

Agency for Health Care Administration

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 55114	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED R-C 10/27/2021
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NAME OF PROVIDER OR SUPPLIER HEARTLAND OF ZEPHYRHILLS	STREET ADDRESS, CITY, STATE, ZIP CODE 38220 HENRY DR ZEPHYRHILLS, FL 33540
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(N 000)	<p>INITIAL COMMENTS</p> <p>A revisit to the relicensure and complaint survey for complaint number 2021001891 and 2021011084, was conducted on _____ and _____ at Heartland of Zephyrhills. The facility had an uncorrected deficiency cited. The facility has been out of compliance since _____.</p>	(N 000)		
(N 201) SS=E	<p>400.022(1)(i), FS Right to Adequate and Appropriate Health Care</p> <p>The right to receive adequate and appropriate health care and protective and support services, including social services; mental health services, if available; planned recreational activities; and therapeutic and rehabilitative services consistent with the resident care plan, with established and recognized practice standards within the community, and with rules as adopted by the agency.</p> <p>This Statute or Rule is not met as evidenced by: Based on observation, interview and record review the facility failed to provide appropriate and adequate health care and services related to 1) staff providing assistance with eating in a timely manner for four (Residents #9, #12, #22, #25) of six dependent residents on the 200 hall and one additional resident (#24) who was dependent on staff for an additional food item requested during the _____ lunch meal, 2) behavior monitoring for seven of seven sampled residents reviewed for the use of _____ medications (#12, #1, #13, #11, #2, #6, #8) out of 49 facility residents receiving _____ medications, 3) obtain physician orders to insert an _____ () line for one (#15) of three residents reviewed for treatment and services, 4) following professional standards of practice for</p>	(N 201)	<p>1. R9 was evaluated by _____ on 11.2.21 and the plan of care was updated. R12 kardex was updated and reflects the need for assistance with meals. R22 no longer resides at the facility. R25 no longer resides at the facility. R24 was evaluated by the IDT team and is independent with meals. R12 no longer receives _____ medications. R1 care plan was updated to include monitoring for behaviors associated with the use of the _____ medications. R13 care plan was updated to include monitoring for behaviors associated with the use of the _____ medications. R11 care plan was updated to include monitoring for behaviors associated with</p>	

AHCA Form 3020-0001 LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE Electronically Signed	TITLE	(X8) DATE
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{N 201}	<p>Continued From page 1</p> <p>obtaining physician orders related to care and removal of the _____ on the _____ access site following _____ treatment for two (#15, #1) of three _____ residents reviewed, and 5) providing necessary treatment and services related to documenting measurements and _____ descriptions for three of three sampled residents (#15, #16, #13) with _____ out of seven total facility residents with _____</p> <p>Findings Included:</p> <p>1. During an observation of the lunch meal on the 200 hall on _____ beginning at 11:50 a.m., two meal carts and one beverage cart were noted to be parked at the top of the hall. Two aides began to pass trays to independent diners at 11:55 a.m. On _____ at 12:00 p.m., Aide A, commented that there were many residents on the 200 hall that needed assistance, and they passed meal trays to the independent diners first. She confirmed that meal trays for dependent diners remained in the closed cart until a staff member was ready to provide assistance. After Aide A obtained a tray for a resident and left the cart, Nurse C approached the meal cart and passed two trays to two independent residents. She then left the cart and returned to the nurse's station.</p> <p>On _____ at 12:15 p.m., two of the unit's three aides were each sitting with a resident assisting them with eating. The third aide was observed providing nail care to Resident #25. The aide was pushing the resident's cuticles _____ prior to painting her nails. After the aide finished polishing the resident's nails, the resident was ask about the meal service. Resident #25 reported that the food usually wasn't very good, no variety and was</p>	{N 201}	<p>the use of the _____ medications. R2 care plan was updated to include monitoring for behaviors associated with the use of the _____ medications. R8 care plan was updated to include monitoring for behaviors associated with the use of the _____ medications. R6 care plan was updated to include monitoring for behaviors associated with the use of the _____ medications. R 15 no longer has an _____ access device. R15 & R1 order was obtained to remove the _____ post _____ days. R15 _____ was assessed on 11.10.21 with measurements obtained and the plan of care updated. R16 no longer resides in the facility. R13 _____ were assessed on 11.10.21 with measurements obtained and the plan of care updated.</p> <p>2. Utilizing the patient response analyzer report in the electronic health record _____ the Interdisciplinary team reviewed resident _____s requiring assistance with meals and validated the plan of care. Utilizing the Dining Observation QAPI tool _____ a comprehensive review of meal service was completed by the Nursing Home Administrator. A comprehensive review of residents receiving _____ medications was completed by the Quality Assurance Consultant to validate residents receiving _____ medications have care plans that include monitoring for behaviors associated with the use of _____ medications. A comprehensive review of current residents with _____ access was completed by the Quality Assurance Consultant/designee to validate appropriate physician orders were</p>	
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{N 201}	<p>Continued From page 2</p> <p>usually cool, but her daughter was bringing lunch for her today. She reported that she would have liked to be given something to drink though as she wasn't meeting her daughter for another half hour. She reported that she often had to wait for something that she asked for as there didn't seem to be much help. It was noted at this time that only three aides were covering the east/rehab side of the building during lunch directly assisting with or ensuring that approximately 26 residents received their afternoon meal. The two nurses assigned to the area and the UM were not observed assisting the residents with the lunch meal.</p> <p>On _____ at 12:17 p.m., the Administrator was found in her office eating pizza while talking with the staffing coordinator. The Administrator was asked where the 200 hall UM could be found. The Administrator reported that she did not know, but she would find her.</p> <p>On _____ at 12:20 p.m., the surveyor returned to the 200 hall after speaking with the Administrator and observed a call light was illuminated/ringing. No staff were present to respond to the light. After five minutes without any staff response, the surveyor asked the resident with the ringing call light (Resident #24) what she needed. The resident reported that her pasta was dry and needed sauce on it. She pointed to her roommate's pasta and commented that the roommate had gravy on it. The Certified Dietary Manager was notified of the request and within another five minutes, the resident was provided with some brown gravy.</p> <p>On _____ at 12:30 p.m., all three aides were observed assisting three residents with eating to include Resident #22.</p>	{N 201}	<p>in place. A comprehensive review of current residents receiving treatments was completed by the Director of Nursing/designee to validate orders and removal schedules if needed were in place. A comprehensive review of current residents with _____ was completed on 11.2.21 by the Quality Assurance Consultant to validate descriptions and measurements were documented in the medical record.</p> <p>3. The Director of Nursing/designee will educate the nursing and interdisciplinary department _____ team members on the Meal Service procedure; on the Behavior Practice Guide; on _____ Flushing, _____ Change; on the _____ nursing procedure; on the Skin Practice Guide on or before the date of compliance.</p> <p>4. Utilizing the Dining Observation QAPI tool <input type="checkbox"/> the Nursing Home Administrator/designee will randomly audit 5 meal times/week x 4 weeks and monthly x2. Results will be reviewed and trended by the QAPI committee for continued compliance. Utilizing the Unnecessary _____ Medications <input type="checkbox"/> Behavior Monitoring QAPI tool the DON/designee will audit 5 residents that receive _____ medications weekly x4 weeks and monthly x2 to validate the care plans include behaviors associated with the medications. Results will be reviewed and trended by the QAPI committee for continued compliance. Utilizing the _____ QAPI tool <input type="checkbox"/> the director of</p>	
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HEARTLAND OF ZEPHYRHILLS

**38220 HENRY DR
ZEPHYRHILLS, FL 33540**

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On _____ at 12:35 p.m., the Activity Aide was observed noted walking down the hall and looking for residents that still needed assistance. She obtained a meal tray and began to assist a resident with eating.

On _____ at 12:40 p.m., Aide B was observed standing next to Resident #12, who was refusing her meal. An attempt to ask Resident #12 about her meal at this time revealed no response from the resident. When Aide B left Resident #12, she obtained another meal tray and sat with Resident #9 to begin assisting with eating. During the meal observation, Resident #9 reported that her meal was good.

On _____ at 12:45 p.m., the UM was observed in her office looking at her computer screen. She was called to the floor and reported that she had just returned from lunch. She asked the staff if they needed help with the lunch meal. At that time, two residents requiring assistance were still waiting to receive their lunch meal.

On _____ at 12:50 p.m. (one hour after meal trays arrived on the hall) the last resident received her tray and received assistance to eat.

On _____ at 1:50 p.m., the Administrator reported that the UM should be providing oversight during the meal process. The Administrator reported that everyone on the hall that was needed was present so the UM probably thought she was able to go to lunch. The Administrator was not aware of who was on the hall and was informed that only three aides were on the hall to assist up to six residents with their meals, one of the three aides was painting Resident #25's nails during lunch, and

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nursing/designee will audit residents with access weekly x4 and monthly x2 to validate appropriate physician orders were obtained. Results will be reviewed and trended by the QAPI committee for continued compliance. Utilizing the _____ QAPI tool the Director of Nursing/designee will audit residents orders weekly times 4 weeks and monthly x2. Results will be reviewed and trended by the QAPI committee for continued compliance. Utilizing the _____ QAPI tool the Director of nursing/designee will audit residents with _____ weekly x4 and monthly x2. Results will be reviewed and trended by the QAPI committee for continued compliance.

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{N 201}	<p>Continued From page 4</p> <p>approximately 20 additional residents needed their trays delivered and set-up.</p> <p>On _____ at 2:35 p.m., the Administrator provided a plan for residents to be assisted at meals. She reported that aides and other nursing staff would be assigned to residents who needed assistance so there would be adequate staff and no resident would need to wait for their meal.</p> <p>A review of the Minimum Data Set (MDS) Assessment for Resident #9, dated _____ revealed the resident's _____ status was _____. She was assessed as requiring _____ with one staff member at meals.</p> <p>A review of Resident #12's MDS dated _____ revealed the resident had a Brief Interview of Mental Status score of 8 indicating moderate _____. She was assessed as requiring _____ with one person physical assistance for eating.</p> <p>A review of Resident #22's MDS completed on _____ revealed she was not able to complete the _____ interview. She was assessed as requiring _____ with one person physical assistance at meals.</p> <p>A review of Resident #25's MDS completed on _____ revealed a _____ of 14 indicating intact cognition and required supervision with one person physical assistance with meals. Review of a nurse's note, dated _____ and written at 10:29 a.m. revealed that Resident #25's daughter requested her nails to be painted because it was her birthday. The note, written by the Unit Manager (UM), indicated the aide was made aware.</p>	{N 201}		

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{N 201}	<p>Continued From page 5</p> <p>A review of Resident #24's MDS completed on revealed a ... of 13 indicating intact cognition. The resident required supervision and set up assistance at meals.</p> <p>2. Review of Resident #12's Physician's orders revealed an order dated for the medication 7.5 mg by at bedtime for nutritional enhancement. The medication is an that is also used as an appetite stimulant. An order for side effect monitoring was also noted: "monitor for side effects related to the use of medications:"</p> <p>A review was conducted of the Minimum Data Set (MDS) Assessment conducted on for Resident #12. The assessment documented the resident as having moderately function. The assessment documented her use of no but the use of an</p> <p>A care plan had been developed on and revised on for Resident # 12's use of the The Focus of the care plan identified the risk for adverse effects of the medication and her diagnosis of for its use. Interventions included evaluating the effectiveness and the side effects of the medication for possible decrease or elimination of the medication. Also, the physician was to be notified of a decline in the resident's ADL (activities of daily living) abilities or decline in/behavior related to a dosage change. The physician was to be notified of signs of adverse reactions as well. The care plan included no interventions related to</p>	{N 201}		

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{N 201}	<p>Continued From page 6</p> <p>monitoring for behaviors associated with the use of _____ medications.</p> <p>Review of the resident's Medication and Treatment Records did not reveal guidance and an area to document the presence or absence of behaviors that the resident might be eliciting. There was an order to monitor side effects of the medication with the clarification that "my initials indicate absence of signs and symptoms of side effects." There was no guidance that side effects when present needed to be documented in the nurse's notes, or what specific side effects the resident might elicit.</p> <p>A review of the nurse's progress notes for _____ revealed the resident was followed by Hospice and had an increase in her _____ medication on _____. Nurses notes prior to _____ revealed scratching was noted on her _____ inner thighs which received treatment. On _____ at 16:06 (4:06 p.m.) and _____ at 17:58 (5:58 p.m.) the nurses note documented the resident's behavior of screaming and yelling and refusing the treatment.</p> <p>On _____ during the lunch meal, Resident #12 was observed being assisted with her meal. The resident was observed taking a small bite of fish out of her _____ and placing it _____ on her plate. The aide commented that the resident usually did that and didn't usually eat anything. An observation of Resident #12 on _____ during the lunch meal revealed she was accepting bites of the fruit cocktail from her lunch tray. The aide confirmed that she refused the meal but seemed to be enjoying the sweet fruit.</p> <p>A review of the resident's _____ revealed upon admission on _____ the resident had _____ On _____ the resident</p>	{N 201}		

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{N 201}	<p>Continued From page 7</p> <p>... on ... the resident ... and on ... the resident</p> <p>**Resident #1 was admitted to the facility initially on ... The resident had current diagnoses that included major ... and ... Review of the resident's active Physician's orders revealed an order for ... 100 mg, give 300 ml by ... at bedtime for major ... and and order for ... 15 mg, give one cap by ... at bedtime for ... Current orders were also noted to monitor the side effects related to the use of the ... medications and ... The order included the statement, "My initials indicate the absence of signs and symptoms of side effects."</p> <p>Resident #1 had an Annual MDS Assessment conducted on ... which identified the resident as having no ... The assessment included the diagnoses of ... and ... with an ... and ... administered on 7 days during the week.</p> <p>A care plan was reviewed for the Focus area of being at risk for behavior symptoms related to ... and ... as well as noncompliance with the ordered diet and lab draws initiated ... and revised on ... Interventions included observations for mental status/behavior changes when new medications are started or with changes in dosages. The Physician's order for monitoring side effects was not included as an intervention in the care plan for at risk behaviors and there was no guidance given in the care plan for what behaviors should</p>	{N 201}		

