| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: | (X2) MULTIPLE CONSTRUCTION A. BUILDING 00 B. WING | (X3) DATE SURVEY COMPLETED |
|---|---|---|---|
| | 155126 | | 08/02/2016 |

| NAME OF PROVIDER OR SUPPLIER | STREET ADDRESS, CITY, STATE, ZIP CODE |
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| SPRINGS VALLEY MEADOWS | 457 S SR 145<br>FRENCH LICK, IN 47432 |

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| F 0000<br><br>Bldg. 00 | This visit was for the Investigation of Complaint IN00205347.<br><br>Complaint IN00205347 - Substantiated. Federal/State deficiencies related to the allegations are cited at F323.<br><br>Survey dates:<br>July 29, August 1 and 2, 2016<br><br>Facility number: 000054<br>Provider number: 155126<br>AIM number: 100287850<br><br>Census bed type:<br>SNF/NF: 67<br>Total: 67<br><br>Census payor type:<br>Medicare: 13<br>Medicaid: 45<br>Other: 9<br>Total: 67<br><br>Sample: 7<br><br>These deficiencies reflect State findings cited in accordance with 410 IAC 16.2-3.1.<br><br>Quality review completed by #02748 on | F 0000 | "This Plan of Correction constitutes the facility's written allegation of compliance for deficiencies cited. This submission of this Plan of Correction is not an admission of or agreement with the deficiencies or conclusions contained in the Department's Inspection Report." Please feel free to contact me if you should need anything further. We are requesting a face to face IDR for this deficiency. Stacy M. Burton, Executive Director, 812-936-9991. | |

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE TITLE (X6) DATE

Any defiencystatement ending with an asterisk (*) denotes a deficency which the institution may be excused from correcting providing it is determined that other safegaurds 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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| | August 4, 2016. | | | |
| F 0323<br>SS=G<br>Bldg. 00 | 483.25(h)<br>FREE OF ACCIDENT HAZARDS/SUPERVISION/DEVICES<br>The facility must ensure that the resident environment remains as free of accident hazards as is possible; and each resident receives adequate supervision and assistance devices to prevent accidents.<br><br>Based on interview and record review, the facility failed to ensure a dependent resident received the necessary | F 0323 | 1.Resident C no longer resides in the facility. A thorough investigation was completed by theExecutive Director and Director of Nursing Services on 07/15/16 regardingevents | 08/17/2016 |

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| | supervision and care to be free of hazards to prevent a large hematoma (raised bruise) on the head, skin tears, and a left femur (hip) fracture, for 1 of 3 residents reviewed with injuries, in a sample of 7. Resident C<br><br>Findings include:<br><br>The closed clinical record of Resident C was reviewed on 8/1/16. The resident was admitted to the facility on 7/11/16 with diagnoses including, but not limited to, fractured left clavicle (shoulder).<br><br>A Progress Note, dated 7/11/16 at 2:40 P.M., indicated, "Pt [patient] arrived at facility...Pt alert and oriented to self and place with confusion noted at times...."<br><br>An admission assessment, dated 7/11/16, indicated the resident weighed 92 pounds.<br><br>A Care Plan, dated 7/12/16, indicated: "Problem, Resident needs assistance with ADLs [activities of daily living] including bed mobility, transfers, eating and toilet use related to: weakness, pain, left clavicle fx [fracture] with sling to left arm." The Approaches included: "2 staff assist with transfers."<br><br>An additional Care Plan, dated 7/12/16, | | surrounding injury sustained by Resident C.<br>2.All Residents have the potential to be affectedby the alleged deficient practice. Re-educationof the Fall Management Program to all Licensed Nursing Personnel will beconducted by the Continuing Education Coordinator. All Residents' Fall Care Plans and ADL CarePlans will be reviewed by the Director of Nursing Services/Designee and updatedto reflect the Residents current condition and to identify any safety concerns.<br>3.An in-service was completed for the IDT on08/12/16 by the DNS regarding indentifying safety concerns during thecomprehensive care plan development. Observational rounds will be completed dailyto ensure that there are not any safety concerns observed. The Care Plan of anynew admission or Resident experiencing a change in condition will be reviewedby the Director of Nursing Services/Designee to ensure that the Care Planaddresses any identified safety concerns.<br>4.Facility will complete The Accommodation ofNeeds QA Audit Tool as well as the Care Plan Updating QA Audit Tool weekly x's 4 weeks, bi-monthlyx 4 months, monthly x 4 months and quarterly thereafter. The results of these audits will be reviewedby | |

