

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

| FC#6749 | | Amended Citation – Fine amount reduced by 35% to \$325.00 on February 28, 2018. Pursuant to Iowa Code Section 135C.43A | | Date: February 2, 2018 | |
|------------------------------------------------------|---------------------|------------------------------------------------------------------------------------------------------------------------|-------------|------------------------------------------|--|
| West Point Care Center | | | | Survey Dates: January 10-11, 16-18, 2018 | |
| 607 6 th Street West Point, Iowa 52656 | | DS | | | |
| Rule or Code Section | Nature of Violation | Class | Fine Amount | Correction date | |

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| 56.12 + 58.20(2)(5) | <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>481-58.20(135C) Duties of health service supervisor. Every nursing facility shall have a health service supervisor who shall: 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) 58.20(5) Initiate preventive and restorative nursing procedures for each resident so as to achieve and maintain the highest possible degree of function, self-care, and independence based on resident choice, where practicable; (II,III).</p> <p>DESCRIPTION: Based on observation, record review, resident, family and staff interviews, the facility failed to prevent contractures to Resident #27's left hand</p> | I | \$2,000 (Held in suspension) | Upon Receipt |
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Facility Administrator

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| | <p>fingers. The sample consisted of 12 residents and the facility reported a census of 28 residents.</p> <p>Findings include:</p> <p>Resident #27 had a MDS (Minimum Data Set) assessment with a reference date of 2/19/17. The MDS identified the resident had diagnoses: diabetes mellitus, cerebrovascular accident (stroke) and subsequent MI of inferior wall (heart attack). The MDS identified the resident to be cognitively intact with a BIMS (brief interview for mental status) score of 12 out of 15. A score of 12 identified the resident to be moderately cognitively impaired. The MDS identified the resident as totally dependent on staff for most activities of daily living and had impairment to one side of both the arm and leg.</p> <p>The Care Plan with a goal target date of 3/18/18 identified a problem of self-care deficit as evidenced by diagnosis of a stroke and left sided weakness. The Care Plan interventions included and directed the staff to:</p> <p>The resident will actively participate in restorative (no documentation of frequency and type),</p> <p>Encourage the resident to keep her provided left armrest on the wheelchair,</p> | | | |
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| | <p>No documentation to address the contracture of fingers to her left arm</p> <p>On 01/10/18 at 01:03 p.m. the resident and spouse reported the following: The resident stated she received bicycle therapy at the facility 3 times a week, no exercises here to get me strong enough to stand, but they do this for me at the hospital where I go 2 times a week. The resident stated she could not open up her left hand all the way. An observation at that time identified contractures to all the fingers on the left hand.</p> <p>The resident's spouse reported the following: They [spouse and resident] were told that Medicare ran out and we were private pay. Therapy just stopped. All they [facility] had her do was use the bicycle. We want her to walk, stand and to be able to go home. The spouse stated the doctor informed there was no reason she should not be able to stand and walk with a walker.</p> <p>On 1/17/18 6:35 a.m. Staff F, restorative aide/CMA was observed performing range of motion exercises to the resident's left arm and to the left hand. Staff F had the resident straighten out her fingers. The resident could not achieve extension to the left hand fingers due to pain and</p> | | | |
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| | <p>then the resident requested pain medication.</p> <p>On 1/17/18 at 06:46 a.m. the resident was observed to do 10 repetitions of leg lifts to both legs, bending at the knee. The resident then marched in place while sitting in the wheelchair and unable to lift the left foot as much as the right foot. Staff F then locked the resident's wheelchair, held the resident's hands and asked her to lean forward then back for 10 repetitions. On 1/17/18 at 06:48 a.m. Staff F unlocked the resident's wheelchair and pushed the resident in front of the omnicycle which the resident pedaled for a full 15 minutes before returning to her room.</p> <p>A review of the hospital discharge summary dated 4/13/17 identified the resident had no contractures to the left hand.</p> <p>A review of the admission Nurse's Note dated 4/13/17 at 1:14 p.m. indicated the resident had no contractures or skeletal deformities at this time.</p> <p>A review of the Nurse's Notes from 9/5/17 through 1/18/18 identified only one entry that addressed the resident's left hand on 1/11/16 at 10:11 a.m. - resting hand splint to left hand/wrist for proper hand position to prevent flexion contracture. The documentation identified no documentation of a contracture to the fingers on the resident's left</p> | | | |
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| | <p>hand.</p> <p>The Director of Nursing (DON) entries in the resident's record revealed the following: On 9/21/17 at 1:17 p.m., 10/18/17 at 1:00 p.m., 11/8/17 at 11:26 a.m., and 12/21/17 at 11:29 a.m. each entry had the following documentation under restorative program note: Met with restorative aide today and the resident participated in the current restorative program without complaints, no concerns at this time with limitations. Will continue current plan of care and proceed with referrals and make modifications as needed. On 1/12/18 at 3:00 p.m. met with restorative aide today and resident is participating in the current restorative program without complaints, no concerns at this time with limitations. The resident also goes to outpatient therapy at the local hospital 1-2 times per week. Will continue current plan of care and proceed with referrals and make modifications as needed.</p> <p>A review of the occupational therapy evaluation and plan of treatment for the certification period 8/22/17 to 11/15/17 had documentation the left arm with impairment at the shoulder and elbow and demonstrated the beginning of contracture development, especially in the left fingers with loss of extension.</p> | | | | |
