

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  155156	X2) MULTIPLE CONSTRUCTION A. BUILDING 00 B. WING _____	X3) DATE SURVEY COMPLETED  05/28/2015
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NAME OF PROVIDER OR SUPPLIER  ARBORS AT MICHIGAN CITY	STREET ADDRESS, CITY, STATE, ZIP CODE 1101 E COOLSPRING AVE MICHIGAN CITY, IN 46360
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F 0000  Bldg. 00	<p>This visit was for the Investigation of Complaints IN00173534 and IN00174099.</p> <p>Complaint IN00173534- Substantiated. No deficiencies related to the allegation are cited.</p> <p>Complaint IN00174099- Substantiated. Federal/State deficiency related to the allegation is cited at F329.</p> <p>Survey dates: May 27 &amp; 28, 2015</p> <p>Facility number: 000076 Provider number: 155156 AIM number: 100271060</p> <p>Census bed type: SNF: 27 SNF/NF: 96 Total: 123</p> <p>Census payor type: Medicare: 27 Medicaid: 81 Other: 15 Total: 123</p> <p>Sample: 4</p>	F 0000		
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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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F 0329 SS=D Bldg. 00	<p>This deficiency reflects State findings cited in accordance with 410 IAC 16.2-3.1.</p> <p>483.25(l) DRUG REGIMEN IS FREE FROM UNNECESSARY DRUGS Each resident's drug regimen must be free from unnecessary drugs. An unnecessary drug is any drug when used in excessive dose (including duplicate therapy); or for excessive duration; or without adequate monitoring; or without adequate indications for its use; or in the presence of adverse consequences which indicate the dose should be reduced or discontinued; or any combinations of the reasons above.</p> <p>Based on a comprehensive assessment of a resident, the facility must ensure that residents who have not used antipsychotic drugs are not given these drugs unless antipsychotic drug therapy is necessary to treat a specific condition as diagnosed and documented in the clinical record; and residents who use antipsychotic drugs receive gradual dose reductions, and behavioral interventions, unless clinically contraindicated, in an effort to discontinue these drugs.</p> <p>Based on observation, record review, and interview, the facility failed to ensure the residents' drug regime remained free of</p>	F 0329	F329	06/12/2015

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	<p>unnecessary medications related to the lack of non-pharmacological interventions attempted prior to the administration of anti-anxiety medications for 2 of 3 residents reviewed for the use of anti-anxiety medications in the sample of 4. (Residents #B and #C)</p> <p>Findings include:</p> <p>1. On 5/27/15 at 9:40 a.m., Resident #B was observed sitting in a chair in the lounge area across from the unit dining room. The resident was awake and alert.</p> <p>The record for Resident #B was reviewed on 5/27/15 at 10:21 a.m. The resident's diagnoses included, but were not limited to, dementia, anxiety state, and high blood pressure.</p> <p>Review of the 4/23/15 Minimum Data Set quarterly assessment indicated the resident's BIMS (Brief Interview for Mental Status) score was (3). A score of (3) indicated the resident's cognitive patterns were severely impaired. The assessment also indicated the resident had received anti-anxiety medications (3) days during the (7) day assessment reference period.</p> <p>The current Physician orders were reviewed. An order was written on</p>		<p><b>The facility requests paper compliance for this citation.</b></p> <p><i>This Plan of Correction is the center's credible allegation of compliance.</i></p> <p><i>Preparation and/or execution of this plan of correction does not constitute admission or agreement by the provider of the truth of the facts alleged or conclusions set forth in the statement of deficiencies. The plan of correction is prepared and/or executed solely because it is required by the provisions of federal and state law.</i></p> <p><b>1) Immediate actions taken for those residents identified:</b></p> <p>Point Click Care system was updated with an option to prompt the documentation of the three non-pharmacological interventions that were tried prior to the administration of the PRN psychotropic medication. The PRN medications for Residents #Band #C have been switched to that option and now have prompts.</p>	

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	<p>1/11/15 for the resident to receive Lorazepam (an anti-anxiety medication) 0.5 milligrams one tablet every six hours as needed for agitation.</p> <p>The 4/2015 Medication Administration Records were reviewed. The Lorazepam was administered on the following dates/times: 4/18/15 at 10:52 a.m. 4/29/15 at 2:38 p.m.</p> <p>The 4/2015 Nursing Notes were reviewed: An entry made on 4/18/15 at 10:53 a.m. indicated the resident was stating "shut that girl up" and getting annoyed with others. An entry made on 4/18/15 at 2:18 p.m. indicated the prn (as needed) medication was effective. There was no indication of any non pharmacological interventions attempted prior to the administration of the prn anti-anxiety medication.</p> <p>An entry made on 4/29/15 at 2:38 p.m. indicated the resident was very loud and asking to get out of here. There was no indication of any non-pharmacological interventions attempted prior to the administration of the prn anti-anxiety medication.</p> <p>The 5/2015 Medication Administration</p>		<p><b>2) How the facility identified other residents:</b></p> <p>Medication lists were reviewed for all residents to identify those with PRN psychotropic medication. All residents who were identified as having PRN psychotropic medications had their PRN orders switched to include the prompts for the three interventions.</p> <p><b>3) Measures put into place/ System changes:</b></p> <p>Point Click Care system was updated with an option to prompt the documentation of the three non-pharmacological interventions that were tried prior to the administration of the PRN psychotropic medication. All new PRN psychotropic medications will enter into that template which offers the prompts.</p> <p>Nurses and QMAs were in-serviced on this new template and the necessity of documenting the non-pharmacological interventions</p>	

