

**ICAL Survey Committee Report
RCF Deficiencies Report
3rd Quarter 2016 (July, August & September)**

**Total Surveys Reviewed: 14
Insufficiency Free Surveys: 4
Total Insufficiencies Cited: 43
Average Number of Insufficiencies Cited per Facility: 3.07
Total Fines: \$1,000**

Cited deficiencies were:

Tag	Description of Deficiency	No.	Fine
50.9(3)c	Background checks—facility failed to request and evaluation by the Department of Human Services and obtain approval before hiring staff; received background check back that required further evaluation that was not done.	1	
52.2(2)a	Dependent adult abuse—facility failed to report an alleged dependent adult abuse to the Department of Inspections and Appeals within 24 hours; missing medications.	1	\$500
57.7(5)b	Facility failed to follow general reporting requirements for reporting dependent adult abuse to the Department of Inspections and Appeals \$500 fine.	1	\$500
57.10(2)c(1) & (3)	Duties of administrator-No infection control in-service during 2015; dietary in-service not conducted during 2015; activity in services not conducted during 2015.	1	
57.11(3)	Personnel—Facility failed to comply with requirements related to conducting employee criminal background checks; staff record reviewed with a positive criminal background history.		
57.11(5)d	Personnel-lacked policies and procedures for residents who required more than general supervision.	1	
57.11(6)	TB testing not completed and physical not completed.	2	
	Personnel—facility failed to secure a physician’s examination prior to employment of personnel; facility failed to follow all physician’s orders to weigh resident and		

	report weight to physician; resident reported to physician they have not been getting all their medications; surveyor compared the list to the facility's and compared to admission the list was not corrected.		
57.12(1)h	General Policies—Staff did not follow program's policies and procedures on medication management regarding actions transcribed onto Medication Administration Report	2	
	General polices—facility failed to follow all written policies regarding medications administrations; missing lorazepam 2 ml labs missing.		
57.13(1)a	Admissions, transfer and discharge—facility failed to obtain a written order for RCF level of care; physician stated "it is my medical opinion that (resident) would best be suited to be admitted to an assisted living home, sooner rather than later for safety; resident was admitted to the facility who had greater needed for services than the facility could provide.	1	
57.16(2)c	Medical examination-resident. 1) No documentation two-step TB testing was conducted on residents.	1	
	Medical examinations; failed to complete TB testing for residents.		
57.17(1)k	Resident records. Facility failed to facility failed to obtain quarterly u medication orders.	1	
57.17(1)o	Resident records. Facility failed to document resident's medications and personal belongings on discharge.	1	
57.17(1)r	Resident records. Facility failed to document disposition of resident's medications and on discharge.	1	
57.17(3)e	Records—staff failed to document all incidents o unusual occurrences in a written incident report form (missing medications).	1	
57.19(1)b(9)	Medications periodic inspection. Facility failed to inspect drug storage unit for three month during 2015.	1	
57.19(2)d	Drugs—medications not adequately stored.		
57.19(4)a	Medications-staff did not watch resident swallow medications.	1	
57.21(1)a	Dietary-Employee did not participate in food protection program and safe food handling.	1	
57.21(2)a	Dietary—staff failed to follow mechanical soft diet for resident.	1	

57.22(3)	Orientation and service plans—facility failed to have current service plan for residents.	2	
	Orientation and service plan—Wanderguaard bracelet alarm system not on 7 residents as dictated in service plan.		
	Orientation and service plan—facility failed to amend or modify the service plan as individual resident needs changes.	1	
57.22(3)d	Orientation and service plan; two quarterly service plans were not completed.	1	
57.35(5)	Housekeeping—Facility failed to control all odors; strong odors present in resident's room.	1	
57.23(1)b	Resident activities program—facility failed to have activity goals for three residents.	2	
	Resident activities program—facility failed to schedule at least two evening activities a week.		
57.36(2)	Maintenance-railing on ramp was weathered and needed reinforcement.	1	
59.5(1) [S115]	Baseline TB screening for health care workers. 1) No documentation two-step TB testing not conducted on all employees. 2) No two-step TB testing completed on employees 3) No two-step TB testing completed on employees.	1	
59.8(2)	Baseline TB screening for residents. (1 No documentation two-step TB testing was conducted on residents. (2 No two-step TB testing was completed for residents.	2	
60.11(3)b	Mechanical requirements; air conditioning unit not working, temperature was 84 degrees.		
R9999	Final observation—door alarm signature sheet 9 out of 21 days not signed out.	1	