

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

PRINTED: 04/14/2006  
FORM APPROVED  
OMB NO. 0938-0391

|   |   |   |   |                      |   |
|---|---|---|---|----------------------|---|
| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION                          |   | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:<br><br><b>145919</b> | (X2) MULTIPLE CONSTRUCTION<br>A. BUILDING _____<br>B. WING _____  |                      | (X3) DATE SURVEY COMPLETED<br><br><b>C</b><br><b>01/27/2006</b> |
| NAME OF PROVIDER OR SUPPLIER<br><br><b>SPRINGWOOD NURSING &amp; REHAB</b> |   |   | STREET ADDRESS, CITY, STATE, ZIP CODE<br><b>1920 NORTH MAIN STREET</b><br><b>ROCKFORD, IL 61103</b>             |                      |   |
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| F 309   | Continued From page 7<br>administration of medication with additional documentation indicating the effectiveness. The handout contained a list of non verbal signs which may indicate that the resident is in pain. A pain assessment has been added to our admission and quarterly assessments as well. Narcotic administration, side effects, potential adverse reactions, and symptoms of abrupt withdrawal were covered by a representative from Omni Care Pharmacy.  | F 309   |   |                      |   |
| F9999   | FINAL OBSERVATIONS<br><br>Licensure Violations<br><br>300.1010e)<br>300.1210a)<br>300.1210b)1)<br>300.1210b)2)<br>300.3210a)<br>300.3220f)<br><br>Section 300.1010 Medical Care Policies<br><br>e) All resident shall be seen by their physician as often as necessary to assure adequate health care. (Medicare/Medicaid requires certification visits.)<br><br>Section 300.1210 General Requirements for Nursing and personal Care<br><br>a) The facility must 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 assessment and plan of care. Adequate and properly supervised | F9999   |   |                      |   |

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| F9999   | <p>Continued From page 8</p> <p>nursing care and personal care shall be provided to each resident to meet the total nursing and personal care needs of the resident.</p> <p>b) 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>Section 300.3210 General</p> <p>a) No resident shall be deprived of any rights, benefits, or privileges guaranteed by law based on their status as a resident of a facility. (Section 2-101 of the Act)</p> <p>Section 300.3220 Medical and Personal Care Program</p> <p>f) All medical treatment and procedures shall be administered as ordered by a physician. All new physician orders shall be reviewed by the facility's Director of nursing or charge nurse designee within 24 hours after such orders have been issued to assure facility compliance with such orders. (Section 2-104(b) of the Act)</p> <p>Based on interview and record review the facility failed to provide services to assist R1 in keeping her appointment to refill her pain medication ( preservative free Morphine Sulfate) in her intrathecal medication pump on 1/12/06. R1 required this medication for severe chronic back pain related to failed back surgeries. Facility staff</p> | F9999   |   |                      |   |

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| F9999   | <p>Continued From page 9</p> <p>cancelled R1's appointment at the pain clinic on 1 /12/06 while R1 was in their care.</p> <p>This is for 1 of 10 residents receiving scheduled narcotic medication for pain management (R1).</p> <p>The findings include:</p> <p>R1's hospital history and physical dated 11/21/05 documented diagnoses including Hypertension, Congestive Heart Failure, Type II Diabetes, Chronic Back Pain on pain pump, Generalized Weakness, Cervical and Lumbar Spine Laminectomy. The physician progress note dated 12/27/05 for R1 had additional diagnoses including Hypoglycemia, Acute Renal Failure and Osteoarthritis.</p> <p>The nurses notes dated 1/12/06 for R1 showed, " Resident Services Director (RSD) talked with R1 regarding appointments today - need to be cancelled. R1 upset, the facility's administrative reasons given to R1 and her pain clinic doctors office. R1 signed herself out against medical advice (AMA)...."</p> <p>On 1/20/06 at 11:05am, E5 (Licensed Practical Nurse - LPN) stated, "R1 signed out AMA last Thursday. We had just received word that R1 had a pain pump. R1 needed to be seen Thursday at a pain clinic to have the pump filled. The information was then given to the front office. Anything under Medicare A falls under a per diem . I'm told all office visits, procedures etc. falls under Medicare A, so we (the facility) pay for it. Anything for residents other than office visits and X-rays go to administration, the higher cost things . E2 (Resident Services Director - RSD) said we</p> | F9999   |   |                      |   |

