

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

PRINTED: 01/30/2023
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 555673	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____		(X3) DATE SURVEY COMPLETED C 01/24/2023
NAME OF PROVIDER OR SUPPLIER ASBURY PARK NURSING & REHABILITATION CENTER			STREET ADDRESS, CITY, STATE, ZIP CODE 2257 FAIR OAKS BLVD. SACRAMENTO, CA 95825		
(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 The following reflects the findings of the California Department of Public Health during an abbreviated survey for the investigation of complaint #CA00814843. Representing the Department of Public Health: Health Facilities Evaluator Nurse, 38834 The inspection was limited to the specific complaint investigated and does not represent the findings of a full inspection of the facility. F 658 SS=D Services Provided Meet Professional Standards CFR(s): 483.21(b)(3)(i) §483.21(b)(3) Comprehensive Care Plans The services provided or arranged by the facility, as outlined by the comprehensive care plan, must- (i) Meet professional standards of quality. This REQUIREMENT is not met as evidenced by: Based on interview and record review, the facility failed to provide necessary care and perform an accurate skin assessment for one of three sampled residents (Resident 1) by failing to ensure Resident 1's surgical incision was identified during admission and monitored for signs and symptoms of infection. This failure had the potential to contribute to Resident 1 developing an infection at the surgery site for which resident had to be re-admitted to the hospital and had another surgery. Findings:	F 000	<i>2/7/23 Doc accepted RVP</i> The plan of correction is prepared in compliance with state and federal statutes and regulations and is not intended to be an admission to or agreement with the allegations contained herein. This plan of Correction constitutes the facility's written redible allegation of compliance for the deficiencies noted. 1) Resident discharged from the facility. 2) We reviewed all new admissions over the last 30 days to verify if a secondary skin assessment was completed and appropriate treatment orders were in place for identified skin conditions. No other residents were found to be affected. 3) IDT will review all new admissions the day after admission including skin assessments and discuss any wound care items needing to be addressed by the team. The treatment nurse will do a secondary assessment the following day after admission to document all skin conditions and ensure that appropriate treatment was in place. All licensed nurses will be inserviced on completing skin assessment and documentation of identified skin conditions upon 4) Medical records will include auditing the documentation of skin assessments daily a minimum of 5 days a week. Audits will be forwarded to the nursing team and the Director of Nursing for review. The QA will review monthly for compliance. 5) Corrective action was taken on 1/25/23. In-servicing with licensed staff was completed on the 1/31/23.		

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

TITLE

(X6) DATE

Nina P. Poutalis *Administrator* *2/3/2023*

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 658	<p>Continued From page 1</p> <p>A review of Resident 1's Admission Record indicated Resident 1 was admitted to the facility earlier this year with multiple diagnoses, which included post-operative care after having a surgery on the back of her neck and diabetes (high blood sugar).</p> <p>A review of Resident 1's Minimum Data Set (MDS, an assessment and care screening tool), dated 11/23/22 indicated resident's cognition was intact (ability to think and process information) and she did not exhibit behaviors of rejecting treatments or care.</p> <p>A review of Resident 1's 48- hour baseline care plan (a document that included the necessary health information to properly care for the resident immediately upon admission in order to reduce the likelihood of negative outcomes shortly after admission) dated 11/16/22, at 11:16 p.m., indicated resident's skin was intact. The care plan failed to identify that Resident 1 had a surgical incision on the back of her neck.</p> <p>A review of Resident 1's Initial Admission Assessment, titled "Skin Condition," dated 11/16/22 included a body image front and back with corresponding numbers to accurately identify the area of concern and/or location of the wound(s). The assessment indicated Resident 1 had a dry scab on her chest area and bruising on left arm but failed to identify the surgical incision on the back of her neck.</p> <p>During a telephone interview on 12/14/22, at 9:20 a.m., Resident 1 stated that her understanding was that she was admitted to the facility so the nurses will monitor her surgical incision site that it was healing well and monitor for signs of</p>	F 658			

