

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

PRINTED: 02/20/2020
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 315125	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 01/23/2020
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NAME OF PROVIDER OR SUPPLIER CRYSTAL LAKE HLTHCARE & REHAB	STREET ADDRESS, CITY, STATE, ZIP CODE 395 LAKESIDE BLVD BAYVILLE, NJ 08721
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(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
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F 000	INITIAL COMMENTS STANDARD SURVEY CENSUS: 178 SAMPLE SIZE: 35 + 9 + 1 CLOSED RECORD A Recertification survey was conducted at Crystal Lake Healthcare and Rehabilitation to determine compliance with 42 CFR Part 483 Requirements for Long Term Care Facilities. Deficiencies were cited as a result of 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:	F 692		2/4/20

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE Electronically Signed	TITLE	(X6) DATE 01/29/2020
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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</p> <p>Based on observation, interview, record review and review of other facility documentation, it was determined that the facility failed to follow the physician's orders for a prescribed diet for 1 of 8 residents (Resident #134) that were reviewed for nutrition. This deficient practice was evidenced by the following:</p> <p>On 1/21/20 at 12:35 PM, the surveyor observed Resident #134 seated at the dining room table. The Certified Nursing Aide (CNA #1) took the resident's tray to the table. The meal consisted of a pureed brown substance, a pureed orange substance, and chopped pieces of an off-white substance. A pureed substance is a food that has been ground, pressed, or blended with liquid into a smooth cream or paste. CNA #1 proceeded to offer the resident each of the three substances with a spoon, moving in a counter-clockwise motion through each item, several times. The resident refused each of the three items on all of the occasions that they were offered. The resident ate applesauce and drank apple juice with a thickened consistency. The CNA then took the tray away from the resident.</p> <p>On 1/21/20 at 12:50 PM, the surveyor interviewed CNA #1, who told the surveyor that the brown substance was beef, the orange substance was carrots, and that the other substance on the plate was noodles. CNA #1 further stated that the beef and carrots were pureed, but the noodles looked ground rather than pureed. A ground substance is one in which foods are minced or chopped into small pieces, less than a quarter inch. The surveyor and the CNA looked at the resident's meal ticket together which revealed "Puree" for was the diet to be served. The CNA gave the surveyor permission to take the resident's meal</p>	F 692	<ol style="list-style-type: none"> 1. Resident #134 was affected by this deficient practice. The tray was removed and the patient was assessed by the RN. The Food Service Director was notified and the meal ticket was reviewed to assure that the ticket matched the diet order. 2. All residents with mechanically altered diets have the potential to be affected by this deficient practice. An audit was completed to assure that the diet orders match the meal tickets for all residents that receive mechanically altered diets. Registered Dietician and Food Service Director visually audited all the meals that day to assure the correct diet was served. 3. All dietary, nursing staff, as well as all departments heads have been in-serviced by the Assistant Director of Nursing and Registered Dietician on how to read the meal ticket and what mechanically altered diets look like to assure that the residents are receiving the correct mechanically altered diet. 4. Food Service Director/Registered Dietician/designee will review all mechanically altered diets to assure they match the order, they are documented in the diet slip, prepared, and delivered to the specific/individual resident. Trays will be audited to assure that the residents will receive the correct ordered, mechanically altered diet. Audits will be completed weekly for the next 4 weeks and monthly for the next 3 months. The Food Service Director will report results during the 		

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F 692	<p>Continued From page 2 ticket.</p> <p>On 1/21/20 at 1:00 PM, the surveyor interviewed the Food Services Director (FSD), who stated that the main lunch meal for the day was Shepherd's Pie and confirmed that noodles were available in regular, ground, and pureed forms. When asked to see the various forms of noodles, the FSD advised the surveyor that only regular noodles remained. The surveyor asked the FSD to follow the surveyor to the floor on which the resident resided.</p> <p>On 1/21/20 at 1:50 PM, the surveyor and the FSD looked at the resident's plate together. The FSD confirmed that the beef and carrots were pureed and stated that the noodles on the plate were not the correct consistency. She further stated that the noodles present were ground consistency and that there was also a whole noodle present on the plate. In addition, the FSD stated that the ground noodles should not have been placed on a plate for a resident with a pureed diet and that the noodles may have been put on the plate accidentally.</p> <p>On 1/22/20 at 1:00 PM, the FSD told the surveyor that the cook is responsible for making certain that the correct consistency diet goes onto the correct plate, for the correct resident. This process occurs according to the meal ticket for the individual resident and is called out verbally to the cook. The FSD stated she believed the events of yesterday were a mistake and reiterated that noodles were available in pureed form yesterday and on this day. The FSD further stated that besides the cook, there was a server and a dietary aide who also checked diet consistencies as well and compared the</p>	F 692	<p>monthly QAPI meeting. The QAPI meeting is attended by the Nursing Home Administrator, Director of Nursing, and Medical Dorector.</p>		

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F 692	<p>Continued From page 3</p> <p>consistency to the order on the individual resident's meal ticket.</p> <p>01/22/20 at 1:10 PM, the surveyor again spoke to CNA #1. She reiterated that the resident did not eat any of the meal, including the noodles, and that the resident did eat the applesauce. The CNA stated that she and other CNA staff members were supposed to check the residents' meal tickets against what was placed on the plate for each resident. She stated she realized that she should have requested a brand new tray for Resident #134 and advised the nurse regarding the error in diet consistency, who in turn would have reported it to the Director of Nursing (DON).</p> <p>On 01/23/20 at 1:13 PM, the surveyor spoke to the facility's Corporate Nurse in the presence of the survey team, who confirmed that ground noodles should not have been on plate of a resident with orders for a pureed diet.</p> <p>The surveyor obtained and reviewed various documents from the facility staff, related to the care of Resident #134. These included the face sheet (admission record), physician's orders, Minimum Data Set (MDS), and care plan.</p> <p>The face sheet of Resident #134 revealed diagnoses included, but were not limited to</p> <div style="background-color: black; width: 100%; height: 100px; margin: 5px 0;"></div> <p>Resident #134's physician's orders for January</p>	F 692			

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F 692	<p>Continued From page 4</p> <p>2020 contained a dietary order for puree consistency. This was consistent with the meal ticket reviewed and dated for 1/21/20 and the resident's care plan.</p> <p>The surveyor also reviewed a copy of the resident's most recent MDS, a resident assessment tool which serves as an evaluation of a resident's current status at a given point in time. According to the MDS dated [REDACTED], Resident #134 had [REDACTED]. A BIMS score is an evaluation of the resident's mental status abilities. This was [REDACTED] on Resident #134 due to the resident's [REDACTED]. The MDS also revealed that the resident had a mechanically altered diet. This means a change in texture, such as pureed food.</p> <p>On 1/22/20, the surveyor obtained and reviewed the facility's policy titled, "Nutrition Program" with an effective date of 2/5/19. The policy indicated that the dietary department was to ensure that the ordered and appropriate diet and consistency was documented on the diet slip and prepared and delivered to the specific resident for whom it was ordered. This process included checking the correct consistency for the ordered diet.</p> <p>NJAC 8:39-17.4(a)(1)</p>	F 692		