

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 155772	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 07/12/2024
NAME OF PROVIDER OR SUPPLIER Cobblestone Crossings Health Campus		STREET ADDRESS, CITY, STATE, ZIP CODE 1850 E Howard Wayne Dr Terre Haute, IN 47802	

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 0778</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Help the resident make transportation arrangements to and from radiology services.</p> <p>34525</p> <p>Based on record review and interview, the facility failed to ensure transportation to a medical appointment was set-up and completed for 1 of 1 resident reviewed for transportation (Resident B).</p> <p>Findings include:</p> <p>Review of a complaint intake form, dated 7/10/24, indicated Resident B had missed her appointment with her urologist (a physician who has special training in diagnosing and treating diseases of the urinary organs) because the facility had not scheduled transport services for her.</p> <p>Resident B's record was reviewed on 7/11/24 at 8:45 a.m. The profile indicated the resident's diagnoses included, but were not limited to, chronic kidney disease (damage to the kidneys which makes them unable to filter blood the way they should), hypertensive chronic kidney disease (high blood pressure caused by damage to the kidneys) and obstructive uropathy (a blockage or obstruction where the ureter [the tube that carries urine] connects to the kidney or bladder).</p> <p>A care plan, dated 1/3/23, indicated the resident had an indwelling urinary catheter (a tube which is inserted into the bladder to drain urine) related to obstructive uropathy.</p> <p>A physician's order, dated 7/10/24, dated one time 6:00 a.m., to 2:00 p.m., indicated to set up transport for a visit with the urology nurse practitioner (NP) for a treatment appointment at 12:30 p.m. The order indicated Lifeloop (a software system used to set up transport for residents) request had been put in.</p> <p>During an interview, on 7/11/24 at 9:33 a.m., the Life Enrichment Director indicated she was responsible for the transport of the facility residents to their appointments. She did not have Resident B on her schedule to transport to an appointment on 7/10/24. Scheduling transport for appointments was set up by the nursing staff.</p> <p>During an interview, on 7/11/24 at 9:36 a.m., Registered Nurse (RN) 17 indicated the nurses were responsible for transport requests when an appointment order was received. Setting up transport requests for the facility bus was very easy, but to set up for an outside transport, they now were required to use a process that takes them to a government website. This made it very time-consuming to set up. Resident B cannot be transported by the facility bus, because she required stretcher transport.</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 0778</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>During an interview, on 7/11/24 at 10:10 a.m., the Regional Director of Clinical Services indicated she was not able to locate a specific policy on setting up transportation for resident appointments. The expectation would be that transportation would be set up by facility staff for any resident who had an appointment outside of the facility.</p> <p>During an interview, on 7/11/24 at 10:47 a.m., the Executive Director (ED) indicated the facility policy was that transportation would be set up and provided for all residents who required transportation to any appointment.</p> <p>This citation relates to Complaint IN00438476.</p> <p>3.1-49(i)(3)</p>		