

# LOOKING FOR A NURSING HOME FOR A LOVED ONE?

The News-Sentinel regularly brings you information on the results of Allen County nursing homes' annual surveys or inspections. Today's surveys are from the four nursing homes inspected during the second quarter of 2006, including a new facility that had its initial inspection to obtain state licensure and federal approval for Medicare and Medicaid reimbursement.

Although the Indiana State Department of Health's Long-Term Care Division releases a quarterly announcement of facilities that have received no deficiencies, the News-Sentinel's health reporter, Jennifer L. Boen, read through results from all Allen County nursing homes inspected during the second quarter of this year so readers can glean the most information possible.

Survey results from 2005 and the first quarter of 2006 are available at [www.news-sentinel.com](http://www.news-sentinel.com).

Information contained in our reviews comes from the surveys that are open to the public, from the state health department's Web site and from ISDH staff.

In the second quarter, 122 of the state's 522 nursing homes had annual inspections, with 13 of them having deficiency-free surveys. One of the four Allen County facilities that had an annual survey during the second quarter was found deficiency-free. It is St. Anne Home, 1900 Randallia Drive.

Note: Federal Quality Initiative scores are the most recent available; some scores are from 2005, others from 2006.

—Compiled by Jennifer Boen, [jboen@news-sentinel.com](mailto:jboen@news-sentinel.com)

## BEVERLY REHAB & SPECIALTY CARE



**Address:** 2940 N. Clinton St.  
**Phone:** 484-0602  
**Owner:** Beverly Healthcare LLC, Fort Smith, Ark.

**Officers:** David Devereaux, Dwight Kouri, David Mills, John Grobmyer and Tina Chavis

**Most recent change in ownership:** Beverly Enterprises-Indiana Inc., Jan. 1, 1999

**Status:** For profit  
**Administrator:** Liane M. Minier  
**Hire date:** Jan. 21, 2002

**Beds:** 88  
**Census:** 61 as of June 25  
**Most recent annual survey:** Date: June 23

**In substantial compliance?:** No  
**When compliance met:** July 23  
**Deficiencies found in Levels D-L\*\*:** 2D; 2E

**D Level:**  
◆ Facility failed to use special elastic stockings on a resident one day as required in the resident's care plan; facility failed to refer a resident for occupational therapy screening as ordered on her care plan.

◆ A resident who had lost 12 pounds between January and May was to have double portions of food and given finger foods to help keep her weight up, but the facility failed to do so; staff failed to observe another resident with swallowing problems as she ate; dietary department changed the diet of a

resident, including reducing a resident's food portions by half, although there was no doctor's order to do so.

**E Level:**  
◆ Nurses failed to use and/or document alternative interventions before using medications as the first treatment for a resident with Alzheimer's and a seizure disorder. Regulations say nurses were to use other means to "provide reassurance to the resident that she is in a safe environment" before using Ativan, an anti-anxiety drug. Nurses documented only four incidents of behavioral issues between April and June, yet administered Ativan 49 times; in 35 of

the 49 cases, they also failed to document the drug's effect after it was given.  
◆ Housekeeping staff failed to maintain a clean and sanitary environment on both floors of the facility; problems found included strong smell of urine in multiple areas of the building; cracked plaster and broken ceramic tile and baseboard; ill-fitting doors to resident rooms; and dust in air vents.

**Substantiated complaints in 2006:** None  
**Previous year:** Two  
**Federal Quality Initiative scores:** None  
**Staffing hours per resident per day for licensed nursing staff:**

**Beverly:** 1 hour, 19 minutes  
**State average:** 1 hour, 24 minutes  
**National average:** 1 hour, 12 minutes  
**For nursing assistants:** Beverly: 2 hours, 17 minutes  
**State average:** 2 hours  
**National average:** 2 hours, 18 minutes  
**National Nursing Home Compare Score (based on three years of data):** (the lower the score, the better)  
**Beverly:** 55  
**State average:** 155  
**State licensure actions this quarter:** None  
**Federal actions imposed:** None

