

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


PRINTED: 12/06/2011  
FORM APPROVED  
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  345237	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED  C 11/21/2011
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NAME OF PROVIDER OR SUPPLIER  BARBOUR COURT NURSING AND REHABILITATION CENTER	STREET ADDRESS, CITY, STATE, ZIP CODE 515 BARBOUR RD SMITHFIELD, NC 27577
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F 204 SS=D	<p>483.12(a)(7) PREPARATION FOR SAFE/ORDERLY TRANSFER/DISCHRG</p> <p>A facility must provide sufficient preparation and orientation to residents to ensure safe and orderly transfer or discharge from the facility.</p> <p>This REQUIREMENT is not met as evidenced by: Based on record review and staff interviews, the facility failed to ensure 1 of 1 sampled resident was provided a safe and orderly discharge (Resident # 1).</p> <p>Findings include:</p> <p>Resident #1 was admitted to the facility on 5/18/2011 with diagnoses of Contusion of Abdominal Wall, Ulcer of other part of Foot, Unspecified Anemia, Pressure Ulcer other site, Morbid Obesity, Esophageal Reflux, Depressive Disorder, Bronchitis not specified as Acute, Cellulites, Abscess of Foot and Chronic Kidney Disease Stage 3. MDS (Minimum data Set) dated 5/18/2011 documented the resident had no problem with her long or short term memory. She needed extensive assistance for bed mobility and transfer; she was totally dependent on staff with the bathing.</p> <p>Review of the physician order dated 10/31/2011 revealed the resident was to be discharged home with Home Health Agency #1.</p> <p>Review of the nurse's note dated 10/31/2011 documented "Resident is alert and cooperative this AM (Morning). She understands her discharge instructions and states she is excited</p>	F 204	<p><i>This Plan of Correction does not constitute an admission or agreement by the provider of the truth of the facts alleged or conclusions set forth in this Statement of Deficiencies. This Plan of Correction is prepared solely because it is required by state and federal law.</i></p> <p><i>Resident #1 was discharged from the facility. Resident was readmitted on 12-2-11 with plans to remain in the facility.</i></p> <p><i>All Resident with known anticipated pending discharges for the upcoming 7 day period were reviewed by Facility Social Workers on 11-22-11 to ensure discharge referrals and plans are being implemented prior to discharge providing safe and orderly discharges for facility residents. The November Discharge Calendar was reviewed to ensure Residents were listed if discharge was anticipated within the current month. The Monthly Discharge Calendar will continue to be maintained and monitored for reference by the facility staff to include the Social Workers assigned the responsibility to coordinate discharge plans.</i></p>	12-12-11
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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE 	TITLE Administrator	(X6) DATE 12/12/11
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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 204	<p>Continued From page 1</p> <p>about going home. The resident also admits to "being Nervous" about leaving this facility. Facility MSW (Master of Social Work) arranged discharge and entered D/C (Discharge order) orders. This writer provided discharge instruction to the resident and called RX (medicines) to her pharmacy of choice. MD (Medical Doctor) entered orders to remove the PICC (Peripherally Inserted Central Catheter) after her ABT (Antibiotics) was completed prior to discharge but no one in facility was legally able to remove the PICC. The original home health agency was unable to accept the case due to their inability to care for or remove the PICC. Resident was referred to (Home Health agency # 2) and MSW made the family aware."</p> <p>Review of another nurse's note dated 10/31/2011 documented "(Home Health Agency # 1) was unable to accept the case due to their inability to care for or remove the PICC. Resident was referred to (Home Health Agency #2) and MSW made the family aware of the change. This writer also scheduled a follow up appt (appointment) with (doctor) on Monday 11/7/2011 at 10: 00 AM (morning) and contacted the resident's Niece to provide this information so arrangements can be made for resident to be seen by primary MD. Resident stable at the time of discharge."</p> <p>Review of the nurse's note dated 11/3/2011 documented "On Monday 10/31/2011, this writer was informed that the resident was discharging home with (Home Health Agency # 1). This writer completed discharge and completed instructions to the resident on 10/31/2011 at approximately 10:30 AM. Resident transport was at the facility at 10: 40 AM. Resident stated she has all her</p>	F 204	<p><i>The Facility Social Workers were in-serviced on 11-22-11 by the Administrator regarding ensuring that all discharge referrals and plans are completed prior to Resident Discharge thereby assisting with ensuring discharges for Residents are conducted in a safe and orderly manner as ordered by the Resident's Physician.</i></p> <p><i>Facility Social Workers will complete discharge arrangements for all anticipated discharges utilizing a QI Discharge Checklist beginning 11-22-11 to assist with ensuring Discharge Plans have been completed prior to discharge. The QI Checklist Tools will be forwarded to the Administrator upon completion.</i></p>	12-12-11	

