

PLAN OF CORRECTION

Name - Provider/Supplier:	
Wi Veterans Home Stordock 700	
Street Address/City/Zip Code:	
N2665 Cty Rd Qq, King, WI 54946	
License/Certification/ID Number (X1):	52A223
Survey Date (X3):	02/27/2015
Survey Event ID Number:	T2W111

ID Prefix Tag (X4)	Provider's Plan of Correction (Each corrective action must be cross-referenced to the appropriate deficiency.)	Completion Date (X5)
	<p>This Plan of Correction constitutes the Wisconsin Veteran's Homes written response to the written allegation of noncompliance for the deficiencies cited. However, submission of this Plan of Correction is not an admission that a deficiency exists or that one was cited correctly. This Plan of Correction is submitted to meet requirements established by state and federal law.</p>	
F 225	<p><i>What corrective action(s) will be accomplished for those residents found to have been affected by the deficient practice:</i></p> <ul style="list-style-type: none"> • Affected member was seen by Primary Care Physician for routine visit on 3/2/14 with issue of pain reviewed and documented on. • Affected member was interviewed by supervisor on 3/9/15 regarding pain control. • Pain assessment done with affected member by nursing staff on 3/15/15. • All the above indicate that member is not having any significant issues with pain control and is satisfied with current pain management. <p><i>How you will identify other residents having the potential to be affected by the same deficient practice and what corrective action will be taken:</i></p> <ul style="list-style-type: none"> • All members receiving narcotic analgesics have the potential to be affected. • All members have the potential to be affected when the facility is conducting an investigation for any potential diversion of medications. <p><i>What measures will be put into place or what systemic changes will be made to ensure that the deficient practice does not recur:</i></p> <ul style="list-style-type: none"> • All nursing supervisory staff have been re-educated on Policy #01-01-20c, <u>Nursing Procedure for Member Abuse, Neglect, Mistreatment, and injuries of Unknown or Known Source</u>, emphasizing that other members that COULD be affected by reportable drug diversion have been interviewed, and these interviews are to be included for all investigations submitted to DQA. • Nursing Supervisor/designee will utilize an audit tool for all investigatory paperwork submitted to DQA to ensure that all required elements for a thorough investigation are completed. • Nursing Supervisor/designee will conduct random audits on members receiving narcotic analgesics using an audit tool for drug diversion prevention. Audits will be done monthly for a three month period and 	April 1, 2015

