

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

PRINTED: 01/16/2008
FORM APPROVED
OMB NO. 0938-0391

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| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 46A043 | (X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____ | (X3) DATE SURVEY COMPLETED 06/21/2007 |
| NAME OF PROVIDER OR SUPPLIER BEAR RIVER VALLEY CARE CENTER | | | STREET ADDRESS, CITY, STATE, ZIP CODE 460 WEST 600 NORTH TREMONTON, UT 84337 | |
| (X4) ID PREFIX TAG | SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION) | ID PREFIX TAG | PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY) | (X5) COMPLETION DATE |
| F 167 SS=C | <p>483.10(g)(1) EXAMINATION OF SURVEY RESULTS</p> <p>A resident has the right to examine the results of the most recent survey of the facility conducted by Federal or State surveyors and any plan of correction in effect with respect to the facility.</p> <p>The facility must make the results available for examination and must post in a place readily accessible to residents and must post a notice of their availability.</p> <p>This REQUIREMENT is not met as evidenced by: Based on observations and interview, the facility did not make results of the most recent State conducted survey of the facility readily available to residents and ensure their right to examine the results of the facility survey and plan of correction.</p> <p>Findings included:</p> <p>During the annual certification survey conducted at the facility beginning on 6/18/07, observations were made on 6/18/07 and 6/19/07 throughout the day to locate the most recent facility survey results. No evidence of facility surveys being posted was observed.</p> <p>An interview was conducted on 6/19/07 with the Director of Nursing (DON) to determine whether survey results were posted anywhere in the facility. The DON stated that they were posted on the wall that was directly across from the dinning area, and pointed out that area to surveyors. The survey results couldn't be found. It was</p> | F 167 | | 8/20/07 |

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

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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| F 167 | Continued From page 1 determined that the bulletin board had been changed recently by a staff member and that the survey results were taken down and not replaced. The results were located in an envelope behind the nurses station. | F 167 | | | |
| F 241 SS=E | 483.15(a) DIGNITY The facility must 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. This REQUIREMENT is not met as evidenced by: Based on observations, interviews and record review, it was determined the facility did not respond to residents' call lights and personal requests for assistance in a timely manner for 1 of 10 sample residents, 2 supplemental residents and 5 of 6 alert and oriented residents during a group interview. Residents: 1, 14, and 15. Findings included: 1. Resident 15 was admitted to the facility 12/20/02 with diagnoses that included hemiplegia, diabetes mellitus and arthritis. Resident 15's medical record was reviewed on 6/21/07. Resident 15's MDS assessment, dated 5/1/07, revealed the resident required total assistance of two staff to transfer between surfaces. On 6/19/07 at 9:48 PM, resident 15's call light sounded at the nurse's station. At 9:52 AM, resident 15's call light was answered at the nurses' station via the intercom. Resident 15 | F 241 | | 8/20/07 | |

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| F 241 | <p>Continued From page 2</p> <p>stated he wanted to go to bed. At 9:56 AM, resident 15 was observed to be in his wheelchair, in the hallway, moving up and down the hallway and back near his room. At 10:00 AM, resident 15 went into his room. At 10:08, resident 15 was back moving up and down the hallway in his wheelchair. At 10:11 AM, resident 15 returned to his room and turned the call light back on. At 10:13 AM, a nursing assistant entered resident 15's room and turned the call light off. Resident 15's first call light was answered in 4 minutes from the nurses' desk. It took an additional 21 minutes before a nursing staff entered the resident's room.</p> <p>At 10:19 AM, resident 15's call light sounded. The light was turned off at 10:22 AM, was back on at 10:24 AM. The second nursing staff entered resident 15's room at 10:28 AM, with a Hoyer transfer device, after the resident had waited an additional 9 minutes.</p> <p>On 6/19/07 at 1:20 PM, resident 15 was interviewed outside his room. Resident 15 was asked how long he waited for assistance when he used his call light. Resident 15 stated, "Sometimes it takes half a day."</p> <p>2. Resident 14 was admitted to the facility 7/27/05 with diagnoses that included arthritis, dementia, hypertension and macular degeneration.</p> <p>Resident 14's medical record was reviewed on 6/20/07. The comprehensive MDS assessment for resident 14, dated 5/29/07, revealed the resident required extensive assistance of one staff to transfer between surfaces.</p> | F 241 | | | |

