

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

PRINTED: 01/28/2021  
FORM APPROVED  
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  435064	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____  B. WING _____	(X3) DATE SURVEY COMPLETED  01/14/2021
NAME OF PROVIDER OR SUPPLIER  AVANTARA NORTH			STREET ADDRESS, CITY, STATE, ZIP CODE 1620 NORTH 7TH STREET RAPID CITY, SD 57701	
(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 000	INITIAL COMMENTS  Surveyor: 40788 A COVID-19 Focused Infection Control Survey was conducted by the South Dakota Department of Health Licensure and Certification Office on 1/14/21. Avantara North was found not in compliance with 42 CFR Part 483.80 infection control regulation: F883.  Avantara North was found in compliance with 42 CFR Part 483.10 resident rights and 42 CFR Part 483.80 infection control regulations: F550, F562, F563, F583, F880, F882, F885, and F886.  Avantara North was found in compliance with 42 CFR Part 483.73 related to E-0024(b)(6).	F 000	STATEMENT OF COMPLIANCE: The following represents the plan of correction for the alleged deficiencies cited during an infection Control Survey that was conducted on 1/14/2021. Please accept this plan of correction as the facility's Credible Allegation of Compliance. The completion and execution of this plan of correction does not constitute an admission of guilt or wrongdoing on the part of the facility. This plan of correction is completed in good faith and as the facility's commitment to quality outcomes for the residents. In addition, this plan of correction is completed as it is required by law.	
F 883 SS=D	Total residents: 51 Influenza and Pneumococcal Immunizations CFR(s): 483.80(d)(1)(2)  §483.80(d) Influenza and pneumococcal immunizations §483.80(d)(1) Influenza. The facility must develop policies and procedures to ensure that- (i) Before offering the influenza immunization, each resident or the resident's 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 representative has the opportunity to refuse immunization; and (iv) The resident's medical record includes documentation that indicates, at a minimum, the	F 883	1. No immediate correction could be made for Resident 1. Resident 1 is unable to receive the influenza vaccine until 2/11/21 because he received a two dose COVID-19 vaccine on 1/7/21 and 1/28/21. Per our policy, there should be a 14-day time span between the COVID-19 vaccine and any other type of vaccine. The resident will be given the influenza vaccine 14 days after his last COVID-19 vaccine dose on 2/11/21 unless contraindicated per guidelines. Resident 1's pneumococcal records were included in his medical record on 1/14/2021.  2. All residents have the potential to be affected by this deficient practice. All residents will be audited to ensure they have either received the vaccines or have been offered them per policy; and if they decline, education is provided and documented.	02/22/2021

