

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 155670	X2) MULTIPLE CONSTRUCTION A. BUILDING <u>00</u> B. WING _____	X3) DATE SURVEY COMPLETED 02/25/2016
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NAME OF PROVIDER OR SUPPLIER SIGNATURE HEALTHCARE OF NEWBURGH	STREET ADDRESS, CITY, STATE, ZIP CODE 5233 ROSEBUD LN NEWBURGH, IN 47630
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F 0000 Bldg. 00	<p>This visit was for the Investigation of Complaint IN00193630.</p> <p>Complaint IN00193630 - Substantiated. Federal/State deficiencies related to the allegations are cited at F314.</p> <p>Survey dates: February 24 and 25, 2016</p> <p>Facility number: 011049 Provider number: 155670 AIM number: 200258520</p> <p>Census bed type: SNF/NF: 90 Total: 90</p> <p>Census payor type: Medicare: 13 Medicaid: 61 Other: 16 Total: 90</p> <p>Sample: 5</p> <p>This deficiency reflects State findings in accordance with 410 IAC 16.2-3.1.</p>	F 0000		
F 0314	483.25(c)			

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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SS=G Bldg. 00	<p>TREATMENT/SVCS TO PREVENT/HEAL PRESSURE SORES</p> <p>Based on the comprehensive assessment of a resident, the facility must ensure that a resident who enters the facility without pressure sores does not develop pressure sores unless the individual's clinical condition demonstrates that they were unavoidable; and a resident having pressure sores receives necessary treatment and services to promote healing, prevent infection and prevent new sores from developing.</p> <p>Based on interview and record review, the facility failed to consistently and accurately assess a pressure wound, resulting in an infection in the wound and the wound doubling in size, for 1 of 3 residents reviewed with pressure ulcers, in a sample of 5. Resident A</p> <p>Findings include:</p> <p>The closed clinical record of Resident A was reviewed on 2/24/16 at 10:45 A.M. Diagnoses included, but were not limited to, CVA and anoxic brain injury.</p> <p>A quarterly Minimum Data Set (MDS) assessment, dated 11/5/15, indicated the resident had a short term and long term memory problem and was severely impaired in cognitive skills for daily decision-making. The resident required extensive assistance of two+ staff for bed</p>	F 0314	<p>1. Resident A no longer resides in the facility.</p> <p>2. All residents in the center have had a new skin assessment completed. All residents with wounds have had wound assessments completed including measurements and changes to treatment plan as needed. Treatment orders for all residents with wounds have been reviewed to ensure treatments ordered for a specific time frame have been reviewed with the physician at the end of the treatment and continued or changed.</p> <p>3. All Licensed Nurses will be retrained on the facility policy for wound care and assessment to include physician notification if wound is not healing, physician notification anytime there is a regression of the wound, and the necessity of assessing wounds every 5-7 days.</p> <p>4. The DON and/or ADON will review the schedule of weekly wound evaluations daily 5 days</p>	03/23/2016	

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	<p>mobility, and was always incontinent of bowels and bladder. The MDS assessment indicated the resident had 1 Stage 3 area, measuring 5 centimeters (cm) x 3.6 cm x 0 cm, which was present upon admission.</p> <p>A Resident Care Plan, initially dated 5/11/15 and updated 12/1/15, indicated, "Problem, Increased protein, MVI [multivitamin] due to compromised skin, Stage III coccyx, 12/1/15 coccyx area having [increased] drainage." The Approaches included, "Dressing chgs [changes] per orders. Monitor improvements. Notify MD/family if none.</p> <p>A "Weekly Wound" record indicated "Wound Location: coccyx, Wound Type: Pressure Ulcer" and included the following:</p> <p>"12/30/15, Wound Measurements: (L X W) [Length x Width]: 2.6 x 4 cm, Depth: 0.2 cm...Wound Stage: Stage 4, Exudate (drainage): Moderate, Exudate Type: [left blank]...Periwound: Macerated, Tissue Types: Granulation...Nutritional Interventions: [left blank]...Physician Notified: [left blank], Family Notified: [left blank] Other Treatments: alginate with foam dressing...."</p>		<p>per week x4 weeks, then 2 times weekly x 4 weeks, then weekly x 4 weeks, then monthly ongoing, to ensure all residents who required wound evaluations were assessed timely and treatments and treatment plans are up to date and appropriate. The DON or designee will report findings to the facility Quality Assurance and Performance Improvement committee monthly for review and recommendation.</p>	

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	<p>"1/14/16, Wound Measurements: 3.4 x 3.2 cm, Depth: 0.2 cm...Wound Stage: Stage 3, Exudate: Moderate, Exudate Type: [left blank]... Periwound: Macerated, Tissue Types: Granulation...Nutritional Interventions: [left blank]...Treatment(s): Calcium Alginate, Thin Foam with Cover, Physician Notified: [left blank], Family Notified: [left blank]...."</p> <p>"1/17/16, Wound Measurements: 2.5 x 3.0 cm, Depth: 0 cm, Exudate: Light, Exudate Type: [left blank]...Periwound: Intact, Tissue Types: Granulation...Nutritional Interventions: [left blank]...Treatment(s): Absorbent Foam Dressing, Physician Notified: [left blank], Family Notified: [left blank]...."</p> <p>A Nurses Note, dated 1/20/16 at 6:00 A.M., indicated, "...Treatment to area on coccyx performed and moderate amount tan, non-odorous drainage with wound bed bright red, beefy in color with slightly raised wound edges and partial white in color...."</p> <p>A Physician's order, dated 1/21/16, indicated, "Apply silvwer [sic] alginate to coccyx wound bed, skin prep to periwound. Cover with Optifoam BID [twice daily] and PRN [as needed] for soiling and increased drainage x 14 days</p>			

