PRINTED: 03/04/2024 FORM APPROVED OMB NO. 0938-0391

NAME OF PROVIDER OR SUPPLIER  GOOD SAMARITAN SOCIETY - ST MARTIN VILLAGE  FOOD INITIAL COMMENTS  INITIAL COMMENTS  A complaint health survey for compliance with 42 CFR Part 483, Subpart B, requirements for Long Tem Care facilities was conducted on 2/21/24. The area surveyed was physical environment. Good Samaritan Society - St Martin Village was found not in compliance with the following requirement: F689.  F689 F689 F69 Accident hazards/Supervision/Devices  CFR(e): 483.25(d)(1) The resident environment remains as free of Accident hazards as is possible; and \$483.25(d)(2)Each resident receives adequate supervision and assistance devices to prevent accidents.  This RECUIREMENT is not met as evidenced by: Based on the South Dakota (SD) Department of Health (DOH) facility reported incident (FRI), observation, interview, record review, and policy review, the provider failed to ensure a secure environment by silencing alarms on 2 of 8 egress doors located on the north and south units. Findings include:  1. Review of the SD DOH FRI on 2/21/24 at 8:30 a.m. revealed:  2. A polysical environment complaint resulting in an elopement of a resident.  3. 1. Review of the SD DOH FRI on 2/21/24 at 8:30 a.m. revealed:  3. 1. Review of the SD DOH FRI on 2/21/24 at 8:30 a.m. revealed:  3. 1. Review of the SD DOH FRI on 2/21/24 at 8:30 a.m. revealed:  3. 1. Review of the SD DOH FRI on 2/21/24 at 8:30 a.m. revealed:  3. 1. Review of the SD DOH FRI on 2/21/24 at 8:30 a.m. revealed:  3. 1. Review of the SD DOH FRI on 2/21/24 at 8:30 a.m. revealed:  3. 1. Review of the SD DOH FRI on 2/21/24 at 8:30 a.m. revealed:  3. 1. Review of the SD DOH FRI on 2/21/24 at 8:30 a.m. revealed:  3. 1. Review of the SD DOH FRI on 2/21/24 at 8:30 a.m. revealed:  3. 1. Review of the SD DOH FRI on 2/21/24 at 8:30 a.m. revealed:  4. Physical environment complaint resulting in an elopement of a resident.  4. Review of the SD DOH FRI on 2/21/24 at 8:30 a.m. revealed:  5. Provided Review of the SD DOH FRI on 2/21/24 at 8:30 a.m. revealed:  5. Provided Review	,		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION A. BUILDING		(X3) DATE SURVEY COMPLETED		
STREET ADDRESS, CITY, STATE, ZIP CODE		435134 B WING						
A complaint health survey for compliance with 42 CFR Part 483, Subpart B, requirements for Long Temporare accidents. The facility must ensure that survey due to the facility must ensure that survey for compliance with the following requirement F699.  F 689 Free of Accident Hazards/Supervision/Devices CFR(s): 483.25(d)(1)(1) Feesident environment remains as free of accident hazards as is possible; and supervision and assistance devices to prevent accidents. This REQUIREMENT is not met as evidenced by: Based on the South Dakota (SD) Department of Health (DOH) facility reported incident (FR), observation, interview, record review, and policy review, the provider failed to ensure a secure environment by selecting sincles. The resident eloped from an alarmed door, but the alarm was selenced when the door closed.  *A physical environment complaint resulting in an elopement of a resident.  *A physical environment complaint resulting in an elopement of a resident.  *A physical environment complaint resulting in an elopement of a resident.  *A resident was outside the facility for 6 minutes.  *The temperature at the time of the incident was then as determined by the committee.  *The temperature at the time of the incident was the racident was outside the facility for 6 minutes.  *The temperature at the time of the incident was the nace of the provider facility for 6 minutes.  *The temperature at the time of the incident was the facility for 6 minutes.  *The temperature at the time of the incident was the facility for 6 minutes.  *The temperature at the time of the incident was the committee and continued for no less than 2 months of monthly monitoring that demonstrated sustained continued for no less than 2 months of monthly monitoring that demonstrated sustained continued for no less than 2 months of monthly monitoring that demonstrated sustained compliance the committee.		201/1252 02 01/221/52	433134	D. WING_	_		02/	21/2024
CALL	NAME OF PI	ROVIDER OR SUPPLIER						
SUMMARY STATEMENT OF DEFICIENCES   PRETIX TAG	GOOD SA	MARITAN SOCIETY - ST	MARTIN VILLAGE					
FREEIX TAG   REQUATORY OR LSG IDENTIFYING INFORMATION)  FOOD  INITIAL COMMENTS  A complaint health survey for compliance with 42 CFR Part 483, Subpart B, requirements for Long Term Care facilities was conducted on 2/21/24. The area surveyed was physical environment. Good Samaritan Society- St Martin Village was found not in compliance with the following requirement: F689.  SS=D  CFR(s): 483.25(d) (1)(2)  S483.25(d) Accidents. The facility must ensure that - S483.25(d)(1)(2)  S483.25(d) The resident environment remains as free of accident hazards as is possible; and S483.25(d)(2)Each resident receives adequate supervision and assistance devices to prevent accidents. This REQUIREMENT is not met as evidenced by:  Based on the South Dakota (SD) Department of Health (DOH) facility reported incident (FRI), observation, interview, record review, and policy review, the provider failed to ensure a secure environment by silencing alarms on 2 of 8 egress doors located on the north and south units. Findings include:  1. Review of the SD DOH FRI on 2/21/24 at 8:30 a.m. revealed:  1. Review of the SD DOH FRI on 2/21/24 at 8:30 a.m. revealed:  1. Review of the SD DOH FRI on 2/21/24 at 8:30 a.m. revealed:  1. Review of the SD DOH FRI on 2/21/24 at 8:30 a.m. revealed:  1. Provident experiment of the sident was silenced when the door closed.  1. Review of the SD DOH FRI on 2/21/24 at 8:30 a.m. revealed:  1. Review of the SD DOH FRI on 2/21/24 at 8:30 a.m. revealed:  1. Review of the SD DOH FRI on 2/21/24 at 8:30 a.m. revealed:  1. Review of the SD DOH FRI on 2/21/24 at 8:30 a.m. revealed:  1. Review of the SD DOH FRI on 2/21/24 at 8:30 a.m. revealed:  1. Review of the SD DOH FRI on 2/21/24 at 8:30 a.m. revealed:  1. Review of the SD DOH FRI on 2/21/24 at 8:30 a.m. revealed:  1. Review of the SD DOH FRI on 2/21/24 at 8:30 a.m. revealed:  1. Review of the SD DOH FRI on 2/21/24 at 8:30 a.m. revealed:  1. Review of the SD DOH FRI on 2/21/24 at 8:30 a.m. revealed:  1. Review of the SD DOH FRI on 2/21/24 at 8:30 a.m. revealed:  2. A p					R	RAPID CITY, SD 57702		
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ORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

