

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

PRINTED: 03/03/2017  
FORM APPROVED  
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>165495</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>C</b> <b>02/16/2017</b>
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NAME OF PROVIDER OR SUPPLIER  <b>CLARKSVILLE SKILLED NURSING &amp; REHAB CENTER</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>115 NORTH HILTON ST CLARKSVILLE, IA 50619</b>
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F 000	INITIAL COMMENTS  Correction date <u>2/17/17</u>  The following deficiency relates to the investigation of mandatory #62957. (See code of federal regulations (42CFR) Part 483, Subpart B-C)	F 000	F 000 The preparation of the following plan of correction for this deficiency does not constitute and should not be interpreted as of the validity or accuracy of the statements alleged or conclusion set forth in this statement of deficiencies.	
F 223 SS=G	483.12 FREE FROM ABUSE/INVOLUNTARY SECLUSION  483.12 The resident has the right to be free from abuse, neglect, misappropriation of resident property, and exploitation as defined in this subpart. This includes but is not limited to freedom from corporal punishment, involuntary seclusion and any physical or chemical restraint not required to treat the resident's symptoms. This REQUIREMENT is not met as evidenced by: Based on record review, staff and family interviews, the facility did not always ensure that each resident had the right to be free from verbal, sexual, physical and/or mental abuse. Concerns were noted for one of four residents in a sample of four residents. (#1). The facility reported a census of 36 residents.  Findings include:  Resident #1 was admitted to the facility on 08-28-2013 and had diagnoses which included diabetes, atherosclerotic heart disease, dysphagia, thyrotoxicosis, hypothyroidism, high blood pressure, gastroesophageal reflux disorder, osteoarthritis, urinary incontinence, malignant neoplasm of prostate, unspecified kidney failure and cardiac pacemaker.	F 223	F 223 On 2/7/2017 staff were retrained on the facility's Dependent Adult Abuse Policy specifically to reporting requirements and the facility's policy regarding the Usage of Electronic Devices and Computers.  On 2/8/2017 education was provided to staff during a mandatory in-service. The topics of discussion included: an overview of the facility's Dependent Adult Abuse Policy, Personal Blogging, Social Media and Confidential Information Policy, the Employee Handbook, the Elder Justice Act and HIPAA.	

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE: *Sharon Selb* TITLE: Administrator (X6) DATE: 3-3-17

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.

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NAME OF PROVIDER OR SUPPLIER  CLARKSVILLE SKILLED NURSING & REHAB CENTER			STREET ADDRESS, CITY, STATE, ZIP CODE 115 NORTH HILTON ST CLARKSVILLE, IA 50619	
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F 223	Continued From page 1  Documentation in the facility Minimum Data Set (MDS) assessment form dated 02-02-2016 indicated Resident #1 could not complete the Brief Interview for Mental Status (BIMS) and was assessed as having long term and short term memory problems and severely impaired cognitive skills for decision making.  The assessment form also indicated Resident # 1 required extensive staff assistance with most activities of daily living (ADL's) including bed mobility, transfers, dressing, personal hygiene, toileting, bathing and eating Resident #1 did not ambulate.  The facility's individual plan of care (dated 02/10/2016) addressed Resident #1 ADL function/rehabilitation potential and directed staff to implement the following approaches: * Utilize the mechanical sit to stand with two staff assist for all transfers. * Incontinent of bowel and bladder, wears adult pull up briefs and needs assistance with pericare after toileting.  Documentation in the nurse's notes dated 02-03-2017 included an annual social service note which indicated Resident #1 was unable to complete the BIMS as Resident #1 did not answer any of the questions. The notation indicted staff interviews were completed which determined Resident #1 was severely impaired with decision making skills.  The annual MDS notation, dated 02/08/2017 indicated Resident #1 was alert and able to state his/her name only. The notation also indicated	F 223	<b>F223 continued...</b>  Upon hire new personnel will receive the facility's Personal Blogging, Social Media and Confidential Information Policy.  The facility will complete a random monthly audit to monitor the accessibility and location of employee cellular devices.	

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F 223	<p>Continued From page 2</p> <p>Resident #1 had frequent urinary and bowel incontinence and wore adult briefs to help manage (the incontinence). The assessment also indicated Resident #1 was no longer ambulatory and required the use of the stand lift and the assistance of two staff for all transfers. Resident #1 utilized a wheelchair (for locomotion) with staff propelling to and from destinations.</p> <p>During an interview on 02/16/17 at 11:35 a.m., the facility administrator indicated at 8:01 p.m. on 02/06/2017 she received notification from a community member stating an employee sent a Snapchat of a staff member holding BM (bowel movement) in the palm of his/her gloved hand and a resident's buttocks. The administrator indicated she immediately went to the nursing facility and initiated an investigation.</p> <p>During an interview on 02/15 2017 at 2:00 p.m. Staff A stated it was her understanding that the facility policy directed staff not to have their cell phones on their person while on duty. Staff A stated cell phones were permitted in the facility break room. Staff A stated she had attended facility inservices on HIPPA and it was pretty obvious/clear that cell phones were not permitted (on their person) but Staff A added that not all staff abided by the policy. Staff A added that on the date of the incident (02-06-2017) she was getting off work (at a different job) when she received a Snapchat from Staff E. Staff A stated she opened the Snapchat and saw a photo of a gloved hand "holding" a pile of BM. She described it as if a resident was in the process of defecating and staff "caught" the feces. Staff A stated she was unable to see the resident but did see bare buttocks from the lower back to mid</p>	F 223		