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{N 201}	<p>Continued From page 8</p> <p>be monitored based on the medications the resident was taking.</p> <p>**On at 9:30 a.m., Resident #13 was lying in bed watching TV. She had no complaints or concerns, and no behaviors were noted.</p> <p>Record review of the quarterly Minimum Data Set (MDS) dated showed a score of 15 (.....). Section N, Medications, showed she was receiving</p> <p>Record review of the progress notes showed On she refused to have vital signs for the 11 p.m. to 7 a.m. shift on through</p> <p>On she refused a bed bath and shower several times.</p> <p>On, resident refused to be</p> <p>On at 22:26 (10:26 p.m.) just before dinner, when observed resident, she was crying. The resident cries often and stated she was tired of being sick and does not like to be touched. The Nurse Practitioner was informed.</p> <p>Review of physician orders, Treatment Administration Record (TAR), and Medication Administration Record (MAR) for showed Resident #13 received 15 mg at bedtime for Monitor for side effects related to use of medication, My initials indicate absence of signs and symptoms of side effects, monitor every shift for side effects of medications. The physician orders and / or MAR lacked orders and monitoring of behaviors for medications.</p> <p>Review of the care plans showed a care plan for resistive / noncompliant with treatment / care</p>	{N 201}		
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{N 201}	<p>Continued From page 9</p> <p>being changed and not having . . . vac changed related to belief that treatment is not needed / working as of Interventions included but not limited to allow for flexibility in Activity of Daily Living (ADL) routine to accommodate . . . , preferences and customary routine and provide education about risks of not complying with therapeutic regimen. Care plan for at risk for adverse effects related to the use of . . . / . . . medication as of Interventions included but not limited to evaluate effectiveness and side effects of medications for possible decrease / elimination of drugs, report to physician signs of adverse reaction. Care plan for at risk for adverse effects related to use of . . . medication as of Interventions included but were not limited to evaluate effectiveness and side effects of medication for possible decrease / elimination of drugs, report to physician signs of adverse reactions. The care plan included no interventions related to monitoring for behaviors associated with the use of medications.</p> <p>**Record review of Resident #11's quarterly Minimum Data Set (MDS) dated showed a (. . .) score of 08 (moderately). Section N, Medications, showed she was receiving medication.</p> <p>Record review of active physician orders and the MAR showed Resident #11 received 50 mg by at bedtime for as of Monitor for side effects related to the use of medication, My initials indicate absence of signs and symptoms of side effects. Check every shift as of 50 mg</p>	{N 201}		
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{N 201}	<p>Continued From page 10</p> <p>daily for Monitor for side effects related to use of medication, My initials indicate absence of signs and symptoms of side effects. Check every shift. 25 mg twice a day for ending on The MAR lacked monitoring for side effects for for The physician orders and/or MAR lacked orders and monitoring of behaviors for medications.</p> <p>Progress notes reviewed showed on the resident had increased different from her normal Resident stated, "I am so nervous I don't think I can breathe." saturation was 93% on room air. was applied and resident eventually calmed down. A call was placed to the Nurse Practitioner and received an order to check her The for was discontinued on and was started on The progress notes, physician orders and/or MAR lacked any documentation regarding her behaviors post medication change.</p> <p>Record review of the care plans showed the resident was an exit seeking / elopement risk related to initiated and revised Interventions included but were not limited to calmly redirect to an appropriate area, alert bracelet, and check for placement and function daily. Care plan for risk for adverse effects related to use of medication, initiated on and revised on Interventions included but were not limited to evaluate effectiveness and side effects of medications for possible decrease / elimination of drugs; notify physician of decline in ADL ability or / behavior related to a dosage change.</p>	{N 201}		
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{N 201}	<p>Continued From page 11</p> <p>provide patient teaching of risks and benefits of medications as needed, report to physician signs of adverse reactions. No care plan was present related to . . .</p> <p>**On . . . at 1:40 p.m., Resident #2 was sitting at bedside watching TV. She was dressed and groomed for the day and had her personal possessions in her room. No behaviors were noted.</p> <p>Record review of the annual Minimum Data Set (MDS) dated . . . showed a . . . (. . .) score of 15 (. . .). Section N, Medications, showed she was receiving an . . .</p> <p>Record review of active physician orders and . . . MAR showed . . . ER (XL) 24-hour 150 mg every other day for . . . Monitor for side effects related to use of . . . medication, . . . My initials indicate absence of signs and symptoms of side effects, monitor every shift. . . . 10 mg at bedtime for . . . Monitor for side effects related to use of . . . medication, . . . My initials indicate absence of signs and symptoms of side effects, monitor every shift. . . . 50 mg give 0.5 tablet by . . . at bedtime on Tuesday, Wednesday, Thursday, Friday, Saturday, Sunday for . . . with . . . Monitor for side effects related to use of . . . medication, . . . My initials indicate absence of signs and symptoms of side effects, monitor every shift. Monitor for side effects related to use of . . . medications. Check every shift as of . . . and discontinued on . . . Monitor for side effects related to use of . . . medication, . . . (. . . ileus). My initials indicate</p>	{N 201}		

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NAME OF PROVIDER OR SUPPLIER HEARTLAND OF ZEPHYRHILLS	STREET ADDRESS, CITY, STATE, ZIP CODE 38220 HENRY DR ZEPHYRHILLS, FL 33540
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{N 201}	<p>Continued From page 12</p> <p>absence of signs and symptoms of side effects, monitor every shift. The physician orders and / or MAR lacked orders and monitoring of behaviors for , , , , medications.</p> <p>Review of the care plans showed resident on , , , , medications related to , , , , and , , , , initiated on , , , , and revised on , , , , . Interventions included but were not limited to provide non-pharmacological interventions for symptom management such as provide quiet environment, decrease stimuli, monitor for thirst / hunger, and provide fluids / snacks of resident's preference, redirection. Monitor for signs and symptoms of adverse side effects related to , , , , medication use and report to physician as indicated. Resident at risk for behavior symptoms related to , , , , recurrent , , , , and history of , , , , scratches self-picks scabs revised , , , , . Interventions included but were not limited to attempt , , , , drug reduction per physician orders, for behaviors / , , , offer to dim the lights, soft music, snacks, or TV; provide for comfort by allowing resident to validate her feelings, offer support; use consistent approaches when giving care. Resident had manipulative behavior that was related to inability to adjust to loss of past roles revised , , , , . Interventions included but was not limited to acknowledge moods in 1:1 interaction with resident and assist in identifying positive coping mechanisms; administer medications per physician orders and observe for effectiveness and signs and symptoms of side effects; assist in identifying positive coping mechanisms. Resident had a risk for changes in , , , , related to diagnoses of , , , , recurrent , , , , and , , , , and history of , , , , revised , , , , . Interventions included but were not</p>	{N 201}		
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{N 201}	<p>Continued From page 13</p> <p>limited to administer medications per physician orders and observe for effectiveness and signs and symptoms of side effects, assess for physical / environmental changes that may precipitate change in . . . ; elicit family for support, watch TV or movies, read books or magazines; observe for mental status / . . . state changes when new medication is started or with dose changes; offer choices to enhance send of control and validate feelings of loss. The care plan included no interventions related to monitoring for behaviors associated with the use of . . . medications.</p> <p>**Observed Resident #8 was lying in bed watching TV on . . . at 1:50 p.m. He had eaten his lunch. No behaviors were noted.</p> <p>Record review of the annual Minimum Data Set (MDS) dated . . . showed a . . . (. . .) score of 15 (. . .).Section N, Medications, showed he was receiving . . . and . . . medication.</p> <p>Record review of physician orders and MAR showed Resident #8 received . . . 100 mg at bedtime for . . . Monitor for side effects related to use of . . . medication, . . . My initials indicate absence of signs and symptoms of side effects, monitor every shift. . . . 7.5 mg three times a day for . . . Monitor for side effects related to use of . . . medication, . . . My initials indicate absence of signs and symptoms of side effects, monitor every shift. The physician orders and/or MAR lacked orders and monitoring of behaviors for . . . medications.</p> <p>Record review of the care plans showed the</p>	{N 201}		

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{N 201}	<p>Continued From page 14</p> <p>resident was at risk for adverse effects related to use of _____ medication, revised _____. Interventions included but were not limited to evaluate effectiveness and side effects of medications for possible decrease / eliminations of _____ drugs. Provide resident with teaching of risks and benefits of medications as needed. Report to physician signs of adverse reactions. The care plan included no interventions related to monitoring for behaviors associated with the use of _____ medications.</p> <p>Record review of progress notes for the month of _____ did not show any documentation related to behavior monitoring.</p> <p>**Observed Resident #6 lying in bed on at 1:48 p.m. watching TV. She would not answer any interview screening questions.</p> <p>Record review of the quarterly Minimum Data Set (MDS) dated _____ showed a _____ (_____) score of 09 (moderately _____). Section N, Medications, showed she was receiving an _____, _____, and _____ medications.</p> <p>Record review of the physician's orders and _____ MAR 2021 showed Resident #6 received _____ 0.5 mg at bedtime for _____ and hold for _____. Monitor for side effects related to use of _____ medication, _____. My initials indicate absence of signs and symptoms of side effects, monitor every shift. _____ 25 mg at bedtime for _____. Monitor for side effects related to use of _____ medication, _____. My initials indicate absence of signs and symptoms of side effects, monitor every shift. _____ 25 mg daily for _____.</p>	{N 201}		

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{N 201}	<p>Continued From page 15</p> <p>Monitor for side effects related to use of _____ medication, _____. My initials indicate absence of signs and symptoms of side effects, monitor every shift. The physician orders and/or MAR lacked orders and monitoring of behaviors for _____ medications.</p> <p>Record review of progress notes for the month of _____ do not show any documentation related to behavior monitoring.</p> <p>Record review of the care plans showed the resident was at risk for behavior symptoms related to _____, and coprophagia (ingestion of feces) revised _____. Interventions included but were not limited to offer dim lights, TV, snacks, soft music; toilet after meals and at bedtime; use consistent approaches when giving care. The resident had inappropriate _____ behavior, attempting to be overly affectionate with male residents related to _____ and _____ revised _____. Interventions included but were not limited to distract, if possible, explain and explore effects of behavior on others, offer dim lights, TV, snacks, soft music; remain calm and avoid angry reactions if exhibits behavior, set limits for acceptable behavior. At risk for changes in _____ related to _____, and _____ revised _____. Interventions included but not limited to administer medications per physician orders and observe for effectiveness and signs and symptoms of side effects. Elicit family support, watching TV, reading books/ magazines; validate feelings of loss. Episodes of _____ related to diagnoses of _____ initiated _____. Interventions included but not limited to administer medications per physician orders, identify and decrease environmental stressors. At risk for adverse effects related to use of _____</p>	{N 201}		

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{N 201}	<p>Continued From page 16</p> <p>..... medications, .. revised .. Interventions included but was not limited to evaluate effectiveness and side effects of medications for possible decrease / elimination of drugs; notify physician of decline in ADL ability or / behavior related to a dosage change; report to physician signs of adverse reactions. At risk for adverse effects related to use of / medication, .. revised .. Interventions included but was not limited to evaluate effectiveness and side effects of medications for possible decrease / eliminations of drugs; notify physician of decline in ADL ability or / behavior related to a dosage change; report to physician signs of adverse reaction. At risk for adverse effects related to use of medication, .. revised .. Interventions included but was not limited to evaluate effectiveness and side effects of medications for possible decrease / eliminations of drugs; notify physician of decline in ADL ability or / behavior related to a dosage change; report to physician signs of adverse reaction.</p> <p>**During an interview on at 1:57 p.m. the new interim DON entered, Staff G. She stated that today was her first day in the position of DON. She stated that all the other nurses, Unit Managers and MDS coordinator would be going to their assigned jobs. She stated that they were looking through the electronic medical records today. She stated that they have been seeing some issues. She stated that she recognized that the behavior monitoring was not there. She stated that she was going to do audits with the UM and the MDS coordinator and put in behavior monitoring related to specific issues for that specific resident.</p>	{N 201}		
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{N 201}	<p>Continued From page 17</p> <p>**During an interview on _____ at 4:26 p.m. the consultant pharmacist stated that that they document by exception for behavior monitoring. He stated, " this was the facility's corporate rules." The behavior documentation will be found in the behavior notes, progress notes, or physician notes. If the resident was not having behaviors, then they will not list anything. If a dose increases or there was a _____, initiated, they should have documentation. He stated, "No documentation then no behaviors." He stated that he looks at anybody on _____ medications and he looks at the notes and looks for behaviors. "If no documentation of behaviors, then will see notes for gradual reduction in dosages. Should be documentation in the electronic medical record for the side effects, _____ increased _____. My initials signify no side effects. They have to monitor for behaviors but not document unless there are behaviors. Do not put in MAR just in the notes. If new _____, monitor the behaviors, and why on medications. If no behaviors med is successful."</p> <p>**Review of the facility's "Behavior Practice Guide," dated _____ showed behavior symptoms may become problematic for an individual if they are: socially unacceptable, stressful to others, interfering with care, presenting safety risk. _____ is defined as the way that someone is feeling. Alterations in an individual's _____ and, or behavior may be triggered by a wide variation of antecedents. _____ AND BEHAVIOR _____: the Interdisciplinary process surrounding _____ and behavior identification is accomplished through recognition of symptoms that commonly arise with adjustment _____ and _____: The experience of _____</p>	{N 201}		
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{N 201}	<p>Continued From page 18</p> <p>is highly individualized. The factors contributing to _____, can trigger fears that escalate into an exaggerated, _____ response when not addressed. _____ is a _____ comprised of affective, _____ and or physiologic symptoms. Severity can range from mild to severe. In many elderly persons, _____ commonly coexists with _____. The more severe medical illness and associated functional _____, the elderly patient exhibits the greater the likelihood of _____. INITIAL PLAN OF CARE: Upon completing an evaluation, the interdisciplinary team (IDT) develops a patient specific, or person centered care plan including goals to prevent and manage behavioral symptoms. Any new behavior symptom suggests a need to reevaluate the plan of care. Pharmacological interventions may be indicated. COMPREHENSIVE CARE PLAN: Based upon the findings of the MDS and other evaluations, the patient's comprehensive care plan is developed, or initial plan of care is updated to include individualized patient interventions that focus on the patient's specific risk factors. Interventions are continually evaluated for effectiveness and updated as the patient's condition and needs change. INTERVENTIONS FOR CONSIDERATION: Selection of the most appropriate interventions is dependent on accurate identification of the behavior, possible root causes and ruling out interventions based on narrowing of possible trigger (s) to the behavior. Begin by evaluating the patient for any unmet physical needs....Provide for any unmet physical need. If the behavior continues, evaluate for possible unmet _____ need....Continue this individualized problem-solving _____, by evaluating the patient's environment for a possible contribution to behavior. MEDICATIONS: Select medications</p>	{N 201}		
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{N 201}	<p>Continued From page 19</p> <p>may be prescribed specifically targeting modification of patient behavioral symptoms. include _____ DOCUMENTATION: Patient behavioral symptoms are documented in the clinical record.</p> <p>3. On _____ at 9:00 a.m., Resident #15 was observed lying in bed. An _____ access was observed in his right _____. The _____ was dated _____. An _____ pole and pump was at the bedside. No _____ medication was observed hanging from the pole at the time of observation.</p> <p>Review of Resident #15's Admission Record Report revealed an admission date of _____ and diagnoses to include _____, and _____. Record review of the admission Minimum Data Set (MDS) assessment dated _____ showed a _____ (_____) score of 12 (moderate _____). Section G, Functional Status showed he required _____ of two for bed mobility, transfers, and toileting. Section M, Skin Conditions showed he had one _____ on admission due to coverage of _____ bed by _____ and/or eschar.</p> <p>Record review of the physician orders showed a culture of the _____ to be performed on _____. An order to change a central line/ _____ was written and discontinued on _____ and _____; flush line with 5 ml normal _____ before and after medication administration twice a day as of _____; line _____ change every Sunday as of _____ to start on _____; line _____ insertion site to be _____</p>	{N 201}		

