South Dakota Department of Health (X1) PROVIDER/SUPPLIER/CLIA STATEMENT OF DEFICIENCIES (X2) MULTIPLE CONSTRUCTION (X3) DATE SURVEY AND PLAN OF CORRECTION **IDENTIFICATION NUMBER:** COMPLETED A. BUILDING: C B. WING 68559 08/01/2023 NAME OF PROVIDER OR SUPPLIER STREET ADDRESS, CITY, STATE, ZIP CODE **133 TEXAS STREET** THE COURTYARD WESTHILLS VILLAGE RAPID CITY, SD 57701 (X4) ID SUMMARY STATEMENT OF DEFICIENCIES PROVIDER'S PLAN OF CORRECTION (X5) (EACH DEFICIENCY MUST BE PRECEDED BY FULL (EACH CORRECTIVE ACTION SHOULD BE COMPLETE PREFIX PREFIX REGULATORY OR LSC IDENTIFYING INFORMATION) CROSS-REFERENCED TO THE APPROPRIATE DATE TAG TAG DEFICIENCY) S 000 Compliance Statement S 000 A licensure survey for compliance with the Administrative Rules of South Dakota, Article 44:70, Assisted Living Centers, requirements for assisted living centers, was conducted from 7/31/23 through 8/1/23. The Courtyard Westhills Village was found not in compliance with the following requirements: S337 and S506. A complaint survey for compliance with the Administrative Rules of South Dakota, Article 44:70, Assisted Living Centers, requirements for assisted living centers, was conducted from 7/31/23 through 8/1/23. Area surveyed included resident abuse. The Courtyard Westhills Village was found in compliance. S 337 S 337 44:70:04:11 Care policies The Courtyard Westhills Village operates in 09/15/2023 compliance with all relevant regulations and Each facility shall establish and maintain policies, professional standards in a manner that ensures procedures, and practices that follow accepted safe and appropriate care for all residents that we standards of professional practice to govern care, serve. and related medical or other services necessary In reference to S 337: Courtyard Westhills Village was found to meet the residents' needs. not in compliance to ensure appropriate delegation from a licensed nurse to one of the certified This Administrative Rule of South Dakota is not medication aides who performed priming of an met as evidenced by: insulin pen and dialing of the insulin dose for two Based on observation, interview, and job sampled residents' insulin administration. This action has the potential to affect all residents who description review, the provider failed to ensure receive insulin. appropriate delegation from a licensed nurse to Only a licensed nurse or designated 2 one of one certified medication aide (CMA) E who medication aides who have received the performed priming of an insulin pen and dialing of unlicensed diabetic aide (UDA) certification will the insulin dose for two of two observed sampled perform the task. Unlicensed diabetic aide (UDA) residents' (1 and 2) insulin administration. CMAs training will be completed by September 15, 2023, and upon new hire of all designated medication should have received unlicensed diabetic aide aides. Director of Resident Services has completed (UDA) training by a registered nurse prior to the UDA Train the Trainer and UDA course. South performing that task according to South Dakota Dakota Board of Nursing has been notified and Board of Nursing rules. Findings include: approval has been received for Director of Resident Services to be UDA trainer on August 18, 1. Observation on 7/31/23 at 11:00 a.m. in 2023. Certification has been received.

LABORATORY DIRECTOR'S OR PRO Kelsey Bertsch

TITLE

(X6) DATE

STATE FORM

Executive Director

08/22/2023

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If continuation sheet 1 of 5

PRINTED: 08/10/2023 FORM APPROVED South Dakota Department of Health (X3) DATE SURVEY STATEMENT OF DEFICIENCIES (X1) PROVIDER/SUPPLIER/CLIA (X2) MULTIPLE CONSTRUCTION COMPLETED AND PLAN OF CORRECTION IDENTIFICATION NUMBER: A. BUILDING: C B WING 08/01/2023 68559 STREET ADDRESS, CITY, STATE, ZIP CODE NAME OF PROVIDER OR SUPPLIER **133 TEXAS STREET** THE COURTYARD WESTHILLS VILLAGE RAPID CITY, SD 57701 PROVIDER'S PLAN OF CORRECTION SUMMARY STATEMENT OF DEFICIENCIES (X4) ID ID COMPLETE (EACH CORRECTIVE ACTION SHOULD BE (FACH DEFICIENCY MUST BE PRECEDED BY FULL PREFIX PREFIX DATE CROSS-REFERENCED TO THE APPROPRIATE REGULATORY OR LSC IDENTIFYING INFORMATION) TAG TAG DEFICIENCY) S 337 S 337 Continued From page 1 Audits will be done to ensure insulin 3 administration is completed by licensed nurse or a resident 1's room with CMA E revealed: medication aide with UDA training weekly for one *The resident was scheduled to receive 18 units month and then monthly for 2 months for all of Novolog insulin subcutaneously daily before insulin doses to ensure compliance by the Director of Resident Services or Designee. Audits will be meals. completed on residents who receive insulin. *CMA E: Findings of these audits are reported to the -Placed the needle on the insulin pen device then monthly QA group for the following 3-month period turned the dial of the pen to 2 and primed the and continued audits will be determined based on the findings and the input from the group, which -Turned the dial of the pen to 18 units. includes facility medical director. 4. This correction will be completed by September *Resident 1: 15, 2023. -Wiped his abdomen with an alcohol pad. -Inserted the insulin pen needle into his abdomen, pushed the dose button, and administered the insulin. *CMA E counted along with the resident to ensure he had held the needle in his skin until the full dose was administered. 2. Continued observation on that same day at 11:07 a.m. in resident 2's room with CMA E revealed: *The resident was scheduled to receive 9 units of Novolog insulin subcutaneously daily before *CMA E followed the same process referred to above for resident 1's insulin administration that she had performed for resident 2. Interview on 7/31/23 at 1:15 p.m. with CMA E regarding the insulin administrations referred to above for residents 1 and 2 revealed she:

