are not given Unnecessary Drugs.</p> <p>1. WHAT CORRECTIVE ACTIONS(S) WILL BE ACCOMPLISHED FOR THOSE</p> <p>PATIENTS FOUND TO HAVE BEEN</p>	07/19/2013			

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	<p>P.M.</p> <p>Diagnoses included, but were not limited to, dementia, depression, osteoporosis, anxiety, acid reflux disease, congestive heart failure, debility, urinary retention, and anemia. The resident was admitted 6/13/13.</p> <p>The physician order dated 6/15/13 indicated an order for Xanax (anti-anxiety medication) 0.5 milligrams by mouth every evening as needed for anxiety.</p> <p>The Medication Administration Record in the computer for June indicated : 6/15/13, 6/18/13, 6/22/13, and 6/23/13 the resident received the as needed medication Xanax 0.5 milligrams.</p> <p>The nursing notes for 6/15/13 , 6/18/13, 6/22/13, and 6/23/13, did not indicate non-pharmacological interventions were attempted prior to giving the as needed medication for anxiety.</p> <p>In an interview with the Director of Nursing at 1 P.M., on 6/26/13, she indicated the nurses should be documenting any non-pharmacological interventions</p>		<p>AFFECTED BY THE DEFICIENT PRACTICE;</p> <p>Both these patients were discharged by end of our survey on 6/27/2013</p> <p>Patient #114 was admitted on 6/13/2013 and discharged 6/27/2013. Patient #122 was admitted on 6/21/2013 and discharged 6/26.</p> <p>Nursing staff will be educated on what non pharmacological interventions</p> <p>to try and to document before giving anxiety PRN medications.</p> <p>2. HOW OTHER PATIENTS HAVING THE POTENTIAL TO BE AFFECTED BY THE</p> <p>SAME DEFICIENT PRACTICE WILL BE IDENTIFIED AND WHAT CORRECTIVE</p> <p>ACTION (S) WILL BE TAKEN; All patients with PRN anxiety medication</p> <p>ordered have the potential to be affected. The Medication documentation</p> <p>and usage list will be reviewed to be sure non pharmacological</p> <p>interventions are tried and documented before anxiety</p>		

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	<p>attempted in the nursing notes before giving the as needed anxiety medication Xanax.</p> <p>She indicated there was not any documented non-pharmacological interventions.</p> <p>The care plan dated 6/24/13 indicated, "...Treat resident primary mood disorder depression with Cymbalta and anxiety with Xanax..." There were no non-pharmacological methods listed as interventions on the care plan.</p> <p>2. Record review for Resident #122 was completed on 6/26/13 at 2 P.M.</p> <p>Diagnoses included, but were not limited to, cellulitis, atrial fibrillation, end stage renal disease, chronic leg edema, high blood pressure, gout, and high lipids.</p> <p>The physician order dated 6/23/13 indicated an order for Xanax 0.25 milligrams by mouth twice daily as needed for anxiety.</p> <p>The Medication Administration Record in the computer for June indicated the resident received the as needed medication Xanax 0.25 milligrams on 6/22- in the morning,</p>		<p>medication is given.</p> <p>3. WHAT MEASURES WILL BE PUT INTO PLACE OR WHAT SYSTEMIC CHANGES WILL BE MADE TO ENSURE THT THE DEFICIENT PRACTICE DOES NOT RECUR;</p> <ul style="list-style-type: none"> · The computer program will be revised to attach an intervention <p>Assessment on anxiety PRN medications.</p> <ul style="list-style-type: none"> · Pharmacy will provide a daily list of anxiety PRN medication administered in order to review for compliance. · Chart reviews will be conducted for anxiety medications that are triggered on the intervention assessments/pharmacy PRN list. <p>4. HOW THE CORRECTIVE ACTION(S) WILL BE MONITORED TO ENSURE THE</p>				

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	<p>6/23- in the morning and evening and 6/24/13- in the morning.</p> <p>The nursing notes for 6/22/13, 6/23/13, and 6/24/13 did not indicate non- pharmacological interventions were attempted prior to giving the as needed anxiety medications.</p> <p>3.1-48(a)(4)</p>		<p>DEFICIENT PRACTICE WILL NOT RECUR, i.e., WHAT QUALITY ASSURANCE</p> <p>PROGRAM WILL PE BUT INTO PLACE;</p> <p>The DON or designee will audit anxiety PRN medications 5 times per week for 30 days, then 5 times per month for 150 days, then 3 times per month for 180 day to total 12 months. Results of report findings will be reported to the QA committee monthly for 12 months. After 100% compliance is reached The QA committee will determine the frequency of continued monitoring.</p> <p>5. WHAT DATE THE SYSTEMIC CHANGES WILL BE COMPLETED.</p> <p>Systemic Changes will be completed by July 19,2013.</p>		