

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

PRINTED: 07/12/2012
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 145928	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____		(X3) DATE SURVEY COMPLETED C 03/13/2012
NAME OF PROVIDER OR SUPPLIER NORTH CHURCH NURSING & REHAB			STREET ADDRESS, CITY, STATE, ZIP CODE 1021 NORTH CHURCH STREET JACKSONVILLE, IL 62650		
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F 354	Continued From page 9 since that time." E2 also stated, " I got mixed up and thought E5 RN was on the schedule for the weekend of 2/25 and 2/26 2012. I did not even think of going in on that weekend."	F 354			
F9999	2. The Facility Data Sheet dated 3/7/12 documented the facility has a census of 87 residents. FINAL OBSERVATIONS LICENSURE VIOLATIONS 300.1010h) 300.1210a) 300.1210b) 300.1210c) 300.1210d)1)2)3) 300.1220a) 300.1220a)1)2) 300.1220b) 300.1220b)1)2) 300.1620a) 300.1630a)2) 300.1630d) 300.3240a) 300.3240b) 300.3240c) 300.3240d) Section 300.1010h) Medical Care Policies h) The facility shall notify the resident's physician of any accident, injury, or significant change in a resident's condition that threatens the health, safety or welfare of a resident, including, but not	F9999			

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F9999	<p>Continued From page 10</p> <p>limited to, the presence of incipient or manifest decubitus ulcers or a weight loss or gain of five percent or more within a period of 30 days. The facility shall obtain and record the physician's plan of care for the care or treatment of such accident, injury or change in condition at the time of notification.</p> <p>Section 300.1210 General Requirements for Nursing and Personal Care</p> <p>a) Comprehensive Resident Care Plan. A facility, with the participation of the resident and the resident's guardian or representative, as applicable, must develop and implement a comprehensive care plan for each resident that includes measurable objectives and timetables to meet the resident's medical, nursing, and mental and psychosocial needs that are identified in the resident's comprehensive assessment, which allow the resident to attain or maintain the highest practicable level of independent functioning, and provide for discharge planning to the least restrictive setting based on the resident's care needs. The assessment shall be developed with the active participation of the resident and the resident's guardian or representative, as applicable. (Section 3-202.2a of the Act)</p> <p>b) The facility shall provide the necessary care and services to attain or maintain the highest practicable physical, mental, and psychological well-being of the resident, in accordance with each resident's comprehensive resident care plan. Adequate and properly supervised nursing care and personal care shall be provided to each resident to meet the total nursing and personal care needs of the resident.</p>	F9999			

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F9999	<p>Continued From page 11</p> <p>c) Each direct care-giving staff shall review and be knowledgeable about his or her residents' respective resident care plan.</p> <p>d) Pursuant to subsection (a), general nursing care shall include, at a minimum, the following and shall be practiced on a 24-hour, seven-day-a-week basis:</p> <p>1) Medications, including oral, rectal, hypodermic, intravenous and intramuscular, shall be properly administered.</p> <p>2) All treatments and procedures shall be administered as ordered by the physician.</p> <p>3) Objective observations of changes in a resident's condition, including mental and emotional changes, as a means for analyzing and determining care required and the need for further medical evaluation and treatment shall be made by nursing staff and recorded in the resident's medical record.</p> <p>Section 300.1220 Supervision of Nursing Services</p> <p>a) Each facility shall have a director of nursing services (DON) who shall be a registered nurse.</p> <p>1) This person shall have knowledge and training in nursing service administration and restorative/rehabilitative nursing. This person shall also have some knowledge and training in the care of the type of residents the facility cares for (e.g., geriatric or psychiatric residents). This does not mean that the director of nursing must have completed a specific course or a specific number of hours of training in restorative/rehabilitative nursing unless this person is in charge of the restorative/rehabilitative nursing program. (See Section 300.1210(a).)</p>	F9999			