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| F 241 | <p>Continued From page 3</p> <p>On 6/18/07 at 4:45 PM, resident 14 was observed to be partially reclining in her room in a lounge chair. Resident 14 called out to the surveyor saying that she needed to "get up now". The surveyor asked resident 14 if she had a call light she could use. Resident 14 activated her call light. The surveyor observed two nursing staff to be near the east side of the nurses' station. At 4:47 PM, a nursing staff answered resident 14's call light over the intercom. Resident 14 stated she wanted to get up and she needed someone to help her. The nursing staff stated to resident 14 that the resident had to wait 40 minutes, until it was time to get up for dinner. No staff had entered resident 14's room by 5:10 PM, when the surveyor left the hallway.</p> <p>3. Resident 1 was admitted to the facility 11/15/05 with diagnoses that included diabetes mellitus, left hemiplegia, macular degeneration, dementia with depression and congestive heart failure.</p> <p>Resident 1's medical record was reviewed 6/18/07.</p> <p>Resident 1's MDS assessment, dated 4/3/07, revealed the resident required extensive assistance of one staff for eating, toileting, and for transferring from one surface to another.</p> <p>On 6/20/07 at 1:07 PM, resident 1 was observed to be in her wheelchair at the dining room table. Resident 1 had eaten her dessert and a couple of bites of potato. Resident 1 stopped eating and stated, "I've got to go to the bathroom."</p> <p>On 6/20/07 at 1:07 PM, resident 1 was observed to be in her wheelchair at the dining room table.</p> | F 241 | | | |

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| F 241 | <p>Continued From page 4</p> <p>Resident 1 had eaten her dessert and a couple of small bites of potato. Resident 1 stopped eating and stated, "I've got to go to the bathroom." No one responded. At 1:09 PM resident 1 stated to the surveyor, who was standing in the doorway to the dining room, "Hey Lady, I've got to go for a walk, got to go to the bathroom." The nursing assistant who was assisting at resident 1's table stated, "We'll take you when we're through, [resident 1]." At 1:12 PM, resident 1 moved away from the table and around the dining room. Resident 1 was assisted back to the table by a nurse, at 1:15 PM, to receive her medications. At 1:17 PM, resident 1 moved out of the dining room and asked a nurse in the hallway for assistance. The nurse stated it would be just a minute. At 1:20 PM, resident 1 was assisted to the bathroom and then into bed. Resident 1 received assistance after 13 minutes and 3 requests.</p> <p>On 6/19/07 at 10:20 AM, resident 1 was interviewed. Resident 1 stated that she needed help to transfer, but "they take forever to answer" the call light. Resident 1 stated, I can't go to the bathroom without them to help. Resident 1 stated, "[I] have come close to not being able to hold it."</p> <p>4. On 6/19/07 at 2:00 PM, an interview was conducted with a group of six alert and oriented residents who needed varying degrees of staff assistance.</p> <p>The residents were asked if their call lights were answered timely. The residents' comments included:</p> <p>"Sometimes they say it will be a minute and it takes 5 or 10 minutes. No one can hold it that</p> | F 241 | | | |

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| F 241 | Continued From page 5 long." "Sometimes you do have to hold it." "Sometimes they are short and have problems getting help." Then the others [who are working] have to work too hard. "[You've] got to understand." "Sometimes it takes a couple hours." "Some people have to go and ask for help [at the nurses' station]." At the nurses' station they find "staff are just talking and people are dancing around." 5. Observations of call lights were made on 6/20/07. They included: At 9:45 AM. The resident's had just finished breakfast. Three call lights were observed to be on in the south hall. An aid came out of the dinning area, walked to the nurses station and looked down the south hall. She then looked down the north hall and stated, "It's not my hall". At 10:28 AM. A resident in the north hall, was in the bathroom when she activated her call light. There were three staff members at the nurses station. There was a discussion about what these staff members wanted to order for lunch. One of the staff members was on the phone placing the order. They did not respond to the call light. At 10:34 an aid with the snack cart, walked by this resident's room, but did not answer the call light. At 10:40 AM, a staff member at the nurses station answered the call light saying, "May I help you?" Since the resident was in the bathroom there was no response from the resident. At 10:44 that staff member asked an other staff member to go | F 241 | | | |

