Citation Numb 7052	er:			Date: Decem	ber 10, 2019
Facility Name: Garden View Care Center			Survey Dates: October 1 – December 10, 2019		
Facility Address/City/State/Zip 1200 West Nishna Rd.					
Shenandoah, IA 51601		ЈКМ			
Rule or Code Section	Nature of Violation		Class	Fine Amount	Correction date

58.19(2)j	481—58.19(135C) Required nursing services for residents. The resident shall receive and the facility shall provide, as appropriate, the following required nursing services under the 24-hour direction of qualified nurses with ancillary coverage as set forth in these rules:	I	\$10,000 (held in suspension)	Upon Receipt
	58.19(2) Medication and treatment.			
	<i>j.</i> Provision of accurate assessment and timely intervention for all residents who have an onset of adverse symptoms which represent a change in mental, emotional, or physical condition. (I, II, III)			
	DESCRIPTION:			
	Based on clinical record review, facility policy review, and interviews, the facility failed to provide accurate and timely interventions for residents who had an onset of adverse symptoms which represented a change in condition for 2 of 4 resident records reviewed (Resident #1 and Resident #3). Resident #3 admitted to the facility on 9/4/19. The resident's Progress Notes failed to contain an admission assessment to determine the resident's baseline condition at the time of her arrival to the facility. Review of the resident's medical record revealed the facility staff failed to consistently provide adequate assessments and timely interventions when			

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	1	
Resident #3 underwent significant changes in condition, including a temperature of 103.9. This resulted in acute hospitalization and treatment for sepsis on 9/9/19. The resident returned to the facility on 9/17/19. However, she was again transferred back to the hospital after requiring intubation and transport via emergency medical helicopter on 9/25/19. At that time, the resident was admitted to ICU with a temperature of 101.2 degrees F. Resident #3 passed away at the hospital on 10/6/19. This constituted an Immediate Jeopardy to resident health and safety. The facility identified a census of 46 current residents.		
Findings include:		
1. The Admission Record for Resident #3 documented the resident admitted to the facility on 9/4/19 from another nursing facility with diagnoses that included type II diabetes mellitus, hypertension, delusional disorder, major depressive disorder-single episode, chronic obstructive pulmonary disease (COPD), osteoarthritis, gastro-esophageal reflux disease, schizophrenia, unspecified psychosis, pseudobulbar affect, repeated falls and urinary tract infection (UTI).		
The resident's Progress Notes failed to contain a head- to-toe admission assessment to determine the resident's baseline condition at the time of her arrival to the facility.		
The Baseline Care Plan completed 9/4/19, completed by the MDS Coordinator/director of nursing (DON)		

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documented the resident was alert and cognitive intact, and communicated verbally. The resident dependent on 2 staff and a mechanical full-body transfers, required set-up assistance for eating, required observation for behaviors. The Care Pla the documented the resident demonstrated both and bladder incontinence.	was lift for and an also
The Progress Notes entry completed by Staff L, corporate employee registered nurse (RN), on 9 at 5:15 PM for an effective date of 9/6/19 at 7:0 (late entry) documented the resident was lethard an oxygen saturation of 96 % on room air, lungs and had no cough or shortness of breath. The e also documented the resident had no intake at c	/8/19 D PM jic with clear entry
Review of the Medication Administration Record (MAR) for September, 2019 revealed a nursing of entered by the DON which directed nurses to co and document a head-to-toe assessment of the resident every shift regarding how the resident completed activities of daily living, and chart any behaviors or abnormalities because the resident able to communicate as well as when admitted to facility. The order specifically requested for staf address if the resident could make needs known speak in complete sentences, and, if not, what so to meet the resident's needs. The entry also documented labs and a urinalysis (UA) had been requested.	not o the i to a and taff did
During interview on 10/3/19 at 3:05 PM the DON stated she entered the nursing order for the heat	