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| F9999   | <p>Continued From page 10</p> <p>could not keep R1's appointment because it is not cost effective. I told R1 that I had instructions that we could not keep the appointment. R1 was upset and called the pain clinic doctor. After R1 and E2 talked to the doctors office, R1 signed out AMA."</p> <p>On 1/20/06 at 11:30am, E1 (Administrator) stated, "At first we were not aware R1 had a pain pump. The next thing we knew R1 had a doctors appointment. E2 and I had a discussion about it ( pain pump and appointment to have it filled) . I did not believe it was part of R1's Medicare A treatment. I did not think it was cost effective." E 1 was asked what is covered by Medicare A. E1 replied, "We are responsible for everything that the residents need while they are here such as room and board, medications and supplies."</p> <p>On 1/20/06 at 11:48am, E2 (RSD) stated, "R1 came from the emergency room (ER). R1 was struggling at home and was unable to care for herself. I know R1 had a lot of issues with pain. R1 had a lot of chronic problems. The day before R1 left was the first time I had heard she had a pain medication pump. The doctors office scheduled an appointment to get it filled." E2 confirmed that she told R1 that it would not be cost effective to have the pain medication pump filled. E2 stated, "We were under the assumption that it was very expensive from the pain physicians nurse and R1 herself." E2 was asked if this would be considered refusing someone care? E2 replied, "Yes."</p> <p>The facility's record showed R1's hospital H&amp;P dated 11/21/05. The H&amp;P showed, "Past medical history, R1 has had a cervical and lumbar spine</p> | F9999   |   |                      |   |

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| F9999   | <p>Continued From page 11</p> <p>laminectomy. R1 also had a pain pump placed. Physical Examination: General: The patient is alert and oriented times three.... Pain pump was noted on the right flank of R1...." The patient discharge transfer form from the hospital dated 12/21/05 for R1 showed a primary diagnosis of Obesity and a secondary diagnosis of Chronic Severe Strain.</p> <p>On 1/24/05 at 2:15pm Z3 (Hospital Social Services) reviewed the hospital H&amp;P (obtained from the facility's chart for R1) dated 11/21/05. Z3 stated, "I faxed that to them (E1) from the ER." Z3 then pointed to the date and time that was printed in the upper left hand corner of the H&amp;P. The date was 12/21/05 at 3:29pm.</p> <p>The nurses notes dated 12/21/05 for R1 showed she arrived at the facility at 6:00pm.</p> <p>The physician progress note dated 12/27/05 for R1 showed, "Assessment/Plan: Chronic Pain. We will continue with the same medications, Oxycodone and the pump."</p> <p>The nurses note dated 12/27/05 for R1 showed, "Noted, internal pain pump to the right flank...."</p> <p>On 1/20/06 at 1:15pm, E5 (LPN) stated, "I try to read the charts when I get time. Initially R1 didn't have a lot in her chart. I never had a chance to go back and look. R1 was a nurse, we talked all of the time. As a nurse, I know that without that medication (pain pump medication) that R1 could go into withdrawal. That could be very bad for R1."</p> <p>On 1/24/06 at 2:30pm, Z2 (Registered Nurse -</p> | F9999   |   |                      |   |

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| F9999   | <p>Continued From page 12</p> <p>RN for the pain management physician) stated, " R1's pump contained Morphine. R1 had an appointment to refill the pump on 12/28/05. We could not locate her until 1/11/06. On that date there would only be 2ml left in the pump. This is a very small amount. The concern that I had was related to this and R1's multiple medical problems. R1 had chronic long term pain and was receiving 6.4mg per day of morphine (via a synchronized pain pump with a catheter placed in the spinal column). With all of R1's physical health problems going on she would have had serious withdrawal symptoms to include: nausea, vomiting ad diarrhea. The kind of pump giving the amount of medication R1 was receiving on a daily basis should be refilled every 90 days. After 90 days the medication starts to break down and is no longer effective."</p> <p>On 1/24/06 at 2:50pm, Z4 (Hospital Clinical Nurse Manager - Ambulatory Care Center) stated, "The medication pump is placed internally and has a catheter that goes intrathecally. A needle is used to access the pump and fill it. It is used in a lot of patients with failed back surgeries or cancer patients. These patients have the pump because it is intrathecal so they receive a more concentrated dose. The amount of medication needed orally to treat these patients would never treat their pain. They have horrendous pain. It is actual harm to the patient if they do not receive the pain medication."</p> <p>On 1/24/06 at 1/24/06 at 3:05pm, Z1 (Pain Management Physician) stated, "If the pump is not refilled the patient will have a severe withdrawal from opiates. In R1's situation she has other serious ongoing medical problems and</p> | F9999   |   |                      |   |

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| F9999   | Continued From page 13<br>withdrawal could be life threatening. The pump is used as a salvage device, to control pain when nothing else works. It is a more effective form of pain management. It has less side effects. The pain signals are blocked at the spinal column. If a physician calls and explains that the pump has to be filled then it has to be done. Once they (the facility) have a patient in their care they need to do everything necessary for their care. This was necessary for R1's care." | F9999   |   |                      |   |