

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

PRINTED: 03/31/2022  
FORM APPROVED  
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>435118</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>03/09/2022</b>
NAME OF PROVIDER OR SUPPLIER  <b>PRAIRIE VIEW HEALTHCARE CENTER</b>			STREET ADDRESS, CITY, STATE, ZIP CODE <b>401 SOUTH FIRST AVENUE WOONSOCKET, SD 57385</b>	
(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: 06365 A recertification health survey for compliance with 42 CFR Part 483, Subpart B, requirements for Long Term Care facilities, was conducted from 3/7/22 through 3/9/22. Prairie View Healthcare Center was found not in compliance with the following requirement: F576.	F 000		
F 576 SS=E	Right to Forms of Communication w/ Privacy CFR(s): 483.10(g)(6)-(9)  §483.10(g)(6) The resident has the right to have reasonable access to the use of a telephone, including TTY and TDD services, and a place in the facility where calls can be made without being overheard. This includes the right to retain and use a cellular phone at the resident's own expense.  §483.10(g)(7) The facility must protect and facilitate that resident's right to communicate with individuals and entities within and external to the facility, including reasonable access to: (i) A telephone, including TTY and TDD services; (ii) The internet, to the extent available to the facility; and (iii) Stationery, postage, writing implements and the ability to send mail.  §483.10(g)(8) The resident has the right to send and receive mail, and to receive letters, packages and other materials delivered to the facility for the resident through a means other than a postal service, including the right to: (i) Privacy of such communications consistent with this section; and (ii) Access to stationery, postage, and writing implements at the resident's own expense.	F 576	1. No immediate corrective action could be taken for residents: 1, 4, 6, 7, 14, 16, 21, 22, 28 and 33. All residents receiving mail are at risk.  2. Administrator, Director of Nursing and the Interdisciplinary Team have reviewed the Resident Mail Policy which included the timeliness of mail delivery. All staff were educated on the mail delivery policy on 3/31/22. Staff not in attendance will be educated on mail delivery prior to their next working shift.  3. The Administrator or designee will audit the facility mail delivery 3-5 times weekly for four weeks then; weekly for 2 months to ensure timely mail delivery. The results of these audits will be taken to the monthly QAPI Committee Meeting for further review and recommendations for continuing or discontinuing the audits.	3/31/2022

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

TITLE

(X6) DATE

*Kayla Evans*

Executive Director

3/31/2022

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.

MAR 31 2022

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NAME OF PROVIDER OR SUPPLIER  <b>PRAIRIE VIEW HEALTHCARE CENTER</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>401 SOUTH FIRST AVENUE WOONSOCKET, SD 57385</b>
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F 576	<p>Continued From page 1</p> <p>§483.10(g)(9) The resident has the right to have reasonable access to and privacy in their use of electronic communications such as email and video communications and for internet research.</p> <p>(i) If the access is available to the facility</p> <p>(ii) At the resident's expense, if any additional expense is incurred by the facility to provide such access to the resident.</p> <p>(iii) Such use must comply with State and Federal law.</p> <p>This REQUIREMENT is not met as evidenced by:</p> <p>Surveyor: 43021</p> <p>Based on interview and policy review, the provider failed to deliver mail daily to ten of ten residents (1, 4, 6, 7, 14, 16, 21, 22, 28, and 33) within twenty-four hours after it was delivered to the local post office. Findings include:</p> <p>1. Interview on 3/8/22 at 2:30 p.m. during the resident group meeting revealed:</p> <ul style="list-style-type: none"> <li>*Ten of ten residents (1, 4, 6, 7, 14, 16, 21, 22, 28 and 33) agreed they did not get their mail daily.</li> <li>*Sometimes the mail was only delivered a few days a week, and the residents would then find a stack of mail had been delivered to their rooms.</li> <li>*One of the residents (6) was concerned that she was not getting her newspaper delivered daily.</li> </ul> <p>Interview on 3/8/22 at 3:27 p.m. with activity director B revealed:</p> <ul style="list-style-type: none"> <li>*Maintenance supervisor (MS) C, executive director A, or she would pick up the mail at the local post office.</li> <li>*MS C and she were certified nursing assistants (CNA) and "helped out on the floor" by working shifts as CNAs.</li> <li>*Working CNA shifts prevented them from going</li> </ul>	F 576		
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F 576	<p>Continued From page 2</p> <p>to get the mail at the post office.</p> <p>*At times, two to three days would pass before mail was picked up and delivered during the weekdays.</p> <p>*She worked Monday through Friday.</p> <p>*She could not confirm mail delivery on Saturdays.</p> <p>*She did confirm daily mail delivery had not happened, including on Saturday.</p> <p>*She needed to work on the problem with mail delivery.</p> <p>Review of the provider's 2015 Resident Mail Policy revealed "Mail goes to the resident within 24 hours of postal service delivery."</p>	F 576		



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E 000	Initial Comments  Surveyor: 06365 A recertification survey for compliance with 42 CFR Part 482, Subpart B, Subsection 483.73, Emergency Preparedness, requirements for Long Term Care Facilities, was conducted from 3/7/22 through 3/9/22. Prairie View Healthcare Center was found in compliance.	E 000		