*Had been a CMA for about five years.

nursing C regarding the above insulin administration observations revealed: *Residents who required insulin had been expected to self-administer their own injections. -CMAs assisted those residents as needed by

Interview on 8/1/23 at 3:15 p.m. with director of

-Was not an UDA.

South Dakota Department of Health

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S 337	pen, dialing the order providing the resident instructions to ensure administered their instructions to ensure that considered primitiand dialing an insulin administration process to delegate to a CMA UDA training. -That was an "oversign Review of the June 2 performance standard aide)/Med Aide (CMA revealed CMA-specification included initial armoversign and included initial armoved in the second standard included initial armoversign and included initial armoved and included initial armoved administration to ensure the second standard included initial armoved and included initial armoved administration to ensure the second standard included initial armoved and included initial armoved and included initial armoved administration to ensure the second standard included initial armoved and included initial armoved administration to ensure the second standard included initial armoved and included initial armoved armoved and included initial armoved and included initial armoved armoved armoved armoved and included initial armoved	the insulin pen, priming the ed insulin dose, and the resident had properly rulin. The Board of Nursing rules and a resident's insulin pen dose part of the insulin and were not appropriate who had not completed the right" on her part. The board of Nursing rules are and were not appropriate who had not completed the right on her part. The board of Nursing rules are and were not appropriate who had not completed the right on her part.	\$ 337					
S 506	The person in charge dietitian shall provide for all dietary and foo Topics shall include: food handling and prefood-borne illnesses, procedures, leftover and temperature comand service, nutrition sanitation requirement provided to any dietal employee within 30 d. This Administrative Remet as evidenced by	serving and distribution ood handling policies, time trols for food preparation and hydration, and hts. The training shall be ry or food-handling ays of hire and annually.	S 506	The Courtyard Westhills Village operates in compliance with all relevant regulations an professional standards in a manner that en and appropriate care for all residents that van the reference to S506 of 1. Courtyard Westhills Village was found not compliance to ensure required dietary train completed within 30 days of hire for one seannually for one cook. This action has the affect all residents. 2. Dietary in-service training has been updated to safety and handling class has been and will be completed by all dining staff in a licensed building within 30 days of hire and Employee F training was completed on August 14, 2023. Reviewed all other dietar employees in licensed building for complet training and all will be completed by Septer 2023.	d sures safe ve serve. It in ing was erver and potential to the Dakota eeen added the I annually. gust 9, d on y ion of			

South Dakota Department of Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION A. BUILDING:			(X3) DATE SURVEY COMPLETED			
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S 506	dietary services train policy review, the pro required dietary train days of hire for one of (G) and annually for Findings include: 1. Personnel file reviservices training material services training material services and document of the completed any requisafety, handwashing techniques, food-bord distribution procedur policies, time and tempreparation and services.	aing manual, interview, and covider failed to ensure aing was completed within 30 of one recently hired server one of one cook (F). It was and review of the dietary mual revealed: on 10/21/22. Interest air was a completed within 30 days of his events in the control of the cook of the dietary training (food and in the cook of th	S 506	3.An audit will be completed mo Services Director or Designee for compliance that required dietary and complete within 30 days of audit will be completed on all die buildings and new hires in licens findings will be reported to the 0 the following 6-month period and will be determined based on the input from the QA group, which director. 4.This correction will be completed 2023.	or 6 months to ensure a training is up to date thire and annually. An etary staff in licensed sed buildings. These DA group monthly for d continued audits findings and the includes the medical				
	*She had completed -Food safety, handwrequirements training -Food-borne illnessed controls for food prein June 2023. *There was no docu completed food hand serving and distribut handling policies, and training during the particular process of the manual and interview director of dietary see *The manual include organized by the model of the safety of	rashing, and sanitation g in April 2023. es and time and temperature paration and service training mentation to support she had dling/preparation techniques, ion procedures, leftover food and nutrition and hydration ast year. the dietary services training on on 8/1/23 at 1:15 p.m. with ervices D revealed:							

South Dakota Department of Health

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

TITLE

(X6) DATE