STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 155479	(X2) MULTIPLE CONSTRUCTION A. BUILDING 00 B. WING	(X3) DATE SURVEY COMPLETED 04/28/2011
NAME OF PROVIDER OR SUPPLIER KINGSTON CARE CENTER OF FORT WAYNE		STREET ADDRESS, CITY, STATE, ZIP CODE 1010 W WASHINGTON CENTER ROAD FORT WAYNE, IN46825	

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F0000	This visit was for the Investigation of Complaint IN00088731. Complaint IN00088731 Substantiated, Federal/State deficiencies related to the allegations are cited at F 282 & F323. Survey dates: April 26, 27, 28, 2011 Facility number: 000522 Provider number: 155479 AIM number: 100267040 Survey team: Sheryl Roth RN TC Sue Brooker RD Census bed type: SNF: 38 SNF/NF: 66 Total: 104 Census payor type: Medicare: 42 Medicaid: 52 Other: 10 Total: 104 Sample: 4 These deficiencies also reflect state findings cited in accordance with 410 IAC	F0000	Enclosed is the plan of correction for the survey completed at Kingston Care Center on 4-28-2011. Please consider this the facility's credible allegation of compliance. However, submission of this response and the plan of correction is not a legal admission that a deficiency exists or that this Statement of Deficiency was correctly rendered, and is also not to be constructed as an admission of interest against the facility, the administrator or any employees, agent, or other individuals who draft or may be discussed in this response and plan of correction. In addition, preparation and submission of this plan of correction does not constitute an admission or agreement of any kind by the facility of the truth of any facts alleged or the correctness of any conclusions set forth in the allegation by the survey agency. Rather, this plan of correction has been prepared because the law requires us to prepare a plan of correction for the citations regardless of whether we agree with them.	

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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	16.2. Quality review completed 5-3-11 Cathy Emswiller RN			
F0282 SS=D	The services provided or arranged by the facility must be provided by qualified persons in accordance with each resident's written plan of care. Based on record review and interview, the facility failed to ensure alarms were in working condition at all times and functioning for 1 of 3 residents reviewed with falls in a sample of 3. (Resident #C) Findings include: Resident #C's record was reviewed on 4/26/11 at 10:50 a.m. The record indicated Resident #C's diagnoses included, but were not limited to, fractured vertebrae (back), osteoporosis and osteoarthritis. The "Admission Assessment and Interim Care Plan," for Resident	F0282	Resident #C no longer resides at the facility. An audit was completed on April 26th 2011 verifying that devices, including alarms, in use or in storage, are in proper working order. Education was provided to licensed nursing staff on May 11th and 12th 2011 and non-licensed nursing staff will be educated on May 17th 2011 on alarm use, including monitoring of placement and function. Daily audits of alarm placement and function will be completed times 30 days, weekly for 60 days and monthly for 90 days with corrections made and education provided to staff involved by the Director of Nursing Services and/or designee. Findings will be brought monthly to facility Continuous Quality Improvement meeting for review. Education and changes will be completed by May 27th 2011.	05/27/2011

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	#C, dated 2/12/11, indicated Resident #C was admitted to the facility on 2/12/11 and was a high risk for falls and that a bed alarm was being utilized. The "Initial Plan of Care" for at risk for falls, dated 2/12/11, indicated Resident #C had a history of falls and decreased safety awareness. Interventions put in place at that time included: frequent monitoring, bed sensor alarm, night light, chair sensor alarm, call light within reach, and bed in low position. The computerized bowel and bladder detail report, dated 2/12/11, indicated Resident #C was toileted, checked and/or changed at 7:56 p.m. The medication administration record for March 2011, indicated dates of 2/13/11 for the initiation of the following: "...check alarm function every shift and chart in caretracker...sensor alarms to bed and wheelchair...."			

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	The "Initial Plan of Care" for at risk for falls, dated 2/12/11 and updated 2/27/11, indicated an order was placed to check the functioning of the alarm every shift. The computerized bowel and bladder detail report, dated 2/13/11, indicated Resident #C was toileted, checked and/or changed at 5:33 a.m., 12:16 p.m., 6:56 p.m., and 8:37 p.m. The computerized bowel and bladder detail report, dated 2/14/11, indicated Resident #C was toileted, checked and/or changed at 3:33 a.m., 1:41 p.m., and 9:43 p.m. The computerized bowel and bladder detail report, dated 2/15/11, indicated Resident #C was toileted, checked and/or changed at 4:26 a.m., 12:24 p.m., 1:45 p.m., and 9:54 p.m. The computerized bowel and bladder detail report, dated 2/16/11,			

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	indicated Resident #C was toileted, checked and/or changed at 1:13 a.m. and 2:03 p.m. The computerized bowel and bladder detail report, dated 2/17/11, indicated Resident #C was toileted, checked and/or changed at 3:13 a.m., 9:16 a.m., 12:25 p.m., 8:38 p.m. The occupation therapy log indicated the resident was in therapy from 9:00 a.m. until 10:05 a.m. even thought CNA charting indicated the resident was being toileted at 9:16 a.m. The computerized bowel and bladder detail report, dated 2/18/11, indicated Resident #C was toileted, checked and/or changed at 1:34 a.m., 1:56 a.m., 12:36 p.m., 8:40 p.m. The computerized bowel and bladder detail report, dated 2/19/11, indicated Resident #C was toileted, checked and/or changed at 12:37 a.m., 1:22 p.m., 4:16 p.m., and 9:35 p.m. The physical therapy log			

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	indicated the resident was in therapy from 3:55 p.m. until 4:55 p.m. even though CNA charting indicated the resident was being toileted at 4:16 p.m. A "Minimum Data Set (MDS) Assessment," dated 2/19/11, indicated Resident #C had a fall within the last month prior to admission and also had a fracture. The care areas triggered for the MDS included falls and indicated the following: "...resident has some cognitive deficits...required supervision to walk in room...required extensive assistance with toileting...not steady...at risk for falls due to hx (history) of falls...occasional urine incontinence, weakness and receives antidepressant medications...she requires assist with care and mobility and is receiving PT (physical therapy) and OT (occupational therapy)...has sensor alarms to bed and w/c (wheelchair) due to poor safety awareness...			