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| F 241 | Continued From page 6 check on the resident. At 10:44 the resident was helped from the toilet. This resident waited for 16 minutes on the toilet before anyone responded to her call for help. An interview was held with this resident at 11:03 AM. The resident stated that staff members had told her not to get up by herself since she was recovering from a fractured hip. She stated that she was frustrated by waiting and that she thought about getting up herself, but they told her not to. At 10:45 AM. A call light down the south hall began ringing. At 10:53 a staff member at the nurse's station answered the light and told the resident she would find her aid and send her in. No one entered that residents room. At 10:57 the resident pushed the call light again. At 10:59 an aid entered the residents room. | F 241 | | | |
| F 312 SS=E | 483.25(a)(3) ACTIVITIES OF DAILY LIVING A resident who is unable to carry out activities of daily living receives the necessary services to maintain good nutrition, grooming, and personal and oral hygiene. This REQUIREMENT is not met as evidenced by: Based on observations of staff and resident interactions during meal times, it was determined the facility did not provide necessary assistance with dining to ensure good nutrition for 3 of 10 sample residents and 2 additional residents. Residents: 1, 8, 9, 12 and 13. Findings included: | F 312 | | 8/20/07 | |

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| F 312 | <p>Continued From page 7</p> <p>1. Resident 9 was admitted to the facility on 1/2/06 with diagnoses that included Alzheimer's dementia, arthritis, fatigue and history of transient ischemic attacks.</p> <p>Resident 9's medical record was reviewed 6/20/07.</p> <p>Resident 9's most recent Minimum Data Set (MDS) assessment, dated 5/15/07, revealed the resident required extensive assistance of one person to eat her meals. Review of the MDS assessment revealed resident 9 was not able to communicate verbally.</p> <p>Review of resident 9's recorded weights for the past 6 months revealed resident 9 had a gradual weight loss. Resident 9's weight was recorded as:</p> <p>97.1 pounds on 12/15/06, 96.0 pounds on 1/26/07, 95.0 pounds on 2/23/07, 93.7 pounds on 3/16/07, 93.3 on 4/20/07, 93.5 on 5/18/07, 93.3 on 6/15/07.</p> <p>On 6/20/07 at 12:35 PM, resident 9 was observed to be sitting in her wheelchair at a assistive dining table, with her hands in her lap. Resident 9's tray was in front of her with beverages, Boost and dessert on it. At 12:45 PM, resident 9 was dozing with her chin on her chest. At 12:53 PM, resident 9 was awakened by a nurse for medication administration. At 12:59 PM, resident 9 was awake and watching the others at her table as they ate. At 1:02 PM, the main course was put in front of resident 9 and at</p> | F 312 | | | |

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| F 312 | <p>Continued From page 8</p> <p>1:03 PM a staff member began to feed resident 9. At times, resident 9 was chewing a mouthful when the staff member attempted to feed the resident another bite. At 1:10 PM, the staff member turned to assist another resident and at 1:15 PM the staff member left the table. At 1:16 PM, resident 9 was observed to attempt to eat bits of ground ham. Both the resident's thumb and her index finger were outstretched straight and stiff and pressed against each other. Resident 9 attempted to pinch bits of ground ham with the tip of her thumb where it touched her finger. During multiple attempts to obtain the meat, resident 9 was observed to be successful in getting one bit of ground ham to her mouth three times. No one assisted resident 9 to finish her meal. At 1:30 PM, resident 9 was taken from the dining room. Resident 9 had eaten less than 30 percent of her meal and none of her Boost.</p> <p>2. Resident 8 was admitted to the facility 7/26/93 with diagnoses that included organic brain syndrome, diverticulitis, and hypertension.</p> <p>Resident 8's medical record was reviewed 6/21/07. Resident 8's comprehensive MDS assessment dated 11/14/06 and quarterly MDS assessment dated 5/1/07 revealed that to eat, the resident required extensive assistance of 1 person. The MDS assessments revealed resident 8 had difficulty communicating. The comprehensive MDS revealed resident 8 was not on a planned weight change program and the resident had problems with chewing and swallowing.</p> <p>Review of resident 8's recorded weights for the past 6 months revealed resident 8 had a gradual weight loss. Resident 8's weight was recorded</p> | F 312 | | | |