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| | indicated, "Problem, Resident is at risk for fall due to: weakness, hx [history] of falls, decreased mobility, acute pain left clavicle fx with left arm sling, dementia with decreased safety awareness." The Approaches included: "Assist of 2 required with all transfers."<br><br>An additional Care Plan, dated 7/12/16, indicated, "Pain related to: left clavicle fx, depression." The Approaches included: "Assist with positioning to comfort. Notify MD if pain is unrelieved and/or worsening. Observe for non verbal signs of pain."<br><br>A Care Plan regarding left hip pain was not found in the clinical record.<br><br>A Progress Note, dated 7/12/16 at 9:01 A.M., indicated, "...Resident noted to have pain/discomfort upon movement of L [left] extremity d/t [due to] L clavicle fx...No c/o pain at this time except when moving extremity...."<br><br>A Fall Risk Assessment, dated 7/12/16 at 1:13 P.M., indicated the resident had a history of one or more falls within the previous 6 months, was incontinent, was on 2 or more high fall risk medications, had an unsteady gait, had altered awareness of immediate physical environment, and had a total fall risk | | the QAPI committee and if threshold of 95% is not achieved and Action Planwill be put into place to ensure compliance. | |

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| | score of 18 ("> 13 Total Points = High Fall Risk").<br><br>A Progress Note, dated 7/12/16 at 1:35 P.M., indicated, "Resident alert and oriented with confusion noted...Able to make wants and needs known. Up with 2 assist with transfers and ADL's...Pain noted with movement of L extremity...no pain or discomfort voiced at this time."<br><br>A Physical Therapy (PT) Plan of Care, dated 7/12/16, indicated, "Reason for Referral:...due to fall and resulting of [sic] left clavicle fracture....Therapy necessary for increase [sic] muscle strength in both LE [lower extremities] and stabilized pain in left shoulder...Precautions: high risk of fall due to confusion, needed all the time cuing on left shoulder not to be used due to left clavicle fracture...Patient complains of pain in left shoulder...able to follow simple commands...The PT note did not document complaints of left hip/leg pain.<br><br>A Progress Note, dated 7/13/16 at 12:24 A.M., indicated, "...Resident noted to have discomfort upon movement of left arm d/t left clavicle fx...Will continue to monitor."<br><br>A "72 hour Admission Shift Charting," | | | |

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| | dated 7/14/16 at 1:34 A.M., indicated, "Is resident currently experiencing pain? No, Mobility Uses wheelchair, Mental status Fearful, Oriented to None of the above...Lower body weakness...."<br><br>Progress Notes continued:<br><br>7/15/16 at 4:00 P.M. "[Recorded as Late Entry on 07/18/2016 at 09:45 AM] CNA came to nurse at this time to inform nurse of knot located on resident L side of head and area to L hand. When nurse CNA what happened [sic] CNA state that she walked into room to give resident bed bath at this time. CNA noticed a knot located on L side of head and skin tear located on L hand and one on L elbow. CNA checked bed alarm and it was in place and working properly. CNA then asked resident what happened. Resident stated 'I fell.' CNA replied 'You are in here because you fell but what happened to your head? Resident stated "I do not know.' CNA then came to nurse with information, this nurse assessed resident and took vital signs. Vital signs WNL [within normal limits]. When asked what hurts resident pointed to L hand and L side of head...Will continue to monitor."<br><br>7/15/16 at 5:15 P.M.: "CNA came to nurse at this time to tell nurse that resident is c/o [complaining] of L hip | | | |