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| | <p>A review of the physical therapy discharge summary with dates of service from 4/13/17 to 7/27/17 revealed the interventions provided: therapeutic activities: transfer training to increase functional task performance, training in rolling, scooting, bridging to facilitate bed mobility and bed mobility activities to increase functional skills. The reason for discharge: highest practical level achieved.</p> <p>A review of the occupational therapy discharge summary with dates of service from 8/22/17 to 9/11/17 revealed the interventions provided: therapeutic activities: gross motor coordination, crossing midline to facilitate independence in functional skill performance, weight shifting to improve safety with unsupported sit/stand, static balance activities during sitting, dynamic balance activities during sitting, placement of objects out of reach to increase dynamic skill performance, range of motion techniques to increase functional task performance, analysis/training in cueing hierarchy to increase strength. Discharge recommendations: functional maintenance program/restorative nursing program and 24 hour care.</p> <p>A review of the hospital outpatient rehabilitation services center dated 12/21/17 had documentation of the following:</p> | | | |
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| | <p>Reason for referral: resident reports she had a total knee replacement in January 2017, had several strokes and a heart attack following that surgery, has not had any therapy for the past 4 months at the nursing home and has goals to be able to start transferring again, possibly ambulate and dress herself.</p> <p>Objective: left hand has some flexion contractures in all digits except thumb.</p> <p>Short term goals: Will be able to demonstrate fair to good tolerance working on static and dynamic sitting balance in preparation for increasing independence with activities of daily living including that of dressing supine or sitting Will demonstrate good tolerance for custom resting hand orthotic to assist with decreasing flexion contractures on left hand/digits to allow for eventual increase use of the left hand</p> <p>A review of the patient visit information dated 12/8/17 by the neurologist revealed the resident had spastic hemiplegia (paralysis on one side) affecting the left non-dominant side and had orders for physical therapy and occupational therapy for lower strengthening three times a week for 4 weeks and upper extremity ROM (Range of Motion) and strengthening 2-3 times a week for 4 weeks</p> | | | |
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| | <p>A review of the restorative care documentation on the survey report v2 revealed the following: November 2017 had no documentation of restorative care given from 11/24/17 through 11/30/17, December 2017 had documentation that restorative care provided only 2 days during the week of 12/10/17 through 12/17/17 and during 12/18/17 through 12/24/17</p> <p>On 1/16/18 at 2:00 p.m., Staff F, restorative aide, was interviewed and stated the resident was getting ready to leave for the day to receive therapy at the hospital as per the family's request.</p> <p>On 1/17/18 at 2:00 p.m., Staff B, CNA reported she could not recall when the resident began restorative care and the resident did not usually use the left hand as the resident could not straighten out those fingers.</p> <p>On 1/17/18 at 02:23 a.m., Staff C, CNA reported when she first worked at the facility, she thought the resident had a contracture to the left hand which he/she should wear a brace to the left hand all the time. The resident is to have the left hand strapped to the armrest of the wheelchair when he/she goes to therapy. Staff C reported she has not seen the resident able to straighten out the fingers to her left hand as it is really difficult for her.</p> | | | |
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| | <p>On 1/17/18 at 2:30 p.m., Staff D, RN was interviewed and stated since she began working at the facility (date unknown), the resident's left hand had always been contracted and the resident unable to fully straighten out the fingers to the left hand. Staff D stated 2 to 3 weeks ago, therapy placed a splint to her left hand. Staff D could not recall what was done for restorative care. The resident went to the hospital for therapy per the family's choice perhaps because they did not think our program was aggressive enough.</p> <p>During an interview on 1/17/18 at 7:35 a.m., Staff F, restorative aide/CMA reported the resident had the contracture to the left hand upon admission to the facility which restorative care included trying to straighten out the fingers to the left hand. She reported she worked with the resident 5 days a week as long as the resident is in the facility.</p> <p>On 1/17/18 at 11:27 a.m. the physical therapy program coordinator/PTA, reported a physical therapist had oversight over the program and came to the facility twice a week. When the resident was admitted to the facility in April 2017, physical therapy worked with her from April through July without contractures during that time frame. After discharge from the program in July, we began to notice tightness in her left hand. We</p> | | | |
