

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

PRINTED: 10/01/2024  
FORM APPROVED  
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>435045</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>C</b> <b>09/19/2024</b>
NAME OF PROVIDER OR SUPPLIER  <b>GOOD SAMARITAN SOCIETY SIOUX FALLS VILLAGE</b>			STREET ADDRESS, CITY, STATE, ZIP CODE <b>3901 S MARION RD</b> <b>SIOUX FALLS, SD 57106</b>	
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F 000	INITIAL COMMENTS  A complaint health survey for compliance with 42 CFR Part 483, Subpart B, requirements for Long Term Care facilities was conducted from 9/18/24 through 9/19/24. Areas surveyed included resident abuse and neglect and elopement. Good Samaritan Society Sioux Falls Village was found not in compliance with the following requirement: F600.	F 000		
F 600 SS=G	Free from Abuse and Neglect CFR(s): 483.12(a)(1)  §483.12 Freedom from Abuse, Neglect, and Exploitation The resident has the right to be free from abuse, neglect, misappropriation of resident property, and exploitation as defined in this subpart. This includes but is not limited to freedom from corporal punishment, involuntary seclusion and any physical or chemical restraint not required to treat the resident's medical symptoms.  §483.12(a) The facility must-  §483.12(a)(1) Not use verbal, mental, sexual, or physical abuse, corporal punishment, or involuntary seclusion; This REQUIREMENT is not met as evidenced by: Based on the South Dakota Department of Health (SD DOH) Facility Reported Incident (FRI), observation, interview, record review, and policy review, the provider failed to ensure that one of one sampled resident (1) was free from neglect by certified nursing assistant (CNA) (F) who did not provide or a shower as directed in her plan of care. Findings include:	F 600	1. Residents' bathing preference and toileting plan were updated and per the care plan education was provided to staff on 10/2/24. Resident received bath on 9/30/24. 2. By 10/4/24 Director of Nursing or Designee will review care plans for all residents who are dependent on cares by staff to ensure resident cares are provided per the care plan. Review will ensure accurate ADL charting is set in C.N.A. charting system, PCC point of care. 3. To ensure the deficient practice does not recur, immediate education was sent out to nursing staff	10/4/24

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

*James Baleen*

TITLE

Administrator

(X6) DATE

10/07/2024

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 600	<p>Continued From page 1</p> <p>1. Review of the provider's submitted SD DOH FRI revealed: *Staff reported to management that resident 1 did not get her shower or toileting on the day shift on 8/5/24 between 7:42 a.m. and 6:04 p.m. *Camera footage revealed that resident 1 did not get showered and was not assisted to the restroom per her care plan. *Certified Nursing Assistant (CNA) F and CNA G had documented throughout the day that resident 1 did not void, and the resident was repositioned every two hours. *During an interview, CNA F stated that she was not aware that she needed to check on residents and change them during her shift. *Both CNA F and CNA G had been written up with a final corrective reminder due to lack of care and false charting. *Skin assessment was completed for resident 1 with no issues identified.</p> <p>2. Observation and interview on 9/18/24 at 1:30 p.m. with resident 1 revealed: *She was in her room sitting in her wheelchair watching TV. Resident appeared neatly dressed. *She did not verbally respond to the surveyor's questions. *She did make eye contact and nod at surveyor inconsistently.</p> <p>3. Interview on 9/18/24 at 3:00 p.m. with CNA D revealed: *This was CNA D's first CNA job and she had worked at the facility for five months. -She received her training from the facility. *CNA D stated that checking on and changing residents (incontinence products or clothing) were tasks CNAs were expected to do during their shifts.</p>	F 600	<p>via OnShift message on 10/2/24. Director of Nursing or Designee will educate all nursing staff on abuse and neglect policy/procedure and expectations of caring for residents who are dependent on cares to ensure residents are receiving the care per the care plan. Education will be completed by 10/4/24 via unit huddles or prior to the start of employees next shift.</p> <p>4. To monitor performance and ensure ongoing compliance the Director of Nursing or Designee will complete random resident audits to ensure the residents receive their scheduled bath, toileting schedule followed, and resident is repositioned every two hours per the care plan. Audit will review staff charting in order to ensure quality care is provided. Audit will be completed weekly x4 and then bi-weekly x2</p>	