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| F 312 | <p>Continued From page 9</p> <p>as: 101.0 pounds on 12/9/06, 100.2 pounds on 1/6/07, 100.6 pounds on 2/10/07, 98.7 pounds on 3/3/07, 102.1 on 4/7/07, 98.7 on 5/5/07, 97.9 on 6/16/07.</p> <p>Resident 8's dietary assessments revealed the resident's ideal body weight was 103 - 138 pounds. Meal intake documentation revealed the resident ate less than 50% of her meals.</p> <p>Resident 8's care plan included a problem that the resident was at nutritional risk. The care plan revealed resident 8 was to have one to one assistance with her meals.</p> <p>On 6/20/07 at 12:35 PM, resident 8 was observed to be sitting at a assistive dining room table. Bread was soaking in a dish of milk and resident 8 began to eat it with a spoon, spilling some down her chin. A staff member was sitting at the assistive table. At 12:48 PM, without speaking, the staff member reached to pull resident 8's spoon out of the resident's hand. Resident 8 resisted and the staff member turned to resident 7. Resident 8 received no further assistance or cueing.</p> <p>At 1:14 PM, resident 8's family member came into the dining room. Resident 8 was sitting at the table with her clothing protector over her dishes of food. Resident 8's Boost had not been opened for the resident. The family member looked at the dishes of food, opened the Boost and asked staff to try to see that resident 8 drank it. At that time, the family member left and a dietary staff began to encourage resident 8 to drink her Boost</p> | F 312 | | | |

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| F 312 | <p>Continued From page 10 supplement.</p> <p>4. Resident 1 was admitted to the facility 11/15/05 with diagnoses that included diabetes mellitus, left hemiplegia, macular degeneration, dementia with depression and congestive heart failure.</p> <p>Resident 1's medical record was reviewed 6/18/07.</p> <p>Resident 1's MDS assessment, dated 4/3/07, revealed the resident required extensive assistance of one staff for eating, toileting, and for transferring from one surface to another.</p> <p>On 6/20/07 at 1:07 PM, resident 1 was observed to be in her wheelchair at the dining room table. Resident 1 had eaten her dessert and a couple of bites of potato. Resident 1 stopped eating and stated, "I've got to go to the bathroom." At 1:09 PM resident 1 repeated her statement. The nursing assistant who was assisting at resident 1's table stated, "We'll take you when we're through, [resident 1]." At 1:12 PM, resident 1 moved away from the table and around the room. Resident 1 was assisted back to the table at 1:15 PM and received her medications. At 1:20 PM, resident 1 was assisted to the bathroom and then into bed. Resident 1 had eaten approximately 20 percent of her meal. The resident was not taken back to the dining room to finish her meal.</p> <p>5. a. Resident 12 was admitted to the facility on 4/9/07 with diagnoses that included weight loss, dementia and congestive heart failure.</p> <p>Resident 12's medical record was reviewed 6/19/07.</p> | F 312 | | |

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| F 312 | <p>Continued From page 11</p> <p>Resident 12's comprehensive MDS assessment revealed the resident was 73 inches tall and weighed 124 pounds. The MDS revealed resident 12 had experienced weight loss and was on a therapeutic diet.</p> <p>The June 2007 physician's orders for resident 12 revealed diet orders for resident 12 that included half and half for milk and Boost liquid supplement with meals.</p> <p>b. Resident 13 was admitted to the facility 11/28/06 with diagnoses that included diabetes mellitus and depression.</p> <p>Resident 13's medical record was reviewed 6/19/07. Resident 13's June 2007 physician's orders revealed the resident was to receive skim milk with a ADA (American Diabetic Association) diet.</p> <p>On 6/19/07 at 12:40 PM, resident 13 was observed to be seated at resident 12's assigned place at the dining table. Lunch trays had been set up with beverages at both resident 12's and resident 13's places. Resident 13 was observed to drink resident 12's Boost, not diabetic formula, and part of resident 12's red punch. Resident 13 left the dining room. There were four staff assisting residents in the dining room.</p> <p>On 6/19/07 at 12:48 PM, resident 12 was directed to the dining room and took his place at the table. Resident 12 picked up his Boost, looked at the can and shook it, attempted to get a drink and set the can back down.</p> <p>At 1:00 PM, resident 13 was directed back to the</p> | F 312 | | | |

