

DEPARTMENT OF HEALTH AND HUMAN SERVICES  
HEALTH CARE FINANCING ADMINISTRATION


STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  465069	(X2) MULTIPLE CONSTRUCTION A. BUILDING B. WING	(X3) DATE SURVEY COMPLETED  05/01/01
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NAME OF PROVIDER OR SUPPLIER Mt. Ogden Nursing and Rehabilitation Center	STREET ADDRESS, CITY, STATE, ZIP CODE 375 East 5350 South, Ogden, UT 84405	<b>COMPLAINT</b> <b>NUMBER. 4959, 5483</b>
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F157 SS=E	<p>§483.10 Resident rights.</p> <p>(11) Notification of changes.</p> <p>(i) A facility must immediately inform the resident; consult with the resident's physician; and if known, notify the resident's legal representative or an interested family member when there is--</p> <p>(A) An accident involving the resident which results in injury and has the potential for requiring physician intervention;</p> <p>(B) A significant change in the resident's physical, mental, or psychosocial status (i.e., a deterioration in health, mental, or psychosocial status in either life-threatening conditions or clinical complications);</p> <p>(C) A need to alter treatment significantly (i.e., a need to discontinue an existing form of treatment due to adverse consequences, or to commence a new form of treatment); or</p> <p>(D) A decision to transfer or discharge the resident from the facility as specified in §483.12(a).</p> <p>(ii) The facility must also promptly notify the resident and, if known, the resident's legal representative or interested family member when there is--</p> <p>(A) A change in room or roommate assignment as specified in §483.15(e)(2); or</p> <p>(B) A change in resident rights under Federal or State law or regulations as specified in paragraph (b)(1) of this section.</p> <p>(iii) The facility must record and periodically update the address and phone number of the resident's legal representative or interested family member.</p>	F157 J&B, 6/16/01	<p>On May 25<sup>th</sup> 2001, an inservice was given for all of the Nurses by the Director of Nursing. A new policy and procedure was developed regarding notifying physician's in the event that the attending physician can not be reached. The Nurses were inserviced regarding following this procedure, as well as when it is appropriate to call the physician. The Director of Nursing will be responsible to ensure that we continue to stay in compliance.</p>	July 9 <sup>th</sup> , 2001
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PRESCRIPTION  
PROGRAM

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE 	TITLE ADMIN	(X6) DATE 5-31-01
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This REQUIREMENT is not met as evidenced by: Based on record review and staff interviews it was determined that the facility did not notify the physician following a significant change in a resident's physical condition for 1 of 10 sampled residents. (Resident 3).

Findings include:

Resident 3 was a 79 year old male with diagnoses including urosepsis, dementia and hypertension.

A review of resident 3's medical record was completed on 5/10/01. A review of nursing notes was done. The following was documented:

a. On 4/15/01 at 12:25 AM - The nurse documented a change in resident 3's assessment. The nurse documented that resident 3 had a 103.3 degree Fahrenheit temperature and was jaundiced. The nurse also documented, "CNA's report pt [patient] is not normal self, did not grip anything like normal. Medicated [with] Tylenol and will cont [continue] to monitor. Resident did not respond to verbal stimuli, grunted to tactile stimuli".

b. On 4/15/01 at 1:10 AM - The nurse documented that resident 3 had a temperature of 102.3 degrees Fahrenheit and he was resting without change.

c. On 4/15/01 at 6:00 AM - The nurse documented, "T [temperature] 100.1 Resting better. Skin color slightly jaundice still. Resident is back to gripping everything, wouldn't let go of covers. Will cont [continue] to monitor".

d. On 4/18/01 at 6:00 PM - The nurse documented that the resident's attending physician was in the facility and stated, "he was not going to get very aggressive c [with] pt [patient]". The doctor ordered Tylenol be given for resident 3's increased temperature.

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On 5/10/01, a review of resident 3's physician progress notes evidenced no progress note dated after 2/14/01.

