

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

PRINTED: 12/12/2022

FORM APPROVED

OMB NO. 0938-039

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER  155855		X2) MULTIPLE CONSTRUCTION A. BUILDING 00 B. WING		X3) DATE SURVEY COMPLETED 11/14/2022	
NAME OF PROVIDER OR SUPPLIER  MCGIVNEY HEALTH CARE CENTER				STREET ADDRESS, CITY, STATE, ZIP COD 2907 EAST SMOKY ROW CARMEL, IN 46033			
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCY (EACH DEFICIENCY MUST BE PRECEDED 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
F 0000  Bldg. 00	<p>This visit was for the Investigation of Complaint IN00393951.</p> <p>Complaint IN00393951 - Substantiated. Federal/state deficiencies related to the allegations are cited at F842.</p> <p>Survey date: November 14, 2022</p> <p>Facility number: 000545 Provider number: 155855 AIM number: 100267350</p> <p>Census Bed Type: SNF/NF: 32 Total: 32</p> <p>Census Payor Type: Medicaid: 32 Total: 32</p> <p>This deficiency reflects State Findings cited in accordance with 410 IAC 16.2-3.1.</p> <p>Quality review was completed on November 21, 2022.</p>			F 0000			
F 0842 SS=D Bldg. 00	<p>483.20(f)(5), 483.70(i)(1)-(5) Resident Records - Identifiable Information §483.20(f)(5) Resident-identifiable information. (i) A facility may not release information that is resident-identifiable to the public. (ii) The facility may release information that is resident-identifiable to an agent only in accordance with a contract under which the agent agrees not to use or disclose the information except to the extent the facility</p>						

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

Randall Shera

Executive Director

12/02/2022

Any deficiency statement ending with an asterisk (\*) denotes a deficiency which the institution may be excused from correcting providing it is determined other safeguards provide sufficient protection to the patients. (see instructions.) Except for nursing homes, the findings stated above are disclosable 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 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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	<p>itself is permitted to do so.</p> <p>§483.70(i) Medical records.</p> <p>§483.70(i)(1) In accordance with accepted professional standards and practices, the facility must maintain medical records on each resident that are-</p> <p>(i) Complete;</p> <p>(ii) Accurately documented;</p> <p>(iii) Readily accessible; and</p> <p>(iv) Systematically organized</p> <p>§483.70(i)(2) The facility must keep confidential all information contained in the resident's records, regardless of the form or storage method of the records, except when release is-</p> <p>(i) To the individual, or their resident representative where permitted by applicable law;</p> <p>(ii) Required by Law;</p> <p>(iii) For treatment, payment, or health care operations, as permitted by and in compliance with 45 CFR 164.506;</p> <p>(iv) For public health activities, reporting of abuse, neglect, or domestic violence, health oversight activities, judicial and administrative proceedings, law enforcement purposes, organ donation purposes, research purposes, or to coroners, medical examiners, funeral directors, and to avert a serious threat to health or safety as permitted by and in compliance with 45 CFR 164.512.</p> <p>§483.70(i)(3) The facility must safeguard medical record information against loss, destruction, or unauthorized use.</p> <p>§483.70(i)(4) Medical records must be retained for-</p>						

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	<p>(i) The period of time required by State law; or</p> <p>(ii) Five years from the date of discharge when there is no requirement in State law; or</p> <p>(iii) For a minor, 3 years after a resident reaches legal age under State law.</p> <p>§483.70(i)(5) The medical record must contain-</p> <p>(i) Sufficient information to identify the resident;</p> <p>(ii) A record of the resident's assessments;</p> <p>(iii) The comprehensive plan of care and services provided;</p> <p>(iv) The results of any preadmission screening and resident review evaluations and determinations conducted by the State;</p> <p>(v) Physician's, nurse's, and other licensed professional's progress notes; and</p> <p>(vi) Laboratory, radiology and other diagnostic services reports as required under §483.50.</p> <p>Based on interview and record review, the facility failed to ensure the Medication and Treatment Administration Records were documented after administration of medications and/or treatments for 3 of 3 residents reviewed for documentation in the medical record. (Resident B, C and D)</p> <p>Findings include:</p> <p>1. The record for Resident B was reviewed on 11/14/22 at 10:12 a.m. Diagnoses included, but were not limited to, acute kidney failure, type 2 diabetes, and hypertension (high blood pressure).</p> <p>The Medication and Treatment Administration Records (MAR/TAR) were reviewed. Missing documentation included, but was not limited to, the following on the August 2022 and September 2022 administration records.</p>			F 0842	<p>MHCC Plan of Correction 2022 F-842</p> <p>1. The facility failed to ensure the Medication and Treatment Administration Records were documented after administration of medications and/or treatments for 3 of 3 residents reviewed for documentation in the medical record.</p> <p>2. All residents have the potential to be affected by this deficient practice.</p> <p>3. McGivney Nurses and QMA was educated about documented after administration of medications and/or treatments.</p> <p>4. Unit Manager will check and track Nurses and QMA</p>		11/30/2022

