

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

PRINTED: 10/12/2011
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 185178	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____		(X3) DATE SURVEY COMPLETED C 09/09/2011
NAME OF PROVIDER OR SUPPLIER CHRISTOPHER EAST HEALTH CARE CENTER			STREET ADDRESS, CITY, STATE, ZIP CODE 4200 BROWNS LANE LOUISVILLE, KY 40220		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (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 000	INITIAL COMMENTS	F 000			
F 309	<p>483.25 PROVIDE CARE/SERVICES FOR HIGHEST WELL BEING</p> <p>Each resident must receive and the facility must provide the necessary care and services to attain or maintain the highest practicable physical, mental, and psychosocial well-being, in accordance with the comprehensive assessment and plan of care.</p> <p>This REQUIREMENT is not met as evidenced by: Based on observation, interview, record review and review of the facility's Skin Practice Guide, it was determined the facility failed to effectively maintain the highest practicable physical well-being for one (1) resident (#2) of the three (3) sampled and three (3) un-sampled residents. The facility failed to provide a quality skin assessment which depicted an accurate account of Resident #2's skin. The facility failed to ensure the CNA Patient Information Worksheet was accurate for Resident #2. The facility failed to obtain and transcribe physician orders for Calazime paste with zinc oxide. The facility failed to follow a physician's order for oxygen and Granulex for Resident #2.</p> <p>Review of the facility's Skin Practice Guide revealed non-pressure related ulcers or other skin alterations, e.g., skin tears, surgical</p>	F 309			

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 309	<p>Continued From page 1</p> <p>incisions, etc are identified; a Skin Alteration Record is initiated as clinically indicated. The facility's Skin Practice Guide stated if the patient did not have a skin alteration, but had risk factors for skin breakdown the initial plan of care may be initiated. After completion of the initial plan of care, the Patient Information Worksheet is initiated.</p> <p>Review of the facility's policy titled, Physician Orders, dated 8/2009 revealed a physician telephone order form is completed for each telephone or verbal order received. The following information is present on each telephone order form: date and time of order and signature of qualified professional receiving the order. The facility's policy Physician Order Recaps or Renewal revealed, recaps reflect orders received during the month including additions, discontinuations and modifications to medications or treatments. The Medical Administration Record (MAR) and Treatment Administration Record (TAR) for the new month are compared to the current order recapitulation and updated as necessary to show orders current as of the first of the month.</p> <p>Observation of Resident #2's skin assessment, on 09/07/11 at 2:30 PM, revealed the skin was red with a pink residue on the bilateral lower buttocks area. Further observation during the skin assessment revealed a tube of Calazime paste in the room. Observation, on 09/07/11 at 3:00 PM, revealed Resident #2 oxygen flow rate at 1.5 Liters per nasal cannula.</p> <p>Interview with CNA #1, on 09/07/11 at 2:30 PM, revealed she had been trained on skin care. She</p>	F 309			

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F 309	<p>Continued From page 2</p> <p>stated the CNA Worksheet was provided at the beginning of the shift, detailing the care of each resident. The documentation of care from the CNA Worksheet was placed in a kiosk computer.</p> <p>Interview with CNA #2, on 09/07/11 at 2:35 PM, revealed she had also been trained on skin care. The CNA Worksheet was provided at the beginning of each shift, identifying the care needs of each resident. The care provided from the CNA Worksheet was then placed in a kiosk computer by the CNA.</p> <p>Interview with LPN #1, on 09/09/11 at 1:30 PM, revealed she had been trained on signs and symptoms of skin breakdown. She stated early interventions for residents at risk for pressure are turning, positioning and the use of a barrier cream. She further stated not following early intervention could increase the risk of pressure. She stated if the barrier cream was used for skin breakdown, a physician's order must be obtained and documented on either the MAR or TAR. She stated the nurse was responsible for the accuracy of the oxygen setting accordance with the physician order.</p> <p>Interview with LPN #2, on 09/09/11 at 1:55 PM, revealed she had also been trained on signs and symptoms of skin breakdown. Early interventions for residents at risk for pressure are turning, positioning and a barrier cream. If staff do not follow early interventions it could increase the resident's risk of pressure. In addition, if a barrier cream is used to prevent or treat skin breakdown, a physician's order must be obtained and documented on either the MAR or TAR. She further stated the nurse was responsible for the</p>	F 309			

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F 309	<p>Continued From page 3</p> <p>accurate setting of the oxygen based on the physician's order.</p> <p>Interview with the Unit Manager (DCD), on 09/09/11 at 2:00 PM, revealed staff are trained on skin care and skin breakdown. She stated skin changes are documented by the CNAs on a shower sheet or skin worksheet. The CNAs are provided a worksheet daily as a tool to ensure the residents receive accurate care. If the CNA worksheet was not accurate it would affect the care of the residents. Signs of a stage one pressure are red or discolored intact skin. She indicated turning, repositioning and a barrier cream are early interventions in the prevention of pressure sores. A physician's order was required for Calizimine ointment and Granulex. She stated the nurse was responsible to transcribe the physician orders to the MAR or TAR.</p> <p>Interview with the Director of Nursing (DON), on 09/09/11 at 3:30 PM, revealed staff are trained on skin care, and whom to report skin changes to. The CNA worksheet was to guide the CNA on the care needs for each resident. Skin alteration could be caused from diarrhea, friction, pressure and/or urine. The wound care team staged pressure ulcers and turning was an early intervention to prevent skin breakdown. She also stated the nurse or desk nurse was responsible for transcribing the physician's order to the MAR or TAR. In addition, Calizime ointment and Granulex would require a physician's order.</p> <p>Review of the admitting physician orders, dated 08/30/11, revealed Resident #2 was the facility admitted the resident with diagnoses of Congestive Heart Failure, Fibromyalgia, and</p>	F 309			

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F 309	Continued From page 4 Chronic Back Pain secondary to Degenerative Disk Disease and Fracture Neck Femur. The admitting physician orders revealed oxygen at 4 liters via nasal cannula and granulex on bilateral heels twice a day. Review of the skin section of the Nursing Admission Evaluation, dated 08/31/11, revealed the facility assessed the resident as immobile and at risk for skin breakdown; the resident would be on a turning schedule. Review of the Skin Worksheet on 08/31/11 by DCD and the DON revealed Resident #2's lower left buttocks skin was reddened and blanchable. Further review of the record revealed an undated, unsigned MD order for heel lift boots and to apply a barrier cream. Review of the Patient Information Worksheet dated 09/07/11 revealed Resident #2 without a turning schedule. Review of the Intervention/Task for September 2011 revealed Resident #2 was not turned every two (2) hours as ordered. Review of the TARs revealed no documented TAR for the month of August 2011 and the September TAR revealed oxygen at four (4) liters, Granulex on bilateral heels and Turning and Repositioned every two (2) hours was not implemented on 09/08/11.	F 309			