On 5/10/01 at 1:15 PM and again at 1:40 PM, the DON (Director of Nursing) was interviewed. The surveyor and DON reviewed nursing documentation of resident 3's condition between 4/15/01 and 4/18/01. The DON stated the nurse providing cares for resident 3 should have contacted the resident's attending physician on 4/15/01, regarding the resident's change in condition. The DON stated that the facility had standing orders to administer Tylenol to residents with elevated temperatures. The DON stated resident 3's physician examined the resident on 4/18/01.

On 5/10/01 at 3:05 PM, resident 3's attending physician was interviewed. He was asked if the facility had notified him of resident 3's change in condition. He stated he had been notified that the resident had a change in condition a couple of days prior to resident 3's death. The physician was unable to recall the specific date. He further stated he did examine the resident on 4/18/01. He stated he may have failed to document that a progress note when he examined resident 3 on 4/18/01.

There were no nursing notes, or other documentation, that resident 3's attending physician had been notified when the resident was noted to have an increased temperature, jaundiced appearance and overall change in condition between the dates of 4/15/01 and 4/18/01.

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F328 SS=G	<p>§483.25(a)(1-8)QUALITY OF CARE.</p> <p>Special needs. The facility must ensure that residents receive proper treatment and care for the following special services:</p> <ul style="list-style-type: none"> <li>(1) Injections;</li> <li>(2) Parenteral and enteral fluids;</li> <li>(3) Colostomy, ureterostomy, or ileostomy care;</li> <li>(4) Tracheostomy care;</li> <li>(5) Tracheal suctioning;</li> <li>(6) Respiratory care;</li> <li>(7) Foot care; and</li> <li>(8) Prostheses.</li> </ul> <p>This REQUIREMENT is not met as evidenced by:</p> <p>Based on observations, interviews and record review, it was determined that for 1 of 10 sampled residents, facility staff did not ensure that a resident, requiring the continuous use of supplemental oxygen, received the necessary care and services. Specifically, resident 5 was observed on two occasions without supplemental oxygen.</p> <p>Findings include: Resident 5 was readmitted to the facility on 5/2/01, following an acute care hospitalization. Upon readmission, his diagnoses included aspiration pneumonia, chronic obstructive pulmonary disease, congestive heart failure, and a cerebrovascular accident with resultant dysphagia.</p>	F328 <i>JAB</i> <i>6/14/01</i>	<p>On May 21<sup>st</sup> 2001, all of our current residents who have Oxygen orders were reviewed by the Director of Nursing. Orders were clarified regarding if the resident should be P.R.N., or continual flow. Residents who have an order of continual flow will have their Oxygen on at all times. P.R.N. residents will be assessed by the Nursing Staff throughout the day, as well as before and after showers to determine if oxygen is necessary. O2 Sats will be taken by the Nurses when resident is displaying any shortness of breath, respiratory distress, and before and after every shower.</p> <p>An inservice was held on May 25<sup>th</sup> 2001, by the Director of Nursing and the Director of Staff Development for all of the Nurses, as well as C.N.A.'s to instruct them regarding this regulation. The Director of Nursing will be responsible to ensure compliance.</p>	July 9 <sup>th</sup> , 2001
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	<p>A review of resident 5's medical record was done. On 5/2/01, a telephone order was obtained to check resident 5's oxygen saturations every shift and to ensure the resident's oxygen saturations remained greater than 90 percent.</p> <p>A review of resident 5's plan of care was done on 5/10/01. On 5/3/01, facility staff developed a care plan for resident 5's assessed, "Alteration in respiratory effort". The goal for this assessed problem was, "Respirations will be even/unlabored and rate between 14-20 [every] check [through next review]." Approaches for this assessed problem included; oxygen and oxygen saturations as ordered, vital signs per protocol and to monitor for increased respiratory effort, cyanosis, capillary refill, mottling of skin, complaints of chest pain and cough.</p> <p>A review of resident 5's May, 2001, treatment record was done on 5/10/01. Facility staff documented resident 5's oxygen saturations as follows:</p> <p style="padding-left: 40px;">a. 5/2/01 – 7:00 AM to 7:00 PM shift – 90 percent. 5/2/01 – 7:00 PM to 7:00 AM shift – left blank. 5/3/01 – 7:00 AM to 7:00 PM shift – 81 percent. 5/3/01 – 7:00 PM to 7:00 AM shift – 92 and 91 percent. 5/4/01 – 7:00 AM to 7:00 PM shift – 79 percent. 5/4/01 – 7:00 PM to 7:00 AM shift – 90 percent. 5/5/01 – 7:00 AM to 7:00 PM shift – 90 percent. 5/5/01 – 7:00 PM to 7:00 AM shift – 92 percent. 5/6/01 – 7:00 AM to 7:00 PM shift – 91 percent. 5/6/01 – 7:00 PM to 7:00 AM shift – 94 percent. 5/7/01 – 7:00 AM to 7:00 PM shift – 86 percent. 5/7/01 – 7:00 PM to 7:00 AM shift – 93 percent. 5/8/01 – 7:00 AM to 7:00 PM shift – 90 percent. 5/8/01 – 7:00 PM to 7:00 AM shift – 90 percent. 5/9/01 – 7:00 AM to 7:00 PM shift – 85 percent. 5/9/01 – 7:00 PM to 7:00 AM shift – 92 percent. 5/10/01 – 7:00 AM to 7:00 PM shift – 85 percent.</p>			