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{N 201}	<p>Continued From page 20</p> <p>changed every 72 hours from the original placement time as of _____ to start on _____; _____ in D5W 400 mg/200 ml every 24 hours for _____ for 7 days as of _____; No orders could be found for initial insertion or tubing changes.</p> <p>Review of the Admission Evaluation dated _____ showed that the resident did not have an _____ present upon admission.</p> <p>Review of nursing progress notes showed: On _____ at 00:16 (12:06 a.m.) was started to right _____ on second attempt with 22-gauge angiocath. On _____ at 21:12 (9:12 p.m.) Resident returned from _____ at 5 p.m. and was alert and had no _____. Resident continued on _____ with no adverse reactions. _____ flushed and patent. On _____ at 01:10 a.m. Resident on _____ for _____. No adverse reactions noted. _____ site to right _____ without signs of _____.</p> <p>Record review of the care plans showed: _____ of _____/skin initiated on _____ (date of survey). Interventions included but not limited to administer medication per physician orders. Second care plan for potential for complications at insertion site: _____, inserted at right _____ on _____ (date of survey, was started on _____). Interventions included but not limited to change _____ tubing per physician orders; do not take _____ in right arm; _____ change by physician order and as needed if soiled or wet; flush _____ line per physician orders; report to physician any signs and symptoms of _____/infiltration.</p> <p>On _____ at 1:57 p.m., the Nursing Home</p>	{N 201}		
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{N 201}	<p>Continued From page 21</p> <p>Administrator (NHA) and Staff E, interim Director of Nursing /MDS Coordinator (DON/MDS) and Staff F, Regional Nurse, reviewed the medical record and verified that Resident #15 did not have a physician's order to place a _____</p> <p>Review of the facility's policy, "Medication and Treatment Administration Guidelines," updated on _____ showed MEDICATION AND TREATMENT ORDERS: A complete treatment order includes: date and time; name of the patient; site of application; cleansing agent if indicated; frequency, including end date orders if applicable; directions for use, if applicable; primary and secondary _____, if applicable; name of the medical practitioner giving the order; signature of medical practitioner if the order is written; name, title and signature of nurse transcribing the order.</p> <p>4. On _____ at 9:00 a.m., Resident #15 was observed lying in bed with a clean and dry _____ on his upper left arm. He stated that he went to _____ yesterday and that was the _____ they applied at _____. He stated that nursing staff get around to removing the _____ from his arm.</p> <p>Review of the Admission Record Report for Resident #15 revealed an admission date of _____ with diagnoses that included _____ (_____) with dependence on _____. Record review of the admission Minimum Data Set (MDS) dated _____ showed a _____ (_____) score of 12 (moderately _____). A review of the physician's orders related to the resident's _____ care, dated _____ and _____, included a high protein _____ diet.</p>	{N 201}		
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{N 201}	<p>Continued From page 22</p> <p>check (.....) site - / every shift for site / check; site observation as needed and one time a day, and per physician order Tues, Thurs, Sat. There was no order for removal of the that was applied to the after the treatment.</p> <p>A review of the resident's 12 page care plan, initiated upon admission revealed no additional care plans related to the access site.</p> <p>A review of the resident's Nursing Notes from until did not reveal documentation that the had been removed, only that the site had been observed and the and was noted.</p> <p>**On at 10:10 a.m., Resident #1 was observed lying in bed on his left side, watching a video. A access site was observed on the upper left arm.</p> <p>A review of Resident #1's Admission Record Report revealed an original admission date of with diagnoses that included with dependence on A review of the physician's orders related to the resident's care, revealed orders for the resident's at the center at 12 p.m., every Monday, Wednesday, Friday for , check the (.....) site / every shift, and site observation every shift, site observation as needed.</p> <p>There was no additional orders for the care of the access, including when to remove the after the treatment. Review of the nurse's notes revealed documentation that the and</p>	{N 201}		

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{N 201}	<p>Continued From page 23</p> <p>... were present after ... treatment on ... (... site clean and dry, positive and ... noted).</p> <p>In an interview with the Administrator and the acting Director of Nurses on beginning at 2:00 p.m., it was confirmed that there should be an order for care of the site to include when to remove the ... applied after the site had been accessed for ...</p> <p>The Administrator confirmed during that interview that the document ... Guidelines was the document used to train staff and also used as reference for care for the ... residents. Review of the "... Guidelines" dated ... revealed:</p> <p>Both the center and the ... facility are responsible for shared communication regarding patients receiving ... services... Collaborative communication included information regarding physician and treatment orders, and adverse reactions or complications and recommendations for follow up observations and monitoring including those related to the ... access site.</p> <p>5. Record review of the facility's policy, "Phase 1: Assess, ... Prevention Pathway" dated 2013 showed the tool can be used by the ... team as a training tool for frontline staff and as an ongoing clinical reference tool. Patient is admitted or readmitted, do both a ...-to-... skin evaluation and ... Document skin issues, including color, temperature, ... moisture status, integrity, ... if present or known, healed, ... If have a current or healed, ... to document</p>	{N 201}		

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STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 55114	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED R-C 10/27/2021
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NAME OF PROVIDER OR SUPPLIER HEARTLAND OF ZEPHYRHILLS	STREET ADDRESS, CITY, STATE, ZIP CODE 38220 HENRY DR ZEPHYRHILLS, FL 33540
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(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
{N 201}	<p>Continued From page 24</p> <p>the , : location, length, width, depth, PUSH tool. The team stages the , Obtain order for treatment from physician and obtain consultations needed. Daily body audits performed. performed.</p> <p>**Review of Resident #15's admission Minimum Data Set (MDS) assessment dated showed a () score of 12 (moderate). Continued review of the MDS revealed the resident required of two for bed mobility, transfers, and toileting and had one on admission due to coverage of bed by and/or eschar.</p> <p>Record review of the physician orders showed a culture of the to be performed on ; cleanse and apply [. care product], and apply foam every day as needed as of and increased to every 8 hours on</p> <p>Review of the Admission Evaluation dated revealed under Clinical Evaluation of Skin: open with foam</p> <p>The medical record lacked the " Healing Chart," (PUSH) form or any other documentation of a description or measurements upon admission on</p> <p>Record review of the progress notes showed the following notes related to the , : at 1:39 a.m. on his bottom with a wet to dry and foam in</p>	{N 201}		

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{N 201}	<p>Continued From page 25</p> <p>place to cover the bed.</p> <p>On at 11:37 a.m. Resident was complaining of of the the as needed was given and repositioned for comfort. Resident's provider was in to assess resident and orders received for treatment of</p> <p>On at 12:44 p.m. resident reported no change with of after or . Registered Nurse (RN) notified Nurse Practitioner (NP) of resident concerns of no relief. NP thinks he just needs the changed. RN to change.</p> <p>On at 22:07 (10:07 p.m.) nurse documented care performed.</p> <p>On at 14:47 (2:47 p.m.) to area noted to have an odor and the was saturated with a large amount of drainage. Area noted to have in the middle of bed. Area cleansed and new treatment applied. Writer educated resident to leave in place and to turn onto their side while in bed.</p> <p>On at 13:15 (1:15 p.m.) Resident had one to the . The measured 9.0 cm x 6.0 cm x 3 cm. and had moderate drainage. The bed was 75% and 25% eschar. The score was 16. The was recently treated with [care product] and foam padding. Resident had a diagnosis of , left and . Resident was currently doing three times a week. Resident's nutritional intake currently included a high protein diet with [brand name] Liquid Nutritional Supplements, and additional nutritional snacks. His nutritional intake was good, and appetite had been normal. Recent labs showed elevated () of 31, and of 5.39 also showed a low total protein</p>	{N 201}		
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{N 201}	<p>Continued From page 26</p> <p>of 5.6 and Hemoglobin at 8.9 and at 27.3. Resident denied during change. culture was pending. Treatments will continue as ordered pending culture. Resident updated on plan of care and status of The care plan was updated on status. Staff D, Registered Nurse (RN) On at 23:00 (11:00 p.m.) resident returned from in stable condition. The care was rendered, and he tolerated it well.</p> <p>Record review of the Culture Results dated showed (1) heavy growth of, (2) moderate growth of and (3) heavy growth of The organism one and two was sensitive to</p> <p>Continued review of the clinical record revealed additional progress notes related to the</p> <p>. at 10:26 a.m. Weekly Rounds showed resident had one to the currently measured 9.0 cm x 6.0 cm x 3.5 cm, and had moderate yellow drainage. The bed was 75% and 25% eschar. The score was 16. Awaiting Medical Doctor (MD) reassessment of Resident currently has a diagnoses of and a left</p> <p>Resident's nutritional intake included a high protein diet, with [name brand] Liquid Nutrition with additional nutritional snacks. Nutritional intake has been adequate with a good appetite. culture completed; results sent to MD awaiting new orders from culture results. changed per MD orders; resident reports no with treatment. Resident updated on plan of care and status of</p>	{N 201}		

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{N 201}	<p>Continued From page 27</p> <p>Staff D, Registered Nurse (RN) On _____ at 01:10 a.m. Resident on _____ for _____. No adverse reactions noted. _____ site to right _____ without signs of _____.</p> <p>On _____ at 11:05 a.m. Resident was up in wheelchair for _____. Resident _____ saturated foam _____, and was half off. RN changed _____ per MD order, resident tolerated. Well. Resident denies removing the _____, "I didn't take it off, it _____ off." _____ with strong odor, continues on _____ for _____. No signs and symptoms of reaction from _____.</p> <p>Record review of the care plans related to the _____ revealed a focus of _____ of _____/skin initiated on _____ (date of survey). Interventions included but not limited to administer medication per physician orders.</p> <p>During an interview on _____ at 1:57 p.m., the Nursing Home Administrator (NHA), the interim Director of Nursing /MDS Coordinator (DON/MDS), and the Regional Nurse, verified that Resident #15 did not have any _____ sizes documented on admission. The Regional Nurse reported that when not measuring _____ on admission and throughout the resident's stay, "It can worsen, the _____, and not know it." They stated that they expected to see both a _____ and _____ care plan for Resident #15 that had been initiated before _____, since he was admitted on _____.</p> <p>**Review of Resident #16's admission record report revealed an admission date of _____ and diagnoses to include _____, COVID-19, _____ and _____ and _____. Record review of the admission _____.</p>	{N 201}		

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{N 201}	<p>Continued From page 28</p> <p>Minimum Data Set (MDS) dated ... showed a () score of 15 (). Section G Functional Status showed she required ... of two for bed mobility, transfers, and toileting.</p> <p>Record review of physician orders showed cleanse ... right ... and left ... with normal ... and apply [care product] gel and foam ... daily and as needed as of ... through ... A new order on ... to cleanse ... right ... and left ... with normal ... and apply xeroform gauze and cover with foam ... daily and as needed. Treatment Administration Record (TAR) showed orders performed as given.</p> <p>Review of the Admission Evaluation dated ... showed under Clinical Evaluation of Skin, ... right ... left ...</p> <p>Record review of the ... Healing Chart (PUSH) forms times three dated ... showed Resident #16 had a ... on her right ... and the form lacked sizes or healing graph. Had a PUSH form for the Left ... and it lacked sizes or healing graph. Had a PUSH form for ... which had a dated section of ... showing ... was 1.5 x 0.8, with light ... and ... tissue. No additional measurements of ... could be located in the clinical record.</p> <p>Review of care plans showed a risk for alteration in skin integrity related to ... mobility initiated ... Interventions dated ... included encourage to reposition as needed;</p>	{N 201}		

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{N 201}	<p>Continued From page 29</p> <p>pressure redistributing device on bed/chair. A second care plan showed resident had a _____ on the right _____. Interventions included to administer treatment per physician orders, daily body audit, _____ management and repositioning during Activities of Daily Living. The care plan and all interventions were initiated on _____ by Staff D, Registered Nurse (RN).</p> <p>Record review of the progress notes showed: On _____ resident had a _____ to left _____, right _____ and two on her _____. Treatment was in place for _____.</p> <p>On _____, resident had treatment to _____ and _____, continued as ordered.</p> <p>On _____, progress note by Nurse Practitioner showed no mention of _____ and not mentioned in plan.</p> <p>On _____, progress note by Nurse Practitioner showed no mention of _____ and not mentioned in plan.</p> <p>On _____, left _____, cleansed with normal _____ and applied [_____ care product] gel and foam sponge until left _____ is healed.</p> <p>On _____ at 12:21, Medical Doctor (MD) updated _____ care, new orders received for right and left _____ and _____. Registered Nurse (RN) notified the resident of changes and all questions were answered.</p> <p>On _____ at 1:57 p.m., an interview was conducted with the NHA, interim DON/MDS Coordinator, and the Regional Nurse. The interim DON/MDS Coordinator and the Regional Nurse verified that Resident #16 had _____ on admission on _____. They also verified that there were no _____ sizes taken on admission.</p>	{N 201}		
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{N 201}	<p>Continued From page 30</p> <p>The interim DON/MDS coordinator stated that the sizes are to be documented in the progress notes. She stated, "I thought they were getting done, but they were not", (related to ... sizing). The DON/MDS coordinator and Regional Nurse verified that only one of the three ... Resident #16 had been measured since admission. Staff D, Registered Nurse, Unit Manager (RN/UM) entered the interview and stated that starting ..., she will be performing the ... sizes, during weekly rounds. Staff D stated that ... sizes on admission are to track and see if the ... was getting better or not.</p> <p>**Clinical record review for Resident #13 revealed she was initially admitted on ... with readmissions after hospital stays on ... and a hospital stay from ... until ... Review of the resident's diagnoses included a , ... of the right heel, unspecified stage and , ... of the ... region, unspecified stage.</p> <p>A readmission assessment for Resident #13 was completed upon return to the facility from the hospital on ... The section of the assessment for the clinical evaluation of the skin included skin issues at the right heel and the , but contained no description of either site, including neither measurements nor stage.</p> <p>A review was conducted of the resident's MDS Quarterly Assessment completed on ... which identified the resident as having no ... (... score of 15). The resident was assessed as having one ... and one ... , both present upon admission. The resident was assessed as</p>	{N 201}		
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{N 201}	<p>Continued From page 31</p> <p>needing _____ with two staff members for bed mobility and transferring, having an _____ and always _____ of _____.</p> <p>A review was conducted of the Physician's orders and was noted to include an order to cleanse the right heel with normal _____ apply [_____ care product] to the _____ bed and cover with gauze and tape, every day. A second order was noted for negative _____ 125 mm Hg (millimeters of mercury) to _____, every day shift on Monday, Wednesday, and Friday, for the Wound vac (vacuum) to _____, change Monday, Wednesday Friday, every day shift related to _____.</p> <p>A record review of the Skin notes revealed only two notes documenting weekly _____ rounds for _____. On _____ the weekly rounds documented the resident's _____ as: length 6.7 cm x width 7.0 cm x depth 1.2 cm. The _____ bed had 90% _____ with 10% necrosis on the edges. The PUSH (_____ scale for healing) score was 12. The peri- _____ was blanchable without redness. The resident had a _____, ate less than 25% or refused meals and received nutrition support. The resident also had a _____, to her right heel. The length measured 2.5 cm and the width measured 1.5 cm. The PUSH score was 6.</p> <p>Further review of the _____ Skin notes did not reveal another weekly _____ round until 19 days later, on _____. The size of the _____ was documented as: length 5.8 cm x width 6.4 cm x depth 1.2 cm. The _____ bed was described as pink, with 100% _____. The PUSH score was a 16. The peri- _____ was _____.</p>	{N 201}		

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{N 201}	<p>Continued From page 32</p> <p>blanchable without redness and the vacuum was in place and is changed Monday/Wednesday/Friday. The note also included that the resident had a was receiving an beginning on for a ; she ate 25-50% of her meals and received other nutrition support. She had a to her right heel which measured as 2.4 cm and the width 1.5 cm. The PUSH score for the heel was 6.</p> <p>During an interview on that began at 2:00 p.m. with the NHA and interim DON, it was confirmed that the nurses documented their daily care on the Treatment Administration Record and once a week rounds by the Unit Managers would document measurements and observations of the . This documentation would be located under the section entitled Skin in the Progress Notes section of the resident's electronic medical record.</p> <p>During this interview, at approximately 2:35 p.m., the NHA confirmed that in mid- there was a problem with the Registered Nurses being able to cover all tasks and for some tasks there was no follow through. She reported that care had been delegated to the floor nurses to do the treatments and the Unit Managers were to conduct the documentation on the weekly evaluations, but she confirmed she was just made aware that the documentation had not been made.</p> <p>Review of the healing Chart used to monitor trends in the PUSH score over time for Resident #13 revealed that there were entries dated and , and then no entries until</p>	{N 201}		

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

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FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 105599	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____		(X3) DATE SURVEY COMPLETED R-C 10/27/2021
NAME OF PROVIDER OR SUPPLIER HEARTLAND OF ZEPHYRHILLS			STREET ADDRESS, CITY, STATE, ZIP CODE 38220 HENRY DR ZEPHYRHILLS, FL 33540		
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{F 000}	INITIAL COMMENTS A revisit to the recertification and complaint survey for complaint number 2021001891 and 2021011084, was conducted on _____ and _____ at Heartland of Zephyrhills. The facility was not in compliance with 42 CFR 483, Requirements for Long Term Care Facilities. The facility had uncorrected and new deficiencies cited. The facility has been out of compliance since _____.	{F 000}			
{F 677} SS=E	ADL Care Provided for Dependent Residents CFR(s): 483.24(a)(2) §483.24(a)(2) A resident who is unable to carry out activities of daily living receives the necessary services to maintain good nutrition, grooming, and personal and oral hygiene; This REQUIREMENT is not met as evidenced by: Based on observation, interview with facility staff, and review of resident documents the facility failed to ensure staff were properly deployed in order to provide assistance with eating in a timely manner to four (Residents #9, #12, #22, #25) of six dependent residents on the 200 hall and one additional resident (#24) who was dependent on staff for an additional food item requested during the _____ lunch meal. Findings included: During an observation of the lunch meal on the 200 hall on _____ beginning at 11:50 a.m., two meal carts and one beverage cart were noted to be parked at the top of the hall. Two aides began to pass trays to independent diners at 11:55 a.m. On _____ at 12:00 p.m., Aide A, commented that there were many residents on	{F 677}	The statements made on this plan of correction are not an admission of and do not constitute an agreement with the alleged deficiencies herein. To remain in compliance with all federal and state regulations, the center has taken or will take the actions set forth in the following plan of correction. The following plan of correction constitutes the centers allegation of compliance such that all alleged deficiencies cited have been or will be corrected by the date or dates indicated. 1. R9 was evaluated by _____ on 11.2.21 and the plan of care was updated. R12 karex was updated and reflects the need for assistance with meals. R22 no		

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

Electronically Signed

/2021

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.