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NAME OF PROVIDER OR SUPPLIER  CLARKSVILLE SKILLED NURSING & REHAB CENTER			STREET ADDRESS, CITY, STATE, ZIP CODE 116 NORTH HILTON ST CLARKSVILLE, IA 50619		
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F 223	<p>Continued From page 3</p> <p>thigh area. Staff A stated she knew the photo was a resident and staff person. She also stated the photo included a typed message, something to the effect of, "this is what I do at my job".</p> <p>During an interview on 02/15/2017 at 2:21 p.m. Staff B stated facility policy directed staff not to have their cell phones on their person while on duty unless it was an emergency and their supervisor was aware. Staff B stated normally cell phones were to be kept in the breakroom. Staff B also stated that taking pictures of residents (or any part of a resident (s) (body) is a "no-no". Staff B stated on the evening of the incident she received a Snapchat notification but did not open it immediately. She stated later when she did open it she observed a "hand with poop on it". Staff B stated she did not recall seeing any part of a resident. Staff B stated she could not recall what the accompanying text had read. She added that she didn't think it was a very professional thing to do and was shocked that a staff person would do such a thing. Staff B also stated she thought the incident should have been reported (to administration ) but admitted that she did not report it because she was a friend of Staff E.</p> <p>During an interview on 02/15/17 at 2:39 p.m. Staff C also stated that it was facility policy that staff did not have cell phones on their person while at work, but cell phones were allowed in the breakroom. Staff C also indicated it was against facility policy for staff to take pictures of residents or any part of a resident. Staff C stated on the day of the incident, she checked her cell phone (between 6:00 and 7:30 p.m.) and noted she had received a message from Staff E which was a picture of a hand with BM on it. Staff C stated she didn't notice any part of a resident but later</p>	F 223			

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F 223	<p>Continued From page 4</p> <p>learned that the photo did include part of a resident's body. Staff C also stated there was a text with the photo that mentioned something about what she (Staff E) does at her job. Staff C stated it did not cross her mind that it was wrong to take a photo and send it out on Snapchat and she did not report the incident as it also did not cross her mind that it was potential abuse.</p> <p>During an interview on 02/16/17 at 10:14 a.m., Staff D stated it was facility policy that staff did not have cell phones on their person during work time and staff were not allowed to take photos of residents. Staff D stated on the day of the incident she (Staff D) and Staff E were assisting Resident #1 to bed following the evening meal. Staff D stated Resident #1 was positioned in the EZ stand (for a transfer) and they had completed perineal cares. Staff D stated a clean adult brief had been placed when Resident #1 began to defecate again. Staff D stated Staff E "caught" the bowel movement in her gloved hand so the clean brief would not be soiled. Staff D stated she then observed Staff E take her cell phone and take a photo of what Staff D thought was Staff E's gloved hand with the bowel movement. Staff D stated then Staff E put her phone away. Staff D stated she did not report the incident, nor was she aware that Staff E had sent the picture to other individuals, and that the photo included a text message. Staff D confirmed that Resident #1 did not consent to having the photo taken and the photo included Resident #1's body (parts).</p> <p>During an interview on 02/16/17 at 10:58 a.m. Staff E stated the facility had zero tolerance for staff to have cell phones on their person while at work. Staff E stated she thought the day shift followed the policy more than second shift staff.</p>	F 223			

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F 223	<p>Continued From page 5</p> <p>Staff E stated she did have her cell phone on her person a few times a week. She stated she also saw other staff with their cell phones, but they checked/used them during "down times" in the cubbies where the Kiosk was located. Staff E stated it was even more unacceptable for staff to take pictures of residents.</p> <p>Staff E described the evening of the incident to be a usual day. She stated she was assisting in getting Resident #1 ready for bed about 7:00 p.m. Staff E stated perineal cares had been completed and as a new brief was placed, Resident #1 began to defecate again. Staff E stated she did not want Resident #1 to soil a second brief so she "caught" the bowel movement in her left (gloved) hand. She stated she then retrieved her cell phone with her ungloved right hand and snapped a photo, adding a text "I love my job" which she stated she was being sarcastic. Staff E stated Staff D was quiet while providing cares, and together they finished getting Resident #1 ready for bed. Staff E stated her actions were immature and she just wasn't thinking. She added that she did not mean any harm by her actions.</p> <p>Review of the facility policy (not dated) titled "Personal Blogging Social Media and Confidential Information" included the following direction for staff.</p> <p>"1. You may not post resident, vendor or co-worker information which is otherwise prohibited from release by state or federal law. Examples include but are not limited to:</p> <p>* Prohibiting the use of photographs or recordings in any manner that would demean or humiliate a resident (s); including by not limited to using any type of equipment (i.e.: cameras, smart</p>	F 223		

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F 223	Continued From page 6 phones and other electronic devices) to take, keep or distribute photographs and recordings on social media. * Demeaning or humiliating photographs or video of nudity, exposed bodily (sic) parts, such as genitalia, breast, or of posting examples of bodily functions such as toileting, provisions of incontinence care, exposing perineal areas and/or fecal material on body parts or bedding/ furnishings.	F 223			