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

*Krista Dittus* Krista Dittus

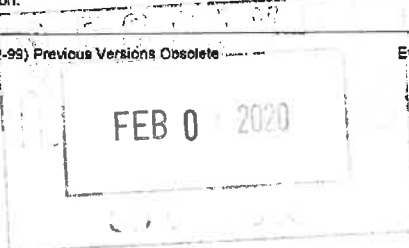
TITLE

*Administrator* Administrator

(X6) DATE

*2/5/21* 2/5/21

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 883	<p>Continued From page 1 following:</p> <p>(A) That the resident or resident's representative was provided education regarding the benefits and potential side effects of influenza immunization; and</p> <p>(B) That the resident either received the influenza immunization or did not receive the influenza immunization due to medical contraindications or refusal.</p> <p>§483.80(d)(2) Pneumococcal disease. The facility must develop policies and procedures to ensure that-</p> <p>(i) Before offering the pneumococcal immunization, each resident or the resident's 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 representative has the opportunity to refuse immunization; and</p> <p>(iv) The resident's medical record includes documentation that indicates, at a minimum, the following:</p> <p>(A) That the resident or resident's 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>This REQUIREMENT is not met as evidenced by: Surveyor: 40788 Based on record review, review of the 2020</p>	F 883	<p>Continued from page 1</p> <p>If they have received either vaccine elsewhere, their immunization records will be obtained and included in their medical records.</p> <p>3. The Director of Nursing (DON) or Designee in collaboration with the Interdisciplinary Team (IDT), Governing Body, Administrator and Medical Director reviewed the Influenza and Pneumococcal Vaccination Policies for residents. The DON or Designee will educate all professional nurses, to include Employee B who monitors and tracks resident immunizations for the facility, on the Influenza and Pneumococcal policies for residents no later than 2/12/2021. Those not in attendance due to vacation, sick/medical leave or casual work status will be educated prior to their first shift back to work. The cited deficiency will be shared during the education. Any resident effected by this deficient practice will be audited and offered both vaccines per policy. If they decline, they will receive education and their declination form will be included in the medical record. If a resident has received the vaccine elsewhere, records will be obtained and included in their medical record.</p> <p>4. The DON or Designee will audit 5 current residents and all new admissions weekly for four weeks, then monthly for two months to ensure all vaccines are offered, administered or declined, or obtained from an outside facility and documented in the medical record per policy. Results of the audits will be discussed by the DON or Designee monthly at the Quality Assurance and Performance Improvement (QAPI) Committee meetings with the Interdisciplinary Team (IDT) and the Medical Director for analysis and recommendations for continuation.</p>		

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F 883	<p>Continued From page 2</p> <p>influenza tracking log, interview, and policy review, during a pandemic (coronavirus disease 2019) the facility failed to ensure:</p> <p>*One of five randomly sampled residents (1) had documentation for the annual influenza vaccination.</p> <p>*One of five randomly sampled residents (1) had documentation for a pneumonia vaccination.</p> <p>*A process had been established to identify , track and monitor residents' influenza and pneumonia vaccination status.</p> <p>Findings include:</p> <p>1. Review of resident 1's care record revealed he:</p> <p>*Had been admitted on 10/16/18.</p> <p>*Had no influenza vaccination documentation for the current flu season.</p> <p>*Had no pneumonia vaccination documentation.</p> <p>Review of the provider's 2020 influenza tracking log revealed:</p> <p>*The facility administered annual influenza vaccinations for their residents on 10/14/20.</p> <p>*Resident names had been highlighted pink if they had received their vaccination on that date.</p> <p>*A note was written beside a resident's name if the vaccination had been declined or already received.</p> <p>*Resident 1's name was not highlighted in pink and there was no notation beside his name.</p> <p>Telephone interview on 1/14/21 between 1:15 p.m. and 1:30 p.m. with administrator A and licensed practical nurse (LPN) B regarding resident vaccinations revealed:</p> <p>*LPN B was responsible for ensuring resident vaccinations had been current and documented in the resident record.</p> <p>*She stated resident 1 was hospitalized when</p>	F 883	<p>Continued from page 2</p> <p>discontinuation or revision of the audits based on the findings.</p> <p>5. 02/22/2021</p>	

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F 883	<p>Continued From page 3</p> <p>influenza vaccinations had been administered on October 14, 2020.</p> <p>*Administrator A stated resident 1's power of attorney had signed a consent earlier in October 2020 for him to receive an influenza vaccination.</p> <p>*She confirmed the influenza tracking log had not been reconciled to ensure residents who had been unavailable to receive their vaccination had subsequently been vaccinated.</p> <p>*LPN B stated resident 1 had received a pneumonia vaccination but it was not documented in his care record.</p> <p>*LPN B and administrator A confirmed there was currently no process to identify, track and monitor all residents' influenza and pneumonia vaccinations for completion.</p> <p>-Both agreed there should have been.</p> <p>Review of the provider's revised 9/1/20 Influenza Vaccination policy for residents revealed: *Policy: -"1. All residents will be offered and encouraged to received the influenza vaccine annually,..." -"3. A log will be maintained documenting how many residents received the vaccine, as well as those who refused or did not get vaccinated."</p> <p>Review of the provider's revised 10/15/20 Pneumococcal Vaccination policy revealed: *Procedures: -"4. Pneumococcal vaccination will be offered upon admission."</p>	F 883			