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F 204	<p>Continued From page 2</p> <p>equipment, supplies and support in place at home. At approximately 1530( 3:30 PM), the MSW approached this writer stating ( Home Health Agency #1) was unable to offer services or evaluate the resident at home. (Home Health Agency # 1) also communicated that this facility needed to arrange PICC removal at (special procedure place) .Several phone calls were made by me to (special procedures place). I also contacted (Home Health Agency # 2) at 1615 (4:15 PM) to ask if they could provide services to this resident. This resident did not have a primary medical doctor at time of discharge but appointment was arranged and scheduled by another physician."</p> <p>Review of the Social Worker's addendum note dated 11/3/2011 documented "Social Worker called patient's niece on 10/31/2011 and informed her that patient's home health agency had been changed from (Home Health Agency # 1) to (Home Health Agency # 2) due to (Home Health Agency #1) not being able to provide next day service, nor pull patient's PICC line out."</p> <p>During the interview with Social Worker (SW) on 11/21/2011 at 3:00 PM, she reported the resident was discharged home the morning of 10/31/2011 at around 10:40 AM. The SW added that she faxed the Home Health Agency #1 the physician's order on 10/31/2011 indicating the resident was going home on the same day. The SW also stated that the Home Health Agency #1 reported later to her that they could not remove the resident's PICC line so they were not going to admit the resident to their services. The SW further reported she asked another nurse to find another home health agency which could remove</p>	F 204		12-12-11	

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F 204	<p>Continued From page 3</p> <p>the resident ' s PICC line at home. The SW added it was approximately 3:00 PM by the time they found Home Health Agency #2, and the resident had been discharged home from the facility at approximately 10:40 AM.</p> <p>During the interview with Home Health Agency #1 staff on 10/21/2011 at 3:15 PM, she reported that she had not received paper work indicating the resident was being discharged home prior to 10/31/2011. She added that she only received a phone call from the facility on 10/31/2011 indicating the resident was to be discharged home on the same day. She added the resident had a PICC line and their agency did not have a qualified staff member who could remove the PICC line.</p> <p>During the interview with Nurse #1 on 11/21/2011 at 3: 30 PM, she reported the resident was discharged home from the facility on 10/31/2011 at approximately 10: 40 AM. She added that it was about 3:00 PM when the Social Worker told her that Home Health agency #1 was not going to provide the home health care services to the resident due to the PICC line which the resident had: Nurse # 1 further reported that she had to call another home health agency at approximately 4: 30 PM to find out if they could provide the home health care services. Nurse #1 also reported the resident was discharged home with a PICC line because there was no one at the facility who was qualified to remove the PICC line.</p> <p>During the interview with the Administrator on 11/21/ 2011 at 4:00 PM, she stated her expectation of the staff was for the Social Worker to communicate or fax the discharge</p>	F 204	<p><i>The Administrator or an Administrative Nurse as assigned will verify receipt of the QI Discharge Checklist against the Discharges Calendar and will verify checklist were completed for all anticipated discharges utilizing a QI Audit Tool. The QI Tools will be completed weekly x 4 then bi-weekly x 2 then monthly for a minimum of 2 months.</i></p> <p><i>The QI tools upon completion will be reviewed by the Quality Improvement Nurse who will comple findings and forward to the Quality Improvement Executive Committee monthly for review and for the identification of trends, development of action plans as indicated, and to determine the need and / or frequency of continuing QI monitoring.</i></p>	12-12-11	12-12-11

