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| F 000 | INITIAL COMMENTS<br><br>The following citations represent the findings of a Health Resurvey and Complaint Investigation #KS00171819 and KS171225.<br><br>This 2567 was electronically sent to the facility on 07/06/22. | F 000 | | |
| F 690 SS=D | Bowel/Bladder Incontinence, Catheter, UTI<br>CFR(s): 483.25(e)(1)-(3)<br><br>§483.25(e) Incontinence.<br>§483.25(e)(1) The facility must ensure that resident who is continent of bladder and bowel on admission receives services and assistance to maintain continence unless his or her clinical condition is or becomes such that continence is not possible to maintain.<br><br>§483.25(e)(2)For a resident with urinary incontinence, based on the resident's comprehensive assessment, the facility must ensure that-<br>(i) A resident who enters the facility without an indwelling catheter is not catheterized unless the resident's clinical condition demonstrates that catheterization was necessary;<br>(ii) A resident who enters the facility with an indwelling catheter or subsequently receives one is assessed for removal of the catheter as soon as possible unless the resident's clinical condition demonstrates that catheterization is necessary; and<br>(iii) A resident who is incontinent of bladder receives appropriate treatment and services to prevent urinary tract infections and to restore continence to the extent possible.<br><br>§483.25(e)(3) For a resident with fecal | F 690 | | |

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE | TITLE | (X6) DATE 07/05/2022

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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incontinence, based on the resident's comprehensive assessment, the facility must ensure that a resident who is incontinent of bowel receives appropriate treatment and services to restore as much normal bowel function as possible.
This REQUIREMENT is not met as evidenced by:
The facility reported a census of 42 residents with twelve selected for review including two residents reviewed for bowel and bladder incontinence. Based on observation, interview, and record review, the facility failed to provide perineal cares after urinary incontinence in a sanitary manner and toilet one of the residents, Resident (R)33, who required antibiotic treatment for a urinary tract infection, per her toileting schedule.

Findings included:

- The electronic medical record (EMR) under the diagnosis tab, for Resident (R)33 included diagnoses of Alzheimer's disease (a progressive mental deterioration characterized by confusion and memory failure) and history of urinary tract infections.

The "Quarterly Minimum Data Set" (MDS), dated 02/15/22, assessed R33 with a "Brief Interview of Mental Status" score of four, indicating severe cognitive impairment. She rejected care one to three days of the seven-day assessment period. She required extensive assist of one staff for toileting. R33 had a trial of a toileting program attempted and was on a current toileting program or trial for her urinary function. She was occasionally incontinent of bladder.

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The "Significant Change MDS," dated 05/18/22, had no changes from the prior assessment.

The "Cognitive Loss/Dementia Care Area Assessment" (CAA), dated 05/31/22, revealed R33 was able to make her needs known and her current BIMS score indicated she had severely impaired cognition.

The "Urinary Incontinence and Indwelling Catheter CAA," dated 05/31/22, revealed R33 was frequently incontinent of bladder, required extensive assistance with toileting task, was on a scheduled toileting plan, but could also use her call light to request assistance from staff as she needed. R33 had a history of urinary tract infections (UTI's) and was taking Hiprex (a urinary antibacterial medication) and cranberry capsules for UTI prophylaxis (measures taken for disease prevention)/prevention. The staff encourage and remind her of the importance of adequate perineal hygiene while assisting her as needed.

The "Behavioral Symptom CAA," dated 05/31/22 revealed her rejection of care was not related to toileting cares.

The "Care Plan," dated 05/27/22, revealed R33 required extensive assistance from staff for toilet use. She required assistance with perineal care and changing her incontinent products and she was on a scheduled toileting program. Staff were to "See profile for specific times." There were times when R33 would not want her incontinent product changed and staff were to approach her in a few minutes to talk to her about it again until she agreed for the staff to assist her.

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The "Physician Orders" tab in the EMR revealed orders for Lasix (medication used to reduce extra fluid in the body) ordered on 01/20/21 and for Amoxicillin (antibiotic medication) for 10 days for a UTI, ordered on 06/21/22

The "Point of Care" charting, located in the EMR, revealed the toileting program. Staff should toilet R33 at 07:00 AM, 10:00 AM, and 01:00 PM (every three hours) during the day shift within 30 minutes of the suggested time.

On 06/27/22 at 11:15 AM, R33 sat in a wheelchair at a dining room table with a cup of fluids on the table. Her denim pants had wetness to both groin areas.

On 06/27/22 at 11:16 AM, R33 stated she was drinking a Coke and she "Peed my pants" and that she was going to eat her lunch first then go change.

On 06/27/22 at 12:02 PM, an unidentified staff member removed R33 from the dining room table to take her to go get changed.

On 06/28/22 at 09:37 AM, R33 participated in an exercise activity. She had a napkin laying over her pants.

On 06/28/22 at 10:30 AM, R33 sitting in wheelchair outside on the patio, with the same clothing on, napkin not in place. Staff had not taken R33 to the toilet.

On 06/28/22 at 10:55 AM, R33 continued to sit outside in her wheelchair.

On 06/28/22 at 10:58 AM, R33 went to the patio

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door, and Certified Nurse Aide (CNA) P opened the door for her and cued her to go to the table for lunch.