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F9999	<p>Continued From page 12</p> <p>2) This person shall be a full-time employee who is on duty a minimum of 36 hours, four days per week. At least 50 percent of this person's hours shall be regularly scheduled between 7 A.M. and 7 P.M.</p> <p>b) The DON shall supervise and oversee the nursing services of the facility, including:</p> <p>1) Assigning and directing the activities of nursing service personnel.</p> <p>2) Overseeing the comprehensive assessment of the residents' needs, which include medically defined conditions and medical functional status, sensory and physical impairments, nutritional status and requirements, psychosocial status, discharge potential, dental condition, activities potential, rehabilitation potential, cognitive status, and drug therapy</p> <p>Section 300.1620 Compliance with Licensed Prescriber's Orders</p> <p>a) All medications shall be given only upon the written, facsimile or electronic order of a licensed prescriber. The facsimile or electronic order of a licensed prescriber shall be authenticated by the licensed prescriber within 10 calendar days, in accordance with Section 300.1810. All such orders shall have the handwritten signature (or unique identifier) of the licensed prescriber. (Rubber stamp signatures are not acceptable.) These medications shall be administered as ordered-by the licensed prescriber and at the designated time.</p> <p>Section 300.1630 Administration of Medication</p>	F9999			

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F9999	<p>Continued From page 13</p> <p>2) Each dose administered shall be properly recorded in the clinical record by the person who administered the dose. (See Section 300.1810.)</p> <p>d) If, for any reason, a licensed prescriber's medication order cannot be followed, the licensed prescriber shall be notified as soon as is reasonable, depending upon the situation, and a notation made in the resident's record.</p> <p>Section 300.3240 Abuse and Neglect</p> <p>a) An owner, licensee, administrator, employee or agent of a facility shall not abuse or neglect a resident. (Section 2-107 of the Act)</p> <p>b) A facility employee or agent who becomes aware of abuse or neglect of a resident shall immediately report the matter to the facility administrator. (Section 3-610 of the Act)</p> <p>c) A facility administrator who becomes aware of abuse or neglect of a resident shall immediately report the matter by telephone and in writing to the resident's representative. (Section 3-610 of the Act)</p> <p>d) A facility administrator, employee, or agent who becomes aware of abuse or neglect of a resident shall also report the matter to the Department. (Section 3-610 of the Act)</p> <p>Based on interview and record review, the facility failed to provide Intravenous (IV) antibiotics and IV line flushes as ordered for one of two residents, (R3) reviewed for IV medication in a sample of four. This failure resulted in R3 being re-admitted to the hospital with cellulitis and undergoing surgery for right above the knee</p>	F9999			

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F9999	<p>Continued From page 14 debridement and amputation.</p> <p>Findings include:</p> <p>Review of the Facility Admission Information sheet documents that R3 has diagnoses which include; Rhabdomyolysis, Sepsis, Polysubstance Abuse, Sacral Ulcer, and a new Right Below the Knee Amputation.</p> <p>R3 was admitted to the facility on 2/15/12 with Physician orders to maintain his Peripherally Inserted Central Catheter (PICC) line, by Flushing with Heparin Lock Solution 10 units per 5 milliliters every eight hours. R3 also had Physician medication orders including; Cubicin 600 milligrams (mgs) in 100 milliliters (ml) of Sodium Chloride to be given once daily for 13 days, and Dilaudid 1 milligram IV push every two hours as needed for pain.</p> <p>Review of the Facility Policy which is undated and titled; Intermittent Intravenous Administration, under the area of "Responsibility" documents RN/Trained LPN only. Under #1) is documented that "only qualified, licensed nurses with sufficient knowledge and training may administer intermittent IV antibiotics."</p> <p>Review of the R3's February 2012 Medication Administration Record (MAR) documents that R3 did not receive any Cubicin, or PICC line Heparin Flushes on 2/25 and 2/26/12. The MAR also documents that on 2/23/12 E5, RN, administered the IV antibiotic and IV line flushes to R3. The Nursing Schedule for the month of February 2012 documents, that no Registered Nurses were scheduled to work on any shift, the weekend of 2/25 and 2/26/12 and that on 2/23/12, E5 RN had called off work on 2/23/12. In an interview on 3/9/12 at 4:00 PM</p>	F9999			

