

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

PRINTED: 10/24/2022
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 155614	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____		(X3) DATE SURVEY COMPLETED C 10/17/2022
NAME OF PROVIDER OR SUPPLIER LINCOLN HILLS OF NEW ALBANY			STREET ADDRESS, CITY, STATE, ZIP CODE 326 COUNTRY CLUB DRIVE NEW ALBANY, IN 47150		
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F 000	<p>INITIAL COMMENTS</p> <p>This visit was for the Investigation of Complaints IN00391638, IN00389798 and IN00387110.</p> <p>Complaint IN00391638 - Substantiated. Federal/State deficiency related to the allegation is cited at F689.</p> <p>Complaint IN00389798 - Substantiated. No deficiencies related to the allegations are cited.</p> <p>Complaint IN00387110 - Substantiated. No deficiencies related to the allegations are cited.</p> <p>Survey date: October 17, 2022</p> <p>Facility number: 000321 Provider number: 155614 AIM number: 100286130</p> <p>Census Bed Type: SNF/NF: 116 SNF: 10 Total: 126</p> <p>Census Payor Type: Medicare: 20 Medicaid: 87 Other: 19 Total: 126</p> <p>This deficiency reflects State Findings cited in accordance with 410 IAC 16.2-3.1.</p> <p>Quality review completed on October 21, 2022.</p>	F 000			
F 689 SS=G	<p>Free of Accident Hazards/Supervision/Devices</p> <p>CFR(s): 483.25(d)(1)(2)</p>	F 689			

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 689	<p>Continued From page 1</p> <p>§483.25(d) Accidents. The facility must ensure that -</p> <p>§483.25(d)(1) The resident environment remains as free of accident hazards as is possible; and</p> <p>§483.25(d)(2) Each resident receives adequate supervision and assistance devices to prevent accidents. This REQUIREMENT is not met as evidenced by: Based on record review and interview, the facility failed obtain a physician's order and ensure safe usage of warm compresses which resulted in second-degree burns to a resident's back for 1 of 3 residents reviewed for accidents. (Resident C)</p> <p>Finding includes:</p> <p>The review of the 10/3/22 Incident Report to the State indicated Resident C requested a warm compress to be placed on her back for muscle aches. LPN (Licensed Practical Nurse) 2 placed the warm cloth on the resident's back. The resident reported no discomfort, but the area was slightly red later with small blisters.</p> <p>The clinical record for Resident C was reviewed on 10/17/22 at 9:30 a.m. The diagnoses included, but were not limited to, multiple sclerosis, burn of second degree of lower back, spinal stenosis and polyneuropathy.</p> <p>The Quarterly Minimum Data Set (MDS) assessment, dated 8/17/22, indicated the resident was cognitively intact; required extensive assist of 2 staff for all Activities of Daily Living, including bed mobility, and had impairment in functional range of motion of both lower extremities.</p>	F 689	Past noncompliance: no plan of correction required.		

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F 689	<p>Continued From page 2</p> <p>The nursing note, dated 10/2/22 at 2:22 a.m., indicated at 10:15 p.m. the resident had complained of back and neck pain. The PRN (as needed) pain medication was given with some relief. LPN 2 then applied warm compresses to the resident's neck and back for about 20 minutes for comfort. When the nurse went in to remove the compresses, the resident had asked to leave it in place for a little longer as she felt some relief. The nurse returned ten minutes later the nurse removed the compresses. At 1:00 a.m., LPN 2 went back into the resident's room and observed redness and blisters on the resident's back. The resident denied pain in the area, but was able to feel the nurse's hand on her back. The physician was notified and new orders were received to keep open to the air, use a lanolin, petrolatum ointment or some petroleum jelly; and a wound care consult.</p> <p>The nursing note, dated 10/2/22 at 3:00 p.m., indicated after the assessment of the resident's back, 2 rows of blisters were observed. The right one measured 22 centimeters (cm) long by 4 cm wide by 0.1 cm deep. The one on the left measured 18 cm long by 7 cm wide by 0.1 cm deep. One open area was 5 cm long by 7 cm wide, in the left row. The resident denied pain, but indicated the area was sore. The wound doctor was notified and new orders were received to cleanse the area with normal saline, apply calcium alginate and cover with ABD (abdominal) pads, and secure with paper tape.</p> <p>On 10/3/22, the resident developed a fever and a change in orientation, which resulted in the resident being transferred to the hospital until 10/7/22 with a diagnosis of sepsis due to urinary tract infection.</p>	F 689			