Adminsitrator, Senior Director

3.7.24

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.

Jana McCroden

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	` ′	(X2) MULTIPLE CONSTRUCTION A. BUILDING			(X3) DATE SURVEY COMPLETED	
		435134	B. WING			C 02/21/2024		
NAME OF D	POVIDED OD SLIDDLIED	400104	5: 11	etdi	EET ADDRESS, CITY, STATE, ZIP CODE	02/	21/2024	
INAIVIE OF F	NAME OF PROVIDER OR SUPPLIER							
GOOD SA	MARITAN SOCIETY - S	T MARTIN VILLAGE			5 JERICHO WAY PID CITY, SD 57702			
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)		ID PREFI) TAG				(X5) COMPLETION DATE	
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	jacket.  *The resident was fo lunch.	und by a nurse going to bistory of elopement.						
	egress door on the s *A camera was locat ceiling. *An "alarm sounds" s part of the glass doo *A keypad required a next to the door whe -A push bar located a activated the opening *A second keypad w button was on the op was located on the w *A short 4-to-5 foot p door that led to the co	sign was painted on the top r. a numerical code on the wall n exiting the facility. on that same door that g of the door. ith the addition of a push oposite side of that door and vall. eassthrough led to another						
	a.m. with resident 1 *Was sitting up in he *Had a WanderGuar the movement of res elopement risk; the c like a bracelet or on wrist. *The WanderGuard weeks agoWas attempting to ta activities room to pla	r bed eating her breakfast. d [a device used to monitor idents that were an device i was worn on the wrist the ankle] placed on her right was placed a couple of ake a shortcut to the						

STATEMENT OF DEFICIENCIES (X AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA (X2) MUL IDENTIFICATION NUMBER: A. BUILD		CONSTRUCTION	(X3) DATE SURVEY COMPLETED	
		435134	B. WING		C <b>02/21/2024</b>	
NAME OF PROVIDER OR SUPPLIER  GOOD SAMARITAN SOCIETY - ST MARTIN VILLAGE			4	TREET ADDRESS, CITY, STATE, ZIP CODE 825 JERICHO WAY APID CITY, SD 57702	1 02/21/2024	
(X4) ID PREFIX TAG	(EACH DEFICIE	STATEMENT OF DEFICIENCIES NCY MUST BE PRECEDED BY FULL R LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTIO (EACH CORRECTIVE ACTION SHOULD CROSS-REFERENCED TO THE APPROP DEFICIENCY)	BE COMPLETION	
F 689	she kept going thro *Realized she took up outsideStated it was chilly light Columbia jack *Was escorted bac -Understood why h away, but she just -Bingo was her fave mistake, she had to  5. Interview on 2/2 manager C reveale *Door checks were system he used ca -The application wa phone for easy use *A WanderuGard w and locking mecha *He demonstrated in the TELS system *It was the respons check the individual function.  6. Observation and a.m. with administr regarding the doub led to the independ revealed: *An "alarm sounds" doors.  *A keypad required next to the door wh corridor that led to *A keypad with the	ring the alarms going off, but augh the door. a wrong turn when she ended of outside, but was wearing a set. It is is is is in a set to be	F 689			

