

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 155668	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 02/22/2024
NAME OF PROVIDER OR SUPPLIER Charlestown Place at New Albany		STREET ADDRESS, CITY, STATE, ZIP CODE 4915 Charlestown Rd New Albany, IN 47150	

For information on the nursing home's plan to correct this deficiency, please contact the nursing home or the state survey agency.

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (Each deficiency must be preceded by full regulatory or LSC identifying information)
<p>F 0656</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Develop and implement a complete care plan that meets all the resident's needs, with timetables and actions that can be measured.</p> <p>34231</p> <p>Based on interview and record review, the facility failed to ensure a plan of care was in place for a resident's (Resident D) refusal of care for 1 of 3 residents reviewed for care plans.</p> <p>Findings include:</p> <p>The clinical record for Resident D was reviewed on 2/21/24 at 10:30 a.m. The diagnoses included, but were not limited to, dementia and stage 3 (full thickness tissue loss) pressure ulcers to the coccyx, left buttock and right buttock.</p> <p>The progress note, dated 1/28/24 at 1:47 a.m., indicated the resident had a shearing area to the left and right buttocks.</p> <p>The wound note, dated 1/29/24 at 3:50 p.m., indicated the areas were noted to be Stage 3 pressure ulcers.</p> <p>The wound physician note, dated 2/1/24, indicated the resident had a Stage 3 to the left buttock which measured 2.3 cm (centimeters) in length, 2.4 cm in width with a depth of 0.1 cm ; Stage 3 to the coccyx which measured 1.1 cm in length, 0.5 cm in width with a depth of 0.1 cm; and the Sage 3 to the right buttock which measured 2.5 cm in length, 1.2 cm in width with a depth of 0.1 cm.</p> <p>During an interview on 2/21/24 at 2:20 p.m., the wound nurse indicated the resident refused to turn side to side. Every time the resident was repositioned, she would roll to her back not 30 minutes later.</p> <p>During an interview on 2/21/24 at 3:06 p.m., CNA (Certified Nursing Aide) 6 indicated she typically did not have the resident, but when she did, she was very non-compliant with turning and repositioning.</p> <p>During an interview on 2/22/24 at 9:50 p.m., RN (Registered Nurse) 7 indicated the resident would not let them do anything for positioning. Each time they turned her on her side, 5 to 10 minutes later, she had already turned over to her back. They continue to turn her, but she always puts herself back on her back. She had refused turning for about 2-3 months.</p> <p>(continued on next page)</p>

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.

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
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<p>F 0656</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>During an interview on 2/22/24 at 10:15 a.m., CNA 8 indicated the only time the resident would turn would be when they check and changed her every 2 hours. She preferred to lay on her back. She would not let you turn her side to side and removed pillows placed for off-loading. She had been refusing to turn and reposition for about 2 months.</p> <p>The clinical record lacked documentation of a plan of care for refusal to turn and reposition.</p> <p>During an interview on 2/22/24 at 1:50 p.m., RN 7 indicated if a resident consistently refused to turn and reposition, a care plan should have been in place for the refusal of care.</p> <p>On 2/22/24 at 1:59 p.m., the Director of Nursing provided a current copy of the document titled Comprehensive Care Plan dated 1/13/2018. It included, but was not limited to, Procedure .To ensure that the resident .is included in all aspects of person-centered care planning .Procedure .The Comprehensive Care Planning will describe the following .Any services that would otherwise be required but are not provided due to the resident's exercise of rights including the right to refuse treatment</p> <p>3.1-35(b)(2)</p>		

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<p>F 0686</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Provide appropriate pressure ulcer care and prevent new ulcers from developing.</p> <p>34231</p> <p>Based on interview and record review, the facility failed to ensure residents' (Residents D and E) treatments were completed, as ordered by the physician, for 2 of 3 residents reviewed for pressure ulcers.</p> <p>Findings include:</p> <p>1. The clinical record for Resident D was reviewed on 2/21/24 at 10:30 a.m.,. The diagnoses included, but were not limited to, stage 3 pressure ulcers (full thickness tissue loss) to the coccyx, left buttock and right buttock.</p> <p>The care plan, dated 8/17/23, indicated the resident was at risk for impaired skin integrity and to perform treatments as ordered by the physician.</p> <p>The February 2024 treatment administration record (TAR) indicated staff were to cleanse the resident's coccyx, left buttock and right buttock wounds with normal saline, apply calcium alginate and cover with a foam dressing daily for wound care.</p> <p>The February 2024 TAR lacked documentation of treatment completion on 2/3/24, 2/6/24, 2/8/24, 2/10/24 and 2/18/24 for the left and right buttocks; and 2/3/24, 2/6/24, 2/8/24 and 2/10/24 for the coccyx.</p> <p>The February 2024 TAR indicated, dated 2/11/24 to discontinue the previous treatment to the coccyx with a new treatment, dated 2/11/24, to cleanse the coccyx pressure ulcer with normal saline, apply calcium alginate with Santyl and cover with a foam dressing daily.</p> <p>The February 2024 TAR lacked documentation of the coccyx wound treatment completion on 2/18/24.</p> <p>During an interview on 2/22/24 at 1:50 p.m., RN (Registered Nurse) 7 indicated once a treatment was completed, it should be signed off on the treatment administration record to show it was completed.</p> <p>2. The clinical record for Resident E was reviewed on 2/22/24 at 11:16 a.m. The diagnosis included, but was not limited to, Stage 3 pressure ulcer to the coccyx.</p> <p>The care plan, dated 1/9/20, indicated the resident was at risk for altered skin integrity and staff were to complete treatments as ordered by the physician.</p> <p>The February 2024 TAR indicated staff were to clean the coccyx with normal saline, apply calcium alginate and cover with a foam dressing daily.</p> <p>The February 2024 TAR lacked documentation of treatment completion on 2/8/24, 2/9/24 and 2/18/24.</p> <p>The current policy titled Pressure Ulcers/Skin Breakdown dated 4/2018, included, but was not limited to, Treatment/Management .They physician will order pertinent wound treatments</p> <p>(continued on next page)</p>		

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