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F 600	Continued From page 2 *Each CNA was assigned a resident to shower each shift. *It was expected that the CNA would shower the resident, document it, and let the nurse know if there were any problems identified. *It was expected that if the CNA did not complete the resident's shower, the CNA would tell the nurse.  4. Interview on 9/18/24 at 4:30 p.m. with registered nurse (RN) C revealed: *She worked the day shift on 8/5/24. -She recalled it being a very busy day. *She recalled asking CNA F if resident 1's shower had been completed, and CNA F replied that it had been completed. *RN C stated she could not recall having seen resident 1 leave her room to go shower that day. *RN C stated resident 1 did not appear to have been showered. *RN C stated she then asked CNA F again if the shower had been completed, and CNA F replied that it had been completed. *RN C expected that CNA F would have showered and assisted her assigned residents with toileting. *RN C stated if she had been notified by CNA F that resident 1's shower had not been completed, the resident would have been offered a shower later or on a different day. *RN C stated she reported the concern to her unit manager.  5. Interview on 9/19/24 at 8:25 a.m. with director of nursing (DON) B revealed: *DON B expected that residents would be showered on their scheduled day of the week. *She expected that if a shower was missed, it would be communicated to the nurse on shift and	F 600	and audit findings will be brought to QAPI committee for review.	

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F 600	<p>Continued From page 3</p> <p>the resident would be offered a shower later or different day that week.</p> <p>*Since the incident, there had been increased education to staff about the expectation for showers, repositioning, and documentation being completed and documented accurately.</p> <p>*They were conducting weekly "hall meetings" to address specific topics of concern.</p> <p>*CNA F was required to train an additional shift with a staff CNA.</p> <p>*CNA F's documentation is audited for accuracy by unit managers.</p> <p>-The audits are not documented and are only performed on CNA F currently.</p> <p>*A skills fair that was conducted and required for all staff, topics included abuse and neglect, and documentation. CNA F was present for the skills fair.</p> <p>6. Interview on 9/19/24 at 9:20 a.m. with administrator A revealed she:</p> <p>*Expected that residents would be showered on their scheduled day.</p> <p>*Expected that if a resident was not showered, the shower would be offered at a different time.</p> <p>7. Interview on 9/19/24 at 9:25 a.m. with Registered Nurse/Clinical Care Leader (RN/CCL) E revealed:</p> <p>*She expected CNAs would complete resident showers on their scheduled day.</p> <p>*Each CNA was assigned one resident to assist with showering each shift.</p> <p>*If the CNA did not complete the shower, the CNA was expected to inform the nurse and the shower should be offered at a different time or on a different day.</p> <p>*She provided a copy of a printed shower schedule for the CNAs that they were to sign after</p>	F 600			

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F 600	<p>Continued From page 4</p> <p>they completed the resident's shower. -She would review the printed schedule later in the week and would offer a shower to any resident who did not receive their shower on their scheduled day.</p> <p>8. Review of resident 1's electronic medical record revealed: *She was admitted on 12/20/2019 *In July 2024, her Brief Interview for Mental Status (BIMS) score was 00, which indicated she had severe cognitive impairment. *Her medical diagnoses included: Type 2 diabetes, dementia, major depressive disorder, osteoarthritis, chronic kidney disease, chronic pain, dysphagia, cerebral infarction. *Her care plan indicated that she should have been repositioned by staff every two hours. *Her care plan indicated that she should have been offered toileting assistance and checked for incontinence by staff every two hours.</p> <p>9. Review of the provider's internal investigation of the incident involving resident 1 revealed: *On 8/7/24, RN C reported her concern that the resident had not been showered, toileted, or repositioned during her shift on 8/5/24. *Review of camera footage revealed that on 8/5/24, CNA F entered the resident's room for the first time at 7:48 a.m. with lift. The resident was then taken to the dining area at 7:54 a.m. -CNA F documented that the resident did not void and was repositioned at 7:04 a.m. *At 8:27 a.m., the resident returned from dining area and was placed in the hall next to the CNA desk. -The resident remained in the hallway until she was taken to the dining area at 11:35 a.m. by CNA F.</p>	F 600			

