

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 155334	X2) MULTIPLE CONSTRUCTION A. BUILDING 00 B. WING _____	X3) DATE SURVEY COMPLETED 04/28/2017
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NAME OF PROVIDER OR SUPPLIER KINDRED TRANSITIONAL CARE AND REHAB-WILDWOOD	STREET ADDRESS, CITY, STATE, ZIP CODE 7301 E 16TH ST INDIANAPOLIS, IN 46219
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F 0000 Bldg. 00	<p>This visit was for the Investigation of Complaint IN00228037.</p> <p>Complaint IN00228037 - Substantiated. Federal/State deficiencies related to the allegations are cited at F312.</p> <p>Survey dates: April 27th and 28th, 2017</p> <p>Facility number: 000227 Provider number: 155334 AIM number: 100267520</p> <p>Census bed type: SNF/NF: 142 Total: 142</p> <p>Census payor type: Medicare: 25 Medicaid: 107 Other: 10 Total: 142</p> <p>This deficiency reflects State findings cited in accordance with 410 IAC 16.2-3.1.</p> <p>Quality review completed on May 1, 2017</p>	F 0000	<p>Please accept this plan of correction for the complaint survey completed 4/28/2017 as our credible allegation of compliance. The facility would also like to request a paper compliance desk review for this survey.</p> <p>Respectfully Linda Vest E.D.</p>	
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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 0312 SS=D Bldg. 00	<p>483.24(a)(2) ADL CARE PROVIDED FOR DEPENDENT RESIDENTS</p> <p>(a)(2) A resident who is unable to carry out activities of daily living receives the necessary services to maintain good nutrition, grooming, and personal and oral hygiene.</p> <p>Based on observation, interview, and record review, the facility failed to provide hair care for 1 of 3 residents reviewed for activities of daily living. (Resident B)</p> <p>Findings include:</p> <p>Resident B's clinical record was reviewed on 4/28/17 at 10:30 a.m. The diagnoses included, but were not limited to, osteoarthritis and multiple sclerosis.</p> <p>The Admission Minimum Data Set (MDS) assessment, dated 4/3/17, indicated a Brief Interview for Mental Status (BIMS) score of 14/15 indicating Resident B is cognitively intact. That same MDS indicated the following, "...Section G-Functional Status...Personal Hygiene...how resident maintains personal hygiene, including combing hair, brushing teeth, shaving, applying makeup, washing/drying face and hands (excludes baths and showers)...Total dependence...one person physical</p>	F 0312	<p>1. Resident B was not harmed by the alleged deficient practice. Resident B did have her hair washed and styled the way she preferred. Resident B was asked her preference on grooming and styling; resident B was offered the services of the onsite beautician however she declined that service at this time. Resident B's careplan has been updated to reflect her preferences.</p> <p>2. Other dependent residents/families that have the potential to be affected have been interviewed and all grooming preferences have been updated in resident careplans.</p> <p>3. Upon admission all residents will be asked their preferences in regards to showers, hygiene, grooming, and specifically to hair care. All residents will have their preferences updated no less than quarterly at the careplan conference. These preferences will be updated in POC, careplans, and CNA assignment sheets.</p> <p>4. The DNS/UM/Designee will continue to interview 10 random residents monthly in regards to</p>	05/01/2017

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	<p>assist...Bathing...Total dependence...one person physical assist...."</p> <p>An observation was conducted of Resident B on 4/28/17 at 11:00 a.m. Certified Nursing Assistant (CNA) 2 was observed performing a bed bath for Resident B. CNA 2 proceeded to provide perineal care and apply a clean brief to Resident B. CNA 2 then was observed emptying the water from the wash basin from Resident B's bedside table. CNA 2 proceeded to leave Resident B's room without combing or washing Resident B's hair.</p> <p>An interview was conducted with Resident B on 4/28/17 at 11:10 a.m. She indicated the nursing staff hasn't washed her hair for a while. Her hair was observed in a ponytail and Resident B stated her hair has been in a ponytail for 3 months. She further indicated the CNAs have told her they do not have time to do her hair.</p> <p>Forms titled "Bathing Sheet" was provided by the Director of Nursing Services (DNS) on 4/28/17 at 2:30 p.m. The forms indicated the "Shampoo" section on the form was not completed on the following days:</p> <p>3/3/17,</p>		grooming and ADL's. All new admissions will be audited by DNS/Designee within 48-72 hours of admission to ensure residents' preferences have been updated. These audits will be reviewed monthly at PI on going until 100% compliance is met.				

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	<p>3/7/17, 3/10/17, 3/21/17, 3/28/17, 3/31/17, 4/4/17, 4/11/17, 4/14/17, 4/18/17, 4/25/17, & 4/28/17.</p> <p>On 4/28/17 at 2:50 p.m., an interview was conducted with the DNS. She indicated she expects nursing staff to fill out the shower sheets completely and/or mark "refused" under that column if they only refuse part of the shower or bed bath.</p> <p>A policy titled "Activities of Daily Living", release date 9/27/16, was provided by the DNS on 4/28/17 at 4:38 p.m. The policy indicated the following, "...Procedure...1. Activities of daily living include the patient's ability to:...a. Bathe, dress, and groom...3. Patients preferences are respected and reasonable accommodations are made...."</p> <p>This federal tag relates to Complaint IN00228037.</p> <p>3.1-38(a)(3)(B)</p>						

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