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| | <p>picked her up again for therapy in August under Part B. The resident was discharged from Part B from occupational therapy in September 2017 as there was no contracture, just tightness. The goal was to discharge from therapy and work with restorative program - complete passive ROM (to perform joint range of motion for a person) LUE (left upper extremities), hand focus on straightening fingers completely. Restorative care was provided from September 2017 to present. She then reviewed the outpatient note on 12/21/17 and addressed the resident's contracture and verified this was the initial evaluation.</p> <p>During an interview on 1/18/18 at 8:24 a.m., the physical therapist with oversight over the facility program reported physical therapy primarily worked on the resident's legs and occupational therapy worked on the resident's arms. When asked what her expectation would be to prevent contractures from occurring, she reported she would expect a restorative program in place where the resident should be seen at least 5 times a week.</p> <p>During an interview on 1/17/18 08:51 a.m., the Director of Nursing, (DON) reported the Care Plan should be updated by the MDS coordinator, but currently the facility is in the process of</p> | | | |
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| | <p>training a new person for that position. The DON reported she would expect a new contracture to be updated on the Care Plan.</p> <p>FACILITY RESPONSE:</p> | | | | |
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| 58.18(4) | <p>481-58.18(135c) Nursing care. 58.18(4) The facility shall provide prompt response from qualified staff for the resident's use of the nurse call system. (II,III) (Prompt response being considered as no longer than 15 minutes.) [ARC 1398C, IAB 4/24/14, effective 5/7/14]</p> <p>DESCRIPTION:</p> <p>Based on interviews and record review, the facility failed to answer call lights in a timely manner to meet the needs of 2 of 5 interviewable residents in the group interview and for 2 of 12 residents reviewed (Residents #16 and #27). The facility reported a census of 28 residents.</p> <p>Findings included:</p> <ol style="list-style-type: none"> On 1/10/18 at 1:30 p.m. a group of residents were interviewed. All 5 residents were interviewable and 2 of the 5 residents stated they had to wait more than 30 minutes for staff to respond to their activation of the call light. The 2 residents stated this happened on all shifts and on a regular basis. Both residents stated they had either a cell phone or watch/clock in their rooms to time the call light response. Resident #16 had a Minimum Data Set (MDS) assessment with a reference date of 11/14/17. | II | \$500 | Upon Receipt | |
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| | <p>The MDS identified the resident had diagnoses including peripheral vascular disease, unilateral primary osteoarthritis unspecified knee and pain in unspecified knee. The MDS indicated a BIMS (Brief Interview for Mental Status) score of 14 out of 15. A score of 14 identified the resident without cognitive impairments. The MDS indicated the resident required extensive staff assistance for most activities of daily living and experienced an occasional bladder and bowel incontinent episodes.</p> <p>The Care Plan with the goal target date of 2/19/18 identified a problem with being able to do own activities of daily living due to weakness, secondary to knee pain and osteoarthritis. The Care Plan directed for 2 staff members to assist the resident with toileting upon rising, before meals and at bedtime and to assist with brief changes, cleansing and check for incontinence.</p> <p>A review of the January 2018 medication administration record (MAR) and physician orders dated 12/1/17 had documentation of the following orders: Docusate sodium (used to treat constipation) capsule 100 milligram (mg) give 2 capsules one time a day, Furosemide (diuretic which promotes the increased production of urine) 40 mg one tablet</p> | | | |
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| | <p>two times a day, administer with 80 mg tablet to equal 120 mg, Furosemide 80 mg one tablet two times a day administer with 80 mg tablet to equal 120 mg.</p> <p>On 01/10/18 at 9:47 a.m. the resident reported she had to wait as long as 30 minutes for the call light to be answered. Staff #16 stated usually on the night shift, once a week and has experienced problems losing control with bowel and bladder incontinence while waiting to go to the bathroom. The resident reported "This makes me feel horrible." During the interview, an observation identified a clock hung on a wall across from the foot of the bed. The clock could be easily visible from the bed and recliner.</p> <p>3. Resident #27 had a MDS assessment with a reference date of 12/19/17. The MDS identified the resident had diagnoses that included diabetes mellitus, cerebrovascular accident (stroke) and subsequent MI of inferior wall (heart attack). The MDS indicated the BIMS score of 12 out of 15. A score of 12 represented a moderate cognitive impairment. The MDS indicated the resident as totally dependent on staff for most activities of daily living, frequently incontinent of bladder and always continent of bowel.</p> <p>The Care Plan with the goal target date of 3/18/18</p> | | | |
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| | <p>identified the resident with the problem of a self-care deficit as evidenced by diagnosis of stroke, left sided weakness and directed staff to: toilet the resident in the morning and at bedtime, before or after meals and as needed and provide pericare as needed.</p> <p>During an interview on 01/10/18 at 12:33 p.m., the resident reported "I have had to wait as long as 25 minutes to get my call light answered, happens on all different shifts. No episodes of incontinence waiting for help to the bathroom. This happens at least once a week." During the interview, an observation revealed a clock hung on a wall across the foot of the bed, easily visible from the bed and recliner.</p> <p>During an interview on 1/16/18 at 09:30 a.m. Staff G, CNA, reported that day there are a total of 3 CNAs working both hallways and two nurses.</p> <p>In an interview on 1/17/18 at 02:00 a.m., Staff B, CNA reported the staffing on night shift usually included 2 CNAs and one nurse and felt that is enough help to do her job and that no residents have complained to her about not getting call lights answered.</p> <p>During an interview on 1/17/18 at 02:23 a.m., Staff C, CNA reported the staffing on night shift</p> | | | |
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Facility Administrator

