

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 155245	X2) MULTIPLE CONSTRUCTION A. BUILDING 00 B. WING _____	X3) DATE SURVEY COMPLETED 04/01/2015
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NAME OF PROVIDER OR SUPPLIER CASTLETON HEALTH CARE CENTER	STREET ADDRESS, CITY, STATE, ZIP CODE 7630 E 86TH ST INDIANAPOLIS, IN 46256
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F 000 Bldg. 00	<p>This visit was for the Investigation of Complaint IN00167276.</p> <p>Complaint IN00167276 -- Substantiated. Federal/state deficiency related to the allegations is cited at F241.</p> <p>Survey dates: March 30, 31 and April 1, 2015</p> <p>Facility number: 000149 Provider number: 155245 AIM number: 100266840</p> <p>Census bed type: SNF/NF: 47 Total: 47</p> <p>Census payor type: Medicare: 2 Medicaid: 35 Other: 10 Total: 47</p> <p>Sample: 4 Supplemental sample: 1</p> <p>This deficiency reflects State findings cited in accordance with 410 IAC 16.2-3.1.</p>	F 000	<p>Submission of this Plan of Correction shall not constitute or be construed as an admission by Castleton Healthcare Center that the allegations contained in the survey report are accurate or reflect accurately the provisions of nursing care and services to the residents at Castleton Healthcare Center. Castleton Healthcare is requesting paper compliance for this survey.</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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F 241 SS=E Bldg. 00	<p>483.15(a) DIGNITY AND RESPECT OF INDIVIDUALITY</p> <p>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.</p> <p>A. Based on interview and record review, the facility failed to ensure the dignity of each resident is maintained and honored as evidenced by honoring the request for being assisted to bed when requested for 1 of 4 residents reviewed for care assistance in a sample of 5. (Resident #D)</p> <p>B. Based on interview and record review, the facility failed to ensure the dignity of each resident is maintained and honored by avoiding the use of personal cell phone conversations taking place during care of a resident for 4 of 4 residents interviewed regarding care assistance in a sample of 5. (Resident #B, #C, #D and #E)</p> <p>Findings include:</p> <p>A. In an interview with Resident #D on 3-30-15 at 1:42 p.m., she indicated she had recently been treated rudely by a second shift staff member when she had requested to be assisted to lie down in her bed after lunch.</p>	F 241	<p>1.What corrective actions will be accomplished for those residents found to have been affected by the deficient practice? All residents have the potential to be affected by the deficient practice. Resident D was interviewed on issue. Accused staff member also educated on incident regarding dignity. For residents including B, C, D, and E, in regards to cellphone usage, facility has implemented a practice that does not allow direct care givers to use their cell phones while giving care.</p> <p>2.How other residents having the potential to be affected by the same deficient practice will be identified and what corrective actions will be taken? All residents have the potential to be affected by the deficient practices.</p> <p>3.What measures will be put into place or what systematic changes will be made to ensure that the deficient practice does not recur? Administrator/Designee will educate residents at the next Resident Council meeting on reporting any dignity issues. In regards to cell phone usage, the facility has implemented a</p>	05/01/2015

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	<p>Review of Resident #D's most recent Minimum Data Set (MDS) assessment, dated 2-13-15, indicated she is cognitively intact, does not ambulate, and requires extensive assistance of 2 or more persons with transfers from one surface to another.</p> <p>On 3-30-15 at 11:00 a.m., the Administrator provided a copy of a document entitled, "Resident Rights." This document was undated, but was indicated to be the current policy utilized by the facility. The document indicated, "The resident has a right to a dignified existence...The facility must care for its residents in a manner and in an environment that promotes maintenance or enhancement of each resident's quality of life. (a) Dignity: 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. (b) Self-determination and participation: The resident has a right to (1) Choose activities, schedules, and health care consistent with his or her interests, assessments and plans of care..."</p> <p>B.1. During an interview with Resident #B on 3-30-15 at 3:05 p.m., she indicated she has observed "many" staff members</p>		<p>practice that does not allow direct caregivers to use their cell phones while giving care. Staff will be educated on cell phone practice by May 1, 2015.</p> <p>4.How will the corrective actions be monitored to ensure the deficient practice will not recur; what quality assurance program will be put into place? The DON/Designee will monitor for dignity issues three times per week x 3 weeks, then monthly for 6 months or until 100% compliant. Audits will be monitored for 6 months. Any deficient practice will be brought to the QA meeting monthly for review.</p>	

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	<p>utilize their personal cell phones for conversation "when they are supposed to be helping me." She indicated the conversations, "sound like personal conversations, not emergencies."</p> <p>Review of Resident #B's most recent Minimum Data Set (MDS) assessment, dated 2-27-15, indicated she is cognitively intact. During the Initial Tour with the Director of Nursing (DON) on 3-30-15 at 10:25 a.m., , she was identified as alert and oriented to person, place and time.</p> <p>B.2. During an interview with Resident #C and an interested family member of Resident #C on 3-30-15 at 2:30 p.m., the family member indicated she visits frequently. She indicated she has observed staff members frequently talk on their personal cell phones during care with Resident #C. "They will answer their cells no matter what they are doing. Very unprofessional...It's rude."</p> <p>During the Initial Tour with the DON on 3-30-15 at 10:25 a.m., Resident #C was identified as alert and oriented to person, place and time.</p> <p>B.3. During an interview with Resident #D on 3-30-15 at 1:42 p.m., she indicated she has observed, "Some staff do use</p>			

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	<p>their cell phones during care on all shifts. [They] talk about going out to eat, who's dating who. It's irritating."</p> <p>During the Initial Tour with the DON on 3-30-15 at 10:25 a.m., Resident #D was identified as alert and oriented to person, place and time.</p> <p>B..4. During an interview with Resident #E on 3-30-15 at 2:02 p.m., she indicated facility staff frequently use their personal cell phones while providing care to her. She indicated she has observed the staff having personal phone calls or listening to music via the cell phones. "It's not necessary."</p> <p>During the Initial Tour with the DON on 3-30-15 at 10:25 a.m., Resident #D was identified as alert and oriented to person, place and time.</p> <p>On 3-30-15 at 11:00 a.m., the Administrator provided a copy of a document entitled, "Resident Rights." This document was undated, but was indicated to be the current policy utilized by the facility. The document indicated, "The resident has a right to a dignified existence...The facility must care for its residents in a manner and in an environment that promotes maintenance or enhancement of each resident's quality</p>			

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	<p>of life. (a) Dignity: 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. (b) Self-determination and participation: The resident has a right to (1) Choose activities, schedules, and health care consistent with his or her interests, assessments and plans of care..."</p> <p>On 4-1-15 at 2:30 p.m., the Administrator provided a copy of a document entitled, "Cell Phone Policy" with a date of January, 2012, and was identified as the current policy utilized by the facility. The policy, in its entirety, indicated, "The use of cell phones in the facility is limited to business use only, upon Administrative approval."</p> <p>This Federal tag relates to Complaint IN00167276.</p> <p>3.1-3(t)</p>				