

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

PRINTED: 05/01/2020
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 315369	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____		(X3) DATE SURVEY COMPLETED 02/26/2020
NAME OF PROVIDER OR SUPPLIER CARE ONE AT VALLEY			STREET ADDRESS, CITY, STATE, ZIP CODE 300 OLD HOOK ROAD WESTWOOD, NJ 07675		
(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 CENSUS: 97 SAMPLE SIZE: 20 A Recertification Survey was conducted to determine compliance with 42 CFR Part 483, Requirements for Long Term Care Facilities. Deficiencies were cited for this survey.	F 000			
F 692 SS=D	Nutrition/Hydration Status Maintenance CFR(s): 483.25(g)(1)-(3) §483.25(g) Assisted nutrition and hydration. (Includes naso-gastric and gastrostomy tubes, both percutaneous endoscopic gastrostomy and percutaneous endoscopic jejunostomy, and enteral fluids). Based on a resident's comprehensive assessment, the facility must ensure that a resident- §483.25(g)(1) Maintains acceptable parameters of nutritional status, such as usual body weight or desirable body weight range and electrolyte balance, unless the resident's clinical condition demonstrates that this is not possible or resident preferences indicate otherwise; §483.25(g)(2) Is offered sufficient fluid intake to maintain proper hydration and health; §483.25(g)(3) Is offered a therapeutic diet when there is a nutritional problem and the health care provider orders a therapeutic diet. This REQUIREMENT is not met as evidenced by: Based on observation, interviews, and record review, it was determined that the facility failed to identify and address weight loss in a timely manner for 1 of 7 residents reviewed for nutrition	F 692		4/19/20	
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE			TITLE		(X6) DATE
Electronically Signed					03/11/2020

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 692	<p>Continued From page 1 (Resident #21).</p> <p>This deficient practice was evidenced by the following:</p> <p>According to the Admission Record, Resident #21 was admitted to the facility with diagnoses that included, but were not limited to, [REDACTED]</p> <p>Review of the Annual Minimum Data Set (MDS), an assessment tool dated [REDACTED], reflected the resident had a Brief Interview for Mental Status (BIMS) of [REDACTED]. The Annual MDS also reflected Resident #21 was on a [REDACTED].</p> <p>On 02/25/20 at 10:17 AM, the surveyor observed Resident #21 sitting up in bed with a breakfast tray in front of him/her. At that time, Resident #21 stated he/she had one egg and one muffin for breakfast. Resident #21 stated he/she had diabetes and was making an effort to eat healthier by eating less but was not actually on a diet to lose weight, but would welcome the weight-loss. The resident stated he/she would eat more carbohydrates in the morning and protein in the afternoon.</p> <p>Review of the Order Summary Report, printed on 02/25/20, revealed an order dated 11/10/19, for house carbohydrate consistency/consistent carbohydrate diet (HCC/CCHO) with regular texture and regular, thin liquid consistency, for</p>	F 692	<p>Corrective action was accomplished by monitoring weights as ordered by the MD, resident was reweighed. MD and resident was notified, and assessment by interdisciplinary care team (including RD) was completed.</p> <p>How the Facility Will Identify Other Residents Having the Potential to be Affected by the Same Deficient Practice:</p> <p>All residents with significant weight loss have the potential to be affected. The dietician or designee will audit all residents with significant weight loss to determine which other residents may be affected. Dietician/DON will audit and review all weights as ordered (daily, weekly, monthly) for signs of weight changes.</p> <p>What Measures will be Put into Place or What Systemic Changes will be Made to Ensure That the Deficient Practice Will Not Recur:</p> <p>The Facility Educator will re-educate all licensed personal regarding the weight assessment and weighing and measuring the residents. Weight procedures on all unit are revised to ensure Registered Dietician and Unit Manager review submitted weights to determine if re-weights are warranted. Re-weights to be completed within 72 hours.</p> <p>Weekly weight meetings will expand to cover all units in the facility, weekly and</p>		