		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:		PLE CONSTRUCTION  G		COMPLETED	
		435134	B. WING		C 02/21/20	24	
NAME OF PROVIDER OR SUPPLIER  GOOD SAMARITAN SOCIETY - ST MARTIN VILLAGE			STREET ADDRESS, CITY, STATE, ZIP CODE 4825 JERICHO WAY RAPID CITY, SD 57702	02/21/2024			
(X4) ID PREFIX TAG	(EACH DEFICIE	STATEMENT OF DEFICIENCIES NCY MUST BE PRECEDED BY FULL R LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORREC (EACH CORRECTIVE ACTION SHOI CROSS-REFERENCED TO THE APPR DEFICIENCY)	JLD BE COM	(X5) PLETION DATE	
F 689	that was located or *A push bar was us those doors. *If the keypad was doors, the push bar for 15 seconds before would release allowThe door alarms wand could only be son the keypad. *Administrator A put *A timer was starte have taken staff to *Administrator A's considered to disarm the *He did not hear the rounding the corner approximately 87 for the had some hear from previous traur affected the hearing *Ancillary manager keypad. *Administrator A and agreed the volume been louderAncillary manager was set on both the south unit and the rounding the corner was set on both the south unit and the rounding the alarm system was set on both the south unit and the rounding the alarm system was set on both the south unit and the rounding the alarm system was set on both the south unit and the rounding the alarm system was set on both the south unit and the rounding the alarm system was set on both the south unit and the rounding the alarm system was set on both the south unit and the rounding the alarm system was set on both the south unit and the rounding the alarm system was set on both the south unit and the rounding the alarm system was set on both the south unit and the rounding the alarm system was set on both the south unit and the rounding the alarm system was set on both the south unit and the rounding the alarm system was set on both the south unit and the rounding the south	a the wall.  The detail of activate the opening of the red to activate the opening of the red to activate the opening the red to be activated one the door lock mechanism wing the doors to open.  Tould sound during that time silenced by entering the code the silenced by entering the code to observe how long it would respond to the alarm. The expectation was for staff to mimmediately. The does not be doors and the location which was the eater from the double doors. The double doors are to the location which was not the alarm.  The confirmed the same volume to the door alarm should have the confirmed the same volume to the orth egress door on the north of the confirmed the volume on the confirmed the confirmed the confirmed	F 68				

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPL A. BUILDING	E CONSTRUCTION	(X3) DATE SURVEY COMPLETED
		435134	B. WING		C <b>02/21/2024</b>
NAME OF PROVIDER OR SUPPLIER  GOOD SAMARITAN SOCIETY - ST MARTIN VILLAGE			STREET ADDRESS, CITY, STATE, ZIP CODE 1825 JERICHO WAY RAPID CITY, SD 57702	•	
(X4) ID PREFIX TAG	(EACH DEFICIEN	STATEMENT OF DEFICIENCIES NCY MUST BE PRECEDED BY FULL R LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD CROSS-REFERENCED TO THE APPROPRIED DEFICIENCY)	O BE COMPLETION
F 689	there was no delay *The alarm sounde without using the ke -The alarm did not s *The alarm was sile *A second keypad was button was on the ce it was located on th -That keypad and p operate the door if a callity from the outs *A short 4-to-5 foot another door that le -That door was not and opened freely. *If the numerical ke to opening the door would silence once hours of 7:30 a.m. t FridayThe only time the ce sound during that a would have been if WanderGuard. *Ancillary manager WanderGuard. *The door alarm so the numerical keypa doorWhen he did not uprior to pushing the sounded. *The adjusted settin or visitors that came using the numerica *It was becoming a	r on the door was activated, in opening the door. In opening the door. In opening the door was opened by pad located on the wall. It is sound if the keypad was used. It is sound if the keypad was used. It is with an addition of a push opposite side of that door and the wall. It is with an addition of a push opposite side of that door and the wall. It is with an individual was entering the side. It is with a passthrough that led to wall to the outside of the facility. It is with a larm would sound and with the door closed between the work of	F 689		

