

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

Citation Number: #5946		Date: December 15, 2022		
Facility Name: Osage Rehab and Health Care Center		Survey Dates: October 20-November 18, 2022		
Facility Address/City/State/Zip 830 South 5th Street Osage, IA 50461		DC		
Rule or Code Section	Nature of Violation	Class	Fine Amount	Correction date

56.12, 58.11(1)j and 58.20(4)a	<p>481—56.12 (135C) Class I violation as a result of multiple lesser violations. The director of the department of inspections and appeals may issue a citation for a class I violation when a physical condition or one or more practices exist in a facility which are a result of multiple lesser violations of the statutes or rules, but which taken as a whole constitute an imminent danger or a substantial probability of resultant death or physical harm to the residents of the facility.</p> <p>481—58.11(135C) Personnel. 58.11(1) General qualifications. <i>j.</i> There shall be an organized ongoing in-service educational and training program planned in advance for all personnel in all departments. (II, III)</p> <p>481—58.20(135C) Duties of health service supervisor. Every nursing facility shall have a health service supervisor who shall: 58.20(4) Develop and implement a written health care plan in cooperation with, to the extent practicable, the resident, the resident's family or the resident's legal representative, and others in accordance with instructions of the attending physician as follows: <i>a.</i> The written health care plan, based on the assessment and reassessment of the resident's health needs and choices, where practicable, is personalized for the individual resident and indicates</p>	I	\$7,750 (HELD IN SUSPENSION)	UPON RECEIPT
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Facility Administrator

