

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  155716	X2) MULTIPLE CONSTRUCTION A. BUILDING 00 B. WING _____	X3) DATE SURVEY COMPLETED  11/29/2012
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NAME OF PROVIDER OR SUPPLIER  GOOD SAMARITAN HOME INC	STREET ADDRESS, CITY, STATE, ZIP CODE 601 N BOEKE RD EVANSVILLE, IN 47711
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F0000	<p>This visit was for the Investigation of Complaint IN00119516 and Complaint IN00119983.</p> <p>Complaint IN00119516- Substantiated. No deficiencies related to the allegations are cited.</p> <p>Complaint IN00119983- Substantiated. Federal/State deficiencies are cited at F309.</p> <p>Survey dates: November 28 and 29, 2012</p> <p>Facility number: 000439 Provider number: 155716 AIM number: 100275070</p> <p>Survey team: Anne Marie Crays, RN</p> <p>Census bed type: SNF: 26 NF: 45 SNF/NF: 117 Residential: 10 Total: 198</p> <p>Census payor type: Medicare: 24 Medicaid: 116</p>	F0000	Please accept this plan of correction as our credible allegation of compliance. This plan of correction is submitted as part of the regulatory required response and is not to be construed as agreement with the deficiencies cited.	
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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>Other: 58 Total: 198</p> <p>Sample: 6</p> <p>These deficiencies reflect state findings cited in accordance with 410 IAC 16.2.</p> <p>Quality review completed on November 30, 2012 by Bev Faulkner, RN</p>				

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F0309 SS=G	<p><b>483.25</b>  <b>PROVIDE CARE/SERVICES FOR HIGHEST WELL BEING</b>  Each resident must receive and the facility must provide the necessary care and services to attain or maintain the highest practicable physical, mental, and psychosocial well-being, in accordance with the comprehensive assessment and plan of care.</p> <p>Based on observation, interview, and record review, the facility failed to ensure a resident with multiple fractures received adequate pain management, and instead frequently received medication for anxiety, for 1 of 5 residents reviewed for pain management, in a sample of 6.  Resident D</p> <p>Findings include:</p> <p>1. On 11/28/12 at 10:00 A.M., during the initial tour, RN # 1 indicated Resident D was receiving therapy, and had a gastrostomy tube.</p> <p>On 11/28/12 at 2:15 P.M., Resident D was observed lying in bed with her eyes closed.</p> <p>The clinical record of Resident D was reviewed on 11/28/12 at 2:35 P.M. The resident was admitted to the facility on 10/15/12 with diagnoses including, but not limited to, subdural hematoma, rib fracture, clavicle fracture, lumbar</p>	F0309	<p>Resident D no longer resides at the facility. To enhance currently compliant operations, under the direction of the Director of Nursing, by 12/21/12, all nursing staff and therapy staff will receive in-service training regarding state and federal requirements on pain management. The focus of the in-service will be on:</p> <ul style="list-style-type: none"> <li>· the need to assess residents with pain and recognize when a resident is experiencing pain,</li> <li>· identifying circumstances when pain can be anticipated,</li> <li>· evaluating the existing pain (location, severity, and pattern) and the cause,</li> <li>· managing or preventing pain consistent with the comprehensive assessment, physician's orders, current clinical standards of practice, and the resident's goals and preferences.</li> <li>· Appropriate interventions for the plan of care will also be discussed. Special consideration for residents with reduced ability or inability to verbalize pain will be emphasized during the in-service. <b>See Exhibits A, B, and C.</b> Because all residents residing in the facility could be</li> </ul>	12/21/2012			