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F 600	Continued From page 5 -CNA F documented resident was repositioned at 9:13 a.m. and 11:32 a.m. -CNA F documented that resident did not void at 9:22 a.m. and 11:32 a.m. *At 12:23 p.m., the resident was brought back from the dining area and was placed in the hallway from 12:26 p.m. until 3:35 pm. -CNA F documented the resident did not void and was repositioned at 12:38 p.m. -CNA G documented the resident did not void at 3:22 p.m. and was repositioned at 3:23 p.m. -At 5:46 p.m., it was documented by CNA G that resident was incontinent. *At 6:03 p.m., CNA G took the resident into her room and CNA F entered the room at 6:04 p.m. with a total lift. -Prior to incontinence at 5:46 p.m. on 8/5/24, the previous incontinence documented on the resident was on 8/4/24 at 3:12 p.m. *CNA F stated that she did not know that she had to check and change residents during her shift. *CNA F confirmed that this was not her first CNA job. -She confirmed that she was required to check and change residents at previous facilities. -She confirmed that she was trained to check and change residents at this facility. *CNA F stated that she did not remember charting (in reference to falsely documented tasks), "but assume you were just clicking."  10. Review of CNA F's employee file revealed: *CNA F started employment with the facility on 6/25/24. *Her CNA certification verified 6/10/24 through South Dakota Registry at <a href="https://www.sduap.org/verify/">https://www.sduap.org/verify/</a> *Her CNA certification was issued 4/20/2023. *She had completed training on: pd-2722, POC	F 600		

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F 600	<p>Continued From page 6</p> <p>Documentation Continence Monitoring Charting: Charting the Toileting Task, completed 7/12/24. *She had completed training on: cc-8745, Module 3 Being a Person with Dementia Actions and Reactions, completed 6/26/24. *She had completed training on: gc-6885, Abuse and Neglect of the Vulnerable Adult, completed 6/26/24. *She had completed training on: gc-6903, Protecting Resident Rights in Nursing Facilities, completed 6/26/24. *A copy of a job description for nursing assistants: "Provides assistance with basic health care needs including daily living activities that may include, but are not limited to, bathing, toileting, grooming, dressing/undressing, obtaining and recording vital signs, and providing psychosocial support and other personal care to assigned resident."</p> <p>11. Review of CNA F's education following the incident on 8/5/24 revealed: *She was re-trained on the floor with staff CNAs (per DON B). *She attended a clinical team meeting on 8/27/24. -Topics included showering expectations, accurate and timely charting, and snacks/hydration. *She attended the mandatory skills fair on 9/11/24. -Topics included: Abuse and neglect, documentation, pressure injury prevention, fall prevention, infection prevention, and other topics.</p> <p>12. Review of the provider's job description for nursing assistants revealed: *The CNA "Provides assistance with basic health care needs including daily living activities that may include, but are not limited to, bathing,</p>	F 600			

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F 600	<p>Continued From page 7</p> <p>toileting, grooming, dressing/undressing, obtaining and recording vital signs, and providing psychosocial support and other personal care to assigned resident." *The CNA "Assists the resident in transferring, repositioning, and walking using correct and appropriate transfer techniques and equipment and also provides range of motion and passive exercises."</p> <p>13. Review of the resident rights pamphlet that was provided to residents upon admission to the facility revealed: *Page 1, section (a) states: "The resident has a right to a dignified existence, self-determination and communication with and access to persons and services inside and outside the facility." -Section (a)(1) states: "A facility must treat each resident with respect and dignity and care for each resident in a manner and in an environment that promotes maintenance or enhancement of his or her quality of life, recognizing each resident's individuality. The facility must protect and promote the rights of the resident. *Page 2, section (c) states: "The resident has the right to be informed of, and participate in, his or her treatment, including: -Section (c)(2) states "The right to participate in the development and implementation of his or her person-centered plan of care, including, but not limited to: (iv) The right to receive the services and/or items included in the care plan."</p> <p>14. Review of the provider's July 2024 Abuse and Neglect policy revealed: **The resident has the right to be free from abuse, neglect, misappropriation of resident property and exploitation. This includes but is not limited to freedom from corporal punishment and</p>	F 600		

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