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toe assessment every shift for the resident because when she worked part of shift as charge nurse on 9/6/19, CNA staff had reported to her the resident did not seem to be as alert and active as she had been on the day she entered the facility. She stated did not personally assess the resident, but wanted to alert nursing staff to monitor the resident and expected them to follow the nursing order. She stated she did not follow-up with charge nurses or CNA's to check on the status of the resident after she entered the nursing order on 9/6/19.		
Review of the Progress Notes revealed no head-to-toe assessment, or assessment of the resident's abilities as directed by the nursing order, documented on 9/6, 9/7 or 9/8.		
An Order Details dated 9/5/19 at 11:24 AM documented the facility received an order from the resident's primary care physician to draw a hemoglobin A1C, lipid panel, thyroid stimulation hormone (TSH) level and basic metabolic profile every 6 months starting on the 5th of the month. The Progress Notes Entry completed by Staff L on 9/8/19 at 5:16 PM for an effective date of 9/6/19 at 9:00 PM (late entry) documented blood drawn from the resident's right hand and taken to the hospital by a facility certified nursing assistant (CNA). Review of the resident's clinical record revealed no lab results for this lab draw that had been ordered by the physician.		
During inquiry on 10/3/19 a medical records representative of the hospital reported the hospital had		

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	Resident #3 on or durin A Progress Notes entry PM by Staff P, RN form documented the residen	completed on 9/7/19 at 5:15				

injection. The Progress Notes entries after this date

a. 9/7/19 at 6:19 PM entry completed by Staff P documented the resident's blood sugar measured 441. Staff gave 25 units (u) of Humalog insulin and contacted the resident's primary care physician.
b. 9/8/19 at 7:33 AM entry completed by Staff P documented the resident was in bed and lethargic with

c. 9/8/19 at 8:35 AM entry completed by Staff P documented the resident was in bed, lethargic and does not awaken easily. The resident's oxygen saturation level measured 84% and the resident started on oxygen at 2 liters per minute (LPM) per nasal cannula. Review of the resident's clinical record revealed no notes or entries that showed staff had contacted the physician for an order to administer

d. 9/8/19 at 9:38 AM entry completed by Staff P documented the resident's oxygen saturation level as 86 % on 2 LPM oxygen and the resident sent to the emergency room after order received from the

e. a late entry created 9/9/19 at 5:04 AM by Staff Q, licensed practical nurse (LPN) staffing agency

resident's primary care physician.

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oxvaen.

are as follows:

a blood sugar of 228.

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Garden View C	are Center		Ostahar	4 Dec	ambar 1	0 2010
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	amployee for an offect	ive data of $0/7/10$ at $10:00$ DM	1			
		ive date of 9/7/19 at 10:00 PM nt in bed with eyes her closed,				
		ul stimuli by opening her eyes.				
		nented staff would continue to				
	monitor for any changes					
		try documented the resident with diagnoses of sepsis and				
	stroke.	with diagnoses of sepsis and				
		t completed by the emergency				
		dated 9/8/19 at 10:10 AM at found unresponsive with left				
		breathing. EMS had rated the				
	resident's initial condition					
		ment (FD) Drewider Note dated				
		ment (ED) Provider Note dated umented nursing home staff				
		ad been acting differently with				
	loss of consciousness,	unresponsive for possibly				
		he notes showed the resident				
		ency room as unresponsive o, with questionable facial				
		ent's temperature measured				
	103.9 degrees, heart ra					
		nd a blood sugar of 475. The				
		for Transfer dated 9/8/9				
medical facility for the d		nt transferred to ICU in another iagnosis of stroke.				
	incultur latinty for the a					
		mpleted by a physician at the				
		8/19 at 2:45 M documented the				
		o painful stimuli, eyes are open t and the resident assessed to				

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have the following medical problems:		
acute respiratory failure severe dehydration hyperglycemia hypernatremia metabolic encephalopathy UTI		
The synopsis further documented the residents acute mental status change appeared to be due to sepsis (infection in the bloodstream) or diabetic ketoacidosis rather than a stroke.		
During interview on 10/17/19 at 9:40 AM Staff P stated she could not recall the resident but said that anything she would have done for the resident would be documented in the Progress Notes.		
Review of the daily scheduled revealed Staff G,CNA assigned to the resident's hall on 9/5/19 on the 6 AM-2 PM shift. During interview on 10/3/19 at 10:40 AM Staff G stated she only cared for the resident 1 time when she first admitted to the facility and she could not recall anything unusual with the resident.		
During interview on 10/3/19 at 2:06 PM Staff B, CNA, stated she worked with the resident the day she admitted to the facility and a couple of days later. Review of the schedule revealed Staff G assigned to care for the resident on 9/4 and 9/6. She stated the resident was alert, and although she did not initiate conversation she would answer questions and did try		