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| | pain. Nurse assessed resident. Resident moaning in pain with any movement to LLE [left lower extremity]. Call made to [name of physician] at this time for N/O [new order] to send resident to ER for eval and tx [evaluation and treatment]...."<br><br>A hospital # 1 Emergency Department note, dated 7/15/16 at 6:38 P.M., indicated, "...The patient was brought in by EMS [emergency medical services] after it was reported to the nurse [name], by CNA, that patient was found in her bed with with [sic] purple lump on the left side of forehead. Staff attempted to get patient up and take her to the dinning [sic] room and pt. was yelling in pain because her left hip was hurting and she could not bear weight. Pt. also has skin tear on her left elbow and left, lateral pinky finger. There were no witnesses who reportedly were present when patient was injured. Patient had a fall earlier on July 8, one week ago, and has a left fractured clavicle...The onset was unknown. The occurrence was unknown. The location where the incident occurred was at a nursing home...The character of symptoms is pain and loss of mobility. The degree at present is severe...Skin symptoms: Abrasions, Contusion on forehead...Left, hip, acute, pain, decreased range of motion...Alert, moderate distress, emaciated, | | | |

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| | underweight, cooperative...Alert and oriented to person, place, time, and situation...Wounds: Left elbow and left lateral pinky finger...Differential Diagnosis: Fall, abrasion, contusion, closed fracture, head injury..."<br><br>A hospital # 1 report, dated 7/15/16 at 7:23 P.M., indicated a Cat Scan of the head revealed findings "consistent [with] evolving subacute infarct. No intracranial hemorrhage" and the resident was transferred to a larger hospital with a diagnosis of CVA (cerebral infarction, or stroke).<br><br>A hospital # 2 history and physical, dated 7/16/16, indicated, "Chief Complaint: Falls...[Resident C]...provides her own history. She tells me that she has fallen twice in the last week. Her first was on July 8...fractured her left clavicle...Today she was found by the staff with a large bruise on the left side of her head and minimal skin injuries to her left hand and left elbow. After the staff tried to assist her with ambulation she was unable to bear weight secondary to her left hip pain. She had a repeat head and pelvic CTs [cat scans] as well as repeat imaging of her collarbone...Physical Exam:...Alert: Cooperative: Oriented - person, place, month; disoriented to year...Contusion - large goose egg on left | | | |

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| | side of head anterior to the ear...Pain - Spasmodic pain in the left hip. Pain present with trial of passive range of motion...Hematoma 1. On left side of head. 2. Over the left clavicle...<br><br>A hospital # 2 discharge summary, dated 7/20/16, indicated, "...Hospital Course: This is an unfortunate 82-year-old female who had an apparently unwitnessed fall at the skilled nursing facility where she resided. She was then sent to [name of hospital # 1] where she was found to have a subacute insult in the left parietooccipital region. She was transferred here for further workup...After persistent hip pain here despite a negative CT [cat scan] at [hospital # 1], a CT of her hip was repeated and identified a small periprosthetic femoral shaft fracture [hip] just distal to the trochanter...."<br><br>On 8/1/16 at 12:05 P.M., LPN # 1 was interviewed. LPN # 1 indicated she was working on 7/15/16. She indicated CNA # 1 notified her that Resident C "had a pretty big goose egg" on her head, and skin tears on her arm. She indicated the resident told her that she had fallen. LPN # 1 indicated she observed a drink spilled on the floor. LPN # 1 indicated Resident C was alert, but had confusion at times. She indicated she did not think the | | | |