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	The computerized bowel and bladder detail report, dated 2/20/11, indicated Resident #C was toileted, checked and/or changed at 12:36 a.m. - 12:40 a.m., 2:49 a.m., 12:34 p.m., 9:11 p.m. The computerized bowel and bladder detail report, dated 2/21/11, indicated Resident #C was toileted, checked and/or changed at 4:03 a.m., 10:41 a.m., and 4:30 p.m. The physical therapy log indicated the resident was in therapy from 9:55 a.m. until 10:55 a.m. even though CNA charting listed the resident as having been toileted at 10:41 a.m. The computerized bowel and bladder detail report, dated 2/22/11, indicated Resident #C was toileted, checked and/or changed at 4:36 a.m., 5:15 a.m., 11:41 a.m., and 8:44 p.m. The computerized bowel and bladder detail report, dated 2/23/11, indicated Resident #C was toileted,			

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	checked and/or changed at 1:07 a.m., 10:38 a.m., 1:13 p.m., 3:24 p.m., 3:50 p.m., and 7:20 p.m. The computerized bowel and bladder detail report, dated 2/24/11, indicated Resident #C was toileted, checked and/or changed at 3:57 a.m., 12:49 p.m., and 9:26 p.m. The computerized bowel and bladder detail report, dated 2/25/11, indicated Resident #C was toileted, checked and/or changed at 2:10 a.m., 12:03 p.m., 1:38 p.m., and 4:05 p.m. The computerized bowel and bladder detail report, dated 2/26/11, indicated Resident #C was toileted, checked and/or changed at 3:57 a.m., 4:48 a.m., 1:30 p.m., and 9:09 p.m. The computerized bowel and bladder detail report, dated 2/27/11, indicated Resident #C was toileted, checked and/or changed at 4:21 a.m., 9:51 a.m., and 8:07 p.m.			

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	The "Skilled Daily Nurses Note," dated 2/27/11 at 6:30 p.m., indicated Resident #C was found lying beside her bed. Visitors to the facility noticed the resident and notified staff at the nurse's station. Few details were listed to the note but did include "...alarm cord possibly tripped...alarm was functioning earlier in shift...." The "Incident/Accident/Concern" staff statement form, dated 2/27/11 by LPN #2, indicated while she was at the nurse's station, an unidentified staff member notified her and another nurse that Resident #C was on the floor (at 6:30 p.m.). The unidentified staff member stated another resident's family member walked by Resident #C's room and saw her lying on the floor. The resident was lying on the floor by the bed with her wheelchair against the wall. The area was free of clutter, the call light was on the bed and the alarm was on the bed with the cord ripped			

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	from the devise. The resident stated she was trying to transfer herself and that she had to use the restroom. The Director of Nursing (DON) was interviewed on 4/27/11 at 11:20 a.m. The DON indicated she was unaware of who the unidentified staff members listed in the report were and was unable to confirm where the alarm box was placed on the bed, whether it was in reach or out of reach of the resident. The "Therapy Post Fall Assessment," dated 2/27/11, and completed by physical therapy and speech therapy. The assessment indicated the therapist was recommending for staff to periodically check to make sure the patients alarms were on and working properly and for the resident to be placed at the nurses station when up. Further recommendations include recommending nursing staff to check on the resident often for toileting as she has irritable bowel			

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	syndrome and needs to go often. Also recommended were reminders to use the call light. The computerized bowel and bladder detail report, dated 2/28/11, indicated Resident #C was toileted, checked and/or changed at 4:32 a.m., 10:09 a.m., 8:44 p.m. A care plan for "Risk for Falls," dated 2/28/11 for Resident #C, included, but was not limited to, 1/2 siderails for bed mobility, have commonly used articles within easy reach, have call bell within reach and reinforce need to call for assistance, resident to wear proper and non slip footwear, assess for pain and/or infection, assist with transfers and ambulation as needed, encourage resident to use handrails or assist devices properly, ensure environment free of clutter and well lit, evaluate effectiveness and side effects of psychotropic drugs with physician, fall risk assessment to be completed on admission/quarterly/or if change in			

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	condition, gait belt to be used for all transfers and ambulation, therapy to provide treatment as ordered. The care plan for incontinence, dated 2/28/11, indicated staff were to assist Resident #C with toileting upon arising, before meals, at bedtime and as needed (PRN). No further updates were noted. The computerized bowel and bladder detail report, dated 3/1/11, indicated Resident #C was toileted, checked and/or changed at 5:38 a.m., 12:18 p.m., and 8:10 p.m. The computerized bowel and bladder detail report, dated 3/2/11, indicated Resident #C was toileted, checked and/or changed at 3:59 a.m., 12:17 p.m., and 6:52 p.m. The computerized bowel and bladder detail report, dated 3/3/11, indicated Resident #C was toileted, checked and/or changed at 4:03 a.m., 12:29 p.m., and 8:33 p.m.			