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

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NAME OF PROVIDER OR SUPPLIER HEARTLAND OF ZEPHYRHILLS			STREET ADDRESS, CITY, STATE, ZIP CODE 38220 HENRY DR ZEPHYRHILLS, FL 33540		
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{F 677}	<p>Continued From page 1</p> <p>the 200 hall that needed assistance, and they passed meal trays to the independent diners first. She confirmed that meal trays for dependent diners remained in the closed cart until a staff member was ready to provide assistance. After Aide A obtained a tray for a resident and left the cart, Nurse C approached the meal cart and passed two trays to two independent residents. She then left the cart and returned to the nurse's station.</p> <p>On at 12:15 p.m., two of the unit's three aides were each sitting with a resident assisting them with eating. The third aide was observed providing nail care to Resident #25. The aide was pushing the resident's cuticles prior to painting her nails. After the aide finished polishing the resident's nails, the resident was asked about the meal service. Resident #25 reported that the food usually wasn't very good, no variety and was usually cool, but her daughter was bringing lunch for her today. She reported that she would have liked to be given something to drink though as she wasn't meeting her daughter for another half hour. She reported that she often had to wait for something that she asked for as there didn't seem to be much help. It was noted at this time that only three aides were covering the east/rehab side of the building during lunch directly assisting with or ensuring that approximately 26 residents received their afternoon meal. The two nurses assigned to the area and the UM were not observed assisting the residents with the lunch meal.</p> <p>On at 12:17 p.m., the Administrator was found in her office eating pizza while talking with the staffing coordinator. The Administrator was asked where the 200 hall UM could be found.</p>	{F 677}	<p>longer resides at the facility. R25 no longer resides at the facility. R24 was evaluated by the IDT team and is independent with meals.</p> <p>2. Utilizing the patient response analyzer report in the electronic health record the Interdisciplinary team reviewed resident's requiring assistance with meals and validated the plan of care. Utilizing the Dining Observation QAPI tool a comprehensive review of meal service was completed by the Nursing Home Administrator.</p> <p>3. The Director of Nursing/designee will educate the nursing and interdisciplinary department team members on the Meal Service procedure and Focus on F-tag 677 on or before the date of compliance.</p> <p>4. Utilizing the Dining Observation QAPI tool the Nursing Home Administrator/designee will randomly audit 5 meal times/week x 4 weeks and monthly x 2. Results will be reviewed and trended by QAPI committee for continued compliance.</p>		

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{F 677}	<p>Continued From page 2</p> <p>The Administrator reported that she did not know, but she would find her.</p> <p>On _____ at 12:20 p.m., the surveyor returned to the 200 hall after speaking with the Administrator and observed a call light was illuminated/ringing. No staff were present to respond to the light. After five minutes without any staff response, the surveyor asked the resident with the ringing call light (Resident #24) what she needed. The resident reported that her pasta was dry and needed sauce on it. She pointed to her roommate's pasta and commented that the roommate had gravy on it. The Certified Dietary Manager was notified of the request and within another five minutes, the resident was provided with some brown gravy.</p> <p>On _____ at 12:30 p.m., all three aides were observed assisting three residents with eating to include Resident #22.</p> <p>On _____ at 12:35 p.m., the Activity Aide was observed noted walking down the hall and looking for residents that still needed assistance. She obtained a meal tray and began to assist a resident with eating.</p> <p>On _____ at 12:40 p.m., Aide B was observed standing next to Resident #12, who was refusing her meal. An attempt to ask Resident #12 about her meal at this time revealed no response from the resident. When Aide B left Resident #12, she obtained another meal tray and sat with Resident #9 to begin assisting with eating. During the meal observation, Resident #9 reported that her meal was good.</p> <p>On _____ at 12:45 p.m., the UM was observed</p>	{F 677}			

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{F 677}	<p>Continued From page 3</p> <p>in her office looking at her computer screen. She was called to the floor and reported that she had just returned from lunch. She asked the staff if they needed help with the lunch meal. At that time, two residents requiring assistance were still waiting to receive their lunch meal.</p> <p>On _____ at 12:50 p.m. (one hour after meal trays arrived on the hall) the last resident received her tray and received assistance to eat.</p> <p>On _____ at 1:50 p.m., the Administrator reported that the UM should be providing oversight during the meal process. The Administrator reported that everyone on the hall that was needed was present so the UM probably thought she was able to go to lunch. The Administrator was not aware of who was on the hall and was informed that only three aides were on the hall to assist up to six residents with their meals, one of the three aides was painting Resident #25's nails during lunch, and approximately 20 additional residents needed their trays delivered and set-up.</p> <p>On _____ at 2:35 p.m., the Administrator provided a plan for residents to be assisted at meals. She reported that aides and other nursing staff would be assigned to residents who needed assistance so there would be adequate staff and no resident would need to wait for their meal.</p> <p>A review of the Minimum Data Set (MDS) Assessment for Resident #9, dated _____ revealed the resident's _____ status was _____, _____, _____. She was assessed as requiring _____ with one staff member at meals.</p>	{F 677}			

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{F 677}	Continued From page 4 A review of Resident #12's MDS dated _____ revealed the resident had a Brief Interview of Mental Status score of 8 indicating moderate _____. She was assessed as requiring _____ with one person physical assistance for eating. A review of Resident #22's MDS completed on _____ revealed she was not able to complete the _____ interview. She was assessed as requiring _____ with one person physical assistance at meals. A review of Resident #25's MDS completed on _____ revealed a _____ of 14 indicating intact cognition and required supervision with one person physical assistance with meals. Review of a nurse's note, dated _____ and written at 10:29 a.m. revealed that Resident #25's daughter requested her nails to be painted because it was her birthday. The note, written by the Unit Manager (UM), indicated the aide was made aware.	{F 677}			
F 686 SS=E	Treatment/Svcs to Prevent/Heal CFR(s): 483.25(b)(1)(i)(ii) §483.25(b) Skin Integrity §483.25(b)(1) Based on the comprehensive assessment of a resident, the facility must ensure that- (i) A resident receives care, consistent with professional standards of practice, to prevent _____ and does not develop pressure	F 686			

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F 686	<p>Continued From page 5</p> <p>... unless the individual's clinical condition demonstrates that they were unavoidable; and (ii) A resident with ... receives necessary treatment and services, consistent with professional standards of practice, to promote healing, prevent ... and prevent new ... from developing. This REQUIREMENT is not met as evidenced by:</p> <p>Based on observation, interview, and record review the facility failed to provide necessary treatment and services related to documenting measurements and ... descriptions for three of three sampled residents (#15, #16, #13) with ... out of seven total facility residents with ...</p> <p>Findings Included:</p> <p>1. During observation and interview on at 9:00 a.m., Resident #15 was observed lying in bed. The resident was observed to have an access in his right ... with a ... dated ... and a clean and dry ... on his upper left arm. The resident stated that this was the ... applied when he went to ... the day before.</p> <p>Review of Resident #15's admission Minimum Data Set (MDS) assessment dated ... showed a ... (...) score of 12 (moderate ...). Continued review of the MDS revealed the resident required ... of two for bed mobility, transfers, and toileting and had one ... on admission due to coverage of ... bed by ... and/or eschar.</p>	F 686	<p>1. R15 was assessed on 11.10.21 with measurements obtained and the plan of care updated. R16 no longer resides in the facility. R13 ... were assessed on 11.10.21 with measurements obtained and the plan of care updated.</p> <p>2. A comprehensive review of current residents with ... was completed on 11.2.21 by the Quality Assurance Consultant to validate descriptions and measurements were documented in the medical record.</p> <p>3. The Director of Nursing/designee will educate the licensed nursing staff on the Skin Practice Guide and Focus on F-tag 686 on or before the date of compliance.</p> <p>4. Utilizing the 686-QAPI tool ... the Director of nursing/designee will audit residents with ... weekly x4 and monthly x 2. Results will be reviewed and trended by QAPI committee for continued compliance.</p>		

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F 686	<p>Continued From page 6</p> <p>Record review of the physician orders showed a culture of the _____ to be performed on _____; cleanse _____ and apply [_____ care product] _____, _____ and apply foam _____ every day as needed as of _____ and increased to every 8 hours on _____.</p> <p>Review of the Admission Evaluation dated _____ revealed under Clinical Evaluation of Skin: _____ open _____ with foam _____.</p> <p>The medical record lacked the " _____ Healing Chart," (PUSH) form or any other documentation of a _____ description or measurements upon admission on _____.</p> <p>Record review of the progress notes showed the following notes related to the _____:</p> <p>_____ at 1:39 a.m. _____ on his bottom with a wet to dry and foam _____ in place to cover the _____ bed.</p> <p>On _____ at 11:37 a.m. Resident was complaining of _____ of the _____, the _____ as needed was given and repositioned for comfort. Resident's provider was in to assess resident and orders received for treatment of _____.</p> <p>On _____ at 12:44 p.m. resident reported no change with _____ of _____ after _____ or _____.</p> <p>Registered Nurse (RN) notified Nurse Practitioner (NP) of resident concerns of no _____ relief. NP thinks he just needs the _____.</p> <p>_____ changed. RN to change _____.</p> <p>On _____ at 22:07 (10:07 p.m.) nurse documented _____ care performed.</p> <p>On _____ at 14:47 (2:47 p.m.) _____ to _____.</p>	F 686			

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F 686	<p>Continued From page 7</p> <p>area noted to have an odor and the _____ was saturated with a large amount of drainage. Area noted to have _____ in the middle of _____ bed. Area cleansed and new treatment applied. Writer educated resident to leave _____ in place and to turn onto their side while in bed.</p> <p>On _____ at 13:15 (1:15 p.m.) Resident had one _____ to the _____. The _____ measured 9.0 cm x 6.0 cm x 3 cm. and had moderate drainage. The _____ bed was 75% _____ and 25% eschar. The _____ score was 16. The _____ was recently treated with [_____ care product] and foam padding. Resident had a diagnosis of _____, left _____ and _____. Resident was currently doing _____ three times a week. Resident's nutritional intake currently included a high protein diet with [brand name] Liquid Nutritional Supplements, and additional nutritional snacks. His nutritional intake was good, and appetite had been normal. Recent labs showed elevated _____ (_____ of 31, and _____ of 5.39 also showed a low total protein of 5.6 and Hemoglobin at 8.9 and _____ at 27.3. Resident denied _____ during _____ change. _____ culture was pending. Treatments will continue as ordered pending _____ culture. Resident updated on plan of care and status of _____. The care plan was updated on _____ status. Staff D, Registered Nurse (RN) On _____ at 23:00 (11:00 p.m.) resident returned from _____ in stable condition. The _____ care was rendered, and he tolerated it well.</p> <p>Record review of the _____ Culture Results dated _____ showed (1) heavy growth of _____, (2) moderate growth of _____</p>	F 686			

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F 686	<p>Continued From page 8</p> <p>..... and (3) heavy growth of</p> <p>..... The organism one and two was sensitive to</p> <p>Continued review of the clinical record revealed additional progress notes related to the ,</p> <p>.....</p> <p>..... at 10:26 a.m. Weekly Rounds showed resident had one to the currently measured 9.0 cm x 6.0 cm x 3.5 cm. and had moderate yellow drainage. The bed was 75% and 25% eschar. The score was 16. Awaiting Medical Doctor (MD) reassessment of</p> <p>Resident currently has a diagnoses of and a left</p> <p>Resident's nutritional intake included a high protein diet, with [name brand] Liquid Nutrition with additional nutritional snacks. Nutritional intake has been adequate with a good appetite. culture completed; results sent to MD awaiting new orders from culture results. changed per MD orders; resident reports no, with treatment. Resident updated on plan of care and status of</p> <p>Staff D, Registered Nurse (RN)</p> <p>On at 01:10 a.m. Resident on for</p> <p>No adverse reactions noted. site to right without signs of</p> <p>On at 11:05 a.m. Resident was up in wheelchair for</p> <p>Resident saturated foam and was half off. RN changed per MD order, resident tolerated. Well. Resident denies removing the "I didn't take it off, it off."</p> <p>with strong odor, continues on</p> <p>No signs and symptoms of reaction from</p>	F 686			

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F 686	<p>Continued From page 9</p> <p>Record review of the care plans related to the _____ revealed a focus of _____ of _____ /skin initiated on _____ (date of survey). Interventions included but not limited to administer medication per physician orders.</p> <p>During an interview on _____ at 1:57 p.m., the Nursing Home Administrator (NHA), the interim Director of Nursing /MDS Coordinator (DON/MDS), and the Regional Nurse, verified that Resident #15 did not have any _____ sizes documented on admission. The Regional Nurse reported that when not measuring _____ on admission and throughout the resident's stay, "It can worsen, the _____, and not know it." They stated that they expected to see both a _____ and _____ care plan for Resident #15 that had been initiated before _____, since he was admitted on _____.</p> <p>2. Review of Resident #16's admission record report revealed an admission date of _____ and diagnoses to include, _____, COVID-19, _____ and _____ . Record review of the admission Minimum Data Set (MDS) dated _____ showed a _____ (_____) score of 15 (_____). Section G Functional Status showed she required _____ of two for bed mobility, transfers, and toileting.</p> <p>Record review of physician orders showed cleanse _____ right _____ and left _____ with normal _____ and apply [_____ care product] gel and foam _____ daily and as needed as of _____ through _____ . A new</p>	F 686			

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F 686	<p>Continued From page 10</p> <p>order on to cleanse right and left with normal .. and apply xeroform gauze and cover with foam daily and as needed. Treatment Administration Record (TAR) showed orders performed as given.</p> <p>Review of the Admission Evaluation dated showed under Clinical Evaluation of Skin, right left ..</p> <p>Record review of the Healing Chart (PUSH) forms times three dated showed Resident #16 had a on her right and the form lacked sizes or healing graph. Had a PUSH form for the Left and it lacked sizes or healing graph. Had a PUSH form for which had a dated section of showing was 1.5 x 0.8, with light and tissue. No additional measurements of could be located in the clinical record.</p> <p>Review of care plans showed a risk for alteration in skin integrity related to mobility initiated Interventions dated included encourage to reposition as needed; pressure redistributing device on bed/chair. A second care plan showed resident had a on the right Interventions included to administer treatment per physician orders, daily body audit, management and repositioning during Activities of Daily Living. The care plan and all interventions were initiated on by Staff D, Registered Nurse (RN).</p> <p>Record review of the progress notes showed:</p>	F 686			