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	<p>A physician's order, dated 03/16/22, indicated to give Aricept (a medication for confusion related to dementia) 10 milligrams (mg) daily at bedtime (2100/9:00 p.m.)</p> <p>There was missing documentation on 08/19/22, 08/24/22 and 08/25/22.</p> <p>A physician's order, dated 08/10/22, indicated to apply Dankin's solution (a topical antiseptic used to clean wounds) to the left ischium (pelvis) every day shift for stage four (4) pressure ulcer. Cleanse the area, pat it dry and pack the wound with gauze soaked in the Dankin's solution. Cover the area with calcium alginate (a dressing) and cover with a foam dressing.</p> <p>There was missing documentation on 08/10/22, 08/16/22 and 08/17/22.</p> <p>A physician's order, dated 01/19/21 and discontinued on 09/16/22, indicated to give Divalproex Sodium ER (a medication used to treat seizures) 250 mg at bedtime.</p> <p>There was missing documentation on 08/20/22, 08/24/22 and 08/25/22.</p> <p>A physician's order, dated 03/16/16, indicated to give Flomax (a medication used to treat the symptoms of an enlarged prostate) 0.4 mg in the evening.</p> <p>There was missing documentation on 08/19/22, 08/24/22 and 08/25/22.</p> <p>A physician's order, dated 01/18/20 and discontinued on 09/16/22, indicated to give Levemir (a long-acting insulin) 20 units at bedtime.</p>				documentation weekly for 3 months with 100% compliance and report back to the QAPI team.		

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	<p>There was missing documentation on 08/11/22, 08/19/22, 08/23/22, 08/24/22 and 08/25/22.</p> <p>A physician's order, dated 01/19/21, indicated to give two melatonin (a supplement) 3 mg (total dose 6 mg) at bedtime for insomnia.</p> <p>There was missing documentation on 08/19/22, 08/24/22 and 08/25/22.</p> <p>A physician's order, dated 07/17/22 and discontinued on 08/11/22, indicated to apply Santyl ointment (an ointment which removes dead tissue from wounds) once a day to the ischium.</p> <p>There was missing documentation on 08/01/22.</p> <p>A physician's order, dated 08/02/22 and discontinued on 08/11/22, indicated to apply silver pad to pack wound every day shift. Clean stage 4 wound to right ischium with normal saline, pat dry, apply skin prep to peri wound, pack wound with silver alginate, cover with an abdominal pad, and secure with tape.</p> <p>There was missing documentation on 08/03/22, 08/09/22 and 08/10/22.</p> <p>A physician's order, dated 03/16/16, indicated to give benztropine mesylate 2 mg two times a day for extrapyramidal side effects (drug-induced movement disorders).</p> <p>There was missing documentation on 08/19/22, 08/24/22 and 08/25/22.</p> <p>A physician's order, dated 09/18/18, indicated to give calcium with vitamin D 600-400 three times a day.</p>						