STATEMENT OF DEFICIENCIES (X1) PROVIDER/SUPPLIER/CLIA AND PLAN OF CORRECTION IDENTIFICATION NUMBER:		1 ' '	PLE CONSTRUCTION  G	, ,	(X3) DATE SURVEY COMPLETED		
		435134	B. WING			C <b>2/21/2024</b>	
NAME OF PROVIDER OR SUPPLIER  GOOD SAMARITAN SOCIETY - ST MARTIN VILLAGE				STREET ADDRESS, CITY, STATE, ZIP CODE  4825 JERICHO WAY  RAPID CITY, SD 57702		02/21/2024	
(X4) ID PREFIX TAG	(EACH DEFICIEN	STATEMENT OF DEFICIENCIES NCY MUST BE PRECEDED BY FULL R LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORR (EACH CORRECTIVE ACTION SI CROSS-REFERENCED TO THE AF DEFICIENCY)	HOULD BE	(X5) COMPLETION DATE	
F 689	up to function the si *Resident 1 exited to setting on 2/9/24 at -She was outside for member saw her out going to lunch. *At that time, reside WanderGuard. *It was administrate would still check if a even though the ala was closed during t *The charge nurse headcount of the re process on the elop was missing. *Administrator A con exited the facility, s elopement checklis  8. Interview with ad 11:45 a.m. revealed *She provided an echecklist. *Staff were educate various training opp a binder at the 2 nu *She was unable to education as she ha the topic.  9. Interview with ad 11:52 a.m. revealed	door on the north unit was set ame way. The facility during the adjusted 12:50 p.m. The 6 minutes when a staff atside of the window while and 1 was not wearing a sor A's expectation that staff a resident exited the facility arm silenced once the door the adjusted time frame. Should have performed a sidents and followed the dement checklist if a resident that when resident 1 taff had not followed the temperature of the elopement of the elopement and on the checklist during cortunities and it was located in the resident of that and given verbal education on 2/15/24.	F 68				

		COMPLETED	
435134 B. WING		C <b>02/21/2024</b>	
NAME OF PROVIDER OR SUPPLIER  STREET  4825 JE  4825 JE	T ADDRESS, CITY, STATE, ZIP CODE  ERICHO WAY  D CITY, SD 57702	02/21/2024	
(X4) ID SUMMARY STATEMENT OF DEFICIENCIES ID PREFIX (EACH DEFICIENCY MUST BE PRECEDED BY FULL PREFIX TAG REGULATORY OR LSC IDENTIFYING INFORMATION) TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIA' DEFICIENCY)	5.475	
*There was a separate sheet that was not included on the agenda that listed "elopement policy and procedure" and had a handwritten addition listing "checklist binder."  *She had not finished the education as that was an ongoing process.  *Staff that were unable to attend the staff meeting were shown the education on the days when they arrived to work and signed the signature sheet at that time.  10. Interview with activities supervisor E on 2/21/24 at 1:06 p.m. revealed:  *On Bingo days, she usually went to get resident 1.  -Sometimes the resident would meet her halfway to the activities room.  *On 2/9/24 around 1:00 p.m. resident 1 decided to make her way to bingo on her own.  *Bingo was held in the activities room and scheduled to begin at 2:00 p.m.  *Resident 1 was embarrassed after the incident and was making jokes about her new bracelet.  11. Interview on 2/21/24 at 2:30 p.m. with administrator A, director of nursing (DON) B, ancillary manager C, and administrator F revealed:  *Administrator F would be filling in for administrator F would be filling in for administrator A when she goes on vacation for the next 2 weeks.  *The doors that have the adjusted setting time frame went back to it's regular setting at 4:00 p.m. on weekdays and was not implemented on the weekends.  *Ancillary manager C has a meeting tomorrow with the door alarm system project manager to re-evaluate the adjusted setting.			

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION  (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:			TIPLE CONSTRUCTION  NG		(X3) DATE SURVEY COMPLETED	
		435134	B. WING _			C <b>02/21/2024</b>
NAME OF PROVIDER OR SUPPLIER  GOOD SAMARITAN SOCIETY - ST MARTIN VILLAGE				STREET ADDRESS, CITY, STATE 4825 JERICHO WAY RAPID CITY, SD 57702	, ZIP CODE	02/2 1/2024
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)		ID PREFII TAG	X (EACH CORRECTIV CROSS-REFERENCE	AN OF CORRECTION VE ACTION SHOULD BE D TO THE APPROPRIATE ICIENCY)	(X5) COMPLETION DATE
F 689	not loud enough for a the opposite side of a the adjusted setting convenient for reside the facility without he entrance.  *They would be look accommodate both the and for resident safe and for resident safe of the provide the convenient safe and for resident safe of the provide the provides of t	staff to hear if they were on the unit. ressing the volume of the door alarm system project  gs time frame was more ent family members to enter aving to use the front  ing into a solution that would he families of the residents sty.  er's 8/22/23 Alarms: Bed, nabilitation/Skilled Care policy : 3. All staff will be ically checking on the	F	589		