

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 05/24/2013
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NAME OF PROVIDER OR SUPPLIER CHATEAU OF BATESVILLE	STREET ADDRESS, CITY, STATE, ZIP CODE 44 CHATEAU BLVD BATESVILLE, IN 47006
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R000000	<p>This visit was for a State Residential Licensure Survey.</p> <p>Survey dates: May 22, 23, and 24, 2013</p> <p>Facility number: 006489 Provider number: 006489 AIM number: N/A</p> <p>Survey team: Gordon Tyree RN, TC Diana Sidell RN</p> <p>Census bed type: Residential: 41 Total: 41</p> <p>Census payor type: Other: 41 Total: 41</p> <p>Sample: 7</p> <p>This state residential finding is cited in accordance with 410 IAC 16.2.</p> <p>Quality review 5/28/13 by Suzanne Williams, RN</p>	R000000	The plan of correction is neither an agreement nor an admission of wrong doing by this facility or its staff members. Rather, it is submitted for compliance purposes. This facility alleges substantial compliance with this plan of correction as of June 7, 2013 and requests paper compliance for this survey.	

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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R000121	<p>410 IAC 16.2-5-1.4(f)(1-4) Personnel - Noncompliance (f) A health screen shall be required for each employee of a facility prior to resident contact. The screen shall include a tuberculin skin test, using the Mantoux method (5 TU, PPD), unless a previously positive reaction can be documented. The result shall be recorded in millimeters of induration with the date given, date read, and by whom administered. The facility must assure the following:</p> <p>(1) At the time of employment, or within one (1) month prior to employment, and at least annually thereafter, employees and nonpaid personnel of facilities shall be screened for tuberculosis. The first tuberculin skin test must be read prior to the employee starting work. For health care workers who have not had a documented negative tuberculin skin test result during the preceding twelve (12) months, the baseline tuberculin skin testing should employ the two-step method. If the first step is negative, a second test should be performed one (1) to three (3) weeks after the first step. The frequency of repeat testing will depend on the risk of infection with tuberculosis.</p> <p>(2) All employees who have a positive reaction to the skin test shall be required to have a chest x-ray and other physical and laboratory examinations in order to complete a diagnosis.</p> <p>(3) The facility shall maintain a health record of each employee that includes reports of all employment-related health screenings.</p> <p>(4) An employee with symptoms or signs of active disease, (symptoms suggestive of active tuberculosis, including, but not limited to, cough, fever, night sweats, and weight loss) shall not be permitted to work until tuberculosis is ruled out.</p>						

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	<p>Based on record review and interview, the facility failed to ensure an employee had the results of a first step tuberculosis (TB) screening test read and documented. This affected 1 of 5 employees reviewed for tuberculosis screening. (Employee #18)</p> <p>Findings include:</p> <p>Employee records were reviewed on 5/24/13 at 9:00 a.m. Employee #18's record indicated an employment start date of 12/15/12. Employee #18's "Employee TB Testing" record indicated a first step TB test had been administered on 12/12/12, and was read on 12/14/12. The results of the TB test had not been documented on the record.</p> <p>During an interview, on 5/24/13, at 11:15 p.m., the Director of Health Services (DHS) indicated she "could get ahold of the person who read it [Tuberculin test] as she is in touch with her," but they have no other documentation that the PPD [Tuberculin test] had been read.</p> <p>A policy and procedure for "Mantoux Testing", with an effective date of 10/23/12, was provided by the DHS on 5/24/13 at 11:25 a.m. The policy</p>	R000121	<p>This facility administers tb tests to employees in accordance with 410 IAC 16.2-5-1.4 (f). This particular issue was an isolated occurrence in that our nurse administered the tb test prior to employee training and then the test was read by the director of nursing in a timely manner. On the form that the tb test is recorded, the director of nursing signed and dated the form, apparently got distracted, and failed to record the millimeters of induration on the form. A second tb test was given to this same employee on a timely manner, was read and recorded with zero millimeters of induration. a. There were no residents affected negatively as a result of this noncompliance issue. This facility's plan of correction is to continue to maintain a checklist for all employee tb tests. The facility will continue to administer tb tests in accordance with 410 IAC 16.2-5-1.4 (f). The director of nursing, business office manager, and general manager will review the tb test forms for completeness. b. The facility has identified that no residents have potential to be affected by the noncompliance issue and the plan of correction is the same as "a" above. The facility has reviewed 100% of the employee tb test forms for completeness. The facility has given an in-service to all employees that administer the tb tests or who</p>	06/13/2013			

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	indicated, but was not limited to, "... All Employee Partners who do not have a documented history of a positive TB test must have a Mantoux method TB test...Read the results in 48 to 72 hrs (hours) and document appropriately on a Mantoux/Vaccine Test form (Resident Vaccines Skin Test Form) on the appropriate day...."		monitors the forms that the tb tests are recorded on June 13, 2013. c. The measures to be put in place to make sure that the tb test forms are complete are that the facility will maintain its checklist for all tb tests for employees. The director of nursing has the initial responsibility to ensure the form's completeness and the business office manager and the general manager will review for completeness. d. The corrective action will be monitored by the director of nursing, business office manager, and executive director. The director of nursing will routinely review and monitor on her normal working days. The business office manager will monitor completeness of forms on a weekly basis and the general manager will monitor on a monthly basis. The monitoring process is perpetual on an annual basis. e. The corrective action has been initiated by June 13, 2013		