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	<p>fracture, and C6 (cervical-neck) fracture.</p> <p>A Daily Skilled Nurse's Note, dated 10/15/12 at 11:50 A.M., indicated, "...admitted to facility...Transferred to bed [with] assist x 3..." The note indicated the resident was alert, had difficulty in speaking, had no altered mood or behavior, and did not exhibit pain.</p> <p>An admission assessment, dated 10/15/12 and untimed, included: "...Resident verbally expresses pain: Yes. Resident is on pain medication: Y [yes]. Resident shows evidence of pain: Yes...Intensity Scale: [left blank]...Describe origin/causes of pain - movement, repositioning...Pain Expression, Sounds of distress, Pain Relief...Tylenol...Pain is increased by movement...."</p> <p>A Physician's order, dated 10/15/12, indicated, "Tylenol 325 mg tablet, Give 2 tablets (650 mg) per G-tube [gastrostomy tube] every 4 hours as needed for elevated pain/elevated temp."</p> <p>Nurses notes, dated 10/16/12 at 2:45 A.M., indicated: "[Two] Tylenol... given for s/s [signs and symptoms] pain - moaning, facial grimace...."</p> <p>A Physical Therapy plan of care, dated 10/16/12, indicated: "Medical</p>		<p>potentially affected by the cited deficiency, each resident will be assessed for pain using the Facility's pain assessment forms for interviewable and non-interviewable residents.</p> <p><b>Refer to Exhibits D and E.</b> The Director of Nursing developed a monitoring tool and schedule to determine if each resident is receiving care and services for the identification, treatment, monitoring and relief, if possible, of pain. <b>See Exhibit F.</b> The monitoring tool and schedule involves designated management team members assigned to different units of the facility on all three shifts to observe and document pain. Effective 12/18/12, a quality assurance program was implemented under the supervision of the Director of Nursing to monitor pain management.. The program involves monitoring pain management each shift five times weekly for four weeks, three times weekly for four weeks, then one time weekly. The audit tool will be reviewed daily, five times a week for four weeks, three times weekly for four weeks, and then one time weekly. This monitoring will be on-going and deficiencies will be corrected immediately. Results of the monitoring will be on-going, and deficiencies will be corrected immediately. Results of the monitoring will be brought to the monthly Quality Assurance Committee for further review,</p>	

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	<p>history...serious fall at son's home 10/07/12...Pt [patient] fell down approximately 7 stairs resulting in a skull fracture, C6 fracture, L1 compression fracture, ribs 1-6 fractured, left clavicle fracture, and pelvic fracture...Reported quality of life: Unable to respond. Observed signs of pain. Pain: Patient unable to report, but observed signs &amp; symptoms of pain...Other clinical observations/ Assessments: Patient without complaints of pain at rest but cries out with pain at times during mobility activities especially rolling. Patient very difficult to understand at times and very apprehensive during mobility activities...Patient demonstrates decreased cognition and difficulty processing verbal cues at times...."</p> <p>A Physician's order, dated 10/17/12, indicated, "Tylenol Ex-Str [extra strength] 500 mg. Give 2 caplets (1000 mg)...every 6 hours as needed for pain."</p> <p>A Physician's order, dated 10/18/12, indicated, "Xanax [anti-anxiety medication] 0.25 mg Give one tablet via peg [gastrostomy tube] tube every 4 hours as needed for anxiety."</p> <p>A "Pain Assessment/Non-Interviewable Resident," dated 10/22/12, indicated: "Is the resident currently on routine pain</p>		analysis, corrective action as needed and recommendations.				

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	<p>medications? No...is the resident currently exhibiting non-verbal signs of pain [Yes]...Non-verbal sounds (crying, whining, gasping, moaning, or groaning), Facial expressions (grimaces, wincen...), Location of resident's current pain: [Right] side of Body D/T [due to] multiple fx [fractures]. Has resident experienced pain in the last 5 days? No...Current medication used to relieve pain: Tylenol 500 mg [2] tabs Q [every] 6 hrs [hours] PRN [as needed]...If chronic, how long have you had the pain? 10/7/12. Identify conditions that may contribute to pain or discomfort: Post fall resulting in multiple fx."</p> <p>A Minimum Data Set [MDS] assessment, dated 10/22/12, indicated the resident scored a 3 out of 15 for cognition, with 15 indicating no memory impairment. The MDS assessment indicated the resident required total dependence on two + staff for bed mobility and transfer, and did not ambulate. The MDS assessment indicated the resident was not on a scheduled pain medication regimen, received PRN pain medications and non-medication interventions, and was unable to answer a pain presence interview. A Staff Assessment for Pain indicated the resident had indicators of pain including Non-verbal sounds, Facial expressions, and Protective body movements or</p>			

