

PRINTED: 05/01/2026
FORM APPROVED
OMB NO. 0938-0391

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
Electronically Signed		11/19/2024

FORM CMS-2567(02-99) Previous Versions Obsolete Event ID: IM6511 Facility ID: ND101 If continuation sheet Page 1 of 4

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

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STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 355096	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____		(X3) DATE SURVEY COMPLETED C 10/23/2024
NAME OF PROVIDER OR SUPPLIER ANETA PARKVIEW HEALTH CTR			STREET ADDRESS, CITY, STATE, ZIP CODE 113 5TH ST S ANETA, ND 58212		
(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 689	Continued From page 1 Review of the facility policy titled "Standards of Care and Practice" occurred on 10/23/24. This policy, dated April 2018, stated, ". . . Each of the following is part of the routine care provided by caregivers, unless otherwise directed. . . . Complete rounds every 2-3 hours during the day and night. . . ." Review of Resident #1's medical record occurred on 10/23/24 and included the diagnoses of generalized anxiety disorder, unspecified dementia, and schizoaffective disorder. The care plan, edited 10/22/24, stated, ". . . I may try [sic] elope and have a history of sleep walking. . . . Wanderguard: Due to being disorientation [sic], there are concerns I may try to elope or even sleep walk. Please help redirect me and ensure my safety. . . ." A physician's order, dated 09/30/24, stated, "Check wanderguard placement each shift . . ." Resident #1's progress notes included the following: * 09/30/24 at 4:05 p.m. ". . . Resident noted to be anxious, confused, and wandering in common area. Resident stated she is looking for her brother. . . . Resident's brother told SS [social services] that resident is risk for elopement and has hx [history] of UTI [urinary tract infection] with confusion and anxiety. Wanderguard brace applied on R) [right] wrist. . . ." * 10/22/24 at 1:00 a.m. "Resident was anxious and confused this evening . . . sat one on one with resident in common area for awhile and resident calmed down, warm blanket given and walked resident back to her room and she laid down to go to sleep." * 10/22/24 at 5:50 a.m. "Resident set off the door	F 689			

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F 689	Continued From page 2 alarm this evening. Resident also then this morning followed the exit signs to the employee exit and got out without sounding the alarm. Writer found resident when writer was coming in from grabbing something from writer's car. Resident confused and was looking for a way home. . . ." During interviews on 10/23/24 an administrative nurse (#1) stated the facility investigation determined Resident #1 exited the building at 3:22 a.m. on 10/22/24 and staff returned the resident to the building at approximately 5:40 a.m. The staff member (#1) reported she expected night shift staff to complete rounds on residents every two hours at 12:00 a.m., 2:00 a.m., 4:00 a.m., and 6:00 a.m. She confirmed staff failed to complete rounds as expected, and failed to discover the resident's elopement in a timely manner. Based on the following information, non-compliance at F689 is considered past non-compliance. The facility implemented corrective actions to ensure the deficient practice does not recur by: * All staff were educated on 10/22/24 as to the importance of monitoring residents at risk of elopement and those who currently utilize wanderguards. * The facility determined the wanderguard alarm system malfunctioned, and no alert sounded when Resident #1 exited the building. The facility contacted the alarm company immediately and reset the system to ensure proper functioning on 10/22/24. * Audits of the wanderguard system and staff rounding began 10/22/24.	F 689			

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