Most Cited Deficiencies

2009/2010 Survey Cycle

Source of Information
- Research information from ADPH website
- Nursing Home Compare website
- Interviews with staff

Statistics
- Alabama has 231 nursing homes that is certified for Medicare and Medicaid
- Alabama averages 5 deficiencies per visit (down from 6)
- Nation averages 7 deficiencies per visit
- Range of deficiencies is from 0 to 23
2008/2009 Survey Cycle
- Accidents 21.7%
- Food sanitation 45.7%
- Care and services 10% ***
- Professional standards 32%
- Comprehensive care plans 29%
- Housekeeping and maintenance 18.3%
- Pressure sores 14.8% ***
- Clinical records 10.9%
- Catheters 20%
- Infection control 21.67%
- Notification of change 12.98% ***

2009/2010 Survey Cycle
- F 371 Sanitary Conditions
- F 441 Infection Control
- F 279 Care Planning
- F 281 Professional Services
- F 323 Supervision and Hazards
- F 514 Clinical records
- F 159 Management of Personal Funds
- F 315 Medical records
- F 241 Dignity
- F 253 Housekeeping and maintenance to maintain a clean and sanitary environment

F 371 Sanitary Conditions
- Regulation:
  - Procure food from sources approved by Federal, State, local authorities
  - Store, prepare, distribute, and serve food under sanitary conditions
F 371 Sanitary Conditions

- Three types of contamination
  - Biological: bacteria, toxins, and spores
  - Chemical: cleaning agents, cleansers
  - Physical: fingernail, hairs etc

Sanitation in Kitchen

- Every possible situation was cited that could be cited
  - Dented/rusty cans
  - Food stored on floor
  - Food/milk temperature
  - Trash cans not available
  - Hair nets not covering all hair including facial hair
  - Sanitization of dishware
    - Dish machine
    - Three compartment sink

Sanitation in Kitchen

- Situations cited 2009/2010 include:
  - Leftovers not dated or outdated
  - Improper storage of the table cleaning cloth
  - Lack of labeling of food
  - Use of gloves and hand washing
  - Pasteurized eggs not used
  - Shields for light bulbs dirty, missing, or cracked
  - Dishware in good condition
  - Cleanliness of ice machine, can opener, fans and vents
  - Cleanliness of hood and ovens
Sanitation in Kitchen
- Not sanitizing thermometer between foods
- Wet plates and trays
- Flies in the kitchen
- Air drying issues
- Proper sanitizer solution
- Uncovered food
- Frozen food labeling and storage in freezer as well as refrigerator

Sanitation of the Kitchen
- Preparation for survey
  - Make sure your policies are in place
  - Frequent observations of the kitchen
  - Make sure the recipe book is available
  - All staff are in-serviced

F 441 Infection Control
- Regulation states:
- Program
  - Investigates, controls, and prevents infection
  - Decides what procedures should be applied to the individual resident
  - Maintains record and corrective actions
- Preventing of Infection
  - Isolation
  - Prohibit employees with infections
  - Require staff to wash hands
F 441 Infection Control

- Has increased every year for past three years
- All disciplines were cited (dietary, activities, nurses, CNAs)
- Environmental situations
  - No red bag in isolation room
  - Lack of cleaning of the oxygen concentrator
  - Lack of cleaning of suction machine
  - Lack of deep cleaning of room after an isolation event

F 441 Infection Control

- CNAs were cited:
  - Numerous citations for hand washing
  - Cited under infection control but also in F 315
  - Touching food in dining room with bare hands
  - Placing tubes of ointment on the over the bed table with out cleaning the table afterwards after peri care
  - Using the tube of ointment on more than one resident thus contaminating the tube
  - The use of contaminated/soiled wash clothes during peri-care
    - Also cited under 315
    - Contaminated water used during extended peri-care *

F 441 Infection Control

- Nurses
  - Surveyor observations cited issued during treatments and medication pass
  - Deficient practice:
    - Touching medications with bare hands
    - Not washing hands between gloving
    - Not washing hands between rooms
    - Touching inside of medication cups
    - Touching of food
    - Touching the inside of the medication crush bag
Infection Control

Nurses
Deficient practice:
- Not washing hands after FSBs and before insulin
- Giving medication that had fallen on the top of the medication cart
- Touching the inside of drinking cup
- Touching eye drop applicator on an ungloved hand
- Placing scissors in pocket and not cleaning between treatments of same resident

F 441 August 27, 2010 CMS Memo

Following practices are deficiencies for infection control
- Reusing of finger stick device for more than one resident
- Using a blood glucose meter or other point of care device for more than one resident
- Point of care device is any device the nurse may use in collecting a blood sample (Pro-time meter)

New Device Guidelines

- Finger stick device must never be used for more than one resident
  - Some manufacturers literature state that they can be used on multiple residents but CMS over rides this instruction.
- Meters must be cleaned between each resident
  - Some manufacturers may not specify how to clean but the facility policy and procedure must reflect the procedure
  - Make sure the staff hand washing matches this concern
New Device Guidelines
• Severity Determination
  • Use of finger stick device on more than one resident is treated as immediate jeopardy
  • Reuse of the meters on more than one resident is a deficiency but the scope and severity will depend on other factors.