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| F 312 | Continued From page 12 dining room to her own place at the table. Resident 13 then ate her own lunch. | F 312 | | |
| F 334 SS=B | 483.25(n) INFLUENZA AND PNEUMOCOCCAL IMMUNIZATION The facility must develop policies and procedures that ensure that -- (i) Before offering the influenza immunization, each resident, or the resident's legal representative receives education regarding the benefits and potential side effects of the immunization; (ii) Each resident is offered an influenza immunization October 1 through March 31 annually, unless the immunization is medically contraindicated or the resident has already been immunized during this time period; (iii) The resident or the resident's legal representative has the opportunity to refuse immunization; and (iv) The resident's medical record includes documentation that indicates, at a minimum, the following: (A) That the resident or resident's legal representative was provided education regarding the benefits and potential side effects of influenza immunization; and (B) That the resident either received the influenza immunization or did not receive the influenza immunization due to medical contraindications or refusal. The facility must develop policies and procedures that ensure that -- | F 334 | | 8/20/07 |

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| F 334 | <p>Continued From page 13</p> <p>(i) Before offering the pneumococcal immunization, each resident, or the resident's legal representative receives education regarding the benefits and potential side effects of the immunization;</p> <p>(ii) Each resident is offered a pneumococcal immunization, unless the immunization is medically contraindicated or the resident has already been immunized;</p> <p>(iii) The resident or the resident's legal representative has the opportunity to refuse immunization; and</p> <p>(iv) The resident's medical record includes documentation that indicated, at a minimum, the following:</p> <p>(A) That the resident or resident's legal representative was provided education regarding the benefits and potential side effects of pneumococcal immunization; and</p> <p>(B) That the resident either received the pneumococcal immunization or did not receive the pneumococcal immunization due to medical contraindication or refusal.</p> <p>(v) As an alternative, based on an assessment and practitioner recommendation, a second pneumococcal immunization may be given after 5 years following the first pneumococcal immunization, unless medically contraindicated or the resident or the resident's legal representative refuses the second immunization.</p> <p>This REQUIREMENT is not met as evidenced by: Based on interview and record review, it was determined that the facility do not ensure that there was documentation on the residents' chart</p> | F 334 | | | |

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| F 334 | <p>Continued From page 14</p> <p>that indicated that residents or the residents' legal representatives were provided education regarding the benefits and potential side effects of the influenza immunizations. Resident identifiers: 1, 2, 3, 4, 5, and 6.</p> <p>Findings included:</p> <p>1. Resident 2 was admitted to the facility on 1/28/05 with diagnoses which included, congestive heart failure, coronary artery disease, angina, hypertension, renals failure and skin cancer.</p> <p>Resident 2's medical record was reviewed on 6/20/07. It revealed documentation that resident 2 had received the influenza vaccine on 10/12/06. However, there was no documentation that the resident and/or legal representatives were provided with education regarding the benefits and potential side effects of the influenza vaccine. There was no documentation that the resident and/or legal representatives were given an opportunity to refuse the administration of the influenza vaccine.</p> <p>2. Resident 5 was admitted to the facility on 1/13/04 with diagnoses which included, history of cerebral vascular accident, anxiety disorder, depression, contractures, delusions and migraine headaches.</p> <p>Resident 5's medical record was reviewed on 6/20/07. It revealed documentation that resident 5 had received the influenza vaccine on 10/12/06. However, there was no documentation that the resident and/or legal representatives were provided with education regarding the benefits and potential side effects of the influenza vaccine.</p> | F 334 | | | |