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An interview with a treatment nurse was held on 5/9/01 at 9:30 AM. The treatment nurse stated that she had checked resident 5's oxygen saturations that morning. She stated the resident's oxygen saturations were 85 percent on 4 liters of oxygen per nasal cannula. She stated that as she finished checking resident 5's oxygen saturation, a nurse aide was preparing to take resident 5 to the shower.

On 5/9/01 at 9:25 AM, nurse aide 1 was assisting resident 5 in the shower. The nurse aide took resident 5 to the shower room without the resident's oxygen concentrator or portable oxygen canister. Resident 5's oxygen concentrator and portable oxygen canister remained in the resident's room. There was no other source of supplemental oxygen in the shower room. Following the shower, while still in the shower room, resident 5's respirations were observed to be shallow and at an increased rate of 32 per minute.

At the surveyors request, resident 5's nurse checked the resident's oxygen saturation at 9:45 AM. At that time, the resident's oxygen saturation was 69 percent. Resident 5's nurse then placed the resident back on

4.5 liters of oxygen per nasal cannula. At 10:36 AM, the surveyor requested resident 5's nurse check the resident's oxygen saturation. Resident 5's oxygen saturation, on 4.5 liters of oxygen, was 87 percent.

On 5/9/01 at 2:20 PM, resident 5 was observed in bed. At that time, the resident was wearing a nasal cannula. The nasal cannula was connected to an oxygen concentrator. The oxygen concentrator was turned off. Resident 5's respirations were shallow and at an increased rate of 32 per minute.

The surveyor requested resident 5's nurse check the resident's oxygen saturation. At 2:21 PM, resident 5's oxygen saturation was 70 percent on room air. The nurse turned on the oxygen concentrator and adjusted the liter flow to 5 liters. At 2:25 PM, resident 5's oxygen saturation raised to 80 percent. At 2:27 PM, resident 5's oxygen saturations were fluctuating between 89 and 91 percent.

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	<p>An interview with nurse aide 1 was held on 5/10/01 at 8:35 AM. She stated that on 5/9/01, resident 5 was agitated and did not want to take the portable oxygen canister to the shower. She stated she informed resident 5's nurse. Nurse aide 1 stated the nurse replied that she only worked a couple days a month and that she was not familiar with the residents. Nurse aide 1 stated the nurse told her to do what she usually would do. Nurse aide 1 stated she took resident 5 to the shower without his oxygen. A review of resident 5's nursing notes was done on 5/10/01. Between 7:00 AM and 7:00 PM on 5/9/01, there was no nursing note entry to document that resident 5's oxygen saturation dropped to 69 and 70 when he was off the supplemental oxygen.</p>			

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