

CALIFORNIA HEALTH AND HUMAN SERVICES AGENCY  
DEPARTMENT OF PUBLIC HEALTH

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>555445</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED  <b>12/10/2008</b>
NAME OF PROVIDER OR SUPPLIER <b>ANAHEIM CREST NURSING CENTER</b>		STREET ADDRESS, CITY, STATE, ZIP CODE <b>3067 W. ORANGE AVE., ANAHEIM, CA 92804 ORANGE COUNTY</b>		
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	<p>The following reflects the findings of the Department of Public Health during a Complaint Investigation visit.</p> <p>Representing the Department of Public Health: [REDACTED], HFEN</p> <p>CLASS AA CITATION -- PATIENT CARE 06-1242-0005824-S Complaint(s): CA00170421</p> <p>72311(a)(1)(A) Nursing Service - General (a) Nursing service shall include, but not be limited to, the following: (1) Planning of patient care, which shall include at least the following: (A) Identification of care needs based upon an initial written and continuing assessment of the patient's needs with input, as necessary, from health professionals involved in the care of the patient. Initial assessments shall commence at the time of admission of the patient and be completed within seven days after admission.</p> <p>72311(a)(1) Nursing Service - General (a) Nursing service shall include, but not be limited to, the following: (1) Planning of patient care, which shall include at least the following.</p> <p>72311(a)(2) Nursing Service - General (a) Nursing service shall include, but not be limited to, the following: (2) Implementing of each patient's care plan according to the methods indicated. Each patient's care shall be based on this plan.</p>			

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	<p><b>Continued From page 1</b></p> <p>The facility failed to ensure nursing care included a continuing assessment of Patient A. On 9/9/08, Patient A choked when he was fed the incorrect diet and choked on a partially consumed sandwich, which he obtained from the nourishment cart later that same day. However, there was no documented evidence Patient A was assessed for possible aspiration. In addition, there was no documented evidence of administration of emergency treatment for choking and/or aspiration.</p> <p>The facility failed to implement the care plans that addressed Patient A's dysphagia (difficulty with swallowing). The care plans stipulated Patient A receive a therapeutic diet and staff provide caregiver training and safety during meals. On 9/9/08, Patient A had two episodes of choking when he received the incorrect diet for dinner and consumed part of a sandwich later in the evening. As a result, Patient A died; the patient's death was determined to be caused by "mechanical asphyxiation" secondary to aspiration of a food bolus.</p> <p>Patient A was admitted to the facility on 7/25/08, with diagnoses that included status post left hip ORIF (open reduction internal fixation), dementia and gastro esophageal reflux disease. On 8/21/08, a diagnosis of dysphagia was added to the health record.</p> <p>An H&amp;P (history and physical) dated 7/26/08, described Patient A as incapable of making his own healthcare decisions. Patient A's daughter was listed as the individual responsible for making</p>				

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	<p><b>Continued From page 2</b></p> <p>healthcare decisions and life sustaining treatment choices.</p> <p>The patient's health record contained a document dated 8/11/08 and signed by Patient A's daughter. The document outlined the patient's wishes, such as CPR, life sustaining treatments and acute care hospital transfers. According to the patient's wishes, CPR (cardiopulmonary resuscitation) would not be performed, "...in the event of a medical emergency, where the patient was determined to be in an "irreversible unconscious or persistent vegetative state; or (2) terminally ill ... or (3) other circumstances arise where burdens of the treatment outweigh expected benefits to the [patient]."</p> <p>Physician's admission orders, dated 7/25/08, included a therapeutic diet, described as puree and honey-thickened liquids. In addition, the physician stipulated all crushable medications were to be crushed before administration.</p> <p>On 7/25/08, a plan of care was initiated to address Patient A's ADL (activity of daily living) requirements. Patient A was determined to be "totally dependent" upon staff for all ADLs, such as hygiene, bed mobility and transfers to and from his wheelchair.</p> <p>On 7/26/08, the physician ordered "swallow treatments" daily, five times a week, for four weeks, which included "direct dysphagia treatment...ongoing swallow analysis, diet modification, as needed, OM (oral motor) tasks;</p>				