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	<p>There was missing documentation on 08/19/22, 08/24/22 and 08/25/22 for the 9:00 p.m., administration.</p> <p>A physician's order, dated 11/20/17, indicated to give Novolog (an insulin) 6 units with meals.</p> <p>There was missing documentation on 08/16/22 at 12:00 p.m., on 09/22/22 at 12:00 p.m., 09/23/22 at 8:00 a.m., and 12:00 p.m. and on 08/26/22 at 8:00 a.m., and 12:00 p.m.</p> <p>A physician's order, dated 03/16/16, indicated to check the blood sugar four times a day.</p> <p>There was missing documentation on 08/02/22 at 8:30 p.m., 08/11/22 at 8:30 p.m., 08/16/22 at 11:30 a.m., 08/20/22 at 6:30 a.m., and 08/23/22-08/25/22 at 8:30 p.m. There was also missing documentation on 09/19/22 at 6:30 a.m., 09/21/22 at 8:30 p.m., 09/22/22 at 11:30 a.m., and 8:30 p.m., 09/23/22 at 6:30 a.m., 09/26/22 at 8:30 p.m., and 09/29/22 at 11:30 a.m.</p> <p>A physician's order, dated 01/22/21, indicated to administer Aspart (an insulin) per sliding scale (based on blood sugar result) before meals and at bedtime.</p> <p>There was missing documentation on 08/20/22 at 9:00 p.m., 08/11/22 at 9:00 p.m., 08/16/22 at 11:30 a.m., 08/19/22 at 9:00 p.m., and 08/23/22-08/25/22 at 9:00 p.m. There was also missing documentation on 09/21/22 at 9:00 p.m., 09/22/22 at 7:30 a.m., 11:30 a.m. and 9:00 p.m., 09/23/22 at 7:30 a.m., 11:30 a.m., 09/26/22 at 7:30 a.m., 11:30 a.m., 9:00 p.m., and on 08/29/22 at 7:30 a.m., and 11:30 a.m.</p> <p>2. The record for Resident C was reviewed on</p>						

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	<p>11/14/22 at 10:55 a.m. Diagnoses included, but were not limited to, dementia, psychotic disturbance, and muscle weakness.</p> <p>The Medication and Treatment Administration Records were reviewed for November 2022.</p> <p>A physician's order, dated 10/26/22, indicated to cleanse healing stage 2 (pressure wound) to right posterior thigh with normal saline, pat dry and apply calmoseptine to peri (the area around) wound and cover with dressing daily until healed every day shift.</p> <p>There was missing documentation on 11/02/22 and 11/11/22.</p> <p>A physician's order, dated 10/26/22, indicated to cleanse skin area to right upper arm with normal saline, pat dry and apply Duoderm (a waterproof barrier dressing) every three (3) days until healed.</p> <p>There was missing documentation on 11/02/22 and 11/11/22.</p> <p>A physician's order, dated 11/05/22, indicated to have a sheep skin brace on right hand at all times. May remove the brace for hygiene.</p> <p>There was missing documentation on 11/08/22 for the night shift.</p> <p>3. The record for Resident D was reviewed on 11/14/22 at 11:07 a.m. Diagnoses included, but were not limited to, hypertension (high blood pressure) diabetes and hyperlipidemia (high cholesterol).</p> <p>The Medication and Treatment Administration Records were reviewed. Missing documentation</p>						

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	<p>included, but was not limited to, the following on the September 2022 and October 2022 administration records.</p> <p>A physician's order, dated 09/21/22, indicated to give Crestor (a medication for high cholesterol) 40 milligrams (mg) at 9:00 p.m.</p> <p>There was missing documentation on 09/02/22 at 9:00 p.m., on 10/08/22, 10/19/22 and 10/20/22 at 9:00 p.m.</p> <p>A physician's order, dated 03/08/16, indicated to give Depakote (a medication for seizures) Extended Release (ER)/24 hours, 250 mg at bedtime 9:00 p.m.</p> <p>There was missing documentation on 09/02/2022 at 9:00 p.m., on 10/08/22, 10/19/22 and 10/20/22 at 9:00 p.m.</p> <p>A physician's order, dated 03/08/22, indicated to give Depakote ER/24-hour 500 mg at 9:00 p.m.</p> <p>There was missing documentation on 09/02/2022 at 9:00 p.m., on 10/08/22, 10/19/22 and 10/20/22 at 9:00 p.m.</p> <p>A physician's order, dated 07/06/22, indicated to give Detemir (insulin) 30 units at 9:00 p.m.</p> <p>There was missing documentation on 09/02/22, 09/03/22, 09/20/22, 09/21/22 and 09/30/22 for the 9:00 p.m. administration and on the October MAR/TAR on 10/1/22, 10/6/22, 10/11/22, 10/14/22, 10/15/22, 10/16/22, 10/21/22 and 10/30/22 for the 9:00 p.m., administration.</p> <p>A physician's order, dated 08/01/2022, indicated to give Metoprolol (a medication for high blood</p>						