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F 686	<p>Continued From page 11</p> <p>On _____ resident had a _____ to left _____, right _____ and two on her _____. Treatment was in place for _____.</p> <p>On _____, resident had treatment to _____, and _____, continued as _____ ordered.</p> <p>On _____, progress note by Nurse Practitioner showed no mention of _____ and not mentioned in plan.</p> <p>On _____, progress note by Nurse Practitioner showed no mention of _____ and not mentioned in plan.</p> <p>On _____, left _____, cleansed with normal _____ and applied [_____ care product] gel and foam sponge until left _____ is healed.</p> <p>On _____ at 12:21, Medical Doctor (MD) updated _____ care, new orders received for right and left _____ and _____. Registered Nurse (RN) notified the resident of changes and all questions were answered.</p> <p>On _____ at 1:57 p.m., an interview was conducted with the NHA, interim DON/MDS Coordinator, and the Regional Nurse. The interim DON/MDS Coordinator and the Regional Nurse verified that Resident #16 had _____ on admission on _____. They also verified that there were no _____ sizes taken on admission. The interim DON/MDS coordinator stated that the _____ sizes are to be documented in the progress notes. She stated, "I thought they were getting done, but they were not", (related to sizing). The DON/MDS coordinator and Regional Nurse verified that only one of the three _____ Resident #16 had been measured since admission. Staff D, Registered Nurse, Unit Manager (RN/UM) entered the interview and stated that starting _____, she will be</p>	F 686			

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F 686	<p>Continued From page 12</p> <p>performing the . . . sizes, during weekly rounds. Staff D stated that . . . sizes on admission are to track and see if the . . . was getting better or not.</p> <p>Record review of the facility's policy, "Phase 1: Assess, . . . Prevention Pathway" dated 2013 showed the tool can be used by the . . . team as a training tool for frontline staff and as an ongoing clinical reference tool. Patient is admitted or readmitted, do both a . . . -to-skin evaluation and Document skin issues, including color, temperature, . . . , moisture status, integrity, if present or known, healed If have a current or healed to document the . . . : location, length, width, depth, PUSH tool. The . . . team stages the Obtain order for treatment from physician and obtain consultations needed. Daily body audits performed. . . . performed.</p> <p>3. Clinical record review for Resident #13 revealed she was initially admitted on with readmissions after hospital stays on and a hospital stay from until Review of the resident's diagnoses included a of the right heel, unspecified stage and of the region, unspecified stage.</p> <p>A readmission assessment for Resident #13 was completed upon return to the facility from the hospital on The section of the assessment for the clinical evaluation of the skin included skin issues at the right heel and the</p>	F 686			

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F 686	<p>Continued From page 13</p> <p>....., but contained no description of either site, including neither measurements nor stage.</p> <p>A review was conducted of the resident's MDS Quarterly Assessment completed on which identified the resident as having no score of 15). The resident was assessed as having one and one both present upon admission. The resident was assessed as needing with two staff members for bed mobility and transferring, having an and always of</p> <p>A review was conducted of the Physician's orders and was noted to include an order to cleanse the right heel with normal apply [..... care product] to the bed and cover with gauze and tape, every day. A second order was noted for negative, 125 mm Hg (millimeters of mercury) to every day shift on Monday, Wednesday, and Friday, for the Wound vac (vacuum) to change Monday, Wednesday Friday, every day shift related to</p> <p>A record review of the Skin notes revealed only two notes documenting weekly rounds for On the weekly rounds documented the resident's as: length 6.7 cm x width 7.0 cm x depth 1.2 cm. The bed had 90% with 10% necrosis on the edges. The PUSH (..... scale for healing) score was 12. The peri- was blanchable without redness. The resident had a ate less than 25%</p>	F 686			

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F 686	<p>Continued From page 14</p> <p>or refused meals and received nutrition support. The resident also had a _____ to her right heel. The length measured 2.5 cm and the width measured 1.5 cm. The PUSH score was 6.</p> <p>Further review of the _____ Skin notes did not reveal another weekly _____ round until 19 days later, on _____. The size of the _____ was documented as: length 5.8 cm x width 6.4 cm x depth 1.2 cm. The _____ bed was described as pink, with 100% _____. The PUSH score was a 16. The peri-_____ was blanchable without redness and the _____ vacuum was in place and is changed Monday/Wednesday/Friday. The _____ note also included that the resident had a _____ was receiving an _____ beginning on _____ for a _____; she ate 25-50% of her meals and received other nutrition support. She had a _____ to her right heel which measured as 2.4 cm and the width 1.5 cm. The PUSH score for the heel was 6.</p> <p>During an interview on _____ that began at 2:00 p.m. with the NHA and interim DON, it was confirmed that the nurses documented their daily _____ care on the Treatment Administration Record and once a week _____ rounds by the Unit Managers would document measurements and observations of the _____. This documentation would be located under the section entitled Skin in the Progress Notes section of the resident's electronic medical record.</p> <p>During this interview, at approximately 2:35 p.m., the NHA confirmed that in mid-_____ there was a problem with the Registered Nurses being able to cover all tasks and for some tasks there was</p>	F 686			

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F 686	Continued From page 15 no follow through. She reported that care had been delegated to the floor nurses to do the treatments and the Unit Managers were to conduct the documentation on the weekly evaluations, but she confirmed she was just made aware that the documentation had not been made. Review of the healing Chart used to monitor trends in the PUSH score over time for Resident #13 revealed that there were entries dated and, and then no entries until	F 686		
{F 694} SS=D / Fluids CFR(s): 483.25(h) § 483.25(h) Fluids. fluids must be administered consistent with professional standards of practice and in accordance with physician orders, the comprehensive person-centered care plan, and the resident's goals and preferences. This REQUIREMENT is not met as evidenced by: Based on observation, interview and record review, the facility failed to obtain physician orders to insert an () line for one (#15) of three residents reviewed for treatment and services. Findings included: On at 9:00 a.m., Resident #15 was observed lying in bed. An access was observed in his right The was dated An pole and pump was at the bedside. No medication was observed hanging from the pole at the time of observation.	{F 694}	1. R 15 no longer has an access device. 2. A comprehensive review of current residents with access was completed by the Quality Assurance Consultant/designee to validate appropriate physician orders were in place. 3. The Director of Nursing/designee will educate the licensed nursing staff on Flushing, inserted central	

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{F 694}	<p>Continued From page 16</p> <p>Review of Resident #15's Admission Record Report revealed an admission date of _____ and diagnoses to include _____ and _____. Record review of the admission Minimum Data Set (MDS) assessment dated _____ showed a _____ (_____) score of 12 (moderate _____). Section G, Functional Status showed he required _____ of two for bed mobility, transfers, and toileting. Section M, Skin Conditions showed he had one _____ on _____ admission due to coverage of _____ bed by _____ and/or eschar.</p> <p>Record review of the physician orders showed a culture of the _____ to be performed on _____. An order to change a central line/ _____ was written and discontinued on _____ and _____; flush line with 5 ml normal _____ before and after medication administration twice a day as of _____; _____ line _____ change every Sunday as of _____ to start on _____; _____ line _____ insertion site to be changed every 72 hours from the original placement time as of _____ to start on _____; _____ in D5W 400 mg/200 ml every 24 hours for _____ for 7 days as of _____; No orders could be found for initial insertion or tubing changes.</p> <p>Review of the Admission Evaluation dated _____ showed that the resident did not have an _____ present upon admission.</p> <p>Review of nursing progress notes showed: On _____ at 00:16 (12:06 a.m.) _____ was started</p>	{F 694}	<p>Change and Focus on F-tag 694 on or before the date of compliance.</p> <p>4. Utilizing the F 694 _____ QAPI tool _____ the director of nursing/designee will audit residents with _____ access weekly x4 and monthly x 2 to validate appropriate physician orders were obtained. Results will be reviewed and trended by QAPI committee for continued compliance.</p>		

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{F 694}	<p>Continued From page 17</p> <p>to right . . . on second attempt with 22-gauge angiocath.</p> <p>On at 21:12 (9:12 p.m.) Resident returned from at 5 p.m. and was alert and had no Resident continued on with no adverse reactions. flushed and patent.</p> <p>On at 01:10 a.m. Resident on for No adverse reactions noted. site to right without signs of</p> <p>Record review of the care plans showed: of /skin initiated on (date of survey). Interventions included but not limited to administer medication per physician orders. Second care plan for potential for complications at insertion site: inserted at right on (date of survey, was started on). Interventions included but not limited to change tubing per physician orders; do not take in right arm; change by physician order and as needed if soiled or wet; flush line per physician orders; report to physician any signs and symptoms of /infiltration.</p> <p>On at 1:57 p.m., the Nursing Home Administrator (NHA) and Staff E, interim Director of Nursing /MDS Coordinator (DON/MDS) and Staff F, Regional Nurse, reviewed the medical record and verified that Resident #15 did not have a physician's order to place a</p> <p>Review of the facility's policy, "Medication and Treatment Administration Guidelines," updated on showed MEDICATION AND TREATMENT ORDERS: A complete treatment order includes: date and time; name of the patient; site of application; cleansing agent if</p>	{F 694}			

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{F 694}	Continued From page 18 indicated; frequency, including end date orders if applicable; directions for use, if applicable; primary and secondary _____, if applicable; name of the medical practitioner giving the order; signature of medical practitioner if the order is written; name, title and signature of nurse transcribing the order.	{F 694}			
{F 698} SS=D	CFR(s): 483.25(l) §483.25(l) The facility must ensure that residents who require _____ receive such services, consistent with professional standards of practice, the comprehensive person-centered care plan, and the residents' goals and preferences. This REQUIREMENT is not met as evidenced by: Based on observation of _____ access sites, interviews with facility staff, and review of physician orders and the facility policy titled _____ Guidelines, the facility failed to follow professional standards of practice for obtaining physician orders related to care and removal of the _____ on the _____ access site following _____ treatment for two (#15, #1) of three _____ residents reviewed. Findings included: 1. On _____ at 9:00 a.m., Resident #15 was observed lying in bed with a clean and dry _____ on his upper left arm. He stated that he went to _____ yesterday and that was the _____ they applied at _____. He stated that nursing staff get around to removing the _____ from his arm.	{F 698}	1. R15 order was obtained to remove the _____ post _____ days. R1 order was obtained to remove the _____ post _____ days. 2. A comprehensive review of current residents receiving _____ treatments was completed by the Director of Nursing/designee to validate _____ orders and removal schedules if needed were in place. 3. Licensed nurses will be educated by the Director of Nursing/designee on the _____ nursing procedure and the Focus on F-tag 698 on or before the date of compliance. 4. Utilizing the F698 _____ QAPI tool _____ the Director of Nursing/designee will		

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{F 698}	<p>Continued From page 19</p> <p>Review of the Admission Record Report for Resident #15 revealed an admission date of _____ with diagnoses that included _____ () with dependence on _____. Record review of the admission Minimum Data Set (MDS) dated _____ showed a _____ () score of 12 (moderately _____).</p> <p>A review of the physician's orders related to the resident's _____ care, dated _____ and _____, included a high protein _____ diet, check (_____) site - / every shift for _____ site - / check; _____ site observation as needed and one time a day, and _____ per physician order Tues, Thurs, Sat. There was no order for removal of the _____ that was applied to the _____ after the _____ treatment.</p> <p>A review of the resident's 12 page care plan, initiated upon admission revealed no additional care plans related to the _____ access site.</p> <p>A review of the resident's Nursing Notes from _____ until _____ did not reveal documentation that the _____ had been removed, only that the site had been observed and the _____ and _____ was noted.</p> <p>2. On _____ at 10:10 a.m., Resident #1 was observed lying in bed on his left side, watching a video. A _____ access site was observed on the upper left arm.</p> <p>A review of Resident #1's Admission Record Report revealed an original admission date of _____ with diagnoses that included _____ with dependence on _____. A review of the</p>	{F 698}	<p>audit _____ residents orders weekly times 4 weeks and monthly x2. Results will be reviewed and trended by the QAPI committee for continued compliance.</p>		

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{F 698}	<p>Continued From page 20</p> <p>physician's orders related to the resident's care, revealed orders for the resident's at the center at 12 p.m., every Monday, Wednesday, Friday for , check the () site every shift, and site observation every shift, site observation as needed.</p> <p>There was no additional orders for the care of the access, including when to remove the after the treatment. Review of the nurse's notes revealed documentation that the and were present after treatment on () site clean and dry, positive and noted).</p> <p>In an interview with the Administrator and the acting Director of Nurses on beginning at 2:00 p.m., it was confirmed that there should be an order for care of the site to include when to remove the applied after the site had been accessed for .</p> <p>The Administrator confirmed during that interview that the document Guidelines was the document used to train staff and also used as reference for care for the residents. Review of the " Guidelines" dated revealed:</p> <p>Both the center and the facility are responsible for shared communication regarding patients receiving services... Collaborative communication included information regarding physician and treatment orders, and adverse reactions or complications and recommendations for follow up observations and monitoring including those related to the access site.</p>	{F 698}			

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{F 758} SS=E	<p>Free from Unnec Meds/PRN Use CFR(s): 483.45(c)(3)(e)(1)-(5)</p> <p>§483.45(e) Drugs. §483.45(c)(3) A. _____ drug is any drug that affects _____ activities associated with mental processes and behavior. These drugs include, but are not limited to, drugs in the following categories:</p> <p>(i) _____; (ii) _____; (iii) _____; and () _____</p> <p>Based on a comprehensive assessment of a resident, the facility must ensure that--</p> <p>§483.45(e)(1) Residents who have not used _____ drugs are not given these drugs unless the medication is necessary to treat a specific condition as diagnosed and documented in the clinical record;</p> <p>§483.45(e)(2) Residents who use _____ drugs receive gradual dose reductions, and behavioral interventions, unless clinically contraindicated, in an effort to discontinue these drugs;</p> <p>§483.45(e)(3) Residents do not receive _____ drugs pursuant to a PRN order unless that medication is necessary to treat a diagnosed specific condition that is documented in the clinical record; and</p> <p>§483.45(e)(4) PRN orders for _____ drugs are limited to 14 days. Except as provided in §483.45(e)(5), if the attending physician or prescribing practitioner believes that it is appropriate for the PRN order to be extended</p>	{F 758}			

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{F 758}	<p>Continued From page 22</p> <p>beyond 14 days, he or she should document their rationale in the resident's medical record and indicate the duration for the PRN order.</p> <p>§483.45(e)(5) PRN orders for _____ drugs are limited to 14 days and cannot be renewed unless the attending physician or prescribing practitioner evaluates the resident for the appropriateness of that medication. This REQUIREMENT is not met as evidenced by:</p> <p>Based on observation, record review, and interview, the facility failed to ensure behavior monitoring occurred for seven of seven sampled residents reviewed for the use of _____ medications (#12, #1, #13, #11, #2, #6, #8) out of 49 facility residents receiving _____ medications.</p> <p>Findings included:</p> <p>1. Review of Resident #12's Physician's orders revealed an order dated _____ for the medication _____ 7.5 mg by _____ at bedtime for nutritional enhancement. The medication _____ is an _____ that is also used as an appetite stimulant. An order for side effect monitoring was also noted: "monitor for side effects related to the use of _____ medications: _____."</p> <p>A review was conducted of the Minimum Data Set (MDS) Assessment conducted on _____ for Resident #12. The assessment documented the resident as having moderately _____ function. The assessment documented her use of no _____, but the use of an _____.</p>	{F 758}	<p>1. R12 no longer receives _____ medications. R1 care plan was updated to include monitoring for behaviors associated with the use of the _____ medications.</p> <p>R 13 care plan was updated to include monitoring for behaviors associated with the use of the _____ medications. R11 care plan was updated to include monitoring for behaviors associated with the use of the _____ medications. R2 care plan was updated to include monitoring for behaviors associated with the use of the _____ medications. R8 care plan was updated to include monitoring for behaviors associated with the use of the _____ medications. R6 care plan was updated to include monitoring for behaviors associated with the use of the _____ medications.</p> <p>2. A comprehensive review of residents receiving _____ medications was completed by the Quality Assurance Consultant to validate residents receiving _____ medications have care plans that include monitoring for behaviors associated with the use of _____.</p>		