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| F 334 | <p>Continued From page 15</p> <p>There was no documentation that the resident and/or legal representatives were given an opportunity to refuse the administration of the influenza vaccine.</p> <p>3. Resident 6 was admitted to the facility on 2/10/04 with diagnoses which included, diabetes mellitus, hypertension, pulmonary embolism, history of cerebral vascular accident, dementia and congestive heart failure.</p> <p>Resident 6's medical record was reviewed on 6/19/07. It revealed documentation that resident 6 had received the influenza vaccine on 10/12/06. However, there was no documentation that the resident and/or legal representatives were provided with education regarding the benefits and potential side effects of the influenza vaccine. There was no documentation that the resident and/or legal representatives were given an opportunity to refuse the administration of the influenza vaccine.</p> <p>4. Resident 1 was admitted to the facility 11/15/05 with diagnoses that included diabetes mellitus, left hemiplegia, macular degeneration, dementia with depression and congestive heart failure.</p> <p>Resident 1's medical record was reviewed 6/18/07. Resident 1's medical record revealed documentation that resident 1 had received the influenza vaccine on 10/12/06. However, there was no documentation that the resident and/or legal representatives were provided with education regarding the benefits and potential side effects of the influenza vaccine. There was no documentation that the resident and/or legal representatives were given an opportunity to refuse the administration of the influenza vaccine</p> | F 334 | | | |

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| F 334 | <p>Continued From page 16</p> <p>5. Resident 3 was an 88 year old female who was admitted to the facility with diagnoses which included congestive heart failure, recent pneumonia, pressure ulcer and macular degeneration.</p> <p>Resident 3's medical record was reviewed on 6/19/07. Resident 3's medical record included a document regarding immunizations which was dated 5/4/07 and signed by a registered nurse (RN). The document revealed resident 3 did "not want to be immunized during their hospitalization." The document included boxes to be marked to indicate the reason the resident was not going to be immunized, but no reason was included. There was no documentation that the resident and/or legal representatives were provided with education regarding the benefits and potential side effects of the pneumococcal vaccine,</p> <p>6. Resident 4 was admitted to the facility on 4/25/07 with diagnoses which included pubic fracture, ankle fracture, spinal stenosis and hypertension.</p> <p>Resident 4's medical record was reviewed on 6/21/07. Resident 4's medical record included a document regarding immunizations which was dated 5/9/07 and signed by a registered nurse (RN). The document revealed resident 4 received the pneumococcal vaccine on 5/9/07. There was no documentation that the resident and/or legal representatives were provided with education regarding the benefits and potential side effects of the pneumococcal vaccine. There was no documentation that the resident and/or legal representatives were given an opportunity to</p> | F 334 | | | |

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| F 334 | Continued From page 17 refuse the administration of the pneumococcal vaccine. | F 334 | | | |
| F 354 SS=C | 483.30(b) NURSING SERVICES - REGISTERED NURSE Except when waived under paragraph (c) or (d) of this section, the facility must use the services of a registered nurse for at least 8 consecutive hours a day, 7 days a week. Except when waived under paragraph (c) or (d) of this section, the facility must designate a registered nurse to serve as the director of nursing on a full time basis. The director of nursing may serve as a charge nurse only when the facility has an average daily occupancy of 60 or fewer residents. This REQUIREMENT is not met as evidenced by: Based on observation and interview, it was determined that the facility designated director of nursing, did not work at the facility on a full time basis. An interview was held on 6/21/07 with the facility administrator. The administrator stated that the DON used to work at the facility full time but that as the adjoining hospital expanded, her duties there had increased. He also stated the the DON's title was actually the assistant administrator for nursing services and this position serves both the facility and the hospital. On the Long Term Care Facility Application for Medicare and Medicaid, (form 671)the facility documented that the DON worked 80 hours per | F 354 | | 8/20/07 | |

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| F 354 | Continued From page 18 pay period at the facility. This form was filled out and signed by the human resource director of the facility. An interview with the human resource director was held on 6/21/07 at 10:30 AM. She stated that the 80 hours listed under the DON was actually the Assistant DON's hours. She also stated the DON's hours were not accounted for by the facility, on the 671 form. | F 354 | | | |