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	<p>pressure) 25 mg. Directions were to give one half tablet (12.5 mg) twice a day.</p> <p>There was missing documentation on 09/02/22 at 5:00 p.m., 09/03/22 at 08:00 a.m., and 09/23/22 at 5:00 p.m.</p> <p>A physician's order, dated 09/25/22, indicated to give Norco (a narcotic pain medication) 5-325 mg twice a day.</p> <p>There was missing documentation on 09/02/22 at 6:00 p.m., and 09/03/22 at 09:00 a.m.</p> <p>A physician's order, dated 09/25/20, indicated to give Gabapentin (a medication for pain due to neuropathy) 800 mg three times a day.</p> <p>There was missing documentation on 09/02/22 at 9:00 p.m., 09/20/22 at 2:00 p.m., 09/23/22 at 2:00 p.m., 09/25/22 at 2:00 p.m., and 10/08/22 at 9:00 p.m.</p> <p>A physician's order, dated 12/21/17, indicated to check the blood sugar (accucheck) before meals and at bedtime.</p> <p>There was missing documentation on the MAR/TAR for 09/02/22 at 9:00 p.m., 09/03/22 at 6:30 a.m., 11:30 a.m. and 9:00 p.m. There was no documentation on the MAR/TAR for 09/04/22 at 6:30 a.m., 09/07/22 at 6:30 a.m., 09/19/22 at 6:30 a.m., 09/21/22 at 9:00 p.m., 09/22/22 at 9:00 p.m., 09/23/22 at 6:30 a.m., 11:30 a.m. and 4:30 p.m., and on 09/30/22 at 9:00 p.m. There was also missing documentation on the MAR/TAR for 10/01/22 at 9:00 p.m., 10/03/22 at 6:30 a.m., 10/06/22 at 9:00 p.m., 10/08/22 at 9:00 p.m., 10/11/22 at 9:00 p.m., 10/12/22 at 6:30 a.m., 10/14 to 10/16/22 at 9:00 p.m., 10/19/22 at 6:30 a.m., 10/20/22 at 9:00 p.m.,</p>						

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	<p>10/21-10/22/22 at 6:30 a.m., 10/27/22 at 6:30 a.m. and 10/30/22 at 9:00 p.m.</p> <p>A physician's order, dated 07/06/22, indicated to give Novolog (an insulin) per sliding scale (based on the blood sugar result) before meals and at bedtime.</p> <p>There was missing documentation on the MAR/TAR for 09/02/22 at 9:00 p.m., 09/03/22 at 7:30 a.m., 11:30 a.m. and 9:00 p.m. There was no documentation on the MAR/TAR for 09/21/22 at 9:00 p.m., 09/22/22 at 9:00 p.m., 09/23/22 at 11:30 a.m. and 4:30 p.m. There was also missing documentation on 09/30/22 at 9:00 p.m. There was missing documentation on the MAR/TAR for 10/01/22 at 9:00 p.m., 10/06/22 at 9:00 p.m., 10/08/22 at 9:00 p.m., 10/11/22 at 9:00 p.m., 10/14 to 10/16/22 at 9:00 p.m., 10/17/22 at 7:30 a.m., 10/20/22 at 9:00 p.m. and 10/30/22 at 9:00 p.m.</p> <p>During an interview, on 11/14/22 at 12:30 p.m., the Executive Director indicated Minimum Data Set (MDS) nurse 1 and LPN 2 were to check the Medication and Treatment Records (MAR/TAR) to ensure they had been documented and the documentation was accurate.</p> <p>During an interview, on 11/14/22 at 12:32 p.m., LPN 2 indicated she was responsible for checking the MAR/TAR daily, but "you know how that goes".</p> <p>During an interview, on 11/14/22 at 12:33 p.m., MDS nurse 1 indicated she did check the MAR/TAR for documentation quarterly when she did the Minimum Data Set Assessments.</p> <p>During an interview, on 11/14/22 at 12:35 p.m., LPN 3 indicated when medications were</p>						

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NAME OF PROVIDER OR SUPPLIER  MCGIVNEY HEALTH CARE CENTER				STREET ADDRESS, CITY, STATE, ZIP COD 2907 EAST SMOKY ROW CARMEL, IN 46033			
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIE (EACH DEFICIENCY MUST BE PRECEDED 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
	<p>administered and treatments were completed, it was to be signed off on the MAR/TAR upon completion.</p> <p>A current facility policy, titled "Charting and Documentation," dated 06/17/19 and provided by the Executive Director on 11/14/22 at 12:31 p.m., indicated "...The following information is to be documented in the resident medical record...Medication administered...Treatments or services performed...."</p> <p>This Federal tag relates to Complaint IN00393951.</p> <p>3.1-50(a)(1)</p>						