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	<p>care to be given, goals to be accomplished, and methods, approaches, and modifications necessary to achieve best results; (III)</p> <p>DESCRIPTION: Based on observation, clinical record review, staff interview and facility policy review the facility failed to provide sufficient staff with appropriate competencies and skills to provide nursing and related services to assure resident safety for one resident with psychosocial disorders, (Resident #2). A determination was made the facility's non-compliance placed residents in the facility in immediate jeopardy, beginning on 9/17/22. The facility identified a census of 33 residents.</p> <p>Findings include:</p> <p>A Minimum Data Set (MDS) assessment form dated 8/31/22 documented Resident#2 with diagnosis that included psychoactive substance abuse, bipolar, depression, deep vein thrombosis (DVT), hypertension (HTN) and a hip fracture. The assessment documented the resident with a Brief Interview for Mental Status (BIMS) score of 15 out of 15 (cognitively intact), non-ambulatory and required extensive assistance of two (2) staff with bed mobility, transfers, dressing, toilet use and hygiene.</p> <p>The resident's Care Plan failed to address his illegal drug use.</p>			
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	<p>The residents Progress Notes entries included the following:</p> <p style="margin-left: 20px;">a. On 9/13/22 at 3:22 p.m. - Received a fax from the resident's Physician for an order for a urinalysis (UA) with culture and a drug panel. The staff obtained the UA and sent it to the lab.</p> <p style="margin-left: 20px;">1. A Lab Report form dated 9/13/22 at 3:38 p.m. documented the resident as positive for methamphetamine.</p> <p style="margin-left: 20px;">b. On 9/17/22 at 1:27 p.m. - The resident screamed at staff over a TV that he claimed was his that had been a facility TV but the resident changed rooms. The resident stated "Get me my f'ing (explicit) tv right now or I am going to start breaking shit!" The resident had a tv in his room already. The resident then went in to another resident's room and ripped off his oxygen. The staff told this resident to stay out of other resident's rooms, Resident #2 stated "I don't give a f*\$# (explicit), I am going to start tearing shit apart!"</p> <p style="margin-left: 20px;">c. On 9/22/22 at 2:48 a.m. - A nurse documented the resident had been very difficult and the police came to the facility several times the past week but they could not do anything as the resident refused for the police or staff to go through his belongings. Earlier that evening the evening nurse walked into the resident's room while he smoked methamphetamine from a methamphetamine pipe. The police returned that evening and searched the room and found 3 methamphetamine pipes and white</p>			
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	<p>residue in a bag and in a bag on his knee scooter that tested positive for methamphetamine.</p> <p>d. On 10/12/2022 at 10:07 p.m. - A nurse documented " I said I don't know but we did find Methamphetamine in your room with pipes it does bother me."</p> <p>e. On 10/28/2022 at 1:48 p.m. (the actual time of occurrence 10 a.m.) - The staff approached this nurse to state it smelled bad in the resident's room which gave them a headache. This nurse went to the resident's room and could smell methamphetamine before entrance into the room. It smelled very strong. The resident had been advised to keep the door shut and but he refused. When staff shut the door the resident opened the door back up.</p> <p>f. On 10/28/2022 at 1:30 p.m. (the actual time of occurrence 10:30 a.m. - 11 a.m.) - The resident in the morning had been found to be cleaning his room with a broom and then found to be cleaning the toilet and sink with the dirty broom, he was also taking his clothes washing them in the sink and then putting them in the toilet and then back into the sink, when the staff went in to ask him if he needed help he told them to leave his room and that he would be fine without their help.</p> <p>g. On 10/28/2022 at 12:55 p.m. - The Business Office Manager (BOM) and Social Services Designee (SSD) went into the resident's room to talk about</p>			
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	<p>discharge plans. The staff found the resident resting in his chair and hard to arouse with a lot of drool coming from his mouth. The resident would not open his eyes while they visited with him. The staff asked if he would like them to set up a treatment facility for discharge, he said "I don't know". The staff attempted many times to ask what his plans had been for discharge and asked if he would accept help from Home Health and he had been unsure. The BOM and SSD left the room and let him know they would return.</p> <p>h. On 10/28/2022 at 1:27 p.m. - Resident is in his room, positioned in his wheel chair, with his arms crossed and his head down, drooling and very hard to arouse. The resident answered the nurse but he had been alert that morning as he conversed with staff and cleaned his room and toilet with a broom.</p> <p>i. On 10/28/2022 at 1:28 p.m. - The staff placed a call the resident's physician related to his lethargy.</p> <p>j. On 10/28/2022 at 1:32 p.m. - Resident #2's vital signs were temperature - 97.8 degrees Fahrenheit (F), pulse 77, respirations 16, oxygen saturation rate at 99% and his blood pressure registered 130/90.</p> <p>k. On 10/28/2022 at 1:35 p.m. - Staff assisted the resident to bed with 2 assistance. The resident assisted but continued with slurred speech.</p> <p>During an interview on 10/21/22 at 2:30 p.m. the</p>			
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	<p>resident confirmed he was caught in the room smoking methamphetamine in his room at the facility not to long ago.</p> <p>During an interview on 11/16/22 at 10:50 a.m., Staff J, nursing assistant (NA) confirmed the facility failed to educate her on how to manage residents with an active drug addiction prior to the most recent education provided.</p> <p>During an interview 11/16/22 at 10:52 a.m., Staff B, CNA/CMA confirmed the facility failed to educate her on how to manage residents with an active drug addiction prior to the most recent education provided.</p> <p>On 10/28/22 at 2:15 PM the facility was notified of the immediate jeopardy at F741 and was given the IJ Template. The facility provided staff education on substance abuse disorder and education given to staff members to report to nurse if they observe any signs and symptoms. The nurse is to complete an assessment and notify doctor, family, and DON/Administrator if signs and symptoms exist. After the surveyor verified implementation of the removal plan the immediate jeopardy was removed on 10/29/22 and the scope and severity was lowered to a D.</p> <p>FACILITY RESPONSE:</p>				
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58.19(2)j	<p>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:</p> <p>58.19(2) Medication and treatment.</p> <p><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)</p> <p>Description: Based on observation, clinical record review, staff and resident interview and facility policy review the facility failed to provide the necessary assessments for 1 of 7 residents reviewed with a condition change, (Resident #2). A determination was made the facility's non-compliance placed residents in the facility in immediate jeopardy, beginning on 9/17/22. The facility identified a census of 33 residents.</p> <p>Findings include:</p> <p>A Minimum Data Set (MDS) assessment form dated 8/31/22 documented Resident#2 with diagnosis that included psychoactive substance abuse, bipolar, depression, deep vein thrombosis (DVT), hypertension (HTN) and a hip fracture. The assessment documented the resident with a Brief</p>	I	\$7,750 (HELD IN SUSPENSION)	UPON RECEIPT