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	The computerized bowel and bladder detail report, dated 3/4/11, indicated Resident #C was toileted, checked and/or changed at 2:19 a.m., 6:06 a.m., 12:21 p.m., and 9:10 p.m. The MDS, dated 3/4/11, indicated Resident #C required extensive assistance of one person for walking and toileting and that the resident was not steady with balance during transitions and walking. The computerized bowel and bladder detail report, dated 3/5/11, indicated Resident #C was toileted, checked and/or changed at 1:20 a.m., 5:41 a.m., 10:21 a.m., 12:58 p.m., and 4:58 p.m. The computerized bowel and bladder detail report, dated 3/6/11, indicated Resident #C was toileted, checked and/or changed at 3:49 a.m., 8:03 a.m., 2:11 p.m., and 8:51 p.m. The physical therapy log			

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	indicated Resident #C was in therapy from 2:05 p.m. until 2:55 p.m. even though the CNA charting indicated the resident was being toilet at 2:11 p.m. The computerized bowel and bladder detail report, dated 3/7/11, indicated Resident #C was toileted, checked and/or changed at 4:09 a.m., 10:29 a.m., and 8:14 p.m. The computerized bowel and bladder detail report, dated 3/8/11, indicated Resident #C was toileted, checked and/or changed at 4:13 a.m., 12:29 p.m., and 9:15 p.m. The computerized bowel and bladder detail report, dated 3/9/11, indicated Resident #C was toileted, checked and/or changed at 4:11 a.m., 4:44 a.m., 9:01 a.m., and 7:35 p.m. The computerized bowel and bladder detail report, dated 3/10/11, indicated Resident #C was toileted, checked and/or changed at 4:15			

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	a.m., 12:47 p.m., and 7:47 p.m. The computerized bowel and bladder detail report, dated 3/11/11, indicated Resident #C was toileted, checked and/or changed at 3:59 a.m., 8:15 a.m., 9:16 a.m., 1:25 p.m., 3:20 p.m., and 8:00 p.m. The speech therapy log listed Resident #C as being in therapy from 3:10 p.m. until 3:55 p.m. even though the CNA documentation listed the resident as being toiled at 3:20 p.m. The "Skilled Daily Nurses Note," dated 3/11/11 at 5:30 a.m., indicated Resident #C's call light in reach but seldom uses. The note further indicated she sits at the side of the bed, setting of the alarm. The computerized bowel and bladder detail report, dated 3/12/11, indicated Resident #C was toileted, checked and/or changed at 4:01 a.m., 1:49 p.m., and 8:19 p.m. The computerized bowel and bladder detail report, dated 3/13/11,			

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	indicated Resident #C was toileted, checked and/or changed at 4:41 a.m., 1:54 p.m., and 8:38 p.m. The physical therapy log indicated the resident was in therapy from 1:05 p.m. until 2:05 p.m. even though CNA charting indicated the resident was being toileted at 1:54 p.m. The computerized bowel and bladder detail report, dated 3/14/11, indicated Resident #C was toileted, checked and/or changed at 3:49 a.m., 9:34 a.m., 1:22 p.m., and 8:21 p.m. The physical therapy log indicated the resident was in therapy from 9:15 a.m. until 10:15 a.m. even though the CNA charting listed the resident as being toiled at 9:34 a.m. The computerized bowel and bladder detail report, dated 3/15/11, indicated Resident #C was toileted, checked and/or changed at 5:03 a.m., 9:22 a.m., 12:29 p.m., and 8:25 p.m. The computerized bowel and			

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(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PERCEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETION DATE
	bladder detail report, dated 3/16/11, indicated Resident #C was toileted, checked and/or changed at 12:48 a.m., 1:37 a.m., 5:09 a.m., 10:45 a.m., 1:46 p.m., and 9:44 p.m. The computerized bowel and bladder detail report, dated 3/17/11, indicated Resident #C was toileted, checked and/or changed at 12:30 a.m., 10:45 a.m., 1:39 p.m., and 8:38 p.m. The "Skilled Daily Nurses Note," dated 3/17/11 at 6:00 p.m. for Resident #C, indicated the resident was observed up and ambulating without assistance, alarm sounded and CNA instructed resident to call for help. The resident stated "know I should call, but I forgot." The note further indicated the alarm was functioning and the call light was within reach. The "Fall Risk Assessment," dated 3/18/11 and 3/22/11, indicated Resident #C was a high fall risk.			