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		care. She stated the resident y she came in but a few days				

 resident remained in bed for supper because she was so tired. The resident re-admitted to the facility from the hospital on 9/17/19. The Progress Notes entry completed by Staff D, licensed practical nurse (LPN) at 6:31 PM documented the resident noted to have decreased appetite to day and also some congestion. Staff D sent a fax to the resident's physician regarding these findings. The next Progress Notes entry completed by Staff E, 		
The resident re-admitted to the facility from the		
During interview on 10/16/19 at 2:36 PM Staff R, CNA, stated she recalled working with the resident on 2 days before she went to the hospital. Review of the schedule revealed Staff R assigned to the resident on 9/6 and 9/7. She stated the resident appeared really lethargic and did not answer questions and had trouble comprehending what staff said to her, She stated she		
did feed herself the day she came in but a few days later when she worked with her she required assistance. The resident acted sleepy but she was not sure if that was normal for the resident or not.		

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documented she applied oxygen to the resident at 2 LPM and her oxygen saturation between 82-87%. The note documented the previous shift nurse stated the resident may have aspirated (no notes identified in the progress notes to corroborate this). The resident's vital signs measured 98.9 degrees, respirations 24 and blood pressure 120/70 and the resident's pulse fluctuating between 56-120. The resident continued with shallow, quick breaths and fluctuating oxygen saturation levels. Staff E checked the resident's blood sugar, and repeated it, and the glucometer determined the results as "HI".		
At midnight Staff E documented she called the DON and left a message and then called the administrator who told her he wanted the resident to be seen in the emergency room. Staff E increased the resident's oxygen flow to 3 LPM. Staff E contacted the hospital in town and a physician directed her to call the resident's physician who is associated with another hospital. Staff D then called the primary care physician's affiliated hospital and received an order at 1:00 AM to send the resident to the hospital in town.		
The Patient Care Report dated 9/25/19 documented the ambulance personnel dispatched to the facility at 1:09 AM and at the patient's side at 1:13 AM. The resident's skin, warm, pale and clammy, lungs sound decreased with rhonchi/wheezing bilaterally, had sinus tachycardia (rapid heart rate) and the resident was unresponsive The resident's pulse measured 120, blood pressure 114/74, respirations 24 and labored, oxygen saturation 81% and blood sugar reading of		

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	facility reported the resise saturation level of 70-80 PM the evening before may have aspirated lass oxygen at 15 LPM and The ambulance person over to medical helicopt The hospital history and 9/25/19 at 6:22 AM doc the hospital via medical ventilation and remaine stimuli. The resident's reperature of 101.2 de respirations 30, blood p saturation 94% and on					
	The resident presented with the principal problem of altered mental status with hyperglycemia, hypotension, hypernatremia, hyperkalemia, and significant abdominal distension, possibly due to bowel obstruction. The resident admitted to ICU. The resident passed away at 10/6/19 at the hospital. Review of the schedules revealed Staff G, certified nursing assistant (CNA) assigned to the resident on the 6 A-4 PM shift on 9/24/19 and she and Staff F, CNA worked together to care for her. Staff G stated that when they got the resident up in the morning, it looked like she had something in her mouth that					

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If, within thirty (30) days of the receipt of the citation, you (1) do not request a formal hearing or; (2) withdraw your request for formal hearing, and (3) pay the penalty; the assessed penalty will be reduced by thirty–five percent (35%) pursuant to Iowa Code section 135C.43A (2013).

looked like cottage cheese. She reported this to Staff D, charge nurse. Staff G stated Staff D later told her