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{F 758}	<p>Continued From page 23</p> <p>A care plan had been developed on and revised on for Resident # 12's use of the The Focus of the care plan identified the risk for adverse effects of the medication and her diagnosis of for its use. Interventions included evaluating the effectiveness and the side effects of the medication for possible decrease or elimination of the medication. Also, the physician was to be notified of a decline in the resident's ADL (activities of daily living) abilities or decline in/behavior related to a dosage change. The physician was to be notified of signs of adverse reactions as well. The care plan included no interventions related to monitoring for behaviors associated with the use of medications.</p> <p>Review of the resident's Medication and Treatment Records did not reveal guidance and an area to document the presence or absence of behaviors that the resident might be eliciting. There was an order to monitor side effects of the medication with the clarification that "my initials indicate absence of signs and symptoms of side effects." There was no guidance that side effects when present needed to be documented in the nurse's notes, or what specific side effects the resident might elicit.</p> <p>A review of the nurse's progress notes for revealed the resident was followed by Hospice and had an increase in her medication on Nurses notes prior to revealed scratching was noted on her inner thighs which received treatment. On at 16:06 (4:06 p.m.) and at 17:58 (5:58 p.m.) the nurses note documented the resident's behavior of screaming and yelling and refusing the treatment.</p>	{F 758}	<p>medications.</p> <p>3. Licensed nursing staff will be educated by the Director of Nursing/designee on the Behavior Practice Guide and Focus on F-tag 758 on or before the date of compliance.</p> <p>4. Utilizing the Unnecessary Medications <input type="checkbox"/> Behavior Monitoring QAPI tool the DON/designee will audit 5 residents that receive medications weekly x4 weeks and monthly x2 months to validate the care plans include behaviors associated with the medications and the completion of behavior documentation. Results will be reviewed and trended by the QAPI committee for continued compliance.</p>		

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{F 758}	<p>Continued From page 24</p> <p>On _____ during the lunch meal, Resident #12 was observed being assisted with her meal. The resident was observed taking a small bite of fish out of her _____ and placing it _____ on her plate. The aide commented that the resident usually did that and didn't usually eat anything. An observation of Resident #12 on _____ during the lunch meal revealed she was accepting bites of the fruit cocktail from her lunch tray. The aide confirmed that she refused the meal but seemed to be enjoying the sweet fruit.</p> <p>A review of the resident's _____ revealed upon admission on _____ the resident had _____ the resident _____ On _____ the resident _____ on _____ the resident _____, and on _____ the resident _____</p> <p>2. Resident #1 was admitted to the facility initially on _____. The resident had current diagnoses that included major _____ and _____. Review of the resident's active Physician's orders revealed an order for _____ 100 mg, give 300 ml by _____ at bedtime for major _____ and _____ and order for _____ 15 mg, give one cap by _____ at bedtime for _____. Current orders were also noted to monitor the side effects related to the use of the _____ medications and _____. The order included the statement, "My initials indicate the absence of signs and symptoms of side effects."</p> <p>Resident #1 had an Annual MDS Assessment conducted on _____ which identified the resident as having no _____. The</p>	{F 758}			

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{F 758}	<p>Continued From page 25</p> <p>assessment included the diagnoses of _____, and _____ with an _____, and _____ administered on 7 days during the week.</p> <p>A care plan was reviewed for the Focus area of being at risk for behavior symptoms related to _____, and _____, as well as noncompliance with the ordered diet and lab draws initiated _____ and revised on _____. Interventions included observations for mental status/behavior changes when new medications are started or with changes in dosages. The Physician's order for monitoring side effects was not included as an intervention in the care plan for at risk behaviors and there was no guidance given in the care plan for what behaviors should be monitored based on the medications the resident was taking.</p> <p>3. On _____ at 9:30 a.m., Resident #13 was lying in bed watching TV. She had no complaints or concerns, and no behaviors were noted.</p> <p>Record review of the quarterly Minimum Data Set (MDS) dated _____ showed a _____ (_____) score of 15 (_____, _____). Section N, Medications, showed she was receiving _____.</p> <p>Record review of the progress notes showed On _____ she refused to have vital signs for the 11 p.m. to 7 a.m. shift on _____ through _____.</p> <p>On _____ she refused a bed bath and shower several times.</p> <p>On _____, resident refused to be _____.</p> <p>On _____ at 22:26 (10:26 p.m.) just before dinner, when observed resident, she was crying.</p>	{F 758}			

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{F 758}	<p>Continued From page 26</p> <p>The resident cries often and stated she was tired of being sick and does not like to be touched. The Nurse Practitioner was informed.</p> <p>Review of physician orders, Treatment Administration Record (TAR), and Medication Administration Record (MAR) for _____ showed Resident #13 received _____ 15 mg at bedtime for _____ / _____. Monitor for side effects related to use of _____ medication, _____. My initials indicate absence of signs and symptoms of side effects, monitor every shift for side effects of _____ medications. The physician orders and / or MAR lacked orders and monitoring of behaviors for _____ medications.</p> <p>Review of the care plans showed a care plan for resistive / noncompliant with treatment / care being changed and not having _____ vac changed related to belief that treatment is not needed / working as of _____. Interventions included but not limited to allow for flexibility in Activity of Daily Living (ADL) routine to accommodate _____ preferences and customary routine and provide education about risks of not complying with therapeutic regimen. Care plan for at risk for adverse effects related to the use of _____ medication as of _____. Interventions included but not limited to evaluate effectiveness and side effects of medications for possible decrease / elimination of _____ drugs, report to physician signs of adverse reaction. Care plan for at risk for adverse effects related to use of _____ medication as of _____. Interventions included but were not limited to evaluate effectiveness and side effects of medication for possible decrease / elimination of _____ drugs, report to physician signs of</p>	{F 758}			

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{F 758}	<p>Continued From page 27</p> <p>adverse reactions. The care plan included no interventions related to monitoring for behaviors associated with the use of _____ medications.</p> <p>4. Record review of Resident #11's quarterly Minimum Data Set (MDS) dated _____ showed a (_____) score of 08 (moderately _____). Section N, Medications, showed she was receiving _____ medication.</p> <p>Record review of active physician orders and the MAR showed Resident #11 received _____ 50 mg by _____ at bedtime for _____ as of _____. Monitor for side effects related to the use of _____ medication, _____. My initials indicate absence of signs and symptoms of side effects. Check every shift as of _____ 50 mg daily for _____. Monitor for side effects related to use of _____ medication, _____. My initials indicate absence of signs and symptoms of side effects. Check every shift. _____ 25 mg twice a day for _____ ending on _____. The _____ MAR lacked monitoring for side effects for _____ for _____. The physician orders and/or MAR lacked orders and monitoring of behaviors for _____ medications.</p> <p>Progress notes reviewed showed on _____ the resident had increased _____, different from her normal _____. Resident stated, "I am so nervous I don't think I can breathe." _____ saturation was 93% on room air. _____ was applied and resident eventually calmed down. A call was placed to the Nurse Practitioner and received an order to check her _____. The _____</p>	{F 758}			

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{F 758}	<p>Continued From page 28</p> <p>for . . . was discontinued on . . . and . . . was started on . . . The progress notes, physician orders and/or MAR lacked any documentation regarding her behaviors post medication change.</p> <p>Record review of the care plans showed the resident was an exit seeking / elopement risk related to . . . initiated . . . and revised . . . Interventions included but were not limited to calmly redirect to an appropriate area, alert bracelet, and check for placement and function daily. Care plan for risk for adverse effects related to use of . . . medication, . . . Initiated on . . . and revised on . . . Interventions included but were not limited to evaluate effectiveness and side effects of medications for possible decrease / elimination of . . . drugs; notify physician of decline in ADL ability or . . . / behavior related to a dosage change, provide patient teaching of risks and benefits of medications as needed, report to physician signs of adverse reactions. No care plan was present related to . . .</p> <p>5. On . . . at 1:40 p.m., Resident #2 was sitting at bedside watching TV. She was dressed and groomed for the day and had her personal possessions in her room. No behaviors were noted.</p> <p>Record review of the annual Minimum Data Set (MDS) dated . . . showed a . . . (. . .) score of 15 (. . .). Section N, Medications, showed she was receiving an . . .</p>	{F 758}			

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{F 758}	<p>Continued From page 29</p> <p>Record review of active physician orders and MAR showed ER (XL) 24-hour 150 mg every other day for Monitor for side effects related to use of medication, My initials indicate absence of signs and symptoms of side effects, monitor every shift. 10 mg at bedtime for Monitor for side effects related to use of medication, My initials indicate absence of signs and symptoms of side effects, monitor every shift. 50 mg give 0.5 tablet by at bedtime on Tuesday, Wednesday, Thursday, Friday, Saturday, Sunday for with Monitor for side effects related to use of medication, My initials indicate absence of signs and symptoms of side effects, monitor every shift. Monitor for side effects related to use of medications. Check every shift as of and discontinued on Monitor for side effects related to use of medication, (. ileus). My initials indicate absence of signs and symptoms of side effects, monitor every shift. The physician orders and / or MAR lacked orders and monitoring of behaviors for medications.</p> <p>Review of the care plans showed resident on medications related to and initiated on and revised on Interventions included but were not limited to provide non-pharmacological interventions for symptom management such as provide quiet environment, decrease stimuli, monitor for thirst / hunger, and provide fluids / snacks of resident's preference, redirection. Monitor for signs and symptoms of adverse side effects related to medication use</p>	{F 758}			

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{F 758}	Continued From page 30 and report to physician as indicated. Resident at risk for behavior symptoms related to _____, recurrent _____ and history of _____, scratches self-picks scabs revised _____ Interventions included but were not limited to attempt _____ drug reduction per physician orders, for behaviors / _____ offer to dim the lights, soft music, snacks, or TV; provide for comfort by allowing resident to validate her feelings, offer support; use consistent approaches when giving care. Resident had manipulative behavior that was related to inability to adjust to loss of past roles revised _____ Interventions included but was not limited to acknowledge moods in 1:1 interaction with resident and assist in identifying positive coping mechanisms; administer medications per physician orders and observe for effectiveness and signs and symptoms of side effects; assist in identifying positive coping mechanisms. Resident had a risk for changes in _____ related to diagnoses of _____, recurrent _____ and _____ and history of _____ revised _____ Interventions included but were not limited to administer medications per physician orders and observe for effectiveness and signs and symptoms of side effects, assess for physical / environmental changes that may precipitate change in _____; elicit family for support, watch TV or movies, read books or magazines; observe for mental status / _____ state changes when new medication is started or with dose changes; offer choices to enhance sense of control and validate feelings of loss. The care plan included no interventions related to monitoring for behaviors associated with the use of _____ medications.	{F 758}			
	6. Observed Resident #8 was lying in bed				

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{F 758}	<p>Continued From page 31</p> <p>watching TV on at 1:50 p.m. He had eaten his lunch. No behaviors were noted.</p> <p>Record review of the annual Minimum Data Set (MDS) dated showed a (.....) score of 15 (.....). Section N, Medications, showed he was receiving and medication.</p> <p>Record review of physician orders and MAR showed Resident #8 received 100 mg at bedtime for Monitor for side effects related to use of medication, My initials indicate absence of signs and symptoms of side effects, monitor every shift. 7.5 mg three times a day for Monitor for side effects related to use of medication, My initials indicate absence of signs and symptoms of side effects, monitor every shift. The physician orders and/or MAR lacked orders and monitoring of behaviors for medications.</p> <p>Record review of the care plans showed the resident was at risk for adverse effects related to use of medication, revised Interventions included but were not limited to evaluate effectiveness and side effects of medications for possible decrease / eliminations of drugs. Provide resident with teaching of risks and benefits of medications as needed. Report to physician signs of adverse reactions. The care plan included no interventions related to monitoring for behaviors associated with the use of medications.</p> <p>Record review of progress notes for the month of</p>	{F 758}			

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{F 758}	<p>Continued From page 32</p> <p>..... did not show any documentation related to behavior monitoring.</p> <p>7. Observed Resident #6 lying in bed on at 1:48 p.m. watching TV. She would not answer any interview screening questions.</p> <p>Record review of the quarterly Minimum Data Set (MDS) dated showed a () score of 09 (moderately). Section N, Medications, showed she was receiving an and medications.</p> <p>Record review of the physician's orders and MAR 2021 showed Resident #6 received 0.5 mg at bedtime for and hold for Monitor for side effects related to use of medication, My initials indicate absence of signs and symptoms of side effects, monitor every shift. 25 mg at bedtime for Monitor for side effects related to use of medication, My initials indicate absence of signs and symptoms of side effects, monitor every shift. 25 mg daily for Monitor for side effects related to use of medication, My initials indicate absence of signs and symptoms of side effects, monitor every shift. The physician orders and/or MAR lacked orders and monitoring of behaviors for,, medications.</p> <p>Record review of progress notes for the month of do not show any documentation related to behavior monitoring.</p> <p>Record review of the care plans showed the resident was at risk for behavior symptoms</p>	{F 758}			

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{F 758}	Continued From page 33 related to _____, and coprophagia (ingestion of feces) revised _____. Interventions included but were not limited to offer dim lights, TV, snacks, soft music; toilet after meals and at bedtime; use consistent approaches when giving care. The resident had inappropriate behavior, attempting to be overly affectionate with male residents related to _____ and _____ revised _____. Interventions included but were not limited to distract, if possible, explain and explore effects of behavior on others, offer dim lights, TV, snacks, soft music; remain calm and avoid angry reactions if exhibits behavior, set limits for acceptable behavior. At risk for changes in _____ related to _____, and _____ revised _____. Interventions included but not limited to administer medications per physician orders and observe for effectiveness and signs and symptoms of side effects. Elicit family support, watching TV, reading books/ magazines; validate feelings of loss. Episodes of _____ related to diagnoses of _____ initiated _____. Interventions included but not limited to administer medications per physician orders, identify and decrease environmental stressors. At risk for adverse effects related to use of _____ medications, revised _____. Interventions included but was not limited to evaluate effectiveness and side effects of medications for possible decrease / elimination of _____ drugs; notify physician of decline in ADL ability or _____ / behavior related to a dosage change; report to physician signs of adverse reactions. At risk for adverse effects related to use of _____ medication, _____ revised _____. Interventions included but was not limited to evaluate effectiveness and side effects of medications for	{F 758}			

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{F 758}	<p>Continued From page 34</p> <p>possible decrease / eliminations of _____ drugs; notify physician of decline in ADL ability or _____ / behavior related to a dosage change; report to physician signs of adverse reaction. At risk for adverse effects related to use of _____ medication, _____ revised _____ . Interventions included but was not limited to evaluate effectiveness and side effects of medications for possible decrease / eliminations of _____ drugs; notify physician of decline in ADL ability or _____ / behavior related to a dosage change; report to physician signs of adverse reaction.</p> <p>8. During an interview on _____ at 1:57 p.m. the new interim DON entered, Staff G. She stated that today was her first day in the position of DON. She stated that all the other nurses, Unit Managers and MDS coordinator would be going to their assigned jobs. She stated that they were looking through the electronic medical records today. She stated that they have been seeing some issues. She stated that she recognized that the behavior monitoring was not there. She stated that she was going to do audits with the UM and the MDS coordinator and put in behavior monitoring related to specific issues for that specific resident.</p> <p>9. During an interview on _____ at 4:26 p.m. the consultant pharmacist stated that that they document by exception for behavior monitoring. He stated, " this was the facility's corporate rules." The behavior documentation will be found in the behavior notes, progress notes, or physician notes. If the resident was not having behaviors, then they will not list anything. If a dose increases or there was a _____, initiated, they should have documentation. He stated, "No documentation</p>	{F 758}			

