

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 155650	X2) MULTIPLE CONSTRUCTION A. BUILDING 00 B. WING _____	X3) DATE SURVEY COMPLETED 03/04/2013
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NAME OF PROVIDER OR SUPPLIER LINCOLNSHIRE HEALTH CARE CENTER	STREET ADDRESS, CITY, STATE, ZIP CODE 8380 VIRGINIA ST MERRILLVILLE, IN 46410
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F0000	<p>This visit was for the Investigation of Complaint IN00124871.</p> <p>Complaint IN00124871 - Substantiated. Federal/State deficiencies related to the allegations are cited at F241.</p> <p>Survey date: March 4, 2013</p> <p>Facility number: 000577 Provider number: 155650 AIM number: 100266950</p> <p>Survey Team: Shannon Pietraszewski, RN, TC</p> <p>Census Bed Type: SNF/NF: 71 Total: 71</p> <p>Census by Payor Type: Medicare: 11 Medicaid: 50 Other: 10 Total: 71</p> <p>Sample: 3</p> <p>This deficiency reflects State finding cited in accordance with 410 IAC 16.2.</p>	F0000		
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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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	Quality review completed on March 6, 2013, by Janelyn Kulik, RN.			

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F0241 SS=D	<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>Based on record review, and interview, the facility failed to ensure each resident's dignity was maintained related to individual respect between staff and resident interactions for 3 of 3 residents reviewed for dignity. (Residents #B, #C, and #D)</p> <p>Findings included:</p> <p>1. Resident #D's record was reviewed on 3/4/13 at 6:00 a.m. Resident's D's diagnosis included, but were not limited to, CVA (cerebral vascular accident/stroke) with hemiplegia (one sided paralysis), muscle weakness, pain, delusional disorder, and vascular dementia with delusions.</p> <p>A care plan was updated on 11/21/12, indicating the resident makes unsubstantiated statements about staff (Resident reports that staff was informing others not to take care of her and other residents).</p>	F0241	<p>We would like to request paper compliance for this citation.</p> <p>F241</p> <p>The facility requests paper compliance for this citation.</p> <p>The filing of this plan of correction does not constitute an admission that the alleged deficiency exists. This plan of correction is provided as evidence of the facility's desire to comply with the regulations and to continue to provide quality care.</p> <p>1) Immediate actions taken for those residents identified:</p> <p>Regarding Resident #B, the CNA #2 was suspended immediately when the incident occurred on 03-03-2013.</p> <p>Regarding Resident #C, the Administrator spoke with the resident regarding her concerns of feeling disrespected.</p> <p>Regarding Resident #D; she was in the hospital at the time of this</p>	03/15/2013			

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	<p>A quarterly MDS (Minimum Data Set) Assessment dated 12/18/12, indicated the resident was cognitively intact, no delusions, hallucinations, or behaviors were observed in the previous 7 days. The MDS indicated the resident needed extensive assistance of 1 person for bed mobility, transferring, dressing, toilet use, and personal hygiene.</p> <p>On 2/21/13 at 2:21 p.m., a social service note indicated a representative from an outside agency completed a questionnaire with the resident and her God daughter. The Administrator was invited to the meeting.</p> <p>A Facility Incident Reporting Form dated 2/21/13 was reviewed on 3/4/13 at 8:00 a.m., indicated Resident #D reported that CNA #1 had a bad tone of voice when she answers the call lights and CNA #1 "pushes" her over too hard when she helps her on and off of the bed pan. The resident also indicated CNA #1 doesn't help her the way she wants her to. The resident indicated she had never been physically hurt and was not afraid of CNA#1. The CNA was suspended pending investigation. After conducting resident and staff interviews, it had been determined</p>		<p>complaint. The Administrator provided a one on one Teachable Moment & Defining Excellent Customer Service In-service with CNA #1.</p> <p>2) How the facility identified other residents:</p> <p>All alert and oriented residents were interviewed.</p> <p>3) Measures put into place/ System changes:</p> <p>Facility staff will be re-educated regarding professionalism, personal recognition, patience, understanding, empathy, courteous treatment, respect, body language and tone of voice.</p> <p>Facility management will observe staff during rounds on varied shifts at least 5 times per week to ensure that staff is providing excellent customer service. The Director of Nursing is responsible for oversight of these audits.</p> <p>Social Service Director or Designee will interview at least 3 interviewable residents per week regarding customer</p>		