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| | resident would be able to get back up on her own if she had fallen. LPN # 1 indicated that later she had told staff to get Resident C up for supper, and the staff informed her that she was complaining of left leg pain. She indicated she then called the physician and sent her out to the hospital. LPN # 1 indicated she "really didn't know what happened, and did not want to accuse anyone."<br><br>On 8/1/16 at 2:00 P.M., CNA # 1 was interviewed. CNA # 1 indicated on 7/15/16, she went in to give Resident C a bed bath. She indicated the resident told her she had to use the bathroom, and CNA # 1 went to get CNA # 2 to assist her. CNA # 2 was giving another resident a shower, and told CNA # 1 to "give her a minute," and she would assist her. CNA # 1 indicated when she went back in the room, she observed Resident C was already wet, so she went ahead and changed her. She indicated the resident's brief was wet, but her pants were not wet. She indicated she did not have to get the resident up out of bed. She indicated Resident C complained that her head hurt, and she noted a "huge bruised knot on her head" and a skin tear on her hand. She indicated she observed pop that was spilled under the chair next to the bed. She indicated she then went and informed | | | |

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| | the nurse. CNA # 1 indicated she was unsure how long it was from the time she spoke to CNA # 2 until she went back into the resident's room, but found the resident laying in bed. She indicated the resident had 1/4 siderails, and she wondered if the resident hit her head on one of the rails. She indicated she did not take the resident to the bathroom.<br><br>On 8/1/16 at 2:20 P.M., CNA # 2 was interviewed. CNA # 2 indicated she was working on 7/15/16. She indicated she was working in a room across the hall from Resident C, and heard an alarm going off. She indicated she saw Resident C sitting on the side of the bed. She indicated she observed the resident's bed was quite wet. CNA # 2 indicated she lifted the resident's legs back up in bed, and positioned her. She indicated there was no knot or bruise on the resident's head at that time. She indicated she was in the shower room, and CNA # 1 came in and asked her to assist her in taking Resident C to the bathroom. CNA # 2 indicated she informed CNA # 1 that she was almost done, and would be able to help her. She indicated when she got back to Resident C's room, "everyone was in there." She indicated she asked, "What's going on?" and asked CNA # 1 how she got the resident's bed dry if she didn't get her up. | | | |

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| | On 8/2/16 at 9:40 A.M., the Administrator and Director of Nursing (DON) were interviewed. The DON indicated the Unit Manager had informed her on 7/15/16 that Resident C had possibly hit her head on the grab bar. She indicated CNA # 1 had observed a hematoma on the left side temporal area, and had observed a drink spilled on the left side of the floor. The DON indicated she was also aware of a skin tear on the resident's finger, and found out later about the skin tear on the resident's elbow. She indicated the resident had said she fell in the bathroom, but she knew the resident had fallen in the bathroom at home. She indicated the resident had been confused since admission. The Administrator indicated they interviewed staff and came to the conclusion that the resident may have hit her head on the grab bar, so they rearranged the furniture.<br><br>The Administrator and DON were informed at that time that a fracture had been discovered at the second hospital. They both indicated they were unaware of that.<br><br>On 8/2/16 at 10:30 A.M., during an interview with the Corporate Nurse, he indicated he thought the resident had left | | | |

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| | hip pain prior to being admitted to the facility. He indicated he was unsure why there was no documentation regarding left hip pain until 7/15/16.<br><br>On 8/2/16 at 12:00 P.M., during an interview with the Administrator, she indicated she had spoken to the Physical Therapist, and that the therapist had informed her that the resident had complained of bilateral lower extremity pain, and that it was possible the hospital had missed the fracture prior to admission. She indicated she had spoken to the staff, and didn't think any of them were being less than truthful. She indicated if the resident had fallen from bed, she did not think one person could get her up by themselves, even if she weighed 92 pounds.<br><br>On 8/2/16 at 10:15 A.M., the DON provided the current facility "Fall Management Program," revised 7/2016. The policy included: "...Post fall: 1. Any resident experiencing a fall will be assessed immediately by the charge nurse for possible injuries and necessary treatment will be provided...."<br><br>This Federal tag relates to Complaint IN00205347.<br><br>3.1-45(a)(1) | | | |

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