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{F 758}	<p>Continued From page 35</p> <p>then no behaviors." He stated that he looks at anybody on , , , medications and he looks at the notes and looks for behaviors. "If no documentation of behaviors, then will see notes for gradual reduction in dosages. Should be documentation in the electronic medical record for the side effects, , , increased My initials signify no side effects. They have to monitor for behaviors but not document unless there are behaviors. Do not put in MAR just in the notes. If new , , , monitor the behaviors, and why on medications. If no behaviors med is successful."</p> <p>10. Review of the facility's "Behavior Practice Guide," dated showed behavior symptoms may become problematic for an individual if they are: socially unacceptable, stressful to others, interfering with care, presenting safety risk. is defined as the way that someone is feeling. Alterations in an individual's and, or behavior may be triggered by a wide variation of antecedents.</p> <p>AND BEHAVIOR : the Interdisciplinary process surrounding and behavior identification is accomplished through recognition of symptoms that commonly arise with adjustment and , and The experience of is highly individualized. The factors contributing to , , , can trigger fears that escalate into an exaggerated, . . . response when not addressed. is a comprised of affective, , , and or physiologic symptoms. Severity can range from mild to severe. In many elderly persons, commonly coexists with The more severe medical illness and associated functional the elderly patient</p>	{F 758}			

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{F 758}	Continued From page 36 exhibits the greater the likelihood of INITIAL PLAN OF CARE: Upon completing an evaluation, the interdisciplinary team (IDT) develops a patient specific, or person centered care plan including goals to prevent and manage behavioral symptoms. Any new behavior symptom suggests a need to reevaluate the plan of care. Pharmacological interventions may be indicated. COMPREHENSIVE CARE PLAN: Based upon the findings of the MDS and other evaluations, the patient's comprehensive care plan is developed, or initial plan of care is updated to include individualized patient interventions that focus on the patient's specific risk factors. Interventions are continually evaluated for effectiveness and updated as the patient's condition and needs change. INTERVENTIONS FOR CONSIDERATION: Selection of the most appropriate interventions is dependent on accurate identification of the behavior, possible root causes and ruling out interventions based on narrowing of possible trigger (s) to the behavior. Begin by evaluating the patient for any unmet physical needs....Provide for any unmet physical need. If the behavior continues, evaluate for possible unmet need....Continue this individualized problem-solving by evaluating the patient's environment for a possible contribution to behavior. MEDICATIONS: Select medications may be prescribed specifically targeting modification of patient behavioral symptoms. Include DOCUMENTATION: Patient behavioral symptoms are documented in the clinical record.	{F 758}			
F 867 SS-D	QAPI/QAA Improvement Activities CFR(s): 483.75(g)(2)(ii)	F 867			

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F 867	<p>Continued From page 37</p> <p>§483.75(g) Quality assessment and assurance.</p> <p>§483.75(g)(2) The quality assessment and assurance committee must:</p> <p>(ii) Develop and implement appropriate plans of action to correct identified quality deficiencies; This REQUIREMENT is not met as evidenced by:</p> <p>Based on observation, interview, and record review the facility's quality assurance (QA) and assessment committee failed to implement an effective QA program related to: 1) proper deployment of staff in order to provide assistance with Activities of Daily Living (ADL's) to four (Residents #9, #12, #22, #25) of six residents dependent on staff for eating on the 200 hall and one additional resident (#24) who was dependent on staff for an additional food item requested during the lunch meal, 2) following professional standards of practice for obtaining physician orders related to care and removal of the _____ on the _____ access site following treatment for two (#15, #1) of three _____ residents reviewed, and 3) ensuring behavior monitoring occurred for seven of seven sampled residents reviewed for the use of _____ medications (#12, #1, #2, #6, #8, #11, #13).</p> <p>Findings included:</p> <p>1. Record review of the facility's policy, "Quality Assurance and Performance Improvement Practice Guide," dated _____ showed Quality Assurance (QA) is a process of meeting quality standards and assuring that care reaches an acceptable level. QA is a reactive, retrospective</p>	F 867	<p>1. The facility implemented a new meal service plan in order to provide assistance with meals for those residents dependent on staff for meal consumption. The facility implemented a plan related to residents receiving _____ and the professional standards of care for removal of _____ from the _____ site. The facility implemented a plan to ensure behavior monitoring was incorporated in the residents plan of care.</p> <p>2. Comprehensive audits of residents requiring assistance with meals, residents receiving _____ treatments and residents receiving _____ medications have been completed and results reviewed with the QA&A committee.</p> <p>3. The Regional Director or Operations educated the Nursing Home Administrator on the QAPI process to prevent a re-occurrence. The facility re-implemented education for staff on the following areas; residents requiring assistance with meal service, residents receiving _____ and residents receiving _____ medication. A root cause analysis was completed for the above</p>		

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F 867	<p>Continued From page 38</p> <p>effort to look at why there was a system failure. QA activities do improve quality, but efforts frequently end once the compliance or standard has been met. The purpose of QAPI is to take a pro-active approach to continually improve the quality of care we provide, the quality of life our patients experience, the ability to honor patient choices and provide care in the appropriate clinical environment. FOUNDATIONAL ELEMENTS: Root Cause Analysis: Root cause analysis is a problem solving method aimed at identifying primary causes of problems or issues. It is predicated on the belief that issues are best resolved by eliminating or correcting root causes, as opposed to obvious symptoms or popular assumptions. By directing corrective action to the underlying cause, it is likely recurrence will be minimized. The administrator is responsible for creating the environment for change, a culture that supports continuous process improvement and facilitating implementation of the QAPI process.</p> <p>2. Review of the facility's plan of correction for the survey ending with a completion date of revealed the following measures would be taken to correct the deficient practice which was identified for concerns with meal tray delivery and call light response:</p> <p>III. Licensed nurses and direct care staff were educated on timely delivery of meal trays by the Administrator/designee.</p> <p>Licensed nurses and direct care staff have been educated on timely call bell responses by the Administrator/designee.</p> <p>. Audits of meal tray delivery will be completed by the IDT (inter-disciplinary team) Team. Call</p>	F 867	<p>mentioned areas and was indicative of knowledge and the failure to implement a sustainable system.</p> <p>4. On-going audits specific to meal service, care and residents receiving medications have been implemented and will be completed weekly x4 and monthly x2 and reviewed and trended by the QAPI committee for continued compliance.</p>		

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F 867	<p>Continued From page 39</p> <p>bell audits will be completed by the IDT Team. Audits will be completed weekly x 4 weeks and then monthly for 2 months. Results of these reviews will be presented at the monthly QA meeting for review and recommendations.</p> <p>3. During an observation of the lunch meal on the 200 hall on _____ beginning at 11:50 a.m., two meal carts and one beverage cart were noted to be parked at the top of the hall. Two aides began to pass trays to independent diners at 11:55 a.m. On _____ at 12:00 p.m., Aide A, commented that there were many residents on the 200 hall that needed assistance, and they passed meal trays to the independent diners first. She confirmed that meal trays for dependent diners remained in the closed cart until a staff member was ready to provide assistance. After Aide A obtained a tray for a resident and left the cart, Nurse C approached the meal cart and passed two trays to two independent residents. She then left the cart and returned to the nurse's station.</p> <p>On _____ at 12:15 p.m., two of the unit's three aides were each sitting with a resident assisting them with eating. The third aide was observed providing nail care to Resident #25. The aide was pushing the resident's cuticles _____ prior to painting her nails. After the aide finished polishing the resident's nails, the resident was ask about the meal service. Resident #25 reported that the food usually wasn't very good, no variety and was usually cool, but her daughter was bringing lunch for her today. She reported that she would have liked to been given something to drink though as she wasn't meeting her daughter for another half hour. She reported that she often had to wait for something that she asked for as there didn't</p>	F 867			

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F 867	<p>Continued From page 40</p> <p>seem to be much help. It was noted at this time that only three aides were covering the east/rehab side of the building during lunch directly assisting with or ensuring that approximately 26 residents received their afternoon meal. The two nurses assigned to the area and the UM were not observed assisting the residents with the lunch meal.</p> <p>On _____ at 12:17 p.m., the Administrator was found in her office eating pizza while talking with the staffing coordinator. The Administrator was asked where the 200 hall UM could be found. The Administrator reported that she did not know, but she would find her.</p> <p>On _____ at 12:20 p.m., the surveyor returned to the 200 hall after speaking with the Administrator and observed a call light was illuminated/ringing. No staff were present to respond to the light. After five minutes without any staff response, the surveyor asked the resident with the ringing call light (Resident #24) what she needed. The resident reported that her pasta was dry and needed sauce on it. She pointed to her roommate's pasta and commented that the roommate had gravy on it. The Certified Dietary Manager was notified of the request and within another five minutes, the resident was provided with some brown gravy.</p> <p>On _____ at 12:30 p.m., all three aides were observed assisting three residents with eating to include Resident #22.</p> <p>On _____ at 12:35 p.m., the Activity Aide was observed noted walking down the hall and looking for residents that still needed assistance. She obtained a meal tray and began to assist a</p>	F 867			

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F 867	<p>Continued From page 41 resident with eating.</p> <p>On at 12:40 p.m., Aide B was observed standing next to Resident #12, who was refusing her meal. An attempt to ask Resident #12 about her meal at this time revealed no response from the resident. When Aide B left Resident #12, she obtained another meal tray and sat with Resident #9 to begin assisting with eating. During the meal observation, Resident #9 reported that her meal was good.</p> <p>On at 12:45 p.m., the UM was observed in her office looking at her computer screen. She was called to the floor and reported that she had just returned from lunch. She asked the staff if they needed help with the lunch meal. At that time, two residents requiring assistance were still waiting to receive their lunch meal.</p> <p>On at 12:50 p.m. (one hour after meal trays arrived on the hall) the last resident received her tray and received assistance to eat.</p> <p>On at 1:50 p.m., the Administrator reported that the UM should be providing oversight during the meal process. The Administrator reported that everyone on the hall that was needed was present so the UM probably thought she was able to go to lunch. The Administrator was not aware of who was on the hall and was informed that only three aides were on the hall to assist up to six residents with their meals, one of the three aides was painting Resident #25's nails during lunch, and approximately 20 additional residents needed their trays delivered and set-up.</p> <p>On at 2:35 p.m., the Administrator</p>	F 867			

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F 867	<p>Continued From page 42</p> <p>provided a plan for residents to be assisted at meals. She reported that aides and other nursing staff would be assigned to residents who needed assistance so there would be adequate staff and no resident would need to wait for their meal.</p> <p>Interview with the Administrator on beginning at 10:25 a.m., revealed the audits to ensure timely meal service were reviewed and noted for providing no details as to what was audited. The audits included resident names and room numbers and a check mark indicating that the meal pass had been timely. There were no details as to whether the residents listed were dependent diners, at what time the meal cart arrived to the hall and when the residents received their meals, if the meal was satisfactory to the residents, especially the temperature of the meal which would be dependent on the time it took for the meal to be provided to the resident. The Administrator reported that their goal is for meals to be passed within 30 minutes of the cart arriving to the floor. It was pointed out that the in-service that was provided to the staff to ensure timely meal service did not reflect a plan for how that would be accomplished. The Administrator was made aware that the meal service observed on on the 200 hall mirrored the deficient practice observed during the survey ending</p> <p>A review was conducted of the Resident Council Minutes for the last two months. It was noted that issues that had been identified on the survey ending on were still on-going in and The Resident Council minutes from documented concerns with long call light time (responses), food, food too tough to chew, food that was</p>	F 867			

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F 867	<p>Continued From page 43</p> <p>bland and menus needing variety. The Resident Council minutes dated _____ documented continued concerns with answering call lights and assisting with activities of daily living. Residents complained about tough food, and food served at the wrong temperature and without flavor.</p> <p>When these issues of continued noncompliance were discussed with the Administrator on _____ in an interview that began at 2:00 p.m. the Administrator reported that she was not aware that the residents at the council meeting were continuing to have concerns with staffing, call bell response, and meals. The Administrator reported that she must have misunderstood the Activities Director when the content of the meetings was discussed with her.</p> <p>Review of the facility's audits revealed no audits were available after _____. In an interview with the Administrator on _____ beginning at 10:25 a.m. the lack of audits per the facility's plan of correction was questioned. Audits were noted to have been conducted per the plan during the last week of _____ and up until _____, but no other audits were available after _____. The plan of correction indicated audits would be conducted during the first two weeks from their Plan of Correction (POC) date of _____ ending on approximately _____. The POC then indicated audits would be conducted weekly for two weeks, ending on approximately _____. The Administrator was not able to provide audits after _____.</p> <p>4. Review of the facility's plan of correction for the survey ending _____ with a completion date of _____ revealed the following measures would</p>	F 867			

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F 867	<p>Continued From page 44</p> <p>be taken to correct the deficient practice which was identified for concerns with :</p> <p>II. DON/Designee completed audit of current residents for communication sheets completed and site observations.</p> <p>III. DON/Designee will re-educated licensed staff on completing and receiving the communication sheet from the center after each visit and documentation of site observation daily.</p> <p>Don/Designee will conduct audits of communication sheets and site observation bi weekly X2, weekly X2, then monthly X2. Information will be reported to QA for review and further recommendations.</p> <p>5. *A revisit to the survey ending was conducted on and . This revisit revealed on-going concerns with as follows:</p> <p>On at 10:10 a.m., Resident #1 was observed lying in bed on his left side, watching a video. A access site was observed on the upper left arm.</p> <p>A review of Resident #1's Admission Record Report revealed an original admission date of with diagnoses that included () with dependence on . A review of the physician's orders related to the resident's care, revealed orders for the resident's at the center at 12 p.m., every Monday, Wednesday, Friday for , check the () site / every shift, and site</p>	F 867			

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F 867	<p>Continued From page 45</p> <p>observation every shift, site observation as needed.</p> <p>There was no additional orders for the care of the access, including when to remove the after the treatment. Review of the nurse's notes revealed documentation that the and were present after treatment on (. site clean and dry, positive and noted).</p> <p>On at 9:00 a.m., Resident #15 was observed lying in bed with a clean and dry on his upper left arm. He stated that he went to yesterday and that was the they applied at He stated that nursing staff get around to removing the from his arm.</p> <p>Review of the Admission Record Report for Resident #15 revealed an admission date of with diagnoses that included (.) with dependence on Record review of the admission Minimum Data Set (MDS) dated showed a (.) score of 12 (moderately).</p> <p>A review of the physician's orders related to the resident's care, dated and included a high protein diet, check (.) site - / every shift for site check; site observation as needed and one time a day, and per physician order Tues, Thurs, Sat. There was no order for removal of the that was applied to the after the treatment.</p>	F 867			

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F 867	<p>Continued From page 46</p> <p>A review of the resident's 12 page care plan, initiated upon admission revealed no additional care plans related to the access site.</p> <p>A review of the resident's Nursing Notes from until did not reveal documentation that the had been removed, only that the site had been observed and the and was noted.</p> <p>In an interview with the Administrator and the acting Director of Nurses on beginning at 2:00 p.m., it was confirmed that there should be an order for care of the site to include when to remove the applied after the site had been accessed for</p> <p>The Administrator confirmed during that interview that the document Guidelines was the document used to train staff and also used as reference for care for the residents. Review of the " Guidelines" dated revealed:</p> <p>Both the center and the facility are responsible for shared communication regarding patients receiving services... Collaborative communication included information regarding physician and treatment orders, and adverse reactions or complications and recommendations for follow up observations and monitoring including those related to the access site.</p> <p>6. Review of the facility's plan of correction for the survey ending with a completion date of revealed the following measures would be taken to correct the deficient practice which</p>	F 867			