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	looked like peaches. Sta sounded "rattley" and w reported that to Staff D not get the resident up f lethargy. Later on in the day Staff in the hallway outside th her she could not do a g resident while she lay in Staff D they would get ti could assess her but re to the offer. She and Sta times that day to check change in condition, and it has been difficult to ge on the concerns they br During interview on 10/3 she and Staff G worked AM-2 PM to care for the	a bed. She and Staff F told he resident out of bed so she ported Staff D never responded taff F asked Staff D several on the resident because of her d added in the last 3-4 months et charge nurses to follow up ing to them. B/19 at 1:40 PM Staff F stated d together on 9/24/19 on the 6 e resident. She stated the				
	when the resident looke "looked through her." S resident but she did not the resident up for the d	y" and lethargic; she stated ed at her she said appeared she he and Staff G talked to the respond. When the assisted lay they noted she had what " medications on the side of her				

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for the resident.

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mouth. She reported this to Staff D, charge nurse. Staff F stated she and Staff G reported the resident's change of condition to Staff D every time they cared

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During interview on 10/16/19 at 6:10 PM Staff J, CNA		
stated she cared for the resident on 9/24/19 on the 2		
PM-10 PM shift. Staff J stated the resident leaned to		
the side when she sat in her wheelchair. The resident		
would not stay awake when she fed her and tapped		
her on the arm and asked her to wake up; she said the		
resident would rouse, take a bite and then doze off		
again. She stated she reported this to Staff E. Staff J		
reported the resident had really labored breathing. She		
said the resident usually lay in bed on her back with		
her hands on her chest and would look at staff, but on		
this day the resident breath in deeply and was		
"puffing". Staff J said she thought the resident's		
oxygen saturation level tested at 74% as she checked		
it. She reported this to Staff E and she applied oxygen		
to the resident. She stated Staff E directed her to		
check the resident's oxygen saturation level every 20-		
30 minutes and she did so. Around midnight the		
resident's saturation level was around 83%. She		
reported this to Staff E, who took the resident's		
temperature and then left the room to make calls; she		
stated she knew the nurse had to call around to get the		
resident assistance. She stated the resident changed		
quickly in 4 hours. The resident usually would usually		
look at them when speaking and moved her head		
towards them; on this day the resident did not.		
During interview on 10/16/19 at 4:35 PM Staff I, CNA,		
stated she worked 6 PM-6 AM on 9/24-9/25/19. Staff		
reported to her the resident did not feel well and had		
not eaten. She tried to get the resident to eat and drink		
but the resident would not accept anything. She stated		
it was hard to get the resident to wake up and she		

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	Staff E, temporary agen	She stated she reported this to cy LPN.					
	Botwoon 8:30-0:30 PM	she entered the resident's					
	room to check on her a						
		ly and slowly and she could not					
	wake her up. She stated						
		Staff J. She reported to Staff					
		breathing right. She checked					
		aturation and it measured 76%.					
	put oxygen on her.	ff E and she said she would					
	put oxygen on her.						
	Staff E directed her to c	heck the resident's oxygen					
	saturation level through	out the shift. Staff I stated she					
		readings to Staff E about every					
	half hour.						
	Around midnight the reg	sident's oxygen saturation level					
		eem the oxygen help the					
	residents. She reported						
		e room to make phone calls.					
		15/19 at 12:40 PM Staff D					
		nursing order which directed a					
	and acknowledges she	nt of the resident every shift					
	assessment of the resid						
		vital signs. She stated Staff G					
		lent did not have a good					
		e resident in bed at lunch. She					
	stated the resident had	nasal congestion but there					
	were other residents in	the facility with the same thing.					

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She stated she did clean the outside of the resident's mouth and along the inner gum line on one side after staff asked her if she had given the resident medications because there was something in and on her mouth and got a whitish old substance out of her mouth. She stated she did not recall she reported to oncoming nurse Staff E the resident may have aspirated and not sure why she would have said that she did.		
During interview on 11/1/9 at 11:45 AM Staff D stated many residents at the facility had upper respiratory symptoms which included cough and congestion. She thought maybe the resident had the same thing. She stated she might have checked the resident's oxygen saturation level but does not recall what the result may have been. She did go to the resident's room to complete a lung assessment but could not complete it because the resident lay in bed on her back. She stated she did not ask for assistance to complete the assessment and could not recall if Staff F and/or G offered to get the resident out of bed to do her assessment.		
Staff D stated she knew the resident did not feel well and she faxed the doctor at the end of her shift to inform him of the resident's throat and nasal congestion.		
During interview on 10/15/19 at 6:20 PM Staff E stated 9/24/19 was the 2nd day she worked in the facility and her 2nd day as a temporary agency nurse. She stated		