## BYRON HEALTH CENTER



**Address:** 12101 Lima Road  
**Phone:** 637-3166  
**Owner:** Recovery Health Services Inc., Fort Wayne  
**Officers:** Herb Hernandez and Williams O'Dell  
**Most recent change in ownership:** N/A  
**Other information:** Receives county funding, as well as Medicare and

Medicaid funding  
**Status:** Non-profit  
**Administrator:** Peter A. Marotti  
**Hire date:** Jan. 19, 1998  
**Beds:** 191  
**Census:** 148 as of June 30  
**Most recent annual survey:** Date: June 30  
**In substantial compliance?:** No  
**When compliance met:** Aug. 3  
**Deficiencies found in Levels D-L\*\*:** 2D; 1E

**D Level:**  
◆ The facility failed to provide needed activities compatible with known interests for two residents and failed to notify and take the residents to and from activities; a resident with mental retardation showed interest in music, touching objects and socializing with others and, according to her care plan, staff

members were to ensure she participated in such activities. On June 26, surveyors observed the resident watching TV for 45 minutes around noon, after which a staff member put her in bed with wrist restraints, where she stayed until 6 p.m.; on another day, she was seen restrained in her bed from 7:15 a.m.-3 p.m., even though a variety of music and other activities were offered during those hours. The other resident was to spend up to two-thirds of her time involved in interests and programs. Surveyors observed her lying in her bed for more than eight hours one afternoon.

◆ The facility also failed to follow recommendations to find a guardian for the first resident described above. The woman had no health-care

representative and above the line indicating the guardian's name was a mark with the words "Mark of (resident's name)," meaning she was her own guardian. Yet the woman was considered severely cognitively impaired, with a mental status score of 0 out of 10 points. Administrative staff told surveyors they had 70 other residents, almost half, who also lacked legal guardians. They told surveyors Adult Protective Services informed them that these residents are "in a protective place," so APS would not get involved with guardianship issues.

**E Level:**  
◆ Housekeeping and maintenance failed to keep the facility in good repair; protruding trim pieces were found on elevators, and there were insects and debris on the floors and

dirty air vents; missing or broken and stained ceiling tiles and ceramic tiles were found, as well as broken blinds on the windows, peeling paint, a non-functioning call light, broken and jagged molding and a loose handrail. Surveyors found old popcorn kernels, several deflated balloons and other items behind a TV. Surveyors asked to see what had been repaired or replaced since the September 2005 annual survey. Records showed Byron had spent \$2,590; \$93 was spent on paint.

**Substantiated complaints in 2006:** None  
**Previous year:** None  
**Federal Quality Initiative scores:** None  
**Staffing hours per resident per day for licensed nursing staff:** Byron: 1 hour, 9 minutes

**State average:** 1 hour, 24 minutes  
**National average:** 1 hour, 12 minutes  
**For nursing assistants:** Byron: 1 hour, 53 minutes  
**State average:** 2 hours  
**National average:** 2 hours, 18 minutes  
**National Nursing Home Compare Score (based on three years of data):** (the lower the score the better)  
**Byron:** 63  
**State average:** 154  
**State licensure actions this quarter:** None  
**Federal actions imposed:** None

## COVENTRY MEADOWS



**Address:** 7843 W. Jefferson Blvd.  
**Phone:** 432-4848  
**Owner:** Health & Hospital Corp. of Marion County, Indianapolis/American Senior Communities  
**Officers:** Matthew Gutwein, Patricia Hebenstreit, Greg Porter and Daniel Sellers

**Most recent change in ownership:** None  
**Status:** For profit  
**Administrator:** JoElyn Morris  
**Other information:** Facility opened for business June 5.  
**Beds:** 150  
**Census:** 64 as of Sept. 25  
**Facility's initial licensure and**

**certification survey:** Date: June 9  
**In substantial compliance?:** Yes  
**Deficiencies found in Levels D-L\*\*:** None  
**Substantiated complaints in 2006:** N/A - new facility  
**Federal Quality Initiative scores:** N/A