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F 867	<p>Continued From page 47</p> <p>was identified for concerns with medication monitoring:</p> <p>III. Quality Assurance Consultant provided education to the DON and Unit Manager related to reviewing medication daily for new orders and that monitoring is started as well as identifying the targeted behaviors.</p> <p>DON/Designee will provide education to licensed nursing staff related to adding monitoring for all new medications and identify targeted behaviors on care plans.</p> <p>DON/Designee to conduct audits on monitoring and targeted behaviors weekly x2, biweekly x2 monthly x2. Findings will be reported to the QA for further review and recommendations.</p> <p>7. A revisit to the survey ending was conducted on and . This revisit revealed on-going concerns with medication monitoring as follows:</p> <p>*On at 9:30 a.m., Resident #13 was lying in bed watching TV. She had no complaints or concerns, and no behaviors were noted.</p> <p>Record review of the quarterly Minimum Data Set (MDS) dated showed a () score of 15 (). Section N, Medications, showed she was receiving</p> <p>Record review of the progress notes showed On she refused to have vital signs for the 11 p.m. to 7 a.m. shift on through</p>	F 867			

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F 867	<p>Continued From page 48</p> <p>On she refused a bed bath and shower several times.</p> <p>On resident refused to be</p> <p>On at 22:26 (10:26 p.m.) just before dinner, when observed resident, she was crying. The resident cries often and stated she was tired of being sick and does not like to be touched. The Nurse Practitioner was informed.</p> <p>Review of physician orders, Treatment Administration Record (TAR), and Medication Administration Record (MAR) for showed Resident #13 received 15 mg at bedtime for Monitor for side effects related to use of medication, My initials indicate absence of signs and symptoms of side effects, monitor every shift for side effects of medications. The physician orders and / or MAR lacked orders and monitoring of behaviors for medications.</p> <p>Review of the care plans for Resident #13 revealed no interventions related to monitoring for behaviors/targeted behaviors associated with the use of medications.</p> <p>*Record review of Resident #11's quarterly Minimum Data Set (MDS) dated showed a (.....) score of 08 (moderately). Section N, Medications, showed she was receiving medication.</p> <p>Record review of active physician orders and the MAR showed Resident #11 received 50 mg by at bedtime for as of Monitor for side effects related to the use of</p>	F 867			

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F 867	<p>Continued From page 49</p> <p>medication, My initials indicate absence of signs and symptoms of side effects. Check every shift as of 50 mg daily for Monitor for side effects related to use of medication, My initials indicate absence of signs and symptoms of side effects. Check every shift. 25 mg twice a day for ending on The MAR lacked monitoring for side effects for for The physician orders and/or MAR lacked orders and monitoring of behaviors for medications.</p> <p>Progress notes reviewed showed on the resident had increased different from her normal Resident stated, "I am so nervous I don't think I can breathe." saturation was 93% on room air. was applied and resident eventually calmed down. A call was placed to the Nurse Practitioner and received an order to check her The for was discontinued on and was started on The progress notes, physician orders and/or MAR lacked any documentation regarding her behaviors post medication change.</p> <p>Record review of the care plans showed the resident was an exit seeking / elopement risk related to initiated and revised Interventions included but were not limited to calmly redirect to an appropriate area, alert bracelet, and check for placement and function daily. Care plan for risk for adverse effects related to use of medication, initiated on and revised on Interventions included but were not limited to evaluate</p>	F 867			

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F 867	<p>Continued From page 50</p> <p>effectiveness and side effects of medications for possible decrease / elimination of , / drugs; notify physician of decline in ADL ability or / behavior related to a dosage change, provide patient teaching of risks and benefits of medications as needed, report to physician signs of adverse reactions. No care plan was present related to</p> <p>*On at 1:40 p.m., Resident #2 was sitting at bedside watching TV. She was dressed and groomed for the day and had her personal possessions in her room. No behaviors were noted.</p> <p>Record review of the annual Minimum Data Set (MDS) dated showed a () score of 15 (). Section N, Medications, showed she was receiving an</p> <p>Record review of active physician orders and MAR showed ER (XL) 24-hour 150 mg every other day for Monitor for side effects related to use of medication, My initials indicate absence of signs and symptoms of side effects, monitor every shift. 10 mg at bedtime for Monitor for side effects related to use of medication, My initials indicate absence of signs and symptoms of side effects, monitor every shift. 50 mg give 0.5 tablet by at bedtime on Tuesday, Wednesday, Thursday, Friday, Saturday, Sunday for with Monitor for side effects related to use of medication, My initials indicate absence of signs and symptoms of side effects, monitor every shift. Monitor for side</p>	F 867			

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F 867	<p>Continued From page 51</p> <p>effects related to use of _____ medications. Check every shift as of _____ and discontinued on _____. Monitor for side effects related to use of _____ medication, _____ (_____ ileus). My initials indicate absence of signs and symptoms of side effects, monitor every shift. The physician orders and / or MAR lacked orders and monitoring of behaviors for _____ medications.</p> <p>Review of the care plans showed no interventions related to monitoring for behaviors/targeted behaviors associated with the use of _____ medications.</p> <p>*Observed Resident #8 was lying in bed watching TV on _____ at 1:50 p.m. He had eaten his lunch. No behaviors were noted.</p> <p>Record review of the annual Minimum Data Set (MDS) dated _____ showed a _____ (_____) score of 15 (_____). Section N, Medications, showed he was receiving _____ and _____ medication.</p> <p>Record review of physician orders and _____ MAR showed Resident #8 received _____ 100 mg at bedtime for _____. Monitor for side effects related to use of _____ medication, _____. My initials indicate absence of signs and symptoms of side effects, monitor every shift. _____ 7.5 mg three times a day for _____. Monitor for side effects related to use of _____ medication, _____. My initials indicate absence of signs and symptoms of side effects, monitor every shift. The physician orders and/or MAR lacked orders and monitoring of behaviors for _____ medications.</p>	F 867			

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F 867	<p>Continued From page 52</p> <p>Record review of the care plans showed no interventions related to monitoring for behaviors associated with the use of _____ medications.</p> <p>Record review of progress notes for the month of _____ did not show any documentation related to behavior monitoring.</p> <p>*Observed Resident #6 lying in bed on _____ at 1:48 p.m. watching TV. She would not answer any interview screening questions.</p> <p>Record review of the quarterly Minimum Data Set (MDS) dated _____ showed a _____ score of 09 (moderately _____). Section N, Medications, showed she was receiving an _____ and _____ medications.</p> <p>Record review of the physician's orders and _____ MAR 2021 showed Resident #6 received 0.5 mg at bedtime for _____ and hold for _____. Monitor for side effects related to use of _____ medication, _____. My initials indicate absence of signs and symptoms of side effects, monitor every shift. _____ 25 mg at bedtime for _____. Monitor for side effects related to use of _____ medication, _____. My initials indicate absence of signs and symptoms of side effects, monitor every shift. _____ 25 mg daily for _____. Monitor for side effects related to use of _____ medication, _____. My initials indicate absence of signs and symptoms of side effects, monitor every shift. The physician orders and/or MAR lacked orders and monitoring of behaviors for _____ medications.</p>	F 867			

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F 867	Continued From page 53 Record review of progress notes for the month of _____ revealed no documentation related to behavior monitoring. Record review of the care plans showed the resident was at risk for behavior symptoms related to _____, and coprophagia (ingestion of feces) revised _____. Interventions did not indicate what the at risk behaviors/targeted behaviors were to monitor. The resident had inappropriate _____ behavior, attempting to be overly affectionate with male residents related to _____ and _____. Interventions included but were not limited to distract, if possible, explain and explore effects of behavior on others, offer dim lights, TV, snacks, soft music; remain calm and avoid angry reactions if exhibits behavior, set limits for acceptable behavior. At risk for changes in _____ related to _____, and _____ revised _____. Interventions included but not limited to administer medications per physician orders and observe for effectiveness and signs and symptoms of side effects. Elicit family support, watching TV, reading books/ magazines; validate feelings of loss. Episodes of _____ related to diagnoses of _____, initiated _____. Interventions included but not limited to administer medications per physician orders, identify and decrease environmental stressors. At risk for adverse effects related to use of _____ medications, _____ revised _____. Interventions included but was not limited to evaluate effectiveness and side effects of medications for possible decrease / elimination of _____, _____ drugs; notify physician of decline in ADL ability or _____ / behavior related to a	F 867			

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F 867	<p>Continued From page 54</p> <p>dosage change; report to physician signs of adverse reactions. At risk for adverse effects related to use of _____ / _____ medication, _____ revised _____. Interventions included but was not limited to evaluate effectiveness and side effects of medications for possible decrease / eliminations of _____ drugs; notify physician of decline in ADL ability or _____ / behavior related to a dosage change; report to physician signs of adverse reaction. At risk for adverse effects related to use of _____ medication, _____ revised _____. Interventions included but was not limited to evaluate effectiveness and side effects of medications for possible decrease / eliminations of _____ drugs; notify physician of decline in ADL ability or _____ / behavior related to a dosage change; report to physician signs of adverse reaction.</p> <p>*Review of Resident #12's Physician's orders revealed an order dated _____ for the medication _____ 7.5 mg by _____ at bedtime for nutritional enhancement. The medication _____ is an _____ that is also used as an appetite stimulant. An order for side effect monitoring was also noted: "monitor for side effects related to the use of _____ medications: _____"</p> <p>A review was conducted of the Minimum Data Set (MDS) Assessment conducted on _____ for Resident #12. The assessment documented the resident as having moderately _____ function. The assessment documented her use of no _____ but the use of an _____</p> <p>A care plan had been developed on _____ and</p>	F 867			

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F 867	<p>Continued From page 55</p> <p>revised on for Resident # 12's use of the The Focus of the care plan identified the risk for adverse effects of the medication and her diagnosis of for its use. Interventions included evaluating the effectiveness and the side effects of the medication for possible decrease or elimination of the medication. Also, the physician was to be notified of a decline in the resident's ADL (activities of daily living) abilities or decline in/behavior related to a dosage change. The physician was to be notified of signs of adverse reactions as well. The care plan included no interventions related to monitoring for behaviors associated with the use of medications.</p> <p>Review of the resident's Medication and Treatment Records did not reveal guidance and an area to document the presence or absence of behaviors that the resident might be eliciting. There was an order to monitor side effects of the medication with the clarification that "my initials indicate absence of signs and symptoms of side effects." There was no guidance that side effects when present needed to be documented in the nurse's notes, or what specific side effects the resident might elicit.</p> <p>A review of the nurse's progress notes for revealed the resident was followed by Hospice and had an increase in her medication on Nurses notes prior to revealed scratching was noted on her inner thighs which received treatment. On at 16:06 (4:06 p.m.) and at 17:58 (5:58 p.m.) the nurses note documented the resident's behavior of screaming and yelling and refusing the treatment.</p>	F 867			

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F 867	<p>Continued From page 56</p> <p>On during the lunch meal, Resident #12 was observed being assisted with her meal. The resident was observed taking a small bite of fish out of her and placing it on her plate. The aide commented that the resident usually did that and didn't usually eat anything. An observation of Resident #12 on during the lunch meal revealed she was accepting bites of the fruit cocktail from her lunch tray. The aide confirmed that she refused the meal but seemed to be enjoying the sweet fruit.</p> <p>A review of the resident's revealed upon admission on the resident had On the resident on the resident and on the resident</p> <p>*Resident #1 was admitted to the facility initially on The resident had current diagnoses that included major and Review of the resident's active Physician's orders revealed an order for 100 mg, give 300 ml by at bedtime for major and and order for 15 mg, give one cap by at bedtime for Current orders were also noted to monitor the side effects related to the use of the medications and The order included the statement, "My initials indicate the absence of signs and symptoms of side effects."</p> <p>Resident #1 had an Annual MDS Assessment conducted on which identified the resident as having no The assessment included the diagnoses of</p>	F 867			

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F 867	<p>Continued From page 57</p> <p>and _____ with an _____, and _____ administered on 7 days during the week.</p> <p>A care plan was reviewed for the Focus area of being at risk for behavior symptoms related to _____, and _____, as well as noncompliance with the ordered diet and lab draws initiated _____ and revised on _____. Interventions included observations for mental status/behavior changes when new medications are started or with changes in dosages. The Physician's order for monitoring side effects was not included as an intervention in the care plan for at risk behaviors and there was no guidance given in the care plan for what behaviors should be monitored based on the medications the resident was taking.</p> <p>"During an interview on _____ at 1:57 p.m. the new interim DON entered, Staff G. She stated that today was her first day in the position of DON. She stated that all the other nurses, Unit Managers and MDS coordinator would be going to their assigned jobs. She stated that they were looking through the electronic medical records today. She stated that they have been seeing some issues. She stated that she recognized that the behavior monitoring was not there. She stated that she was going to do audits with the UM and the MDS coordinator and put in behavior monitoring related to specific issues for that specific resident.</p> <p>"During an interview on _____ at 4:26 p.m. the consultant pharmacist stated that that they document by exception for behavior monitoring. He stated," this was the facility's corporate rules."</p>	F 867			

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F 867	<p>Continued From page 58</p> <p>The behavior documentation will be found in the behavior notes, progress notes, or physician notes. If the resident was not having behaviors, then they will not list anything. If a dose increases or there was a initiated, they should have documentation. He stated, "No documentation then no behaviors." He stated that he looks at anybody on medications and he looks at the notes and looks for behaviors. "If no documentation of behaviors, then will see notes for gradual reduction in dosages. Should be documentation in the electronic medical record for the side effects. increased My initials signify no side effects. They have to monitor for behaviors but not document unless there are behaviors. Do not put in MAR just in the notes. If new monitor the behaviors, and why on medications. If no behaviors med is successful."</p> <p>*Record review of the Staff Development Program Attendance Record showed the education provided to licensed nurses following the survey covered:</p> <ul style="list-style-type: none"> >Each medication requires side effects monitoring for each classification. >Your initials indicate absence of signs and symptoms of side effects. > Use code #9 if side effects are present and write on nurses note. <p>Signature sheets showed this education was provided to nursing staff on and The education did not cover adding monitoring for all new medications and identifying targeted behaviors as indicated in the plan of correction.</p> <p>8. During an interview on at 5:26 p.m.</p>	F 867			

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F 867	Continued From page 59 the NHA stated that they have monthly Quality Assurance (QA) meetings. She stated the Medical Director either attends in person or by phone. She stated that he participates and gives us homework. The Medical Director was involved in the action plans. She stated that they had a meeting in _____ on _____, before the results of the survey were received. She stated that the next meeting was _____ and they did an ADHOC QAPI (quality assurance performance improvement). They discussed the Performance Improvement Plans (PIPs) to put into place and reviewed to see if anything needed to be changed. She stated that they used the PIPs to create the action plans. The next meeting was on _____, and they discussed the plan of correction items. She stated that they went through each tag and items on the CMS 2567. The NHA acknowledged that audits were missing for all of the tags cited (no audits could be located past _____). She stated that they discussed each piece of the audits and they were on track with most of the audit. In response to the missing audits, she stated, "Don't know how I missed those next ones." I have my list, maybe I was crossing off when I gave them out and I don't know if I got them _____." She confirmed that the audits were not performed in accordance with the Plan of Correction (POC). She verified the audits did not mirror the tags, related to monitoring behaviors of the _____ medications. She stated that they went by the POC. This was what they focused on in the meetings and on the system, not the exact issue. She stated that when they did the POC they went line by line. Regarding dining on the 100 hall, she stated that during the audits there were no red flags. She agreed that the audits did not have enough detail of what was being observed. The NHA stated that	F 867			

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F 867	Continued From page 60 there was some staff not doing what they were supposed to be doing. The PIP was going to fix it. The facility was using the all _____-on deck approach (related to dining of independent residents). She stated that the community numbers were in the yellow, so the facility may open the dining room again. She stated that the meeting, was an Interdisciplinary Team, which included the NHA, Medical director, activity person, the DON or the UM, the MDS, Control Preventionist, Human Resources, housekeeping, and maintenance. In addition, sometimes the Registered Dietician, Certified Dietary Manager, Social Services and _____ will come. The NHA stated, "Some of the plans were working and some are not." She stated that they thought they were being followed up in the morning meeting and someone was tracking everybody. She stated, "Not having the nursing leadership has been a problem. Staff G can help us through until the DON comes _____."	F 867			