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F9999	<p>Continued From page 15</p> <p>E5 RN reviewed the MAR and confirmed he did not work 2/23/12.</p> <p>During an interview on 3/9/12 at 11:00 AM with E2 RN/DON she stated, she set it up initially to come in to work to give the pain medication and IV antibiotics when E5, the only staff RN, was not scheduled to work. E2 assumed that E5 RN was working that weekend so she didn't go in. The Licensed Practical Nurses that worked the weekend did not call anyone to let them know the medication had not been given.</p> <p>On 3/13/12 at 11:55 AM E4, the Licensed Practical Nurse (LPN) that had cared for R3 on the weekend in question stated, "We do not have assigned charge nurses on the weekend. We each take care of our own residents. I did not know we were supposed to call someone to come in to give the IV medicine. I thought the DON had that all set up. LPN's aren't allowed to give IV medications so I didn't even look at that medicine or know if they were coming in later to give (R3) the medicine.</p> <p>On 3/9/12 at 9:45 AM R3 was interviewed in his hospital room. He previously had a right below the knee amputation. On 3/7/12, R3 underwent a right above the knee debridement and amputation. R3 stated "The last six days I was in the home they only gave me my antibiotics once. E2 only came in to give me my IV pain medication once, after that they got it changed to a shot or a pill. Neither one helped as much as the IV pain medicine so I was always in pain."</p> <p>R3 was discharged from the hospital on Norco 5/325 1-2 tablets every 6 hours as needed and Dilaudid 1 milligram Intravenous (IV) every 2 hours as needed.</p> <p>R3's Nurses notes and the Medication Administration (MAR) dated 2/15/12 document</p>	F9999			

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F9999	<p>Continued From page 16</p> <p>that no pain assessment is included in the admission documentation or the nurses notes.</p> <p>R3's Physician Order Sheet for February 2012 included orders for, "Negative Pressure Wound Treatment (wound Vacuum) per facility protocol."</p> <p>On 3/8/12 E1 and E3 stated at 2:30 PM that they did not have a facility policy or protocol for treatment with a Negative Pressure Wound Vacuum. They were following the provider's information to change the dressing every three days, and the canister when full.</p> <p>Documentation by E10, Social Services, on 2/23/12 documented that the resident informed her that he had not had any drainage canisters for his wound vacuum for two days and he has no pain medications. E10 notified E3, Licensed Practical Nurse, (LPN)/ Quality Assurance Nurse. E3 called and made sure canisters will be at the facility in the morning and contacted the Physician for a one time order for pain med's and other medication will arrive around 7 or 8 PM tonight.</p> <p>Review of the facility Treatment record documents that R3 did not have the wound vacuum in place for 2/15/12 and 2/16/12. It was not initiated until 2/17/12.</p> <p>On 3/9/12 at 9:45 AM R3 was interviewed in his hospital room. R3 stated, "The air seal on the wound vacuum kept leaking the nurses didn't know what to do with it so they just keep adding more tape, but it still leaked. The canister on the thing would be full and they didn't change it for two days, they had to order some."</p> <p>On 3/9/12 at 9:10 AM Z1 Plastic Surgery Resident working with Z2 stated, " the standard of care for Negative Pressure Wound vacuums is to change them every other day. It may be left on</p>	F9999			