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	The computerized bowel and bladder detail report, dated 3/18/11, indicated Resident #C was toileted, checked and/or changed at 4:18 a.m., 9:42 a.m., 1:07 p.m., and 8:33 p.m. The "Skilled Daily Nurses Note," dated 3/18/11 at 2400 (midnight) by LPN #3, indicated Resident #C was found on the floor of her room at 9:40 a.m., with the alarms in place and functioning. The note further indicated a hematoma (swelling) was noted to the resident's forehead. The note for 3:30 p.m., indicated a new order was obtained for the resident's medications to be changed. The "Incident/Accident/Concern" staff statement form, dated 3/18/11 by LPN #3, indicated at 9:40 a.m., the nurse was called to Resident #C's room by a CNA. The alarms were sounding and the resident was lying on her back with a hematoma noted to the right side of her forehead. The resident stated she			

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	was attempting to get into the closet. CNA #4, who was present on 3/18/11, was interviewed on 4/27/11 at 11:10 a.m. She indicated she did not write any statements for the fall investigation. She indicated she was not aware of any times the resident messed with the alarm box but she did indicate the resident did have some confusion. The Incident/Accident/Concern" staff statement form, dated 3/18/11 by CNA #6, indicated she was talking with CNA #4 when she turned to go down the hallway when she heard an alarm sounding. CNA #6 from walking down one end of the hall while CNA #4 was approaching from the other end of the hall towards Resident #C's room. CNA #4 was the first to arrive at the room so CNA #6 then went to get the nurse. The "Nursing Post Fall Assessment," dated 3/18/11 by LPN #3, indicated Resident #C had been trying to get into her closet prior to			

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	the fall. A progress note by the nurse practitioner, dated 3/18/11, indicated the resident was seen for a recent fall, unclear of how she fell. The note further noted a lump and bruise to Resident #C's right forehead due to fall. The "Therapy Post Fall Assessment," dated 3/18/11, indicated the therapist recommendations included to place the resident at the nurses station when up throughout the day. The note further indicated the resident had pressure alarms and staff were to provide frequent checks and reminders to use the call light for assistance. The computerized bowel and bladder detail report, dated 3/19/11, indicated Resident #C was toileted, checked and/or changed at 5:41 a.m., 9:37 a.m., 1:06 p.m., 8:42 p.m., and 11:59 p.m.			

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	The computerized bowel and bladder detail report, dated 3/20/11, indicated Resident #C was toileted, checked and/or changed at 2:02 a.m., 8:15 a.m., 1:40 p.m., 7:23 p.m., and 9:28 p.m. The speech therapy log listed Resident #C as being in therapy from 1:36 p.m. until 2:06 p.m. even the CNA documentation listed the resident as being toileted at 1:40 p.m. The "Skilled Daily Nurses Note," dated 3/20/11 at 12:30 a.m., indicated Resident #C was alert and oriented but forgetful. The resident was able to make needs known but forgets to use call light at times. Shown call light with each interaction. The computerized bowel and bladder detail report, dated 3/21/11, indicated Resident #C was toileted, checked and/or changed at 6:01 a.m., 8:27 a.m., 1:12 p.m., 9:08 p.m., and 11:40 p.m. The computerized bowel and			

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	bladder detail report, dated 3/22/11, indicated Resident #C was toileted, checked and/or changed at 12:32 a.m. The "Skilled Daily Nurses Note," dated 3/22/11 at 2:30 a.m. by LPN #5, indicated Resident #C was found lying in the hallway by her room after a nurse heard a thud. The resident indicated she was attempting to go to the bathroom. The note further indicated the resident was last toilet by the CNA at 1:30 a.m. and the alarm were functioning at that time. A hematoma (swelling) was noted to her left forehead along with a small laceration with bleeding. An x-ray report, dated 3/22/11, indicated Resident #C was evaluated for complaints of left leg pain after a fall. The results indicated a pubic fracture and suspicious left hip. An "Admit/Discharge" form provided by the DON on 4/26/11 at			

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	10:20 a.m., indicated Resident #C was discharged from the facility on 3/22/11 to a local community hospital. The inservice for "Fall Prevention Guidelines" for 3/28/11 was provided by the DON on 4/27/11 at 2:10 p.m. The guidelines indicated "...use gait belts...make sure alarms are turned to the on position and functioning...make sure alarm wires are not showing...if resident messes with alarm move out of reach of resident...make sure the rooms are clutter free and well lit...do room rounds throughout your shift and take care of any fall hazards that are present...always make sure the resident has their call light within reach...make sure the resident has on non-skid footwear...make sure to toilet residents upon rising, before and after meals, at bedtime, and prn (as needed)...offer confused residents activities, snacks, reading materials, etc. to keep them busy...if confused residents are attempting to get up out of bed, do not leave tem			

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	unattended in their room, sit them close to nurses station so they can be closely watched...common extrinsic fall risk factors...room to far from nurses station...toileting needs of residents who need assist or incontinent residents...malfunctioning call system or alarms...fall risk prevention...reassessment with any acute illness, change in functional or cognitive status...documentation of specific interventions in interdisciplinary care plan...reassessment at regular intervals to determine if interventions are effective...team conference and root cause analysis of any falls, even non-injurious ones...." The most recent inservice prior to this for alarm management was dated 11/17/10 and 11/18/10. The current policy "Accident and Incidents - Investigating and Reporting," dated 2001, with a revision date of March 2004, was provided by the DON on 4/27/11 at 9:15 a.m. The policy indicated			

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	"...All accidents or incidents...must be investigated...the nurse supervisor/charge nurse and/or the department director or supervisor must conduct an immediate investigation of the accident or incident...the following data, as it may apply, must be included on the Accident Investigation Report Form...the name(s) of witnesses and their accounts of the accident or incident...." The undated manufacturers instruction for the pressure pad alarm, was provided by the DON on 4/27/11 at 9:15 a.m. The instructions indicated the following: "...place pad under shoulders to be alerted when resident sits up in bed...place pad under lower back/buttocks to be alerted when the resident vacates the bed...place monitor out of reach of the resident...make sure the resident cannot tamper with monitor or reach the 'reset' button...always check battery level before monitor is attached to			