On 06/28/22 at 12:12 PM, CNA M approached R33 and assisted to propel her to her room, then to the bathroom. CNA M applied gloves without performing hand hygiene first, guided R33 to stand and sit on the toilet. While the resident stood, her incontinence product, her pants, and the cushion of her wheelchair were visibly soiled. CNA M removed the incontinent product and placed the soiled product in the trash can and placed the wet pants directly on the floor next to the trash can, then removed her gloves. R33 stated "I am wet, wet, wet." CNA M then applied a new pair of gloves without performing hand hygiene and applied a dry incontinent product and a clean pair of pants on R33 and told her she would be right back; she was going to get some wipes for the wheelchair.

On 06/28/22 at 12:20 PM, R33 was unable to recall the last time she had been toileted and stated, "I can't remember anything."

On 06/28/22 at 12:21 PM, CNA M returned to the resident's bathroom, applied her gloves, wiped the cushion of the wheelchair with sanitation wipes, removed her gloves, then applied another pair of gloves without performing hand hygiene. CNA M moved the wheelchair closer to R33, locked the brakes, removed the perineal care wipes and draped the wipes on the edge of the sink of a shared bathroom. After having R33 stand, CNA M used one of the wipes that were on the sink edge and wiped the resident several times with the same area of the wipe front to back, then disposed the wipe in the trash and

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repeated the same procedure a few more times. CNA M then guided R33 to stand back up, pulled up her incontinent product and her pants with the same soiled gloved hands, and assisted R33 to sit in the wheelchair. CNA M then removed her gloves, tied up the trash bag, took the trash down the hallway and disposed the trash in appropriate container, then assisted R33 by propelling her wheelchair to the family room, without hand hygiene. After the resident was in the family room, CNA M washed her hands.

On 06/28/22 at 12:30 PM, CNA M stated R33 does not let the staff know when she needs to go to the bathroom. R33 was on a scheduled toileting program in the morning at 06:00 AM, 10:00 AM, 12:00 PM, then at 02:00 PM (every four hours) on her shift. CNA M stated she did not assist R33 with her 10:00 AM toileting time, but one of the other two CNAs' would have helped her. CNA M stated R33 was wet very often on her shift and her pants would get wet too as she was a "Heavy wetter". CNA M stated the wipes should not be used more than once when wiping during perineal care and verified her hands should be washed before and after and assumed, she should wash her hands or use hand sanitizer after removing her gloves. CNA M stated she did not know where else to put the wipes used for perineal care, but staff should clean the sink daily.

On 06/28/22 at 12:38 PM, CNA N stated R33 does not normally let staff know when she needs to go to the bathroom and if she does it is "Too late." CNA N stated R33 was on a scheduled toileting program and believed it was every three hours at 07:00 AM, 10:00 AM, and 01:00 PM. CNA N stated she assisted R33 with toileting

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around breakfast after she ate between 07:30 AM-08:00 AM. CNA N stated sometimes when they asked R33 if she needed to go to the bathroom she will say no, and then 20 minutes later she would be wet. CNA N stated she did not toilet R33 at the 10:00 AM toileting time today and was unaware if other staff toileted the resident.

On 06/28/22 at 12:45 PM, CNA O stated she had not toileted R33 so far today on her 06:00 AM to 02:00 PM shift.

The staff failed to toilet R33 between 08:00 AM and 12:12 PM, missing the 10:00 AM toileting time.

On 06/29/22 at 09:10 AM, Administrative Nurse D confirmed staff should toilet the resident on her scheduled toileting times that were 07:00 AM, 10:00 AM, and 01:00 PM, within thirty minutes of the scheduled time.

On 06/29/22 at 09:20 AM, Licensed Nurse (LN) G stated R33 will refuse toileting at times if she was busy in an activity. She likes to go to all of the activities. LN G had not known her to be incontinent to the degree her pants would be wet and expected the staff to toilet her per the toileting schedule.

On 06/29/22 at 09:41 AM, Administrative Nurse D stated she expected staff to toilet R33 per schedule in the time frames as long as she did not refuse. Staff should not place perineal cleansing wipes on the sink. Staff should use one wipe per swipe when providing perineal cares.

The facility policy "Incontinence" dated 10/11/2021, revealed it was the policy the

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residents' would be assessed to provide appropriate treatment and services to achieve or maintain normal continence function, and if the underlying condition was not reversible, it was important to treat or manage the incontinence to reduce complications. Incontinence programs must be specific to the type of incontinence and should be modified as necessary for each resident to encourage the highest level of continence. Scheduled toileting programs should be at regular intervals to match the usual voiding habits and timed voiding based on a resident's usual voiding schedule/pattern.

The facility policy "Giving Female Perineal Care," undated, included instructions for providing perineal care using washcloths and soap and water rather than pre-packaged wipes. The instructions included prior to performing perineal care to decontaminate hands and apply gloves, use a clean part of the washcloth for each stroke front to back, use more than one wash cloth if needed and following procedure to remove the gloves and decontaminate hands.

The facility policy "Hand Hygiene" dated 10/12/21 revealed gloves reduce hand contamination by 70-80 percent, prevent cross-contamination and protect elders and health care personnel form infection, however, the use of gloves does not eliminate the need for hand hygiene. Gloves should be worn with contact of body fluids and removed promptly after use before touching non-contaminated items and environmental surfaces. Decontaminate hands after removing gloves by appropriate hand hygiene.

The facility failed to ensure the staff toileted R33 per toileting to decrease episodes of

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| F 690 | Continued From page 8<br>incontinence, provide appropriate perineal care and hand hygiene to decrease occurrence of urinary tract infections. | F 690 | | |