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	<p>Records were reviewed. The Lorazepam was administered on the following dates/times: 5/4/15 at 4:04 p.m. 5/15/15 at 7:11 p.m. 5/26/15 at 7:05 p.m.</p> <p>The 5/2015 Nursing Notes were reviewed: An entry made on 5/4/15 at 4:04 p.m. indicated the resident was agitated and wanted to go home. An entry made on 5/4/15 at 8:45 p.m. indicated the prn medication was effective. There was no indication of any non-pharmacological interventions attempted prior to the administration of the prn anti-anxiety medication.</p> <p>An entry made on 5/15/15 at 7:11 p.m. indicated the resident was very anxious, yelled out to the Nurse he was going home now, and sitting by the door wanting to open it. Lorazepam was given prn. An entry on 5/15/15 at 11:01 p.m. indicated the prn was effective. There was no indication of any non-pharmacological interventions attempted prior to the administration of the prn anti-anxiety medication.</p> <p>An entry made on 5/26/15 at 7:05 p.m. indicated the resident was restless and made frequent statements of "I have to</p>		<p>that were completed.</p> <p><b>4) How the corrective actions will be monitored:</b></p> <p>An audit tool was devised to monitor the documentation and completion of the three interventions and the proper use of the template. Audits will be completed at least 3 times weekly, on all residents with PRN psychotropic medications, and monitored by DON or designee.</p> <p>The results of these audits will be reviewed in Quality Assurance Meeting monthly x3</p> <p>Months, then quarterly x1 for a total of 6 months.</p> <p><b>5) Date of compliance:</b></p> <p>06/12/15</p>		

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	<p>get out of here." An entry made on 5/26/15 at 9:14 p.m. indicated the prn was effective and the resident was resting in bed with no further behavioral issues. There was no indication of any non-pharmacological interventions attempted prior to the administration of the prn anti-anxiety medication.</p> <p>2. On 5/27/15 at 9:37 a.m., Resident #C was observed sitting in a wheel chair in the lounge area in front of the Nurses' Station. The resident was awake and alert and drinking a beverage.</p> <p>The record for Resident #C was reviewed on 5/27/15 at 11:50 a.m. The resident's diagnoses included, but were not limited to, dementia, altered mental status, and psychosis.</p> <p>Review of the 5/20/15 Minimum Data Set quarterly assessment indicated the resident's BIMS (Brief Interview for Mental Status) score was (3). A score of (3) indicated the resident's cognitive patterns for decision making were severely impaired. The assessment also indicated the resident received anti-anxiety medications (7) days during the (7) day reference period.</p> <p>The current Physician orders were reviewed. An order was written on</p>			

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	<p>4/3/15 for the resident to receive Lorazepam 0.5 milligrams by mouth every 12 hours as needed for agitation and anxiety.</p> <p>The 5/2015 Medication Administration Records were reviewed. The Lorazepam was administered on the following dates/times: 5/2/15 at 10:41 a.m. 5/6/15 at 10:04 a.m. 5/26/15 at 8:00 p.m.</p> <p>The 5/2015 Nursing Notes were reviewed: An entry made on 5/2/15 at 10:41 a.m. indicated the resident was insisting to go home and getting agitated. An entry made on 5/2/15 at 12:16 p.m. indicated the prn medication was effective and the resident was exit seeking less. There was no indication of any non-pharmacological interventions attempted prior to the administration of the prn anti-anxiety medication.</p> <p>An entry made on 5/6/15 at 10:04 a.m. indicated the resident was restless and trying to go outside. An entry made on 5/6/15 at 1:12 p.m. indicated the prn medication was effective. There was no indication of any non-pharmacological interventions attempted prior to the administration of the prn ant-anxiety</p>						

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	<p>medication.</p> <p>An entry made on 5/26/15 at 8:00 p.m. indicated the resident became agitated with the surroundings and was yelling out "I gotta go." An entry made on 5/26/15 at 9:16 p.m. indicated the resident had no further behavioral issues. There was no indication of any non-pharmacological interventions attempted prior to the administration of the prn anti-anxiety medication.</p> <p>When interviewed on 5/28/15 at 9:37 a.m., the Social Worker indicated non-pharmacological interventions should have been attempted and documented prior to the administration of prn anti-anxiety medications.</p> <p>The facility policy titled "Administration of PRN Medications Guideline" was reviewed on 5/28/15 at 11:20 a.m. There was no date on the policy. The Director of Nursing provided the policy and indicated the policy was current. The policy indicated non-pharmacological interventions were to be attempted and documented prior to the administration of prn medications.</p> <p>This Federal tag relates to Complaint IN00174099.</p>			
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	3.1-48(a)(4)				