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	<p>postures "(e.g., bracing, guarding...or holding a body part during movement)." The MDS assessment indicated the resident had indicators of pain or possible pain observed daily.</p> <p>A Care Area Assessment [CAA] Summary, dated 10/22/12, indicated, "Resident has s/s of pain AEB [as evidenced by] facial grimacing and moaning...Speech is unclear at times so resident does not always verbally convey presence of pain. Receives ES [extra strength] Tylenol PRN per MD order...Contributing factors to pain include recent fall with multiple fractures...Proceed with care plan."</p> <p>A Care Plan, dated 10/29/12, indicated: "Problem, Pain Related to recent fall [with] C-6 facet fx, 1-6 [left] rib fx, pelvis fx, L1 comp. [compression] fx as evidenced by: facial grimace, moaning, restlessness. Interventions, Assess for nonverbal signs of pain i.e.... irritability, restlessness, anxiety, withdrawal...Administer pain med as ordered. Discuss with resident the need to request pain mediations before pain becomes severe...Evaluate resident's response to pain...Notify physician of any change in level or frequency of pain...."</p> <p>A Physician's order, dated 11/7/12,</p>			

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	<p>indicated, "Tramadol 50 mg [pain medication] [one] Q 4 hrs PRN pain."</p> <p>A Pain Assessment, dated 11/12/12, indicated: "Is resident currently on routine pain medications? No. ...is the resident currently exhibiting non-verbal signs of pain? [Yes]...Non-verbal sounds...Facial expressions...Location of resident's current pain: Resident unable to state...Current medications used to relieve pain: Tramadol 50 mg [one] Q 4 hrs PRN. Is the pain chronic or new? D/T [due to] fx...."</p> <p>A Care Plan Conference Summary, dated 11/12/12, indicated, "...Resident having a lot of anxiety affecting progress [with] therapy...now seems to be having a hard time progressing...Discussed anxiety/pain she has been exhibiting."</p> <p>A Physical Therapy Updated Plan of Care, dated 11/13/12, included: "...Reported quality of Life: Unable to respond. Observed signs of pain...Patient has not met any additional STGs [short term goals] this week due to increased anxiety and complaints of increased pain...Nursing working with medication management to increase alertness while decreasing anxiety...Patient demonstrates...guardedness with movement...."</p>			

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	<p>A Nurses Note, dated 11/14/12 at 3:00 A.M., indicated, "...[Increased] restlessness, crying, states 'I don't know' when asked what's wrong. Gave 0.25 mg Xanax per peg. 0400 [4:00 A.M.] [No] further s/s anxiety/restlessness but face grimace et [and] cried out 'ow, ow' during brief change, gave [one] 50 mg Ultram per peg for s/s pain...."</p> <p>A Nurses Note, dated 11/14/12 at 5:00 P.M., indicated, "Yelling out [and] tearful. Facial grimace, restless; legs off mattress...Calling out for Mommy. Reassurance given not effective. Tramadol 50 mg [one] per peg tube...."</p> <p>A Nurses Note, dated 11/15/12 at 12:00 A.M., indicated, "...[Increased] restlessness, calling out 'Help' [and] for 'Mama,' gave [one] Xanax per peg...0100 [1:00 A.M.] Resident less restless but moaned [with] facial grimace during bed check, gave [one] 50 mg Tramadol per peg for pain...."</p> <p>A Nurses Note, dated 11/15/12 at 7:40 A.M., indicated, "Tylenol given @ this time D/T [due to] resident moaning [and] yelling out in bed...."</p> <p>A Nurses Note, dated 11/15/12 at 12:30 P.M., indicated, "Resident very anxious</p>			

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	<p>[and] restless. Yelling out...Attempted to redirect [without] success. Denies pain or discomfort...[Name of physician] [notified] of [increased] anxiety...Awaiting return call."</p> <p>A Nurses Note, dated 11/15/12 at 1:10 P.M., indicated, "New orders received from [name of physician] as follows: 1) Xanax 0.5 mg via peg tube Q 4 hours PRN anxiety. 2) DC [discontinue] Tramadol...."</p> <p>A different pain medication was not ordered.</p> <p>Nurses Notes included the following notations:</p> <p>11/15/12 at 9:35 P.M.: "Repositioned [with] assist for restlessness. Anxious [and] tearful - yelling out. Reassures [without] relief. Xanax 0.25 mg [two] tabs per peg for anxiety...."</p> <p>11/16/12 at 1:50 A.M.: "PRN Xanax 0.25 mg given via peg for restlessness/anxiety...."</p> <p>11/16/12 at 7:00 A.M.: "...Resident [increased] anxiety [and] agitation, crying out 'Don't hurt me [and] I'm scared.' Attempted staying 1-1 [with] resident, talking, rubbing arms...Resident would</p>			