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F 658	<p>Continued From page 2</p> <p>infection. Resident 1 stated that every day since being admitted she kept asking nurses to check on her surgical site, but they kept saying the, "Doctor will check on it once I go to see him at the end of the month." Resident 1 stated that about two (2) days after her admission, she felt her neck dressing was wet and felt wet drainage down her neck. Resident 1 added, "I ...was sore and uncomfortable...I...begged them to check on my incision, kept saying it was painful...I was so scared I would develop an infection." Resident stated that about a week after her admission, one of the male nurses finally checked on her wet dressing and changed it. Resident stated she had told multiple staff, including her doctors that her dressing was wet and the wound site was painful, but they repeatedly told her that she will be seeing her surgeon soon. Resident 1 stated that when her surgeon checked her incision site on 11/28/22, he told her, "Your wound is really infected...will need to perform another surgery."</p> <p>A review of Resident 1's clinical records indicated there was no documented evidence that the facility identified and assessed her surgical incision for three days after admission. On 11/19/22, three (3) days after her admission nurses identified that Resident 1 had "surgical incision ... to the back of the neck with steri-strips (strips of tape to keep the wound edges together)." Resident 1's treatment administration record (TAR, a flowsheet where nurses document monitoring skin issues and wound care) indicated that on 11/20/22 nursing staff initiated monitoring the resident's incision on the back of her neck for signs of infection.</p> <p>A review of the skin/wound progress note dated 11/22/22, at 1:16 p.m., six days after admission,</p>	F 658			

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F 658	<p>Continued From page 3</p> <p>indicated Resident 1's surgical site was assessed by Treatment Nurse (TN). The TN documented, "Posterior [back] neck dehiscence [when wound edges separated] 0.5x0.5 cm [centimeters, unit of measurement; equal to 0.39 inches]." The TN note indicated Resident 1's wound was draining small amount of bloody drainage.</p> <p>A review of the Physician Visit Note dated 11/22/22, at 3 p.m., indicated, "Patient noted purulent [thick, white or green drainage indicating unhealthy wound or infection] drainage to back of hard neck collar...Posterior neck midline surgical incision noted with 0.1 cm small opening."</p> <p>A review of the clinical records indicated on 11/25/22 Resident 1 was prescribed Clindamycin (a medication to treat "possible post operative infection") 150 milligram (unit of measurement), eight (8) days after she was admitted to the facility. Per Resident 1's clinical records, she was hospitalized after a visit with her surgeon on 11/28/22 and never came back to facility.</p> <p>During a concurrent interview and record review on 12/14/22, at 1:15 p.m., Nurse Practitioner (NP, trained, licensed, and independent health care clinician who concentrate on managing patient's illnesses) stated Resident 1 was transferred to the facility for postoperative care. The NP stated she was aware that Resident 1's surgical incisions edges separated and the resident had to have another surgery less than 2 weeks after staying in the facility. The NP was asked if the infection could have been prevented if it was assessed during admission and consistently monitored for signs of infection. Upon reviewing Resident 1's transfer orders, the NP stated there was no order to monitor resident's surgical</p>	F 658			

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F 658	<p>Continued From page 5</p> <p>During a concurrent interview and record review on 12/14/2022, at 12:40 p.m., Director of Nursing (DON) stated she was made aware of Resident 1's concerns with surgical incision care after the resident left the facility. Upon reviewing Resident 1's admission assessment the DON confirmed that no surgical incision was identified during admission and no assessment of the site was documented. The DON stated her expectation was for admitting nurse to perform a complete and thorough inspection of all skin issues and to accurately document on Resident 1's admission assessment. The DON added that if the resident had surgical incision, she expected nurses to assess it from day one, monitor the surgical site for signs and symptoms of infection, and document the assessments. The DON acknowledged that if Resident 1's surgical wound was identified and assessed early during admission, the outcome might be different, and the second surgery might have been avoided.</p> <p>A review of facility's policy titled, "Admission Assessment and Follow Up: Role of the Nurse," revised 9/12, indicated the purpose of the admission assessment was to gather the information about the resident's physical, emotional, and psychosocial condition upon admission for the purpose of managing the resident. The policy indicated the gathered information will be used to initiate the care plan guiding resident's care. The policy directed nurses to "Conduct a physical assessment, including...skin and skin assessment...Contact...Physician to communicate and review the findings of the initial assessment and any other pertinent information and obtain admission orders that are based on</p>	F 658			

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F 658	Continued From page 6 these findings...Documentation...Information should be recorded in the resident's medical record:...date and time the assessment was performed."	F 658			