Compliance Tips from IHCA's Survey Results Committee

October 2016

The five most frequently cited tags from the 27 annual surveys (4 deficiency free), 35 complaints (9 unsubstantiated), 5 self-reports (5 unsubstantiated), 10 complaint/self-report (1 unsubstantiated) and 1 mandated report (0 unsubstantiated reviewed by the IHCA Survey Results Committee are listed below with the most common citations. There were 190 total reported citations.

The following is a breakdown of severity level:

A =	0.00%	D =	48.42%	G =	8.43%
B =	2.63%	E =	21.58%	H =	0.24%
C =	2.11%	F =	2.11%	I =	0.00%
				J =	1.05%
				K =	0.53%
				L=	0.00%

Total # of Reports: 73
Total # of surveys/reports deficiency free or unsubstantiated: 19
Avg. # of deficiencies

- All = 2.60
- Annual = 3.32
- Complaint/Self-Reports= 2.22

Total state fines for September Report = $1,500 ($93,500 held in suspension)

Top 5 Most Frequently Cited Tags for October 2016 Report

F 323—Free of Accident Hazards/Supervision/Devices

- Resident eloped. Wanderguard alarm not working, staff stated alarm doesn't always work (K) **$5,000 fine**
- Resident was found in parking lot, was to have Wanderguard alarm on, but was off resident and investigation revealed it was off for four days following an emergency room visit, but staff had been documenting checks of the Wanderguard each shift for those four days; resident to resident abuse without interventions in place; placed alarm to chair but removed it when in bed and did not place on care plan, resident fell with hip fracture; dining room left

unsupervised and resident to resident abuse occurred at that time (F) **$60,000 fine**

- Resident had history of sitting on arm of chair, but staff stopped providing assistance to deter that behavior, resident fell in dining room and suffered a hip fracture (G) **$3,000 fine**
- Facility staff did not use foot pedals while propelling resident in wheelchair, resident caught feet, fell forward, lacerated eye and forehead (G) **$2,000 fine**
- Resident scratched and pinched other residents (G) **$2,000 fine**
- Resident eloped, door alarm sounded but staff did not look for resident **(D) $500 fine**
- Facility failed to separate two residents in a CCDI unit; resident found in room of another resident with pants off (but brief on); found two times with blanket covering his/her lap, hands on other resident's thigh; resident was not moved off unit for nine days, same resident hit another resident in the face (G)
- Care plan called for resident to have alarms at all times, but resident was left unattended on toilet without alarm (G)
- Confused, ambulatory resident had access to areas where hazardous chemicals were available (E)
- Staff failed to keep medications cart locked (E)
- Facility's front door alarm not sounding, administrator stated "we turn alarm off during the day" (E)
- A bocster between resident and side rail not documented on fall report as per care plan (D)
- Resident fell six times, toileting plan not developed until after the sixth fall (D)
- Foot pedals were not on wheelchair when staff pushed resident down hall (D)
- Resident fell; bed not in low position, call light not in place; resident was exit seeker (D)
- CPAP machine was plugged into a surge protector (D)
- Medications cart was left unattended and unlocked (D)
- Staff failed to do safe transfer with gait belt per care plan (D)

F 279—Resident's Comprehensive Plan of Care

- Resident's care plan did not address urinary tract infections; staff did not utilize two-person transfer for ambulation; care plan interventions not updated as required (E)
- Care plan did not address resident's toileting or falls prevention interventions (E)
- Resident experienced additional skin breakdown issues; but no new interventions added to resident's care plan; no new care plan interventions for a resident who experienced a fall with fracture; side effects for use of antipsychotics not on resident's care plan (E)
- Resident's care plan did not address to monitor or report side effects of antidepressant (E)
- Resident with exit seeking/elopement risk not addressed in care plan (D)
- Facility failed to update care plan when a resident experienced a change in condition; his/her behavior became very rude (D)

- Facility failed to document interventions prior to PRN administration of hypnotic or antianxiety medications (D)
- Resident's care plan did not address how to monitor or report side effects of antipsychotics (D)
- Resident's care plan didn't have interventions for MRSA (D)
- No interventions in care plan for aggressive behavior with hx (D)
- Care plan lacked interventions for behaviors and hallucinations (D)
- Staff failed to change care plan after resident fell three times during shift (B)