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	<p>calm for short time then cry out again. 0900 [9:00 A.M.] Xanax given, and staff stayed [with] resident...."</p> <p>11/17/12 at 8:30 A.M.: "Resident yelling out, nurse [checked] brief, was dry, shook head no when asked if needed rest room or in pain. 0900 Increased restlessness, yelling out, Xanax 0.25 mg given for c/o [complaints of] restlessness and [increased] agitation."</p> <p>11/17/12 at 4:30 P.M.: "Agitated yelling out @ times. Ativan 0.5 mg [sic] given per peg tube."</p> <p>11/18/12 at 7:00 A.M.: "...resident calling out, restless, facial grimacing...Tylenol 500 mg [2] and Xanax 0.25 mg [2] given...."</p> <p>11/18/12 at 7:45 P.M.: "Agitated, yelling out criscros [sic] in bed. Xanax 0.5 mg given via peg tube."</p> <p>11/18/12 at 4:00 P.M.: "Agitated, yelling out sideways in bed. Xanax 0.5 mg given per peg tube...Repositioned will monitor."</p> <p>11/18/12 at 11:00 P.M.: "[Increased] restlessness, calling out, this nurse comforted patient, cried out/facial grimace during brief change, repositioned. 2330 [11:30 P.M.] Continues to moan/cry</p>			

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	<p>out, [increased] restlessness, s/s pain, gave [1] Xanax 0.5 mg et [2] Tylenol 500 mg...."</p> <p>11/19/12 at 7:30 A.M.: "[Increased] restlessness, tearful, crying, denies pain, gave 0.5 mg Xanax per peg."</p> <p>11/19/12 at 4:15 P.M.: "Yelling out, restless, crying. Calling out for 'mommy.' Xanax 0.5 mg given...2100...Continue restless at times. Repositioned [with] 1 assist...Reassurance given."</p> <p>11/20/12 at 2:45 A.M.: "[Increased] crying, yelling, despite staff 1 on 1 comforting, gave 0.5 mg Xanax for anxiety...."</p> <p>11/20/12 at 6:00 A.M.: "Continues to yell out, crying, inconsolable, fax sent to MD."</p> <p>11/20/12 at 10:00 A.M.: "Res. [up] in w/c [wheelchair]. Alert et yelling out. Facial grimacing et inconsolable. PRN Xanax 0.5 mg [1] given...."</p> <p>11/20/12 at 6:00 P.M.: "Res [resident] in bed hollering out et anxious. Repositioned et brief changed...."</p> <p>11/20/12 at 9:00 P.M.: "Restless et yelling out. PRN Xanax 0.5 given...."</p>			

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	<p>A Physical Therapy Progress Report, dated 11/20/12, indicated: "...Pain: Patient unable to report, but observed signs &amp; symptoms of pain, Pain location/description: unable to localize or verbalize pain...."</p> <p>Nurses Notes continued:</p> <p>11/21/12 at 12:00 A.M.: "Crying, yelling out...provided reassurance by staff, repositioned, resident calmed down slightly. 0100 [1:00 A.M.] [Increased] restlessness, crying, yelling out, gave [1] Xanax 0.5 mg per peg...."</p> <p>11/21/12 at 9:40 A.M.: "Rec'd [received] n.o. [new order] from [physician] to [increase] Xanax to 1 mg po Q 4 [hours] PRN anxiety et start Seroquel 25 mg [an antipsychotic medication] po BID [twice daily] for atypical psychosis..1220 Res has [increased] restlessness et anxiety, crying out loudly et yelling. Administered Xanax 1 mg as per PRN order for anxiety."</p> <p>11/21/12 at 6:45 P.M.: "Resident crying out thrashing covers and agitated, Xanax 1.0 mg given...."</p> <p>11/22/12 at 1:00 A.M.: "Yelling out, crying, unable to redirect, gave 1.0 mg</p>			