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she received no orientation to the facility and not familiar with residents. She stated that during report on 9/24/19 Staff D told her to watch the resident closely as may have possibly aspirated but she did not asked her any details and Staff D did not offer any. She stated CNA staff reported the resident acted differently and had shallow respirations. She applied oxygen to the resident. She stated she checked the resident's oxygen saturation level but did not document it. Around midnight she increased the resident's oxygen to 3 LPM because an on-call physician at the local hospital told her to do so but she did not document the call and did not write the order for it. She stated she checked the resident's blood sugar and the meter read "HI" but she did not review the glucometer manual to find out the meter's parameters. The user guide for the facility's blood glucose monitoring system directed the following: Page 38: Caution: If you see "HI" or "LO" displayed the patient's blood glucose level may be above 600 mg/dL (milligrams/deciliter). Repeat the blood glucose test. If you receive the same result, contact the patient's physician or healthcare provider. She stated she had to make several calls to get an order to send the resident to the hospital. She did not call 911 because in other facilities when she had worked you could not send a resident to the hospital without a physician order. The facility's Oxygen Administration policy dated 1/13
patient's physician or healthcare provider. She stated she had to make several calls to get an order to send the resident to the hospital. She did not call 911 because in other facilities when she had worked you could not send a resident to the hospital without a physician order.
order to send the resident to the hospital. She did not call 911 because in other facilities when she had worked you could not send a resident to the hospital without a physician order.
The facility's Oxygen Administration policy dated 1/13

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directed the following: Procedure: 1. Verify physician's order to include, but not be limited to: flow rate duration of use (PRN (as needed), continuous, etc.) parameters for monitoring oxygen saturation, as indicated The facility's Pulse Oximetry (oxygen saturation test) policy dated 1/13 directed the following: Procedure 1. Verify physician's order to include, but not limited to: pulse biometry with or without oxygen continuous or spot check 15. Document the following: date and time type of probe used oxygen saturation reading oxygen concentration, or liter flow, as applicable describe if resident/patient was at rest or exercising respiratory rate resident/patient response to the procedure 17. Notify the physician of any changes or concerns. The facility's Clinical Change in Condition policy dated 6/2015 directed the following: Overview		
The Interdisciplinary team strives to identify and		

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 manage all resident's/patients that are experiencing a change of condition. Daily observation and communication is important in identifying changes in a resident/patient that requires further investigation. Daily observation includes, but is not limited to: participation in daily routines 	
physical assessment (i.e., cardiovascular, respiratory, mental status, neurological) behavior mobility comfort level	
response to medications Procedure 1. Assess resident/patient clinical status when a change of condition is identified. This may include but	
is not limited to: vital signs lung sounds pulse ox (oxygen saturation level) mental/neurological status	
bowel sounds skin color, turgor, temperature pain 2. Review the resident/patient medical record	
including but not limited to: primary diagnosis and medical history lab work medication changes changes in nutritional status advance directives	

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allergies		
3. Review resident/condition with an RN. A telephonic review is acceptable. Note: If situation requires emergency attention this is not applicable.		
4. Contact the physician and provide clinical data and information about the resident/patient condition Documented notification and physician response in the resident/patient medical record. Initiate any new physician orders.		
2. The MDS dated 8/6/19 documented diagnoses that included aphasia and Non-Alzheimer's type dementia for Resident #1. The same MDS documented the resident unable to complete a Brief Interview of Mental Status test, experienced hallucinations and delusions and required extensive assistance for completion of all activities of daily living.		
The care plan problem initiated 1/14/19 identified the resident has impaired cognitive function/dementia or impaired thought processes and directed staff to communicate with the resident/family/caregivers regarding resident capabilities and needs. The care plan problem initiated 1/14/19 documented the resident requested a do not resuscitate (DNR) order and directed staff to notify the family or resident condition changes.		
A Progress Notes Entry dated 9/22/19 documented the resident on follow-up for fall with no injury noted. No		