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F 692	<p>Continued From page 2</p> <p>██████████.</p> <p>Review of the Clinical Physician Orders revealed an order, dated 11/15/18, for weekly weight-documented, one time a day every Monday with a discontinue date of 02/21/20.</p> <p>Review of the Weight Summary sheet, revealed the following recorded weights for Resident #21: On 12/02/19, the weight was ██████████ On 01/13/20, the weight was ██████████ On 02/17/20, the weight was ██████████.</p> <p>The Weight Summary sheet did not reflect any re-weights noted after the 01/13/20 weight loss of ██████████ and did not reflect any re-weights noted after the 02/17/20 weight loss of ██████████.</p> <p>Review of the Progress Notes (PNs), from 01/13/20 through 02/03/20, revealed that the facility did not address the ██████████.</p> <p>Review of the PNs, dated from 01/13/20 to 02/24/20, revealed that there was no documentation that the physician or nurse practitioner was made aware of the ██████████ between 12/02/19 and 01/13/20 or the ██████████ between 01/13/20 and 02/17/20. The PNs did not reveal Registered Dietitian (RD) documentation that addressed the weight changes within 72 hours. Additionally, the PNs did not reveal an assessment, analysis and conclusion by the multidisciplinary team regarding the weight changes for Resident #21.</p> <p>Review of Resident #21's Care Plan (CP), date initiated 12/16/19, revealed a focus of nutritional status as evidenced by actual/potential weight loss/gain related to therapeutic diet, and chronic wounds. The CP goals included to tolerate diet</p>	F 692	<p>ongoing.</p> <p>Registered Dietician or Nursing will ensure MD is made aware of al significant weight changes and family/resident are aware of status.</p> <p>Resident #21 counseled and educated on weight loss. Nutritional Assessment completed. Labs ordered and ongoing monitoring for dehydration in place.</p> <p>How The Facility Will Monitor Its Corrective Actions to Ensure that the Deficient Practice Will Not Recur, What QAPI(quality assurance performance improvement) will be Put Into Place:</p> <p>Registered Dietician or designee will audit all residents with significant weight loss over 8 weeks until 4/19/2020 and document the number of residents triggering for significant weight loss, as well as notify the resident, family, and MD.</p> <p>Interdisciplinary care team will discuss and review weight change and care plan as well as any dietary recommendations.</p> <p>Will review weekly x 4 weeks until 3/22 and at QAPI monthly and quarterly for next three months.</p>		

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F 692	<p>Continued From page 3</p> <p>and textures/consistency, consume appropriate amounts of food and fluids, and maintain nutritional status. The CP interventions included, but were not limited to, "notify physician and responsible party of significant weight changes."</p> <p>During an interview with the surveyor on 02/21/20 at 9:50 AM, the RD stated all resident notes were in the electronic medical record. The RD stated the Certified Nursing Assistants (CNA) would obtain the weights as ordered and that she would review weekly weights on Tuesday and monthly weights every month. The RD stated the nurses and CNAs should re-weigh a resident if there was a 3-5 lb change or if the weight was outside the ordered parameter.</p> <p>During an interview with the surveyor on 02/21/20 at 12:34 PM, the Registered Nurse Unit Manager (RN/UM) stated she would be responsible to review resident weights also and, if there was a discrepancy, she would either observe or re-weigh the resident herself. The RN/UM stated the CNAs could see the previous weights and should report any discrepancy to the nurse. The RN/UM stated that she would expect a change of 4-5 lb to be re-weighed and reported. In the presence of the surveyor, the RN/UM accessed the electronic medical record and acknowledged there had been no re-weights for Resident #21 in January or February.</p> <p>During an interview with the surveyor on 02/24/20 at 10:16 AM, CNA #1 stated the CNAs would get a list of the residents that needed to be weighed. The CNAs would enter the weight into the computer and were able to see the previous weight. CNA #1 stated if the resident's weight was 3-4 lb different, they would verbally</p>	F 692			

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F 692	<p>Continued From page 4</p> <p>communicate to the nurse and the nursing supervisor, and re-weigh the resident.</p> <p>During an interview with the surveyor on 02/24/20 at 10:53 AM, RN #1 stated the process was for the CNA to obtain the weight and tell the nurses verbally if there was a "big change." RN #1 stated the nurses entered the weights on the Medication or Treatment Administration Record (MAR) in accordance with the physician's orders. RN #1 add that if the nurses see a weight change, they should report it to the physician.</p> <p>During an interview with the surveyor on 02/24/20 at 11:12 AM, the Director of Nursing (DON), stated the CNAs would get a weight list and weigh the resident. If the resident's weighed was under a 100 lb and the weight was up or down by 2 lb or if the resident was over 100 pounds and the weight was up or down 5 lb, the staff would re-weigh the resident and notify the physician. The resident would be re-weighed by the CNA and nurse to see if it was accurate. The DON stated the re-weights would be listed in the electronic medical record weight summary.</p> <p>During an interview with one of the surveyors on 02/25/20 at 10:14 AM, CNA #2 stated CNAs would take a residents weight, compare it to the last one and, if the weights did not match, the CNA should re-weigh the resident and inform the nurses. CNA #2 stated it was important to re-weigh, especially if the resident had a weight loss so they can tell the nurse and the nurse could call the physician.</p> <p>During an interview with one of the surveyors on 02/25/20 at 10:25 AM, RN #2 stated the CNAs would get a list in their computer tasks of which</p>	F 692			