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F9999	<p>Continued From page 17</p> <p>longer if the wound is healing and there is minimal drainage, but that would not be true for (R3), he had a lot of drainage. The every other day change of the dressing is a standard and common knowledge. There should be no deviation. Canisters need to be changed when almost full, or if the seal is broken."</p> <p>On 3/8/12 at 2:00 PM Z1, Medical Doctor and Surgeon stated, "(R3) had a severe leg and muscle injury to begin with. Missing those antibiotics did not help and allowed the infection to flare up again. The antibiotics were there to prevent further spread of the infection. It contributed to his re-admission to the hospital, but the re-admission is also a result of the injury that was present to begin with." Z1 also stated, "I did request a copy of the medication administration record to be sent to me so that I could verify how many doses of medication had been missed. I was concerned.</p> <p>According to the hospital surgery report dated 3/7/12 on 3/7/12, R3 underwent a right above the knee debridement and amputation.</p> <p>On 3/9/12, Z2 stated, "I did see (R3) in my office on 2/23/12. There are two reasons why I would have stopped the wound vacuum at that time. One is when the wound is healed, two would be that the wound vacuum was not working effectively and there was so much drainage we needed to open it up and let it drain in hopes of promoting healing. I believe that is why I discontinued the wound vacuum for (R3)."</p> <p>Review of the Nurses Notes from 2/15/12 to 2/23/12 do not document any dressing changes or wound assessments. 2/24/12 and 2/25/12 do not document any wound assessment.</p> <p>According to the Medication Administration Record (MAR) R3 received oral pain medication</p>	F9999			

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F9999	<p>Continued From page 18</p> <p>at 11:00 PM on 2/15/12. There is no documentation reflecting the effectiveness of the medication. R3 again complained of pain at midnight and requested Intravenous (IV) pain medication. E11 Licensed Practical Nurse (LPN) documented she explained to R3 that he had oral pain medication two hours ago and could not have more at this time. E11 also explained that LPN's were not able to give IV pain medication, and she would have to call the doctor. The physician returned her call at 1AM and gave an order for 2 tablets of Norco 5/325 to be given this one time only.</p> <p>On 2/16/12 at 2:00 PM Norco was again administered with no pain assessment documented as to the level of pain. After administration it is documented that R3's pain was only somewhat relieved. There is no nursing documentation of pain assessment or relief on 2/17, 2/18, or 2/19/12.</p> <p>On 2/20/12 E4 Registered Nurse (RN) requested an order for the Dilaudid IV to be given IV or IM (intramuscular) as needed so that R3 could have the Dilaudid after hours when no RN was available. There is no pain assessment of relief from the IM Dilaudid on 2/20, 2/21 or 2/22/12.</p> <p>On 2/23/12 there is documentation that IM Demerol was given but no pain assessment as to why there was a need for a change in the pain medication order.</p> <p>On 2/24 there is a request for pain medication but no assessment, or documentation of what medication was given and if there was any relief obtained.</p> <p>There is no no pain assessment documented on 2/25, and on 2/26 there is documentation that R3 complained of pain that is not relieved by IM</p>	F9999			

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F9999	<p>Continued From page 19</p> <p>pain medication. That day R3 was transferred back to the hospital for treatment of recurrent cellulitis.</p> <p>On 3/9/12 at 9:45 AM, in his hospital room R3 stated, "I only got my IV pain medication once after hours. The Registered Nurse (RN) would not come in after that so they had to get an order for a shot or pills which never did work as well so I was always in pain.</p> <p>Nurses Notes dated 2/26/12 document that at 3:00 PM, R2 had complained of pain and a burning sensation throughout the right thigh. The right outside of the thigh is red, tender to the touch and slightly swolled. Pain is not relieved with Intra-Muscular pain medication. Temperature is 99. The nurse received an order for a direct admission to the hospital. R2 was transported per facility van at 8:30 PM. Per the hospital emergency room documentation dated 2/26/12, R2 was admitted with cellulitis of the right thigh. The hospital Emergency room nurse documented after contacting the facility, that R2 had no IV medication given the previous two days because they did not have an RN on duty to administer it.</p> <p>According to the hospital Surgery Report dated 3/7/12, R3 underwent surgery for right above the knee debridement and amputation.</p> <p>(B)</p>	F9999			