F 441- Logic
• Several articles are published in last four months
• The results indicated that the multiple use had a direct link to the transmission of Hepatitis B.

Survey Preparation
• In-service of all staff including housekeeping
• Observation of staff
• Make sure your policies and procedures reflect what you expect from hand-washing
• Take to QA
F 253 Housekeeping Services

Regulation

- Housekeeping and maintenance services necessary to maintain a sanitary, orderly, and comfortable environment.
- Probes in the guideline:
  - Is resident care equipment sanitary
  - Is the area orderly
  - Is the area uncluttered and in good repair
  - Can resident and staff function unimpaired

F 253 Housekeeping Services

- Interpretative guidelines
  - Sanitary
    - Toothbrushes, dentures, denture cups, glasses and water pitchers, emesis basins, hairbrushes and combs, bedpans and urinals, feeding tubes, leg bags, catheter bags, pads and positioning devices

F 253 Housekeeping Services

- Importance of the documentation of correct deficient practice
  - If cited at "F" can result in substandard quality of care
  - Determine if it is worth requesting surveyor put the other observations in the proper tag.
F 253 Housekeeping Services
- Other related tags:
  - Infection control
  - Dignity
  - Training of staff

F 253 Housekeeping Services
- Prevention
  - Staff training
  - Compliance rounds

F 253
- Deficiencies
  - Toilet seats and shower in need of repair*
  - Dresser knobs missing and drawer in need of repair*
  - Resident IV poles stains
  - Hole in wall *
  - Need for painting walls *
  - Nurses station in need of repair*
  - Wall paper in need of repair*
  - Closet doors in need of repairs*
F 253
- Deficiencies
  - Cleanliness of electric wheelchairs
  - Curtains not clean or in good repair*
  - AC vent with a build up of dust*
  - Over the bed table in need of repairs*
  - Carpet with debris and stain*
  - Stains in bathroom, odors*
  - Baseboard broken or in need of repair*
  - Air conditioners with debris *
  - Window with tape on it *

F 279 Care Plans
- Regulation requires:
  - Development of care plans (implementation of care plans should be cited under F 280)
- Probes:
  - Needs identified by assessment
  - Address avoidable declines
  - Reflect standards of professional practice
  - Reflect resident wishes especially in the area of refusal of care

F 279 Care Plans
- 279 Care Plans
  - Higher number in 2009 than 2008
  - Easiest deficiency to be cited
  - Cited that the staff failed to develop the care plan
    - Failed to add approaches
    - Several cited pain management and anticoagulant
    - No care plan for activities
    - Failure to date the added approaches
    - Date and initial
F 279 Care Plans
- Preventative measures:
  - Review of care plans
  - Quality Assurance

F 241-Dignity
- Regulatory - Promote care for residents in a manner and in an environment that maintains or enhances each resident's dignity and respect in full recognition of his or her individuality.
  - Grooming (can also be cited under grooming)
  - Encouraging and assisting in personal clothing rather than hospital type gowns*** (effective 6-2-09)
  - Assisting to attend activities
  - Labeling of clothes that respects dignity

F 241 Dignity
- Promoting residents independence in dining
  - Avoid plastic cutlery
  - Use of Bibs (Clothing protector) instead of napkins except by resident choice ****
  - Staff standing while feeding ****
  - Staff talking with each other rather than residents ****
  - Respecting private space and property
  - Speaking respectfully
  - Avoiding labeling - "Feeder"
F 241

- Environment free of signs****
- Privacy of body when transporting and during ADLs ****
  (164 can be cited as well)
- Refraining from demeaning practices***
  - Covering catheter bags, complying with request for toileting, restricting residents from common areas
- Grooming as resident wishes ***
  - Facial hair, hair, fingernails, clothing

F 241 Dignity

- Historical was not in top 10 for the past 2 years
- Could have been cited under accommodation of needs
  - Height of table to high for residents
- Strong CNA issue
  - Facial hair of resident
  - Staff not knocking on door
  - Meals not served to all residents at the same time
  - Wheeled backwards down hallway
  - Sitting in Geri Chair at table with back to table for meals
  - Standing and feeding residents
  - Signs posted giving personal information