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	patient...this product is not suitable for all individuals. Other devises may be required. This product is not a substitute for visual monitoring by caregiver. This device is to help augment caregivers comprehensive resident mobility management program. Test this device before each use...This device is not designed to replace good care giving practices including, but not limited to: a.) direct patient supervision b.) Adequate training of staff personnel for elopement c.) Testing of the system before each use...." The Physical Therapy Assistant #1 was interviewed on 4/27/11 at 10:30 a.m. During the interview, the Physical Therapy Assistant indicated the Resident #C's room was eighty (80) feet from the rehabilitation nurse's station and was 110 feet to the next closest nurse's station. This federal tag relates to complaint IN00088731			

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	3.1-35(g)(2)			
F0323 SS=G	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. Based on record review and interview, the facility failed to provide documentation of increased supervision and increased toileting as recommended by therapy and to ensure alarms were in working condition at all times and functioning for 1 of 3 residents reviewed with falls in a sample of 3. (Resident #C) This resulted in a fall with a fracture. (Resident #C) Findings include: Resident #C's record was reviewed on 4/26/11 at 10:50 a.m. The record indicated Resident #C's diagnoses included, but were not limited to, fractured vertebrae (back), osteoporosis and osteoarthritis.	F0323	Resident #C no longer resides at the facility. Fall risk status was reassessed for like residents and appropriate interventions evaluated and implemented. Assessments were completed by May 10, 2011. Licensed nursing staff have been educated on the facilities Fall Policy and Procedure, including but not limited to assessment of risk, appropriate interventions for fall management, and post fall procedures; completed May 11th and 12th of 2011. To monitor prevention protocols, daily rounds will be conducted by the DON and/or designee to ensure interventions are in place. Fall policy and procedure follow through is audited with the interdisciplinary team upon any occurrence of a fall. Results from audits will be corrected and education provided as needed with results brought monthly to facility Continuous Quality Improvement meeting. Education and changes will be completed by May 27, 2011.	05/27/2011

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	The "Admission Assessment and Interim Care Plan," for Resident #C, dated 2/12/11, indicated Resident #C was admitted to the facility on 2/12/11 and was a high risk for falls and that a bed alarm was being utilized. The "Initial Plan of Care" for at risk for falls, dated 2/12/11, indicated Resident #C had a history of falls and decreased safety awareness. Interventions put in place at that time included: frequent monitoring, bed sensor alarm, night light, chair sensor alarm, call light within reach, and bed in low position. The computerized bowel and bladder detail report, dated 2/12/11, indicated Resident #C was toileted, checked and/or changed at 7:56 p.m. The medication administration record for March 2011, indicated dates of 2/13/11 for the initiation of the following: "...check alarm function every shift and chart in			

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	caretracker...sensor alarms to bed and wheelchair...." The "Initial Plan of Care" for at risk for falls, dated 2/12/11 and updated 2/27/11, indicated an order was placed to check the functioning of the alarm every shift. The computerized bowel and bladder detail report, dated 2/13/11, indicated Resident #C was toileted, checked and/or changed at 5:33 a.m., 12:16 p.m., 6:56 p.m., and 8:37 p.m. The computerized bowel and bladder detail report, dated 2/14/11, indicated Resident #C was toileted, checked and/or changed at 3:33 a.m., 1:41 p.m., and 9:43 p.m. The computerized bowel and bladder detail report, dated 2/15/11, indicated Resident #C was toileted, checked and/or changed at 4:26 a.m., 12:24 p.m., 1:45 p.m., and 9:54 p.m.			

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	The computerized bowel and bladder detail report, dated 2/16/11, indicated Resident #C was toileted, checked and/or changed at 1:13 a.m. and 2:03 p.m. The computerized bowel and bladder detail report, dated 2/17/11, indicated Resident #C was toileted, checked and/or changed at 3:13 a.m., 9:16 a.m., 12:25 p.m., 8:38 p.m. The occupation therapy log indicated the resident was in therapy from 9:00 a.m. until 10:05 a.m. even thought CNA charting indicated the resident was being toileted at 9:16 a.m. The computerized bowel and bladder detail report, dated 2/18/11, indicated Resident #C was toileted, checked and/or changed at 1:34 a.m., 1:56 a.m., 12:36 p.m., 8:40 p.m. The computerized bowel and bladder detail report, dated 2/19/11, indicated Resident #C was toileted, checked and/or changed at 12:37			

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	a.m., 1:22 p.m., 4:16 p.m., and 9:35 p.m. The physical therapy log indicated the resident was in therapy from 3:55 p.m. until 4:55 p.m. even though CNA charting indicated the resident was being toileted at 4:16 p.m. A "Minimum Data Set (MDS) Assessment," dated 2/19/11, indicated Resident #C had a fall within the last month prior to admission and also had a fracture. The care areas triggered for the MDS included falls and indicated the following: "...resident has some cognitive deficits...required supervision to walk in room...required extensive assistance with toileting...not steady...at risk for falls due to hx (history) of falls...occasional urine incontinence, weakness and receives antidepressant medications...she requires assist with care and mobility and is receiving PT (physical therapy) and OT (occupational therapy)...has sensor alarms to bed and w/c			

