

**Iowa Department of Inspections and Appeals
Health Facilities Division
Citation**

Citation Number: 6461				Date: February 23, 2017	
Facility Name: Keota Health Care Center		Fine amount reduced by 35% to \$325.00 on March 6, 2017 pursuant to Iowa Code Section 135C.43A		Survey Dates: February 6-9, 2017	
Facility Address/City/State/Zip 204 N. Keokuk Washington Rd Keota, Iowa 52248					
		DS			
Rule or Code Section	Nature of Violation	Class	Fine Amount	Correction date	

58.20(2)(6)e	<p>481-58.20(135C) Duties of health service supervisor. Every nursing facility shall have a health service supervisor who shall:</p> <p>58.20(2) Plan for and direct the nursing care, services, treatments, procedures, and other services in order that each resident's needs and choices, where practicable are met; (II, III)</p> <p>58.20(6) Supervise health services personnel to ensure they perform the following restorative measures in their daily care of residents:</p> <p>e. Assisting residents with routine range of motion exercises; (III)</p> <p>DESCRIPTION:</p> <p>Based on observation, record review, and staff interviews, the facility failed to provide ROM(range of motion) exercises in order to prevent a decline for 1 of 3 residents reviewed with a ROM program(Resident #5). The facility reported a census of 20 residents.</p> <p>Findings include:</p> <p>1. Resident #5 had a MDS (Minimum Data Set) assessment with a reference date of 5/24/16. The assessment identified the resident had diagnosis including Parkinson's disease, anxiety and depression. The MDS indicated the resident required extensive assistance of 1 staff person for</p>	II	\$500	Upon receipt	
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Facility Administrator

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If, within thirty (30) days of the receipt of the citation, you (1) do not request a formal hearing or withdraw your request for formal hearing, and (2) pay the penalty, the assessed penalty will be reduced by thirty-five percent (35%) pursuant to Iowa Code section 135C.43A (Supp. 2009).

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	<p>eating, extensive assistance of 2 staff for bed mobility and personal hygiene and depended totally on 1 staff for bathing. The resident depended totally on 2 staff for transfers and dressing. The MDS identified the resident had no impairments in ROM in the upper or lower extremities.</p> <p>The MDS assessment, dated 11/3/16, indicated the resident required extensive assistance of 1 staff for bed mobility and personal hygiene, depended totally on 1 staff for eating, and depended totally on 2 staff for transfers, dressing, toilet use, and bathing. The MDS indicated the resident did not walk during the MDS review period and the resident had impairments in ROM on both sides of the upper and lower extremities. The MDS listed the resident's cognitive skills as moderately impaired.</p> <p>During an observation on 2/8/17 at 11:00 a.m., Staff D CNA(Certified Nursing Assistant), Restorative Aide completed ROM exercises to the resident's upper and lower extremities. The resident had a left wrist contracture (a condition of shortening and hardening of muscles, tendons, or other tissue, often leading to deformity and rigidity of joints) and left foot drop. The resident did not have full range of motion in the left fingers and had a rolled up washcloth in the left hand.</p>			
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	<p>The resident's Restorative Care Plan, dated 9/8/16, directed staff to complete 10 repetitions of the following exercises three times per week:</p> <ul style="list-style-type: none"> a. hip and knee flexion and extension b. hip abduction c. ankle dorsal and plantar flexion d. shoulder flexion e. elbow flexion and extension f. wrist flexion and extension <p>The facility lacked a Restorative Care Plan prior to 9/8/16.</p> <p>Review of facility documentation revealed the resident participated in Physical Therapy from 8/26/16-9/9/16 and Occupation Therapy from 8/26/16-9/8/16.</p> <p>ROM documentation for the resident for the survey year from 3/3/16 through 2/6/17 revealed staff completed ROM exercises the following days and durations:</p> <table style="width: 100%; border: none;"> <tr><td style="padding-left: 20px;">1/24/17</td><td>25 minutes</td></tr> <tr><td style="padding-left: 20px;">1/26/17</td><td>no minutes listed</td></tr> <tr><td style="padding-left: 20px;">1/27/17</td><td>no minutes listed</td></tr> <tr><td style="padding-left: 20px;">1/30/17</td><td>25 minutes</td></tr> <tr><td style="padding-left: 20px;">1/31/17</td><td>no minutes listed</td></tr> <tr><td style="padding-left: 20px;">2/2/17</td><td>25 minutes</td></tr> <tr><td style="padding-left: 20px;">2/3/17</td><td>no minutes listed</td></tr> <tr><td style="padding-left: 20px;">2/6/17</td><td>25 minutes</td></tr> </table>	1/24/17	25 minutes	1/26/17	no minutes listed	1/27/17	no minutes listed	1/30/17	25 minutes	1/31/17	no minutes listed	2/2/17	25 minutes	2/3/17	no minutes listed	2/6/17	25 minutes			
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	<p>2/7/17 25 minutes</p> <p>The facility lacked documentation of additional ROM exercises completed in the survey year.</p> <p>Care plan entries, dated 6/9/14, stated the resident usually required extensive assistance of 2 staff for bed mobility and utilized a Hoyer(mechanical)lift and 2 staff members for transfers.</p> <p>A care plan entry, dated 1/17/17 identified the resident required passive ROM exercises to the upper and lower extremities 5 days per week.</p> <p>The facility policy and procedures titled <u>Range of Motion (ROM) Splints, Braces, Orthotics</u>, dated 8/2009, directed the staff that residents at risk for contractures had a ROM program a minimum of 6 days per week unless contraindicated in order to maintain the resident's ability to move a joint through its normal range of movement and perform activities of daily living.</p> <p>During an interview on 2/8/17 at 11:24 a.m., Staff D stated she started completing ROM exercises at the facility in November 2016 after returning from helping out at a sister facility. She stated in her absence, she doubted the CNAs had time to complete the ROM exercises with just 2 CNAs on</p>			
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	<p>the floor.</p> <p>During an interview on 2/8/17 at 1:31 p.m., Staff C CNA stated the CNAs left ROM up to the Restorative Aide and stated it was "tough" to complete ROM exercises with only 2 CNAs on the floor.</p> <p>During an interview on 2/8/17 at 2:30 p.m., the DON(Director of Nursing) stated she could not locate additional ROM documentation for the survey year.</p> <p>FACILITY RESPONSE:</p>			
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