F 223—Resident Freedom from Abuse

- Resident struck another resident in chest, no interventions were in place; resident was found holding a pillow over the face of another resident (G) **$24,000 fine**
- Resident-to-resident altercation in CCDI (G) **$3,000 fine**
- CNA carried resident over his/her shoulder down the hall, also facility administration took resident's pre-paid debit card and used it seven times (G) **$2,500 fine**
- Facility did not ensure residents from sexual abuse; a resident grabbed another resident in the groin area which was verified by video camera (G) **$2,000 fine**
- A resident "rammed" another resident with a wheelchair, causing the resident to slide to the floor; ramming resident kicked other residents; facility policy failed to prevent and eliminate abuse (G) **$2,000 fine**
- Resident #1 hit resident #6 (their spouse), Resident #6 reported to nurse; director of nursing stated she was unaware; also resident #1 hit at nurse; resident #1 said nurse grabbed wrist and caused a skin tear (G) **$2,000 fine**
- Resident hit another resident (G) **$500**
- Staff failed to complete an incident report and investigate resident-to-resident altercation **(D)**

F 281—Professional Standards of Quality

- Novalog was expired at time of administration to resident (more than 28 days) (D)
- Proper insulin dose not administered to resident as per sliding scale (D)
- Tegaderm was not dated as to when it was applied (D)
- Nurse gave vitamin C; although vitamin C had been discontinued (D)
- Staff failed to weigh resident six daily weights in one month; missed HgbA1C (D)
- Staff failed to conduct daily weigh-in and blood pressure checks as physician ordered 26 times in one month; physician-ordered ace wraps not on resident as observed by surveyor (D)
- Facility failed to follow physician's orders, daily medications not given (D)
- Staff failed to check tube placement prior to tube feeding resident (D)
- Resident's knee brace not on per physician's orders, and no seat alarm (D)

F 312--Activities of Daily Living

- Incorrect pericare, staff failed to turn wipe cloth when wiping, failed to wash left buttocks, groin, etc. (E)
- Resident baths not given twice weekly; incomplete pericare (E)
- Not all of residents areas cleansed during incontinence care (D)
- Resident not repositioned as per care plan evidenced by interviews (D)
- Staff failed to complete pericare, failed to cleanse resident's hips (D)
- Staff failed to provide ADL care for one dependent resident, failed to provide appropriate pericare (D)
- Staff failed to provide nail care, black and yellow substance found under resident's fingernails (D)

F 371—Store, prepare and serve food under sanitary conditions

- Grease buildup on stove hood in kitchen (F)
- Dirty kitchen: dust on vents; unsanitizable cutting boards (E)
- Dirty ice machine, dirty upright freezer, food stacked on floor in boxes (E)
- Dust on fans in kitchen; opened, undated food items in freezer (E)
- Dietary worker used ungloved hand to push mechanical blade down with food inside (E)
- Facility's kitchen had dirty microwave oven and dirty light bulbs (E)
- Dirty juice dispenser in kitchen (D)
- Hot meat temperatures not maintained at 145 degrees Fahrenheit (D)

Other notable deficiencies and fines

F-224

- Facility discovered several $200 withdrawals out of resident's funds from an automated tell machine by a facility staff member; reported to the department as abuse; staff member received $50 "gratuity" for each withdrawal (G) **$2,000 fine**

F-225

- Facility failed to separate a staff member from a resident after resident reported he/she got a skin tear from staff grabbing arm; facility failed to report 2 instances of abuse to the department (G) **$2,000 fine**

F-226

- Facility failed to complete background checks in a timely manner (D) **$500 fine**

- Facility failed to assess and intervene with a change in condition; did not timely report change to physician; change in skin integrity not addressed through facility's skin care protocol; the physician stated initial diagnosis of skin area was a canuclusion; then determined to be an abscess with MRSA with debridement, IV meds and wound vac; resident hospitalized (G) **$5,000 fine**
- Resident's skin issues not checked or reported; also staph infection not reported **(G)**