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	(wheelchair) due to poor safety awareness... The computerized bowel and bladder detail report, dated 2/20/11, indicated Resident #C was toileted, checked and/or changed at 12:36 a.m. - 12:40 a.m., 2:49 a.m., 12:34 p.m., 9:11 p.m. The computerized bowel and bladder detail report, dated 2/21/11, indicated Resident #C was toileted, checked and/or changed at 4:03 a.m., 10:41 a.m., and 4:30 p.m. The physical therapy log indicated the resident was in therapy from 9:55 a.m. until 10:55 a.m. even though CNA charting listed the resident as having been toileted at 10:41 a.m. The computerized bowel and bladder detail report, dated 2/22/11, indicated Resident #C was toileted, checked and/or changed at 4:36 a.m., 5:15 a.m., 11:41 a.m., and 8:44 p.m. The computerized bowel and			

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	bladder detail report, dated 2/23/11, indicated Resident #C was toileted, checked and/or changed at 1:07 a.m., 10:38 a.m., 1:13 p.m., 3:24 p.m., 3:50 p.m., and 7:20 p.m. The computerized bowel and bladder detail report, dated 2/24/11, indicated Resident #C was toileted, checked and/or changed at 3:57 a.m., 12:49 p.m., and 9:26 p.m. The computerized bowel and bladder detail report, dated 2/25/11, indicated Resident #C was toileted, checked and/or changed at 2:10 a.m., 12:03 p.m., 1:38 p.m., and 4:05 p.m. The computerized bowel and bladder detail report, dated 2/26/11, indicated Resident #C was toileted, checked and/or changed at 3:57 a.m., 4:48 a.m., 1:30 p.m., and 9:09 p.m. The computerized bowel and bladder detail report, dated 2/27/11, indicated Resident #C was toileted,			

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	checked and/or changed at 4:21 a.m., 9:51 a.m., and 8:07 p.m. The "Skilled Daily Nurses Note," dated 2/27/11 at 6:30 p.m., indicated Resident #C was found lying beside her bed. Visitors to the facility noticed the resident and notified staff at the nurse's station. Few details were listed to the note but did include "...alarm cord possibly tripped...alarm was functioning earlier in shift...." The "Incident/Accident/Concern" staff statement form, dated 2/27/11 by LPN #2, indicated while she was at the nurse's station, an unidentified staff member notified her and another nurse that Resident #C was on the floor (at 6:30 p.m.). The unidentified staff member stated another resident's family member walked by Resident #C's room and saw her lying on the floor. The resident was lying on the floor by the bed with her wheelchair against the wall. The area was free of clutter, the call			

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	light was on the bed and the alarm was on the bed with the cord ripped from the devise. The resident stated she was trying to transfer herself and that she had to use the restroom. The Director of Nursing (DON) was interviewed on 4/27/11 at 11:20 a.m. The DON indicated she was unaware of who the unidentified staff members listed in the report were and was unable to confirm where the alarm box was placed on the bed, whether it was in reach or out of reach of the resident. The "Therapy Post Fall Assessment," dated 2/27/11, and completed by physical therapy and speech therapy. The assessment indicated the therapist was recommending for staff to periodically check to make sure the patients alarms were on and working properly and for the resident to be placed at the nurses station when up. Further recommendations include recommending nursing staff to			

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	check on the resident often for toileting as she has irritable bowel syndrome and needs to go often. Also recommended were reminders to use the call light. The computerized bowel and bladder detail report, dated 2/28/11, indicated Resident #C was toileted, checked and/or changed at 4:32 a.m., 10:09 a.m., 8:44 p.m. A care plan for "Risk for Falls," dated 2/28/11 for Resident #C, included, but was not limited to, 1/2 siderails for bed mobility, have commonly used articles within easy reach, have call bell within reach and reinforce need to call for assistance, resident to wear proper and non slip footwear, assess for pain and/or infection, assist with transfers and ambulation as needed, encourage resident to use handrails or assist devices properly, ensure environment free of clutter and well lit, evaluate effectiveness and side effects of psychotropic drugs with physician, fall risk assessment to be			

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	completed on admission/quarterly/or if change in condition, gait belt to be used for all transfers and ambulation, therapy to provide treatment as ordered. The care plan for incontinence, dated 2/28/11, indicated staff were to assist Resident #C with toileting upon arising, before meals, at bedtime and as needed (PRN). No further updates were noted. The computerized bowel and bladder detail report, dated 3/1/11, indicated Resident #C was toileted, checked and/or changed at 5:38 a.m., 12:18 p.m., and 8:10 p.m. The computerized bowel and bladder detail report, dated 3/2/11, indicated Resident #C was toileted, checked and/or changed at 3:59 a.m., 12:17 p.m., and 6:52 p.m. The computerized bowel and bladder detail report, dated 3/3/11, indicated Resident #C was toileted,			

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	checked and/or changed at 4:03 a.m., 12:29 p.m., and 8:33 p.m. The computerized bowel and bladder detail report, dated 3/4/11, indicated Resident #C was toileted, checked and/or changed at 2:19 a.m., 6:06 a.m., 12:21 p.m., and 9:10 p.m. The MDS, dated 3/4/11, indicated Resident #C required extensive assistance of one person for walking and toileting and that the resident was not steady with balance during transitions and walking. The computerized bowel and bladder detail report, dated 3/5/11, indicated Resident #C was toileted, checked and/or changed at 1:20 a.m., 5:41 a.m., 10:21 a.m., 12:58 p.m., and 4:58 p.m. The computerized bowel and bladder detail report, dated 3/6/11, indicated Resident #C was toileted, checked and/or changed at 3:49			