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Citation Numb	er:]			Date:	40.0040
7052					Decem	ber 10, 2019
Facility Name: Garden View C			Survey I	Dates:		
			October	1 – Dec	ember 1	0, 2019
Facility Address/City/State/Zip						
1200 West Nishna Rd.		JKM				
Shenandoah, I	A 51001					
Rule or						Correction
Code Section	Natur	e of Violation	Class	Fine A	Mount	date
Section						
	signs or symptoms of pa 70, Respirations 18, Blo	ain. Temperature 97.2 F, Pulse ood Pressure 114/68.				
	PM documented the res degrees F, with a moist	es entry dated 9/24/19 at 2:38 sident's temperature was 99.1 cough and sleepy that day. unds were clear at that time f resident condition.				
	A Progress notes entry completed by the facility restorative aide dated 9/25/19 at 7:09 AM documented the resident's exercise program not completed on 9/24/19 as the resident did not feel well and would attempt it today as resident allows.					
	9/26/19 documented the hospital for suspected k Discharge Disposition d transferred back to the	ment (ED) Provider Note dated e resident admitted to the ower respiratory infection. The locumented the resident nursing facility on 9/28/19 with ct infection, change in mental				
		record revealed no full or with regard to the resident's status.				
	The facility abated the I by implementing the foll	mmediate Jeopardy on 10/4/19 lowing actions:				
	1. The Director of Nursi educated all licensed nu	ng and/or RN designee ursing staff regarding the				

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Facility Administrator

Citation Numb 7052	er:			Date: Decem	ber 10, 2019	
Facility Name: Garden View Care Center				Survey Dates: October 1 – December 10, 2019		
Facility Address/City/State/Zip 1200 West Nishna Rd.			_ October			
Shenandoah, I		ЈКМ				
Rule or Code Nature Section		e of Violation	Class	Fine Amount	Correction date	

		-
assessment requirements for change of condition, completing vital signs, oxygen therapy and obtaining orders, monitoring signs and symptoms of hyperglycemia/hypoglycemia, assessments, physician notification, admission process, admission medication entry, timely medication administration, Alert Charting and accurate and timely documentation initiated 10/3/19. The education was given prior to nurses working their next shift. A "Change of Condition Alert" was added to the clinical whiteboard process to identify residents with change of condition requiring assessment and follow up. Initiated baseline assessments of residents that will be validated by the Director of Nursing or Designee in the morning clinical meeting going forward.		
 2. The facility put a plan in place to complete audits regarding changes in condition to ensure assessments and vital signs were completed, the physician was notified in a timely manner, and follow-up charting was completed. They also audited the admission process for current residents that had been admitted within the last 30 days to ensure an admission assessment was completed, medication orders were entered and administered in a timely manner with physician verification, and verify new admission shift charting had been completed by the licensed according to guidelines. In addition, a baseline assessment was completed on each resident in the building. 3. The facility informed the Medical Director of this plan its findings. The facility Director of Nursing will 		
complete audits for 7 days weekly for 3 weeks and		

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Facility Administrator

Citation Number 7052	er:				Date: Decen	ıber 10, 2019
Facility Name: Garden View C				Survey Dates:		
Facility Address/City/State/Zip			0	October 1 – December 10, 2019		
1200 West Nishna Rd. Shenandoah, IA 51601		JKM				
Rule or Code Nature Section		e of Violation	с	Class	Fine Amount	Correction date
Section						

monthly for 2 months to validate that staff continue to follow the facility's process for Change of Condition and Admission Process. Ongoing compliance will be validated through medical record review in the morning clinical meeting.		

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Facility Administrator

Citation Number: 7052				Date: Decem	ber 10, 2019	
Facility Name: Garden View Care Center				Survey Dates: October 1 – December 10, 2019		
Facility Address/City/State/Zip 1200 West Nishna Rd. Shenandoah, IA 51601						
		JKM				
Rule or Code Section	Nature of Violation		Class	Fine Amount	Correction date	

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Facility Administrator

Date