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

TITLE

(X6) DATE

*Kayla Evans*

Executive Director

3/31/2022

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K 321	<p>Continued From page 1</p> <p>b. Laundries (larger than 100 square feet) c. Repair, Maintenance, and Paint Shops d. Soiled Linen Rooms (exceeding 64 gallons) e. Trash Collection Rooms (exceeding 64 gallons) f. Combustible Storage Rooms/Spaces (over 50 square feet) g. Laboratories (if classified as Severe Hazard - see K322)</p> <p>This REQUIREMENT is not met as evidenced by: Surveyor: 27198 Based on observation, testing, and interview the provider failed to maintain one hazardous area (boiler room/maintenance office) as required. Findings include:</p> <p>1. Observation and testing on 3/9/22 at 1:52 p.m. revealed the door to the boiler room/maintenance office was a fire rated door provided with an automatic closer. That door had an electronic latch to control access into the room. Testing of that door revealed the latch did not engage under the power of required automatic self-closing feature.</p> <p>Interview with the director of maintenance at the time of the observation confirmed that finding.</p> <p>The deficiency affected one of numerous requirements for hazardous storage rooms and 100% of the smoke compartment.</p>	K 321		



South Dakota Department of Health

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S 000	Compliance/Noncompliance Statement  Surveyor: 27198 A licensure survey for compliance with the Administrative Rules of South Dakota, Article 44:73, Nursing Facilities, was conducted from 3/7/22 through 3/9/22. Prairie View Healthcare Center was found not in compliance with the following requirement(s): S408.	S 000		
S 408	44:73:12:09(1-15) Service Area in Care Units  Each care unit must shall contain a service area which includes the following: (1) Staff station with convenient access to handwashing facilities; (2) Staff charting; (3) Communications; (4) Storage for supplies and staff personal effects; (5) Staff toilet room; (6) Nurses' office; (7) Clean workroom for the storage and assembly of supplies for nursing procedures which contains a work counter and sink; (8) Soiled workroom which contains a work counter with a handwashing facility, a waste receptacle, soiled linen receptacles, a clinical sink with an exposed water trap seal, siphon jet or blowout action, and a bedpan flushing device; (9) Medicine room adjacent to the staff station with a sink, refrigerator, locked storage, and facilities for preparation and administration of medication; (10) Clean linen storage area in an enclosed storage space; (11) Nourishment station containing refrigerated storage, self-dispensing ice machine, and a sink for serving between-meal nourishments; (12) Equipment storage room on each resident wing or floor for storage of resident care	S 408	1. The clinical sink in the South Soiled Utility Room was repaired. All residents were potentially at risk.  2. The Maintenance Director and Executive Director will ensure all clinical sinks throughout the facility are properly functioning.  3. The Maintenance Director or designee will audit to ensure all clinical sinks throughout the facility are properly functioning monthly for 3 months. Audit findings will be discussed by the Maintenance Director in monthly QAPI meetings for review and recommendations on the continuation/discontinuation of the audit and any further action required.	3/31/2022

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

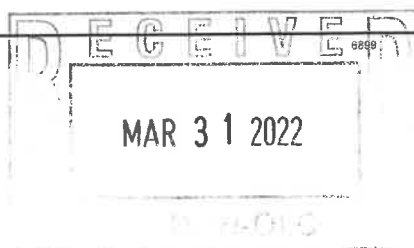
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S 408	<p>Continued From page 1</p> <p>equipment;</p> <p>(13) Resident bathing facilities containing one shower, bathtub, or whirlpool for each 15 beds not individually served. Whirlpool units with lifts may serve 30 beds;</p> <p>(14) Janitor's closet for storage of housekeeping supplies and equipment which contains a floor receptor or service sink. The janitor's closet space and equipment may be incorporated into the soiled utility room;</p> <p>(15) Multipurpose rooms for staff, residents, and residents' families for conferences, reports, education, training sessions, and consultation.</p> <p>This Administrative Rule of South Dakota is not met as evidenced by: Surveyor: 27198 Based on observation, and interview the provider failed to furnish every care unit with a clinical sink as required. Findings include:</p> <p>1. Observation and interview on 3/9/22 at 12:02 p.m. revealed a clinical sink in the soiled utility room of the south win care unit. That clinical sink had a cover over it and an "out of order DO NOT use" sign on it. Not having a functioning clinical sink in that care unit does not meet the requirements for the care unit.</p> <p>Interview with the administrator at the time of the observation confirmed that finding.</p> <p>The deficiency affected one of numerous requirements for care units.</p>	S 408		
S 000	<p>Compliance/Noncompliance Statement</p> <p>Surveyor: 06365</p>	S 000		

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S 000	Continued From page 2  A licensure survey for compliance with the Administrative Rules of South Dakota, Article 44:74, Nurse Aide, requirements for nurse aide training programs, was conducted from 3/7/22 through 3/9/22. Prairie View Healthcare Center was found in compliance.	S 000		