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	a.m., 8:03 a.m., 2:11 p.m., and 8:51 p.m. The physical therapy log indicated Resident #C was in therapy from 2:05 p.m. until 2:55 p.m. even though the CNA charting indicated the resident was being toilet at 2:11 p.m. The computerized bowel and bladder detail report, dated 3/7/11, indicated Resident #C was toileted, checked and/or changed at 4:09 a.m., 10:29 a.m., and 8:14 p.m. The computerized bowel and bladder detail report, dated 3/8/11, indicated Resident #C was toileted, checked and/or changed at 4:13 a.m., 12:29 p.m., and 9:15 p.m. The computerized bowel and bladder detail report, dated 3/9/11, indicated Resident #C was toileted, checked and/or changed at 4:11 a.m., 4:44 a.m., 9:01 a.m., and 7:35 p.m. The computerized bowel and bladder detail report, dated 3/10/11,			

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	indicated Resident #C was toileted, checked and/or changed at 4:15 a.m., 12:47 p.m., and 7:47 p.m. The computerized bowel and bladder detail report, dated 3/11/11, indicated Resident #C was toileted, checked and/or changed at 3:59 a.m., 8:15 a.m., 9:16 a.m., 1:25 p.m., 3:20 p.m., and 8:00 p.m. The speech therapy log listed Resident #C as being in therapy from 3:10 p.m. until 3:55 p.m. even though the CNA documentation listed the resident as being toiled at 3:20 p.m. The "Skilled Daily Nurses Note," dated 3/11/11 at 5:30 a.m., indicated Resident #C's call light in reach but seldom uses. The note further indicated she sits at the side of the bed, setting of the alarm. The computerized bowel and bladder detail report, dated 3/12/11, indicated Resident #C was toileted, checked and/or changed at 4:01 a.m., 1:49 p.m., and 8:19 p.m.			

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	The computerized bowel and bladder detail report, dated 3/13/11, indicated Resident #C was toileted, checked and/or changed at 4:41 a.m., 1:54 p.m., and 8:38 p.m. The physical therapy log indicated the resident was in therapy from 1:05 p.m. until 2:05 p.m. even though CNA charting indicated the resident was being toileted at 1:54 p.m. The computerized bowel and bladder detail report, dated 3/14/11, indicated Resident #C was toileted, checked and/or changed at 3:49 a.m., 9:34 a.m., 1:22 p.m., and 8:21 p.m. The physical therapy log indicated the resident was in therapy from 9:15 a.m. until 10:15 a.m. even though the CNA charting listed the resident as being toiled at 9:34 a.m. The computerized bowel and bladder detail report, dated 3/15/11, indicated Resident #C was toileted, checked and/or changed at 5:03 a.m., 9:22 a.m., 12:29 p.m., and 8:25 p.m.			

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	The computerized bowel and bladder detail report, dated 3/16/11, indicated Resident #C was toileted, checked and/or changed at 12:48 a.m., 1:37 a.m., 5:09 a.m., 10:45 a.m., 1:46 p.m., and 9:44 p.m. The computerized bowel and bladder detail report, dated 3/17/11, indicated Resident #C was toileted, checked and/or changed at 12:30 a.m., 10:45 a.m., 1:39 p.m., and 8:38 p.m. The "Skilled Daily Nurses Note," dated 3/17/11 at 6:00 p.m. for Resident #C, indicated the resident was observed up and ambulating without assistance, alarm sounded and CNA instructed resident to call for help. The resident stated "know I should call, but I forgot." The note further indicated the alarm was functioning and the call light was within reach. The "Fall Risk Assessment," dated 3/18/11 and 3/22/11, indicated			

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	Resident #C was a high fall risk. The computerized bowel and bladder detail report, dated 3/18/11, indicated Resident #C was toileted, checked and/or changed at 4:18 a.m., 9:42 a.m., 1:07 p.m., and 8:33 p.m. The "Skilled Daily Nurses Note," dated 3/18/11 at 2400 (midnight) by LPN #3, indicated Resident #C was found on the floor of her room at 9:40 a.m., with the alarms in place and functioning. The note further indicated a hematoma (swelling) was noted to the resident's forehead. The note for 3:30 p.m., indicated a new order was obtained for the resident's medications to be changed. The "Incident/Accident/Concern" staff statement form, dated 3/18/11 by LPN #3, indicated at 9:40 a.m., the nurse was called to Resident #C's room by a CNA. The alarms were sounding and the resident was lying on her back with a hematoma			

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	noted to the right side of her forehead. The resident stated she was attempting to get into the closet. CNA #4, who was present on 3/18/11, was interviewed on 4/27/11 at 11:10 a.m. She indicated she did not write any statements for the fall investigation. She indicated she was not aware of any times the resident messed with the alarm box but she did indicate the resident did have some confusion. The Incident/Accident/Concern" staff statement form, dated 3/18/11 by CNA #6, indicated she was talking with CNA #4 when she turned to go down the hallway when she heard an alarm sounding. CNA #6 from walking down one end of the hall while CNA #4 was approaching from the other end of the hall towards Resident #C's room. CNA #4 was the first to arrive at the room so CNA #6 then went to get the nurse. The "Nursing Post Fall Assessment," dated 3/18/11 by LPN			