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	<p>that CNA #1 may be in need of sensitivity training and no abuse had occurred.</p> <p>On 3/4/13 at 11:30 a.m., the Administrator was interviewed. The Administrator indicated he would talk to the resident every morning and she would indicate she was fine and there were no problems.</p> <p>On 3/4/13 at 12:00 p.m., the Administrator provided a Teaching Moment and Defining Excellent Customer Service inservice he conducted with CNA #1 on 2/25/13. The inservice discussed professionalism, personal recognition, patience, understanding, empathy, courteous treatment, respect, and language (body and tone of voice).</p> <p>The resident was transferred to the hospital on 2/27/13 and was unable to be interviewed.</p> <p>2. A Facility Incident Reporting Form dated 2/21/13 was reviewed on 3/4/13 at 8:00 a.m. Resident #C was interviewed by the Administrator regarding CNA #1. The resident indicated CNA #1 answered her call light saying, "What do you want?". Resident #C indicated the CNA did not yell at her, but doesn't seem like</p>		<p>service, dignity and respect.</p> <p>4) How the corrective actions will be monitored:</p> <p>The results of these audits will be reviewed in the Quality Assurance Meeting monthly x3 months and quarterly x1 for a total of 6 months.</p> <p>5) Date of compliance: 03-15-2013</p>				

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	<p>CNA #1 wanted to help out at times. Resident #C indicated CNA #1 does help her when she needed it, but when CNA #1 helps her get situated in bed, she "pushes a little too hard". The resident indicated she was comfortable with CNA #1 caring for her but wished she would be a little more careful.</p> <p>Resident C's record was reviewed on 3/4/13 at 9:30 a.m. Resident C's diagnoses included, but were not limited to, hemiplegia, muscle weakness, muscle wasting, CVA (stroke), and Parkinson's Disease.</p> <p>A quarterly MDS Assessment dated 1/15/13, indicated the resident was cognitively intact, and needed extensive assist of two people for bed mobility. The care plan [undated] indicated the resident was one to two person assist for bed mobility.</p> <p>On 3/4/13 at 11:00 a.m., Resident #C was interviewed regarding her interview with the Administrator on 2/21/13 against CNA #1. The resident indicated she was not fearful of CNA #1 but did not feel things had improved. The resident indicated she wanted to be heard, respected and appreciated. Resident #C indicated there was other staff, who she felt</p>				

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	<p>disrespected her but was unable to indicate who they were. Resident #C indicated she did not feel she was being abused.</p> <p>The Administrator was interviewed on 3/4/13 at 11:30 a.m. The Administrator indicated the resident had been declining significantly due to her Parkinson's and it had been difficult to meet Resident #C's needs due to her decline. The Administrator indicated the resident's sister had been trying to assist the staff to meeting the resident's needs, but found it to be difficult herself. The Administrator indicated he would go speak with the resident regarding the disrespect she was feeling with the staff.</p> <p>3. On 3/4/13 at 7:40 a.m., the Administrator indicated he was currently investigating an allegation of verbal abuse Resident #B and CNA #2, which occurred on 3/3/13. CNA #2 had been suspended pending investigation.</p> <p>A Facility Incident Reporting Form dated 2/27/13 was reviewed on 3/4/13 at 8:10 a.m. The incident indicated during a QA (Quality Assurance) interview with Resident #B, he had indicated CNA #3 was</p>			

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	<p>rude to him two weeks prior. The CNA was cleaning his face when the resident told her to stop and she responded by telling him to shut his mouth. CNA #3 was suspended during the investigation. Four residents and three staff members were interviewed. It was determined that no verbal abuse occurred. The form indicated Social Service would evaluate the resident the next day.</p> <p>Resident #B's record was reviewed on 3/4/13 at 8:20 a.m. Resident B's diagnoses included, but were not limited to, COPD (congestive obstructive pulmonary disease/lung disease), CVA with hemiplegia (stroke with one sided paralysis), anxiety disorder, and vascular dementia with delusions.</p> <p>An Annual MDS Assessment dated 12/22/12 indicated the resident was cognitively intact and he needed total assistance of one person for bathing/hygiene.</p> <p>On 2/28/13, 3/1/13, and 3/3/13, Social Service followed up with the resident. Resident #B denied emotional distress, and need for counseling.</p> <p>Resident #B was interviewed on</p>						

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	<p>3/4/13 at 10:50 a.m. The resident indicated CNA #2 was washing his face and her finger and thumb was in an uncomfortable area. Resident #B asked CNA #2 to stop, but indicated she told him to shut up. The resident indicated he was not fearful of CNA #2. The resident indicated he was able to wash his own face. The resident indicated he felt disrespected due to his crying a lot when he was in pain, but did not feel he was being verbally abused.</p> <p>The Administrator was interviewed on 3/4/13 at 11:30 a.m. The Administrator indicated the resident had changed his "story"/allegation. The resident had a history of being inappropriate. The Administrator indicated the resident told him he was capable of washing his own face. The Administrator indicated he had already informed the staff to prepare the wash cloth for the resident, but allow him to wash his own face. The Administrator indicated he would follow up with the resident about his feelings of disrespected.</p> <p>This Federal tag relates to Complaint IN00124871.</p> <p>3.1-3(t)</p>				

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