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F 689	<p>Continued From page 3</p> <p>On 10/7/22 at 8:42 p.m., the resident was transferred back to the facility. Her skin was assessed as warm, dry and intact, but continued with blister wounds to the middle of the back. The resident did complain of soreness to the area related to the transfer back in her bed.</p> <p>On 10/8/22, the wound physician completed a wound care assessment and evaluation of the resident's wounds. The evaluation indicated the following areas:</p> <p>Site 1 - Burn Wound of the Left Lateral Back Full Thickness which measured 1 cm long by 1 cm wide by 0.1 cm deep; moderate serous exudate and abnormal granulation was present within the wound margins.</p> <p>Site 2 - Burn Wound of the Left Medial Back Full Thickness, which measured 20 cm long by 4 cm wide by 0.1 cm deep; moderate serous exudate; thick adherent devitalized necrotic tissue and slough were present as well as granulation tissue.</p> <p>Site 3 - Burn Wound of the Right Back Full Thickness which measured 17 cm long by 3 cm wide by 0.1 cm deep; moderate serous exudate present and abnormal granulation were present within the wound margins.</p> <p>All areas required chemical cauterization with topical anesthetic of the abnormal tissue in order to facilitate healing. Treatment orders to all areas included Alginate Calcium dressing with ABD pad and tape.</p> <p>The Skin Condition Progress Note, dated 10/13/2022 at 11:00 p.m., indicated the burn</p>	F 689			

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F 689	<p>Continued From page 4 continued to heal.</p> <p>The nursing note, dated 10/17/22 at 10:14 a.m., indicated there was still redness to the site and blisters had popped with pain.</p> <p>The care plan, dated 10/2/22, indicated a problem of a burn wound of the left medial and right back. The interventions included, treatment per wound physician; nursing to monitor until healed; notify the provider of any changes.</p> <p>The written statement from LPN 2, dated 10/3/22, indicated at 10:15 p.m., she applied the warm compresses to the resident's neck and back for comfort measures for 20 minutes initially. She then went back to remove the compresses and the resident indicated she would like to keep them in place for a little longer because she was starting to feel better. The LPN returned 10 minutes later to remove the compresses. The resident's skin was assessed to have redness due to the compresses, but her skin was intact and dry. At 1:00 a.m. while providing care, the blisters were on the resident's back.</p> <p>During an interview with Resident C on 10/17/22 at 11:40 a.m., she indicated when she complained of neck pain and soreness, LPN 2 gave her a warm wash cloth for her neck. When she told the nurse it felt good and wished she had something for her back, she guessed the nurse went and got some towels, wet them, maybe placed them in the microwave and brought them to her. She indicated it felt good and was not too hot to her skin. She then forgot about them and so did the nurse and later blisters were noticed on her back.</p>	F 689			

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F 689	<p>Continued From page 5</p> <p>During an interview with the Director of Nursing (DON) on 10/17/22 at 12:05 p.m., she indicated the resident wanted something for soreness, so the nurse warmed up some wet wash cloths in the microwave, placed them in a bag and gave them to the resident. She was unsure how long the resident had them on her back. She indicated she spoke with the nurse after it happened and told her she really needed a physician's order for the compresses and about leaving the compresses in place when the resident refused to remove them the first time. LPN 2 was given a written warning for the incident with education on how to properly apply a warm compress even if the resident refused and to re-check the skin and offer to re-apply it. An all nursing in-service was given the next day 10/3/22 on "How to make a warm compress."</p> <p>This tag was related to past non-compliance as the facility took immediate steps for treatment; all nursing staff were re-educated on how to apply warm compresses on 10/3/22, and the LPN received disciplinary action on 10/3/22.</p> <p>This Federal tag was related to Complaint IN00391638.</p> <p>3.1-45(a)(1)</p>	F 689			