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	#3, indicated Resident #C had been trying to get into her closet prior to the fall. A progress note by the nurse practitioner, dated 3/18/11, indicated the resident was seen for a recent fall, unclear of how she fell. The note further noted a lump and bruise to Resident #C's right forehead due to fall. The "Therapy Post Fall Assessment," dated 3/18/11, indicated the therapist recommendations included to place the resident at the nurses station when up throughout the day. The note further indicated the resident had pressure alarms and staff were to provide frequent checks and reminders to use the call light for assistance. The computerized bowel and bladder detail report, dated 3/19/11, indicated Resident #C was toileted, checked and/or changed at 5:41 a.m., 9:37 a.m., 1:06 p.m., 8:42			

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	p.m., and 11:59 p.m. The computerized bowel and bladder detail report, dated 3/20/11, indicated Resident #C was toileted, checked and/or changed at 2:02 a.m., 8:15 a.m., 1:40 p.m., 7:23 p.m., and 9:28 p.m. The speech therapy log listed Resident #C as being in therapy from 1:36 p.m. until 2:06 p.m. even the CNA documentation listed the resident as being toileted at 1:40 p.m. The "Skilled Daily Nurses Note," dated 3/20/11 at 12:30 a.m., indicated Resident #C was alert and oriented but forgetful. The resident was able to make needs known but forgets to use call light at times. Shown call light with each interaction. The computerized bowel and bladder detail report, dated 3/21/11, indicated Resident #C was toileted, checked and/or changed at 6:01 a.m., 8:27 a.m., 1:12 p.m., 9:08 p.m., and 11:40 p.m.			

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	The computerized bowel and bladder detail report, dated 3/22/11, indicated Resident #C was toileted, checked and/or changed at 12:32 a.m. The "Skilled Daily Nurses Note," dated 3/22/11 at 2:30 a.m. by LPN #5, indicated Resident #C was found lying in the hallway by her room after a nurse heard a thud. The resident indicated she was attempting to go to the bathroom. The note further indicated the resident was last toilet by the CNA at 1:30 a.m. and the alarm were functioning at that time. A hematoma (swelling) was noted to her left forehead along with a small laceration with bleeding. An x-ray report, dated 3/22/11, indicated Resident #C was evaluated for complaints of left leg pain after a fall. The results indicated a pubic fracture and suspicious left hip.			

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	An "Admit/Discharge" form provided by the DON on 4/26/11 at 10:20 a.m., indicated Resident #C was discharged from the facility on 3/22/11 to a local community hospital. The inservice for "Fall Prevention Guidelines" for 3/28/11 was provided by the DON on 4/27/11 at 2:10 p.m. The guidelines indicated "...use gait belts...make sure alarms are turned to the on position and functioning...make sure alarm wires are not showing...if resident messes with alarm move out of reach of resident...make sure the rooms are clutter free and well lit...do room rounds throughout your shift and take care of any fall hazards that are present...always make sure the resident has their call light within reach...make sure the resident has on non-skid footwear...make sure to toilet residents upon rising, before and after meals, at bedtime, and prn (as needed)...offer confused residents activities, snacks, reading materials, etc. to keep them busy...if			

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	confused residents are attempting to get up out of bed, do not leave tem unattended in their room, sit them close to nurses station so they can be closely watched...common extrinsic fall risk factors...room to far from nurses station...toileting needs of residents who need assist or incontinent residents...malfunctioning call system or alarms...fall risk prevention...reassessment with any acute illness, change in functional or cognitive status...documentation of specific interventions in interdisciplinary care plan...reassessment at regular intervals to determine if interventions are effective...team conference and root cause analysis of any falls, even non-injurious ones...." The most recent inservice prior to this for alarm management was dated 11/17/10 and 11/18/10. The current policy "Accident and Incidents - Investigating and Reporting," dated 2001, with a revision date of March 2004, was			

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(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PERCEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETION DATE
	provided by the DON on 4/27/11 at 9:15 a.m. The policy indicated "...All accidents or incidents...must be investigated...the nurse supervisor/charge nurse and/or the department director or supervisor must conduct an immediate investigation of the accident or incident...the following data, as it may apply, must be included on the Accident Investigation Report Form...the name(s) of witnesses and their accounts of the accident or incident...." The undated manufacturers instruction for the pressure pad alarm, was provided by the DON on 4/27/11 at 9:15 a.m. The instructions indicated the following: "...place pad under shoulders to be alerted when resident sits up in bed...place pad under lower back/buttocks to be alerted when the resident vacates the bed...place monitor out of reach of the resident...make sure the resident cannot tamper with monitor or reach the 'reset'			

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	button...always check battery level before monitor is attached to patient...this product is not suitable for all individuals. Other devises may be required. This product is not a substitute for visual monitoring by caregiver. This device is to help augment caregivers comprehensive resident mobility management program. Test this device before each use...This device is not designed to replace good care giving practices including, but not limited to: a.) direct patient supervision b.) Adequate training of staff personnel for elopement c.) Testing of the system before each use...." The Physical Therapy Assistant #1 was interviewed on 4/27/11 at 10:30 a.m. During the interview, the Physical Therapy Assistant indicated the Resident #C's room was eighty (80) feet from the rehabilitation nurse's station and was 110 feet to the next closest nurse's station.			

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	During a confidential interview on 4/26/11 at 10:12 a.m., the interviewee indicated Resident #C was now in another nursing facility and that since the fall has been declining. The interviewee further indicated due to the resident's health, she was not a surgical candidate therefore her pelvic fractures were not repaired. This federal tag relates to complaint IN00088731 3.1-45(a)(2)			