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	<p>Interview for Mental Status (BIMS) score of 15 out of 15 (cognitively intact), with verbal behavioral symptoms directed towards others and rejection of cares 1-3 days a week in the look back period, non-ambulatory and required extensive assistance of two staff with bed mobility, transfers, dressing, toilet use and hygiene.</p> <p>The resident's Care Plan failed to address his illegal drug use.</p> <p>The residents Progress Notes entries included the following:</p> <p style="margin-left: 20px;">a. On 9/13/22 at 3:22 p.m. - Received a fax from the resident's Physician for an order for a urinalysis (UA) with culture and a drug panel. The staff obtained the UA and sent it to the lab.</p> <p style="margin-left: 40px;">1. A Lab Report form dated 9/13/22 at 3:38 p.m. documented the resident as positive for methamphetamine.</p> <p style="margin-left: 20px;">b. On 9/17/22 at 1:27 p.m. - The resident screamed at staff over a TV that he claimed was his that had been a facility TV but the resident changed rooms. The resident stated "Get me my f'ing (explicit) tv right now or I am going to start breaking shit!" The resident had a tv in his room already. The resident then went in to another resident's room and ripped off his oxygen. The staff told this resident to stay out of other resident's rooms, Resident #2 stated "I don't give a f*\$# (explicit), I am going to start</p>				
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	<p>tearing shit apart!</p> <p>c. On 9/22/22 at 2:48 a.m. - A nurse documented the resident had been very difficult and the police came to the facility several times the past week but they could not do anything as the resident refused for the police or staff to go through his belongings. Earlier that evening the evening nurse walked into the resident's room while he smoked methamphetamine from a methamphetamine pipe. The police returned that evening and searched the room and found 3 methamphetamine pipes and white residue in a bag and in a bag on his knee scooter that tested positive for methamphetamine.</p> <p>d. On 10/12/2022 at 10:07 p.m. - A nurse documented " I said I don't know but we did find Methamphetamine in your room with pipes it does bother me."</p> <p>e. On 10/28/2022 at 1:48 p.m. (the actual time of occurrence 10 a.m.) - The staff approached this nurse to state it smelled bad in the resident's room which gave them a headache. This nurse went to the resident's room and could smell methamphetamine before entrance into the room. It smelled very strong. The resident had been advised to keep the door shut but he refused. When staff shut the door the resident opened the door back up. The residents record lacked documentation of staff assessment and/or intervention according to the given circumstance.</p>			
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	<p>f. On 10/28/2022 at 1:30 p.m. (the actual time of occurrence 10:30 a.m. - 11 a.m.) - The resident in the morning had been found as he cleaned his room with a broom and then cleaned the toilet and sink with the dirty broom, he was also taking his clothes washing them in the sink and then putting them in the toilet and then back into the sink, when the staff went in to ask him if he needed help he told them to leave his room and that he would be fine without their help. The residents record lacked documentation of staff assessment and/or intervention according to the given circumstance.</p> <p>g. On 10/28/2022 at 12:55 p.m. - The Business Office Manager (BOM) and Social Services Designee (SSD) went into the resident's room to talk about discharge plans. The staff found the resident resting in his chair and hard to arouse with a lot of drool coming from his mouth. The resident would not open his eyes while they visited with him. The staff asked if he would like them to set up a treatment facility for discharge, he said "I don't know". The staff attempted many times to ask what his plans had been for discharge and asked if he would accept help from Home Health and he had been unsure. The BOM and SSD left the room and let him know they would return. The residents record lacked documentation of staff assessment and/or intervention according to the given circumstance.</p> <p>h. On 10/28/2022 at 1:27 p.m. - Resident was in</p>			
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	<p>his room, positioned in his wheel chair, with his arms crossed and his head down, drooling and very hard to arouse. The resident answered the nurse but he had been alert that morning as he conversed with staff and cleaned his room and toilet with a broom.</p> <p>i. On 10/28/2022 at 1:28 p.m. - The staff placed a call the resident's physician related to his lethargy.</p> <p>j. On 10/28/2022 at 1:32 p.m. - Resident #2's vital signs were, Temperature - 97.8 degrees Fahrenheit (F), pulse 77, respirations 16, oxygen saturation rate at 99% and his blood pressure registered 130/90.</p> <p>k. On 10/28/2022 at 1:35 p.m. - Staff assisted the resident to bed with 2 assistance. The resident assisted but continued with slurred speech.</p> <p>During an interview on 10/21/22 at 2:30 p.m. the resident confirmed staff caught him in his room as he smoked methamphetamine not too long ago.</p> <p>According to an email dated 11/9/22 at 10:42 a.m. the Interim Director of Nursing documented the expectation when nurses performed skin assessments to have completed a head to toe assessments, with the proper form and measurements documented for each area identified.</p> <p>A Clinical Change in Condition Management form dated 6/2015 included the following procedural directives:</p>			
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	<p>a. Assessment of the resident's clinical status with a condition change to have included but not limited to:</p> <ol style="list-style-type: none"> 1. Vital signs, lung sounds, pulse oximeter, mental/neurological status, bowel sounds, skin color/turgor and temperature and pain. 2. Contact the Physician and family. <p>On 10/28/22 at 2:15 PM the facility was notified of the immediate jeopardy at F684 and was given the IJ Template. The facility provided staff education on substance abuse disorder and education given to staff members to report to nurse if they observe any signs and symptoms. The nurse is to complete an assessment and notify doctor, family, and DON/Administrator if signs and symptoms exist. After the surveyor verified implementation of the removal plan the immediate jeopardy was removed on 10/29/22 and the scope and severity was lowered to a D.</p> <p>Facility Response:</p>			
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**Iowa Department of Inspections and Appeals
Health Facilities Division
Citation**

Citation Number: #5946					Date: December 15, 2022
Facility Name: Osage Rehab and Health Care Center		Survey Dates: October 20-November 18, 2022			
Facility Address/City/State/Zip 830 South 5th Street Osage, IA 50461		DC			
Rule or Code Section	Nature of Violation	Class	Fine Amount	Correction date	

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