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	<p>Dx [diagnosis]: Pressure Ulcer."</p> <p>The most recent Wound Measurement form, dated 1/30/16, indicated, "Wound Measurements: 3.0 x 3.0 cm , Depth: 0 cm... Wound Stage: Stage 2, Exudate: Light, Exudate Type: [left blank]...Periwound: Intact, Tissue Types: Epithelialization...Nutritional Interventions: Vitamin C...Treatment(s): Absorbent Foam Dressing, Calcium Alginate, Physician Notified: [left blank], Family Notified: [left blank]...."</p> <p>Documentation regarding physician notification of the pressure ulcer following the 14 days of treatment was not found in the clinical record.</p> <p>A "Quarterly Nursing Information," dated 2/4/16 indicated the resident was at High Risk for skin concerns. The form did not document impairments in skin.</p> <p>The last Nurse's Note regarding the coccyx pressure ulcer was on 2/4/16 at 9:00 P.M., which indicated, "Tx [treatment] to coccyx. PEG tube intact...."</p> <p>A Nurse's Note, dated 2/7/16 at 12:00 P.M., indicated, "Call received from triage [with] N.O. [new order] to send resident to ER for [evaluation and</p>			

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	<p>treatment]...."</p> <p>A "Nursing Home to Hospital Transfer Form," dated 2/7/16 at 12:30 P.M., included: "Reason(s) for transfer: Tachycardia [rapid heart rate]...Receiving Rocephin [an antibiotic]...(UTI) [Urinary Tract Infection]...Skin/Wound Care: Stage 2 to coccyx...."</p> <p>An Emergency Room record, dated 2/7/16 at 1:35 P.M., indicated, "The patient did have a large sacral decubitus [pressure ulcer]...Final Impression, 1. Sepsis, due to unspecified organism, 2. Decubitus ulcer...."</p> <p>A Hospital Wound Assessment," dated 2/7/16, indicated, "Wound Pressure Ulcer Coccyx Mid: Left...Present on admission? Yes, Wound Type: Pressure Ulcer...Dry, Fragile, Painful, Pale...Wound Length (cm) 6 cm, Wound Width (cm) 6 cm, Wound edges, Unattached edges, Periwound Fragile...."</p> <p>A hospital History and Physical, dated 2/9/16, indicated, "Admitted for: Sepsis...Infected sacral decubitus ulcer...."</p> <p>On 2/24/16 at 2:45 P.M., during an interview with RN # 1, she indicated pressure area assessments were kept in</p>			

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	<p>the "WoundSense." She indicated it was a computerized documentation system. She indicated that there was not a designated wound care nurse who assessed the pressure areas, but that which ever nurse was working when a wound assessment was due would assess the wound. RN # 1 indicated the computer system would turn the resident's name yellow, and that would notify the nurse on duty if an assessment was due.</p> <p>At that time, the Assistant Director of Nursing (ADON) indicated that pressure wound assessments were not necessarily done every 7 days, but were done weekly.</p> <p>On 2/25/16 at 2:00 P.M., the ADON reviewed the resident's WoundSense pressure wound assessments. The ADON indicated he was sure there were more assessments of the pressure ulcer than what was provided. The ADON indicated the facility was looking into having 1 specific staff member assessing the pressure wounds. The ADON indicated nursing staff were told not to "stage wounds backward," that if a resident had a Stage 4 wound, it would always be a Stage 4 wound.</p> <p>On 2/25/16 at 2:15 P.M., during an interview with MDS Staff # 1, she</p>			

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	<p>reviewed the resident's WoundSense assessments and other skin assessments. There was no skin assessment after 1/30/16.</p> <p>In STAGES OF PRESSURE ULCERS, AMDA - 2008, the following was included:</p> <p>Stage I: Intact skin with nonblanchable redness of a localized area, usually over a bony prominence...Note: This area may be painful, firm, soft, warmer or cooler compared to adjacent skin.</p> <p>Stage II: Partial thickness loss of dermis presenting as a shallow open ulcer with a red pink ulcer bed without slough. May also present as an intact or open/ruptured serum filled blister.</p> <p><u>Stage III:</u> Full thickness tissue loss. Subcutaneous fat may be visible but bone, tendon or muscle is not exposed. Slough may be present but does not obscure the depth of tissue loss. May include undermining and tunneling.</p> <p><u>Stage IV:</u> Full thickness tissue loss with exposed bone, tendon, or muscle. Slough or eschar may be present on some parts of the ulcer bed. Often includes undermining and tunneling."</p> <p>On 2/25/16 at 2:40 P.M., the ADON provided the current facility policy on "Pressure Ulcer Risk Assessment," undated. The policy included: "...Pressure</p>			

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	<p>ulcers are often made worse by continual pressure, heat, moisture...decline in nutrition and hydration status, acute illness and/or decline in the resident's physical and/or mental condition...Routinely assess and document the condition of the resident's skin per facility wound and skin care program for any signs and symptoms of irritation or breakdown...."</p> <p>At that time, the ADON provided the current facility policy on their wound care program, "WoundSense," undated. The policy included: "...WoundSense is a comprehensive, electronic skin and wound care documentation and management reporting system...WoundSense will be used for all resident skin and wound care evaluations and documentation...If a resident has an alteration in skin integrity...this tool (with photos) will be used weekly to complete the resident's skin assessment...."</p> <p>This Federal tag relates to Complaint IN00193630.</p> <p>3.1-40(a)(2)</p>			

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

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