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	<p><b>Continued From page 3</b></p> <p>compensatory...strategies; thermal stimulation; caregiver instruction."</p> <p>On 7/26/08, a plan of care was initiated by the SLP (speech language pathologist). The treatment plan reiterated the physician's order for "swallow treatments."</p> <p>On 8/21/08, Patient A underwent a "Videofluoro Swallow Study" as ordered by the physician. The following "impression" was included within the test results, "[Patient A] presents with moderate oral pharyngeal phase dysphagia, silent aspiration with nectar thick liquids and thin...mealtime protocol must include puree and honey thick liquids...encourage [Patient A] to cough/clear at end of meal...family reports incidences of staff attempting to feed patient bread/solids...make sure his tray is checked for proper consistency of food/liquids..." In addition, documentation included, "recommendation comment: "...high risk for aspiration, particularly with thin, nectar thick liquids...must not be fed fast...must be fed puree and honey thick liquids...crush meds when possible..."</p> <p>On 8/22/08, the physician re-ordered swallow treatments, "to focus on caregiver instruction and safety while eating."</p> <p>On 8/25/08, the physician ordered RNA (restorative nurse assistant) feeding program.</p> <p>On 8/28/08, the physician discontinued swallow treatments by the speech therapist, as Patient A's</p>				

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	<p><b>Continued From page 4</b></p> <p>"current potential reached."</p> <p>On 9/1/08, the plan of care that addressed Patient A's dysphagia was updated to include, the use of a "Nosey" (special drinking cup) cup and "prn" (as needed) suctioning of the patient's oral secretions.</p> <p>Review of the MAR (medication administration record) revealed the licensed nurse checked the patient's therapeutic diet, for all three meals, from 9/1/08 through 9/9/08.</p> <p>On 9/9/08 at 1715 hours, the licensed nurse documented Patient A was observed in the dining room, "for feeding program...visited by the daughter at meal time...consumed 30% of the dinner tray."</p> <p>At 1745 hours, the licensed nurse documented Patient A was observed in the hallway of Station II. According to the documentation, the patient's daughter left for home. The licensed nurse documented "alert and responsive to pain and tactile stimuli...as usual, behavior problem arise when reposition for comfort in the wheelchair."</p> <p>At 1950 hours, the licensed nurse documented, "when C.N.A. (certified nurse assistant) was about to put him [Patient A] back to bed for HS (hour of sleep) care, heard C.N.A. called for help...immediately checked and assisted [Patient A] ... noted with SOB (short of breath) and getting bluish cyanosis...called 911...after 5 minutes paramedics arrived....took over."</p> <p>However, there was no documented evidence the</p>				

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	<p><b>Continued From page 5</b></p> <p>licensed nurse assessed Patient A to determine whether or not the patient aspirated. In addition, based on the licensed nurse's documentation, emergency treatment, such as administration of oxygen and/or suctioning, was not provided.</p> <p>The following documentation was included within the "Emergency Medical Services" report dated 9/9/08. EMS was summoned by facility staff at 2003 hours; EMS personnel arrived at 2007 hours. Under the heading "Chief Complaint," the following was documented, "Cardiac arrest for greater than 10 minutes...found lying on bed in F/A (full arrest)." Patient A was described with cyanosis and levidity (pooling of blood) to the back, spine and pelvis areas and pupils were fixed and dilated. The area titled "Treatment/Response," included "DNR (do not resuscitate) provided by staff...base contact made and advised to discontinue any ALS (advanced life support) intervention." At 2027 hours, documentation revealed no pulse, no respirations, no blood pressure and EKG "asystole" (no heartbeat).</p> <p>An unsigned "Record of Death" was discovered in the patient's health record. Patient A's "principle cause of death" was listed as "cardiac arrest."</p> <p>On 11/25/08, Patient A's daughter forwarded a copy of the certificate of death to the Department; along with a written request for an investigation into the death of Patient A.</p> <p>On 12/10/08 at approximately 0900 hours, an interview was conducted with an administrative</p>			

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TITLE

(X6) DATE

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. Except for nursing homes, the findings 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.