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(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETION DATE
	<p>Xanax per PEG for [increased] anxiety/restlessness...."</p> <p>11/22/12 at 11:40 A.M.: "Resident anxious. Staff attempted to console et redirect resident - anxiety continues. PRN Xanax given...."</p> <p>11/22/12 at 4:00 P.M.: "...Resident is yelling out and restless. Attempt to comfort with talk and holding resident's hand. 1700 [5:00 P.M.] Res. continues to yell and cry out. Threw covers off. Xanax given per orders...."</p> <p>11/23/12 at 12:30 A.M.: "Restless, crying, [Temperature] 100.0...gave [2] Tylenol 500 mg for pain/fever, gave 1.0 mg Xanax for restlessness, crying...."</p> <p>11/23/12 at 2:15 P.M.: "Xanax .5 mg given per peg tube for restlessness, yelling out - tearful. Reposition [illegible] [and] reassurance [without] effectiveness prior to Xanax given...."</p> <p>11/24/12 at 2:30 P.M.: "Restless, yelling out; Repositioned. Checked for incontinence. Not effective. Xanax 1 mg per peg tube given...."</p> <p>11/24/12 at 8:30 P.M.: "Resident agitated and crying out gave Xanax 1.0 mg...."</p>			

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  155716	X2) MULTIPLE CONSTRUCTION A. BUILDING 00 B. WING _____	X3) DATE SURVEY COMPLETED  11/29/2012
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	<p>11/25/12 at 12:30 A.M.: "Crying, yelling out, [increased] anxiety, T 99.7, gave 1.0 mg Xanax et 1000 mg Tylenol per peg...0430 [4:30 A.M.] Yelling, [increased] restlessness, anxiety, gave 1.0 mg Xanax per peg."</p> <p>11/26/12 at 3:00 P.M.: "Res. lying in bed, restless and crying out, social worker visits attemp [sic] to comfort res. 1530 [3:30 P.M.] Res continues crying and yelling out states 'she is scared.' Xanax 1.0 mg given...."</p> <p>11/26/12 at 7:00 P.M.: "Res begins crying and yelling out. Repositioned q 2 hrs...1930 [7:30 P.M.] Continues to cry and have [increased] anxiety. Gave Xanax 1.0 mg...."</p> <p>11/27/12 [untimed]: "Res moaning...Unable to get resident comfortable. PRN Xanax provided per order to help resident calm down...."</p> <p>11/27/12 at 5:15 P.M.: "Res in bed crying out anxious et tearful. PRN Xanax given after this staff was unable to comfort res. Sat [with] res., reassured her, massaged back...."</p> <p>A Speech Therapy Progress Report, dated 11/27/12, included: "...Pain: Patient unable to report, but observed signs &amp;</p>			

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	<p>symptoms of pain...."</p> <p>A care plan note, dated 11/28/12, indicated, "Resident's medical condition continues to decline impacting ability to participate in therapy. Plan to discharge from therapy considering palliative care...."</p> <p>The resident's Medication Administration Record [MAR], dated November 2012, indicated the resident received Tylenol 650 mg 2 times, and Tylenol 1000 mg 7 times, from 11/1/12 through 11/29/12. The resident received Xanax 0.25 mg 23 times, Xanax .5 mg 13 times, and Xanax 1.0 mg on 17 different occasions from 11/1/12 through 11/29/12. The MAR indicated the resident received Tramadol 50 mg on 12 occasions from 11/8/12 through 11/15/12, when it was discontinued, and that it was effective in relieving the resident's pain.</p> <p>On 11/29/12 at 11:15 A.M., during interview with the Director of Nursing [DON], she indicated she did not know why the physician did not order a different medication after he discontinued the Tramadol on 11/15/12, and did not know why the staff did not administer the PRN Tylenol more often instead of the Xanax. The DON indicated the resident did have a head injury, and the staff did</p>						

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	<p>not want her "too sedated."</p> <p>2. On 11/29/12 at 12:50 P.M., the Director of Nursing provided the current facility policy on "Pain Management," revised 8/12. The policy included: "...Effective and aggressive pain management is to be provided for all residents....Pain management is the responsibility of physicians, nurses and other health care professionals providing direct care to the resident...All residents will be screened and assessed for pain upon admission to the facility...Residents will be re-evaluated quarterly for pain issues. Residents who are identified as having more severe pain issues, or who are admitted for pain management may receive more frequent assessments."</p> <p>This federal tag relates to Complaint IN00119983.</p> <p>3.1-37(a)</p>						

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