**Staffing hours per resident per day for licensed nursing staff:** Beverly: N/A  
**State average:** 1 hour, 24 minutes  
**National average:** 1 hour, 12 minutes  
**For nursing assistants:** Coventry: N/A  
**State average:** 2 hours  
**National average:** 2 hours, 18

minutes  
**National Nursing Home Compare Score (based on three years of data):** (the lower the score, the better)  
**Coventry:** N/A  
**State average:** 154  
**State licensure actions this quarter:** N/A  
**Federal actions imposed:** N/A



**ST. ANNE HOME**  
**Address:** 1900 Randallia Drive  
**Phone:** 484-5555  
**Owner:** St. Anne Home of Catholic Diocese of Fort Wayne-South Bend Inc.  
**Officers:** J. William Lester, Mark Schenkel, George Manning, Joan Eichman, James Fitzpatrick and Gary Windmiller

**Most recent change in ownership:** Catholic Charities of Fort Wayne-South Bend Diocese  
**Status:** Nonprofit  
**Administrator:** Mary Haverstick  
**Hire date:** Aug. 4, 1986  
**Beds:** 334 total, with 166 licensed as nursing home beds plus 168 licensed as residential care  
**Census:** 157 as of May 23

**Most recent annual survey:** Date: May 26  
**In substantial compliance?:** Yes  
**Deficiencies found in Levels D-L\*\*:** None  
**Substantiated complaints in 2006:** None  
**Previous year:** None  
**Federal Quality Initiative scores:** None  
**Staffing hours per resident per day**

**for licensed nursing staff:** St. Anne: Unavailable  
**State average:** 1 hour, 24 minutes  
**National average:** 1 hour, 12 minutes  
**For nursing assistants:** St. Anne: Unavailable  
**State average:** 2 hours  
**National average:** 2 hours, 18 minutes

**National Nursing Home Compare Score (based on three years of data):** (the lower the score, the better)  
**St. Anne:** 50  
**State average:** 154  
**State licensure actions this quarter:** None  
**Federal actions imposed:** None

## Explanation

Nursing homes are given deficiencies according to ratings set by the federal government. Although there are A-C ratings, they are the least serious deficiencies and are not tracked in News-Sentinel reports. Levels D-L have the following meanings, with D being less severe and L indicating the most serious deficiency. Levels G-L are particularly cause for concern:

**D: Isolated/minimal harm or potential for actual harm** - A less serious deficiency and isolated to the fewest number of individuals; results in minimal discomfort or has the potential to negatively affect a resident's ability to achieve his or her highest level of functioning.  
**E: Pattern/minimal harm or potential for actual harm** - A less serious deficiency affecting more than a limited number of individuals; results

in minimal discomfort or has the potential to negatively affect residents.  
**F: Widespread/minimal harm or potential for actual harm** - A less serious deficiency that is widespread; results in minimal discomfort or has the potential to negatively affect residents.  
**G: Isolated/actual harm** - A more serious deficiency isolated to the fewest number of individuals;

negatively affects the resident's ability to achieve his or her highest functioning.  
**H: Pattern/actual harm** - A more serious deficiency affecting more than a limited number of individuals; negatively affects residents.  
**I: Widespread/actual harm** - A more serious deficiency that is widespread and/or has the potential to affect a large number of residents.  
**J: Isolated/immediate jeopardy** - The

most serious deficiency, although isolated to the fewest number of residents, staff or occurrences; has caused or is likely to cause serious injury, harm, impairment or death; immediate corrective action required.  
**K: Pattern/immediate jeopardy** - The most serious deficiency affecting more than a limited number of individuals; has caused or is likely to cause serious injury, harm, impairment or death; immediate

corrective action required.  
**L: Widespread/immediate jeopardy** - the most serious deficiency and widespread throughout the facility; places residents in immediate jeopardy, causing or likely to cause serious injury, harm, impairment or death; immediate corrective action required.