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| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 155181 | X2) MULTIPLE CONSTRUCTION A. BUILDING 00 B. WING _____ | X3) DATE SURVEY COMPLETED 09/12/2012 |
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| NAME OF PROVIDER OR SUPPLIER CARMEL HEALTH & LIVING COMMUNITY | STREET ADDRESS, CITY, STATE, ZIP CODE 118 MEDICAL DR CARMEL, IN 46032 |
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| F0000 | <p>This visit was for the Investigation of Complaint IN00116228.</p> <p>Complaint IN00116228 - Substantiated. No deficiencies related to the allegations are cited.</p> <p>Unrelated deficiencies cited.</p> <p>Survey dates: September 11, 12, 2012</p> <p>Facility number: 000095 Provider number: 155181 AIM number: 100290490</p> <p>Survey team: Chuck Stevenson RN</p> <p>Census bed type: SNF: 21 SNF/NF: 107 Total: 128</p> <p>Census payor type: Medicare: 19 Medicaid: 91 Other: 18 Total: 128</p> <p>Sample: 3</p> <p>This deficiency also reflects state findings</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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| | cited in accordance with 410 IAC 16.2 Quality review 9/18/12 by Suzanne Williams, RN | | | | |

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| F0226 SS=D | <p>483.13(c) DEVELOP/IMPLMENT ABUSE/NEGLECT, ETC POLICIES The facility must develop and implement written policies and procedures that prohibit mistreatment, neglect, and abuse of residents and misappropriation of resident property.</p> <p>Based on record review and interview, the facility failed to ensure residents were protected from potential abuse by not thoroughly screening job applicants prior to hiring, including employment reference checks, for 1 employee (CNA #1) of 6 recently hired employees reviewed for pre employment screening. One of 3 sampled residents (Resident C) had an allegation of abuse involving this CNA.</p> <p>Findings include:</p> <p>1. The record of Resident C was reviewed on 9/11/12 at 2:00 p.m.</p> <p>Diagnoses included, but were not limited to, Parkinson's Disease, acute renal failure, urinary tract infection, and cardiac dysrhythmia with internal pacemaker.</p> <p>A Facility Incident Report dated 9/04/12 indicated "Resident Name: (Resident C)...Brief description of incident: Resident (Resident C) reported to nurse that (CNA #1) had made contact with him and when the nurse asked where, resident</p> | F0226 | <p>F226 483.13 (c) DEVELOP/IMPLEMENT ABUSE/NEGLECT, ETC POLICIES I. C.N.A #1 has two reference checks completed in her personnel file. II. The facility will complete an audit of all current associates hired within the past 24 months to determine each associate has 2 reference checks in their personnel file. Any issues identified will be corrected immediately. III. The systemic change includes the Human Resource Director will obtain two reference checks on all prospective associates prior to employment. If the reference checks provided by the associate do not return the request, the prospective associate will be requested to provide additional contacts until at least two satisfactory references are returned. Education will be provided to the Human Resources Director regarding the Credentials and Qualifications for Employment Policy. IV. The Administrator/ Designee will</p> | 09/19/2012 | | | |

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| | <p>put his hand on his lower abdomen..."</p> <p>A report dated 9/04/12 prepared by Social Services worker #2 indicated "... (Resident C) made statement that a staff member had struck him."</p> <p>CNA #1's personnel file was reviewed for compliance with regulation and facility policy in pre employment screening. Records indicate CNA #1 was hired by the facility on 8/01/12.</p> <p>CNA #1's employment application included 3 personal references. Reference checks were not completed for any of the 3 provided references.</p> <p>CNA #1's employment application included 3 previous employers:</p> <p>Long Term Care Facility #1: Employed 4/4/10 to 8/10/11 as a CNA. This reference was not checked.</p> <p>Home Health Agency #2: Employed 9/01/10 to 11/04/11 as a CNA and Home Health Aide on a PRN basis. This reference was not checked.</p> <p>Long Term Care Facility #3: Employed 3/12 to 4/12. This reference was checked, and it was confirmed CNA #1 worked there for 1 month. No other information</p> | | <p>audit personnel files for prospective associates to determine two satisfactory reference checks are present prior to the first day of employment. This review will be done for 100% of new associates weekly for 8 weeks. Following this initial 8 weeks, random review of a minimum of 5 new associates will occur weekly for 16 weeks, and then monthly for an additional 6 months to total 12 months of audits to determine that associates have at least two satisfactory reference requests. Any identified concerns from audits will be addressed immediately. The results of these audits will be discussed at the monthly facility Quality Assurance Committee meeting and frequency and duration of reviews will be adjusted as needed. COMPLIANCE DATE: 9/19/2012</p> | | |

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| | <p>was obtained.</p> <p>During an interview with the Human Resources Director on 9/11/12 at 2:20 p.m. he indicated it was facility policy and his practice to check at least 1 personal and 1 professional reference on each job applicant. He indicated he had attempted to contact one of CNA #1's personal references but had not made contact.</p> <p>2. An undated facility document titled "Credentials and Qualifications for Employment" received from the Administrator on 9/12/12 at 9:30 a.m. and identified as a current facility policy indicated:</p> <p>"Credentials and Qualifications for Employment...Policy...It is the policy of (name of facility's parent company) to ensure that each associate it seeks to hire holds all appropriate credentials and qualifications for employment with the company...Reference Requests...Policy...Satisfactory reference checks are a condition of employment with (name of parent company)...At least two (2) reference checks will be performed and documented as part of the pre-employment requirements of each potential employee and maintained in the personnel record if hired."</p> | | | | | | |

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| | 3.1-28(a) | | | |