F309 PROVIDE CARE/SERVICES FOR HIGHEST WELL BEING

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.

This REQUIREMENT is not met as evidenced by:

Intakes: TN00031128

Based on medical record review and interview, it was determined the facility failed to follow a physician's order for dressing changes for 1 of 3 (Resident #1) sampled residents with Peripherally Inserted Central Catheters (PICC).

The findings included:

Medical record review for Resident #1 documented an admission date of 11/30/12 with diagnoses of Sepsis, End Stage Renal Disease with Hemodialysis, Congestive Heart Failure, Failure to Thrive, and Obesity. A nurse noted dated 11/30/12 documented, "Resident readmitted to 511 b: Right antecubital arm with PICC line, dry [dressing] dry and intact." A Physician telephone order dated 11/30/12 documented, "[symbol for change] dressing every Monday..." There was no documentation of the PICC dressing change having been completed for Monday December 3, 2012.

During an interview in the conference room on

This Plan of Correction is submitted as required under State and Federal law. The facility's submission of the Plan of Correction does not constitute an admission on the part of the facility that the findings cited are accurate, that the findings constitute a deficiency, or that the scope and severity determination is correct. Because the facility makes no such admissions, the statements made in the Plan of Correction cannot be used against the facility in any subsequent administrative or civil proceeding.

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1. Resident #1 was admitted on 11/30/12 and discharged 12/4/12. The Director of Nursing was unable to interview resident #1 due to discharge on 12/4/12. No corrective action for resident #1 can be taken.

The wound care nurses were in-service on 11/30/12 on Peripherally Inserted Central Catheter (PICC) line dressing changes. The dressing change will be conducted and documented by the wound care nurses at time of wound care admission assessment. Dressing changes will then be conducted by the licensed nurses every week and as needed. The wound care nurses will monitor PICC line dressings weekly for compliance. No adverse outcomes noted.

An audit of the orders and documentation of residents with Peripherally Inserted Central Catheter line dressing changes was conducted by the Director of Nursing on 2/4/13. No deficient practices were identified. No adverse outcomes noted.
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2/4/13 at 11:30 AM, the Director of Nursing stated, "I can't find where it [PICC dressing] had been changed on Monday [12/3/12]. No one charted on the MAR [medication administration record] that it was changed..."

3. All admissions will be monitored for Peripherally Inserted Central Catheter (PICC) line dressing change orders by the Director of Nursing and/or Nursing Supervisors. Licensed nurses were in-service by the Director of Nursing and/or Staff development 2/15/13 - 2/18/13 on policy for Peripherally Inserted Central Catheter (PICC) line orders and documentation of dressing changes.

4. An audit of all residents with Peripherally Inserted Central Catheter (PICC) line orders and the documentation of their dressing changes will be conducted 1 times a week for 3 months and until 100% compliant by the Director of Nursing and/or Nursing Supervisors. The findings will be reported by the Director of Nursing and/or Nursing Supervisor to the Quality Assurance Performance Improvement committee for 3 months by the Director of Nursing or until 100% compliance obtained. Members of the Quality Assurance Performance Improvement Committee are the Administrator, Medical Director, Director of Nursing, Social Services, Activities Director, Quality Assurance Nurse, Dietary Manager, Minimum Data Set Registered Nurse, Medical Records, Rehab Manager, Maintenance Director, and Environmental Services.

Completion date 2/19/13