F 241

- Prevention
  - In-service
  - The new probes are an observation based thus observation is the key word

- Note don't forget F 240. Frequently cited when long term isolation is required and activities etc are not provided.
F 323 Supervision and Hazards

- Intent: Environment free of hazards and resident supervision
- Four requirements from the regulation
  - Identification of hazards
  - Analyzing risk and hazards
  - Implementation of intervention
  - Monitoring

Examples
- Allowing resident with some dementia to have sewing needles without supervision
- Area not secured for caustic liquids
- Having a hair dryer plugged in a shower room
- Wheelchairs with cracked plastic on arms
- Ants in bed causing bites on residents
- Failure to initiate an investigation and incident report

F 323 Supervision and Hazards

- Survey preparation
  - Observation of procedures
  - Review of care plans
  - Interview of staff
F 323
- Deficiencies
  - Failure to implement care plan
  - Failure to revise care plan
  - Failure to assess for proper use of a lift
  - Falls
    - Failure to identify fall risk
    - Safe use of Hoyer Lift
    - Two person transfer with only one staff present
    - Laceration of head during transfer with lift
    - Skin tear during transfer

F 281 Services Provided or Arranged
- Regulation: Services Provided or Arranged meets professional standard
  - Provided by nurse or certified individual

F 281 Services Provided or Arranged
- Probes
  - Notification of physician (also cited under 157)
  - Provide hospitalization if services cannot be provided in facility
  - Errors or technique – medication pass, treatments
  - Care planning prior to the Assessment
  - Physician’s orders being carried out
F 281 Services Provided

- This is a nurses performance tag
- Cited as a result of observation
- Examples cited include
  - Not giving medications with food when required
  - Not following orders to not remove a splint
  - Not providing the flushes as required for G-tube feeders
  - Not documenting date, time, and name on the tube feed formula
  - Changed the formula without a physician’s order
  - Medications left at bed side

F 281

- Examples
  - Improper installation of eye drops
  - Improper installation of ointment in eye
  - Allowing the tip of eye drop container to hit the eye
  - Improper installation of ear drops
  - Improper installation of nasal spray
  - Obtain oxygen saturation levels
  - Follow orders for continuous use of oxygen
  - Failure to get an order for diet change
  - Failure to have a witness for destruction of control drugs
  - Inaccurate writing of orders

F 281

- Geriatric Medication Handbook
- American Society of Pharmacists
- Med-Pass
  - Gives information if meds should be given with meals, before or after
  - Potential side effects
F 315

- Year 2009 this deficiency cited the use of catheters
- Examples cited 2009/2010
  - Improper cleaning of female residents
  - Improper catheter care for a male resident
  - Improper catheter care for a female resident
  - One for lack of diagnosis to support use of catheter
  - Failure to remove catheter timely
  - Failure to secure the catheter*
  - Failure to change wash clothes and water
  - Failure to follow care plan and check for incontinence every 2 hours

F 315

- Notes regarding catheter use
  - Estimated that 100% of residents with catheters for more 4 days will have UTI
  - Catheter should be anchored (CDC guidelines well as in the Guidance to Surveyors) **
    - Prevent injury to the meatus
    - Facilitate the flow of urine

* The surveyors are writing up when the bag is not contained in dignity bag both when in bed and out

F 159 Management of Personal Funds

- Regulation requires:
  - Management of personal Funds
    - Written authorization
    - Hold
    - Safeguard
    - Manage and account for funds
F 159 Management of Personal Funds

- **Deficiencies**
  - Failure to have authorization to handle funds
  - Failure to have access of personal funds outside of business hours
  - Poor general accounting practices

F 514 Medical Records

- **Guidelines**
  - Complete
  - Accurate
  - Readily accessible
  - Organized

F 514

- **Deficiencies cited**
  - Failure to document meal intake
  - Failure to document liquids
  - Failure to document notification of physician of neuro check
  - Failure to document why the resident did not see the doctor(eye)
  - Assume effectiveness of PRN medications especially pain
  - Failure to record FSHS®
  - Failure to document time orders were taken
  - Failure to document dates on care plan revisions
  - Late entries
  - Failure to document labs
Honorable Mention
- F 431 Storage of drugs
- F 411 Services from outside resources
  - Assisting to make appointments
  - Assisting with transportation
  - Probes
    - Dentures used and in good condition
    - Poor oral health
- Dentures used and in good condition
- Poor oral health

Honorable Mention
- F 332 Medication errors
- F 325 Nutrition
- F 312 Resident who is unable to carry out daily activities be provided the required assistance
- F 328 Special needs
  - Foot care