F-328

- Facility failed to ensure staff educated and demonstrated proper use of e-tank oxygen administration to ensure delivery of oxygen as ordered for continuous oxygen; resident #1 had oxygen ordered per nasal cannula hooked up to portable e-tank; resident died, oxygen tank was empty, staff did not know it was empty (J) **$8,000 fine**

F-333

- Resident's antipsychotic medication changed from 100 mg to 150 mg but old medication was left in cart and both doses given on two days, resident had major decline, was hospitalized on palliative care and died; the medication error was not reported to the resident's physician, family or facility supervisor until decline in condition occurred two days later (J) **$6,000 fine**

F-353

- Call lights not answered timely; evidenced by automatic records and resident complaints (E) **$500 fine**

481-50.7

- Facility failed to report fall with major injury **$500 fine**

K 170

- U.S. mail not delivered on weekends (E)

Annual Survey Frequency
September Survey Results Meeting

Facility	City	Last Year	This Year	Frequency
Carlisle Center for WN & Rehab	Carlisle	11/19/15	9/22/16	44 Weeks
Cedar Manor	Tipton	10/22/15	9/22/16	48 Weeks
Concord Care Center	Garner	10/29/15	9/29/16	48 Weeks
Deerfield Retirement Community	Urbandale	11/20/15	9/15/16	43 Weeks
Eastern Star Masonic Home	Boone	10/1/15	9/19/16	49 Weeks
Elmcrest Retirement Community	Harlan	11/3/15	9/15/16	45 Weeks
Evans Memorial Home	Cresco	10/15/15	9/22/16	49 Weeks
Golden Age Care Center	Centerville	10/15/15	9/22/16	49 Weeks
Good Samaritan	Indianola	11/5/15	9/22/16	46 Weeks
Good Samaritan	Manson	10/29/15	9/15/16	46 Weeks
Good Samaritan	Ottumwa	10/29/15	9/15/16	46 Weeks
Iowa Veteran's Home	Marshalltown	10/22/15	9/29/16	50 Weeks
Kanawha Community Home	Kanawha	10/15/15	9/8/16	47 Weeks
Luther Manor Retirement Home	Dubuque	12/3/15	9/29/16	43 Weeks
On With Life	Glenwood	11/12/15	9/8/16	43 Weeks
QHC Mitchellville	Mitchellville	11/2/15	9/1/16	44 Weeks
Rehab Center of Hampton	Hampton	11/25/15	9/29/16	47 Weeks

Rotary Senior Living	Eagle Grove	8/20/15	6/30/16	45 Weeks
St Anthony Regional Hospital	Carroll	11/5/15	9/8/16	44Weeks
Simpson Memorial Home	West Liberty	7/23/15	6/9/16	45 Weeks
Sunrise Retirement Community	Sioux City	10/1/15	9/15/16	50 Weeks
The Madison	Fort Madison	7/2/15	9/22/16	61 Weeks
Thomas Rest Haven	Coon Rapids	10/15/15	9/8/16	47 Weeks
Wheatland Manor	Wheatland	10/15/15	9/8/16	47 Weeks
Hallmark Care Center	Mt. Vernon	9/17/15	9/1/16	50 Weeks

Of the (25) Tabulated Annual Surveys Reviewed in October:

(1) Annual Survey was later than last year:

The Madison	Fort Madison	7/2/15	9/22/16	61 Weeks

(24) Annual Surveys were earlier than last year:

Earliest Surveys:

Deerfield Retirement Community	Urbandale	11/20/15	9/15/16	43 weeks
Luther Manor Retirement Home	Dubuque	12/3/15	9/29/16	43 Weeks
On With Life	Glenwood	11/12/15	9/8/16	43 weeks

Average Survey Frequency:

October Survey Meeting	**47.04 Weeks**
September Survey Meeting	**46.72 Weeks (5.28 Weeks Early)**
August Survey Meeting	**47 Weeks (5 Weeks Early)**
July Survey Meeting	**45.12 Weeks (6.88 Weeks Early)**
June Survey Meeting	**45.31 Weeks**
May Survey Meeting	**46.60 Weeks**
April Survey Meeting	**48.50 Weeks**