Date

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).

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

| FC#6749 | | Amended Citation – Fine amount reduced by 35% to \$325.00 on February 28, 2018. Pursuant to Iowa Code Section 135C.43A | | Date: February 2, 2018 | |
|------------------------------------------------------|---------------------|------------------------------------------------------------------------------------------------------------------------|-------------|------------------------------------------|--|
| West Point Care Center | | | | Survey Dates: January 10-11, 16-18, 2018 | |
| 607 6 th Street West Point, Iowa 52656 | | DS | | | |
| Rule or Code Section | Nature of Violation | Class | Fine Amount | Correction date | |

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| | <p>included one nurse and 2 aides, felt that is enough help to do her job and that no residents have complained to me about not getting call lights answered in a timely manner, especially at night because it's pretty slow at night.</p> <p>In an interview on 1/17/18 02:30 a.m., Staff D, RN reported staffing on night shift included one nurse and 2 aides which works out really well. She also reported only one resident complained of not getting call lights answered timely, but has never said how long he/she had waited.</p> <p>On 1/17/18 8:51 a.m., the Director of Nursing, (DON) was interviewed and stated she would expect the staff to answer call lights right away. The DON stated she was unsure if the facility had a policy that addressed the length of time lights are allowed to be on before staff answers.</p> <p>A review of the facility policy and procedures titled, <u>Answering The Call Light</u> (revised 10/17) did not direct the staff to respond to a call light within 15 minutes. The policy directed staff to do the following steps:</p> <ol style="list-style-type: none"> a. Turn off the signal light, b. Identify yourself and the resident by his/her name, c. Listen to the resident's request, d. Do what the resident asks of you, if permitted, | | | |
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| | <p>If you are uncertain as to whether or not request can be fulfilled or if you cannot fulfill the resident's request, ask the nurse supervisor for assistance, e. If you have promised the resident you will return with an item or information, do so promptly, f. If assistance is needed when you enter the room, summon help by using the call signal.</p> <p>FACILITY RESPONSE:</p> | | | |
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