PRINTED: 04/18/2012
FORM APPROVED
OMB NO. 0938-0391

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

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	385114	A. BUILDING _____ B. WING _____	04/03/2012

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
NORTH DAKOTA VETERAN HOME	1600 VETERANS DRIVE LISBON, ND 58054

(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 For the standard Medicare/Medicaid recertification survey started on April 1, 2012 and completed on April 3, 2012, the sample included two (2) residents for complete review, nine (9) residents for focused review, and one (1) closed record for review.	F 000	**F465 SAFE/FUNCTION/SANITARY/ COMFORTABLE ENVIRONMENT** 1. All resident bathrooms and toilets have been cleaned and sanitized. 2. All Resident Living Specialists (RLS) on the skilled unit have been instructed to clean toilets ASAP if toilet seats are observed to be soiled. 3. Household Coordinators and RLSs have been re-educated about how to clean toilets. Supervisor will be making periodic visits to units and a weekly QA will be started to make sure toilets will remain unsoiled. 4. A weekly QA will be performed for the first month, biweekly for the next two months and then quarterly until the end of the year. Completion date: 5/11/12	
F 465 SS=D	483.70(h) SAFE/FUNCTIONAL/SANITARY/COMFORTABL E ENVIRON The facility must provide a safe, functional, sanitary, and comfortable environment for residents, staff and the public. This REQUIREMENT is not met as evidenced by: Based on observation, review of job description, resident interview, and staff interview, the facility failed to provide a safe and sanitary environment for residents, staff, and the public on 2 of 4 resident care areas (Rooms 123 and 126, Courage Cove and Room 244, Honor Hill); one public rest room (hallway outside Freedom Ridge); and, 1 of 3 sampled residents (Resident #3) using a power wheelchair, on 3 of 3 days of survey. Failure to clean the toilets of visible soiled material in Rooms 123, 126, and 244 and the public rest room did not provide the residents, staff, and the public a sanitary environment. Failure to clean Resident #3's wheelchair of visible debris did not provide a sanitary environment or enhance the resident's quality of life. Findings include:	F 465		

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE: Kristin Runneberg | TITLE: CFO | (X6) DATE: 5-2-12

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 465	Continued From page 1 Review of the facility's job description, "Position Information Questionnaire" for the Resident Living Specialist (RLS) occurred on 04/03/12. This undated document, provided on 04/03/12 at 2:00 p.m., by an administrative nursing staff member (#1), stated ". . . DUTY/RESPONSIBILITY . . . : Cleaning . . . Frequency, D [Daily] . . . Maintain a safe, clean environment, Residents' living and/or treatment areas are left in clean, orderly fashion. . . . Clean, wash, sanitize and/or polish bathroom fixtures. . . . Remove dirt, dust, grease, film, etc. from surfaces using proper cleaning/disinfecting solutions. . . ." - Observation during the initial facility tour on 04/01/12 at 10:30 a.m., identified visible fecal material on the toilet in Room 123 and 126. Observation during resident cares showed visible fecal material remained on the residents' private room toilets as follows: *Room 123 - 04/01/12 at 3:25 p.m., 04/02/12 at 9:55 a.m. and 12:50 p.m. *Room 126 - 04/01/12 at 4:25 p.m., 04/02/12 at 7:45 a.m. and 9:20 a.m. Observation on 04/01/12 at 10:45 a.m. and in the afternoon on 04/02/12, identified visible fecal material remained on the toilet in the public rest room outside Freedom Ridge resident care unit. - The facility identified Resident #3 as interviewable. During interview, on 04/02/12 at 12:45 p.m., Resident #3 stated staff "do not clean often enough" in his bathroom, and "it has not been cleaned yet today." Observation showed	F 465	1. All resident power wheelchairs have been cleaned. 2. All Resident Living Specialists (RLS) on the skilled unit have been instructed to clean resident wheelchairs ASAP if observed to be soiled. 3. Household Coordinators and RLSs have been re-educated about the importance of cleaning resident wheelchairs. Supervisor will be making periodic visits to units and a weekly QA will be started to make sure scooters get cleaned. 4. A weekly QA will be performed for the first month, biweekly for the next two months and then quarterly until the end of the year. Completion date:	5/11/12

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F 465	Continued From page 2 visible fecal material on the toilet. Resident #3 stated "one time, it was a week before they cleaned it." Resident #3 then pointed at the foot rest of his power wheelchair. Observation showed considerable food material and debris on the leg and foot rests. The resident reported the material had been present on his wheelchair for a least a couple of days and facility staff did not offer to clean the wheelchair. Resident #3 stated staff are aware of how dirty his power wheelchair can get, but they do not regularly clean it. During the environmental tour, on 04/03/12 at 8:15 a.m., observation identified Resident #3's wheelchair was clean. During interview, the resident reported a facility staff member cleaned the wheelchair in the evening on 04/02/12. During the facility environmental tour, on 04/03/12 at 8:15 a.m., observation showed visible dried fecal material on the toilets in Room 123, 126, 244, and the public rest room outside Freedom Ridge resident care unit. An environmental services management staff member (#2) confirmed the presence of the material. She stated she expected facility staff to clean toilets daily.	F 465		