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F 692	<p>Continued From page 5</p> <p>residents needed to be weighed. RN #2 stated it would be the nurses responsibility to look at the weights when they are logged into the computer and that the nurses were able to see the last two or three weights. RN #2 stated a weight change of 2 lb in a day or "maybe" 5 lb would indicate the staff needed to re-weigh the resident to ensure it was accurate and that the re-weigh should be done within the day because if there was a problem, the staff could catch it. RN #2 stated weight loss would be reported to the nursing supervisor and RD.</p> <p>During an interview with one of the surveyors on 02/25/20 at 10:26 AM, RN #3 stated if there was a discrepancy in weights, the staff would obtain a re-weight and if it was a true discrepancy, the nurses would report it to the nursing supervisor and RD.</p> <p>During an interview with the surveyors on 02/25/20 at 12:13 PM, the RD stated Resident #21 should have had a re-weight and that she had requested a re-weight but it was never done. The RD stated if she had a hard time getting the staff to re-weigh a resident, that she would have gone to the DON but there was no record of this communication. The RD acknowledged there had been no re-weight for Resident #21 in the medical record and documentation that a re-weight was discussed with staff.</p> <p>During an interview with the surveyor on 02/26/20 at 10:51 AM, Resident #21 stated he/she always tried to eat healthy but had been in the hospital a few times, which could have resulted in a weight loss, but was unaware of how much weight he/she had lost. Resident #21 stated none of the staff, including the physician</p>	F 692			

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F 692	<p>Continued From page 6</p> <p>and the RD had ever discussed any weight loss plans but that the RD discussed it with him/her on 02/25/20.</p> <p>During an interview with the surveyor on 02/26/20 at 10:55 AM, RN #2 stated Resident #21's normal intake for breakfast was one or two eggs, a bagel or sometimes cereal, coffee or tea. For lunch, the resident ate chicken and one or two bites of dessert. RN #2 stated the resident had been trying to eat more protein in the evening and was cutting down on carbohydrates. RN #2 stated she had a discussion "in passing" with the resident regarding healthy eating. RN #2 stated there was no formal discussion or weight loss plan documented in the resident's medical record and that she should have documented the conversation.</p> <p>Review of the facility's "Weighing and Measuring the Resident" policy and procedure, dated 08/16, revealed to note and record the weight and report significant weight loss/weight gain to the nurse supervisor: 1 month=5%; 3 months=7.5%, and 6 month=10%.</p> <p>Review of facility's "Weight Assessment and Intervention" Policy, dated 01/20, revealed weights would be recorded in each resident's medical record; a change of 5 lb or more in a resident weighing more than 100 lb or 2 lb in a resident weighing less than 100 lb, will be retaken for validation. If weight was verified, nursing would notify the Dietitian. The Dietitian will respond within 72 hours. Assessment information shall be analyzed by the multidisciplinary team and conclusion shall be made regarding the resident's target weight range; calorie, protein and nutrient needs, the</p>	F 692			

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F 692	<p>Continued From page 7</p> <p>relationship between current medical condition or clinical situation and recent fluctuations in weight and whether and to what extent weight stabilization or improvement can be anticipated.</p> <p>Review of the the provided Monthly Weight Meetings, dated 01/06/20, 01/14/20, 01/22/20, 01/29/20, 02/05/20, and 02/12/20, revealed Resident #21 had not been included or listed in the meeting notes and the attached Monthly Weight Report, dated from March 2019 to February 2020, did not have Resident #21 listed on the report at all.</p> <p>Review of the facility's "Change in a Resident's Condition or Status" policy, dated 05/17, revealed the facility shall promptly notify the resident, Physician and representative of changes in the medical/mental condition. The nurse will notify the resident's Physician or physician on call when there had been a significant change in the resident's physical/emotional/mental condition. The nurse will record in the resident's medical record, information relative to changes in the resident's medical/mental condition or status. If significant change in the resident's physical or mental condition occurs, a comprehensive assessment of the resident's condition would be conducted.</p> <p>Review of the Dietitian Job Description, dated revised 01/19, revealed the dietitian was responsible for the nutritional oversight of all residents, which included review of weekly weights, as applicable, and completion of reassessments and care plan revisions on all residents that display a significant weight change. A review of monthly weights and completion of reassessments and care plan</p>	F 692			

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F 692	Continued From page 8 revisions on all residents that display a significant weight change of greater than or equal to 5% in one month. During an interview with the survey team on 02/26/20 at 11:50 AM, the Administrator stated the facility did not have the signed RD job description there so they could not provide it, but that the Job Description-Dietitian that was provided to the surveyors was the same one signed by the RD. NJAC 8:39-17.1(c); 27.2(a)	F 692			