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F 204	Continued From page 4 paper work to the home health care agency at least 2 to 3 days prior to a resident being discharged home. The administrator also reported her expectation in reference to removal of a PICC line was for a qualified staff to remove the PICC line prior to the resident being discharged home. She added a clarification doctor's order was to be written if the PICC line could not be removed prior to a resident being discharged home	F 204		
F 281 SS=D	483.20(k)(3)(i) SERVICES PROVIDED MEET PROFESSIONAL STANDARDS  The services provided or arranged by the facility must meet professional standards of quality.  This REQUIREMENT is not met as evidenced by: Based on record reviews, and staff interview, the facility failed to follow the physician's orders for 1 of 1 sampled resident who had an order for PICC (Peripherally inserted Central Catheter) line to be removed before being discharged home (Resident #1).  Findings include:  Resident #1 was admitted to the facility on 5/18/2011 with diagnoses of Contusion of Abdominal Wall, Ulcer of other part of Foot, Unspecified Anemia, Pressure Ulcer other site, Morbid Obesity, Esophageal Reflux, Depressive Disorder, Bronchitis not specified as Acute, Cellulites, Abscess of Foot and Chronic Kidney Disease Stage 3. MDS (Minimum data Set) dated 5/18/2011 documented the resident had no problem with her long or short term memory. She	F 281	<i>The PICC line for Resident #1 was removed during hospital admission 11-2-11. Resident #1 has continued to receive services that meet professional standards of quality since readmission on 12-2-11.</i>  <i>All Residents with PICC lines were reviewed on 11-4-11 by the RN Supervisor and the Lab Nurse to ensure orders were present for PICC line to remain in place and that PICC line was currently being utilized as ordered by the Physician. One Resident with PICC line not in use had the line removed by the Resident's Primary Physician on 11-5-11.</i>  <i>In-service of Nursing Staff was initiated on 11-2-11 by the Staff Development Coordinator related to following Physician Orders to include for the removal of PICC lines.</i>	12-12-11

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F 281	<p>Continued From page 5</p> <p>needed extensive assistance for bed mobility and transfer; she was totally dependent on staff with the bathing.</p> <p>Review of the Physician order dated 10/31/2011 indicated the PICC line was to be discharged after resident had completed her antibiotics medication.</p> <p>Review of the discharge summary dated 10/31/2011 documented the resident "completed IV (Intravenous) ABT (Antibiotics) for urosepsis/ UTI (Urinary Tract Infection) on 10/31/2011. PICC line scheduled to be removed from right upper arm prior to discharge home."</p> <p>Review of the nurse's note dated 10/31/2011 documented "Resident is alert and cooperative this AM (Morning). She understands her discharge instructions and states she is excited about going home. The resident also admits to "being Nervous" about leaving this facility. Facility MSW (Master of Social Work) arranged discharge and entered D/C (Discharge order) orders. This writer provided discharge instruction to the resident and called RX (medicines) to her pharmacy of choice. MD (Medical Doctor) entered orders to remove the PICC after her ABT (Antibiotics) was completed prior to discharge but no one in facility was legally able to remove the PICC. The original home health agency was unable to accept the case due to their inability to care for or remove the PICC. Resident was referred to Home Health agency #2 and MSW made the family aware."</p> <p>Review of the nurse's note dated 11/4/2011 "This writer discussed removal of PICC line with House</p>	F 281	<p><i>servicing include the process to follow in the event orders are received for removal of PICC lines and the removal could not be completed to include Physician notification for orders to send out for removal or orders to allow the PICC line to remain in place. IV Training provided by Neil Medical Pharmacy IV Nurse Instructor related to Central Lines to include PICC line removal with PICC line removal check off was completed on 12-6-11.</i></p>	12-12-11

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F 281	<p>Continued From page 6</p> <p>supervisor ( Nursing) and she states she spoke to FNP ( Family Nurse Practitioner) with the ( Doctor) group and FNP stated she was unable to pull/ remove line."</p> <p>During the interview with Nurse #1 on 11/21/2011 at 3: 30 PM, she reported the resident was discharged home from the facility on 10/31/2011 at approximately 10: 40 AM. She added that it was about 3:00 PM when the Social Worker told her that Home Health agency #1 was not going to provide the home health care services to the resident due to the PICC line which the resident had. Nurse #1 further reported that she had to call another home health agency at approximately 4: 30 PM to find out if they could provide the home health care services. Nurse #1 also reported the resident was discharged home with a PICC line because there was no one at the facility who was qualified to remove the PICC line.</p> <p>During the interview with the Administrator on 11/21/ 2011 at 4:00 PM, she reported her expectation in reference to removal of a PICC line was for a qualified staff to remove the PICC line prior to the resident being discharged home. She added a clarification doctor's order was to be written if the PICC line could not be removed prior to a resident being discharged home</p>	F 281	<p><i>A Listing of Resident with PICC lines will be maintained by the Lab Nurse ongoing. Residents utilizing PICC lines will continue to be reviewed weekly x 4 then bi-weekly x 2, then monthly for a minimum of 2 months by the RN Supervisor or the Lab Nurse to ensure lines are In use or removed as ordered by the Physician. A QI Tool will be utilized.</i></p> <p><i>The QI tools upon completion will be reviewed by the Quality Improvement Nurse and the Director of Nursing with follow up as deemed necessary for any identified concerns. Findings will be compiled and forwarded to the facility Quality Improvement Executive Committee monthly for review and for the identification of trends, development of action plans as indicated, and to determine the need and / or frequency of continuing QI monitoring.</i></p>	12-12-11	12-12-11