

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 155196	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 07/16/2024
NAME OF PROVIDER OR SUPPLIER Altenheim Health & Living Community		STREET ADDRESS, CITY, STATE, ZIP CODE 3525 E Hanna Ave Indianapolis, IN 46237	

For information on the nursing home's plan to correct this deficiency, please contact the nursing home or the state survey agency.

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (Each deficiency must be preceded by full regulatory or LSC identifying information)
<p>F 0698</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Provide safe, appropriate dialysis care/services for a resident who requires such services.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 38466</p> <p>Based on interview and record review, the facility failed to ensure care and services for residents with dialysis were provided for 3 of 4 residents reviewed for dialysis services. Daily weights as ordered by the physician, related to the resident's dialysis services, were not obtained and monitored. (Resident 54, Resident 59, Resident 67)</p> <p>Findings include:</p> <p>1. On 7/9/24 at 2:41 p.m., Resident 54's clinical record was reviewed. The diagnoses included, but were not limited to, dependence on renal dialysis (process by which dissolved substances are removed from an individual's body by diffusion from one fluid compartment to another across a semipermeable membrane) and stage 5 chronic kidney disease (also known as end-stage kidney disease where the kidneys are severely damaged and can no longer perform their functions).</p> <p>The Annual Minimum Data Set (MDS) assessment, dated 5/24/24, indicated Resident 54 was cognitively intact and renal failure, End Stage Renal Disease (ESRD), stage 5 chronic renal failure, and was dependent upon dialysis.</p> <p>Resident 54's care plan included, but were not limited to the following:</p> <ul style="list-style-type: none"> - .Problem start date: 5/16/24; Resident receives Hemodialysis due to end stage renal disease and is at risk for complications. Goal target date: 9/8/24; Resident will have effective fluid management, hemodynamically stable, without complications. Approach start date: 5/16/24; Report fluid excess (weight gain .) - .Problem start date: 8/11/23; Resident is at risk for weight loss [related to] chronic kidney disease. Goal target date 9/8/24; Resident will not have significant weight changes through next review. Approach start date: 8/11/23; Monitor resident's weight, notify physician of any significant weight changes . <p>Physician Orders included, but were not limited to:</p> <ul style="list-style-type: none"> - .daily weight, notify [Physician] if weight gain greater than 3 pounds overnight or 5 pounds in one week. Start date 2/28/24 . <p>(continued on next page)</p>

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.

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
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<p>F 0698</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>- Resident to receive dialysis at the [facility] on Tuesday, Thursday, and Saturday. Start date 2/28/24 and no stop date .</p> <p>On 7/16/24 at 11:20 a.m., the Director of Nursing Services (DNS) provided copies of the Treatment Administration Records. A review of the records indicated the physician's prescribed daily weights, as it related to the dialysis services, were documented. The following documents identified the dates and the nursing staff's reasons the weights had not been performed.</p> <p>- from 2/28/24 to 3/28/24, the record lacked 4 daily weights:</p> <p>3/14/24 - Not administered: Resident unavailable</p> <p>3/15/24 - record lacked a reason for not obtaining the weight</p> <p>3/17/24 - Not administered: On hold</p> <p>3/18/24 - Not administered: Unable to obtain [weight]</p> <p>- from 3/29/24 to 4/28/24, the record lacked 5 daily weights:</p> <p>3/29/24 - Not administered: day-shift</p> <p>4/7/24 - record lacked a reason for not obtaining the weight</p> <p>4/17/24 - Not administered: Resident unavailable</p> <p>4/21/24 - record lacked a reason for not obtaining the weight</p> <p>4/26/24 - record lacked a reason for not obtaining the weight</p> <p>- from 4/29/24 to 5/28/25, the record lacked 4 daily weights:</p> <p>5/5/24 - record lacked a reason for not obtaining the weight</p> <p>5/12/24 - Not administered: Resident unavailable</p> <p>5/19/24 - Not administered: On hold</p> <p>5/26/24 - Not administered: Weight not obtained</p> <p>- from 5/29/24 to 6/28/24, the record lacked 5 daily weights:</p> <p>5/30/24 - Not Administered: Resident unavailable</p> <p>6/10/24 - record lacked a reason for not obtaining the weight</p> <p>6/25/24 - record lacked a reason for not obtaining the weight</p> <p>(continued on next page)</p>		

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<p>F 0698</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>6/26/24 - Not administered: Resident unavailable</p> <p>6/28/24 - Not administered: nurse completed</p> <p>- from 6/29/24 to 7/10/24, the record lacked 1 daily weight:</p> <p>7/5/24 - Not administered: Other</p> <p>During an interview on 7/10/24 at 9:15 a.m., Licensed Practical Nurse (LPN) 3 indicated Resident 54 was dialysis dependent and staff were to monitor his weights daily.</p> <p>During an interview on 7/12/24 at 10:07 a.m., Resident 54 indicated the dialysis staff weighed him during his dialysis sessions. Sometimes the nursing staff had weighed him on his non-dialysis days, his weight was not taken on a daily basis.</p> <p>2. On 7/9/24 at 3:04 p.m., Resident 59's clinical record was reviewed. The diagnoses included, but were not limited to, dependence on renal dialysis and ESRD.</p> <p>The Quarterly MDS assessment, dated 4/23/24, indicated Resident 59 was moderately cognitively intact and had ESRD, renal disease, and was dependent upon dialysis.</p> <p>Resident 59's care plan included, but were not limited to, the following:</p> <p>- .Problem start date: 5/26/24; Resident receives Hemodialysis due to end stage renal disease and is at risk for complications. Goal target date: 9/26/24; Resident will have effective fluid management, hemodynamically stable, without complications. Approach start date: 5/26/24; Report fluid excess [weight gain] .</p> <p>- .Problem start date: 6/19/23; Resident has experienced significant weight loss. Goals target date: 9/26/24; Resident will have no further significant weight loss through next review. Approach: Monitor/record weight routinely, notify [Physician] of any significant changes .</p> <p>Physician orders included, but were not limited to:</p> <p>- .daily weight, notify [Physician] if weight gain greater than 3 pounds overnight or 5 pounds in one week. Start date 5/15/24 with no end date noted .</p> <p>- .Resident to receive dialysis at [dialysis provider], on Monday, Wednesday, and Friday .start date 5/15/24 with no end date noted .</p> <p>On 7/16/24 at 11:20 a.m., the DNS provided copies of the Treatment Administration Records. A review of the records indicated the physician's prescribed daily weights, as it related to the dialysis services, were documented. The following documents identified the dates and the nursing staff's reasons the weights had not been performed.</p> <p>- from 5/15/24 to 5/31/24, the record lacked 3 daily weights:</p> <p>5/18/24 - record lacked a reason for not obtaining the weight</p> <p>(continued on next page)</p>		

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<p>F 0698</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>5/19/24 - Not administered: On hold</p> <p>5/26/24 - Not administered: Weight not obtained</p> <p>- from 6/1/24 to 6/30/24, the record lacked 1 daily weight:</p> <p>6/18/24 - Not administered: Resident unavailable</p> <p>- from 7/1/24 to 7/10/24, the record lacked 1 daily weight:</p> <p>7/2/24 - Not administered: Other</p> <p>During an interview on 7/10/24 at 9:20 a.m., LPN 3 indicated Resident 59 was dialysis dependent and staff were to monitor her weights daily.</p> <p>During an interview on 7/12/24 at 12:30 p.m., Resident 59 indicated she was weighed during her dialysis sessions. Resident 59 indicated she had not been weighed by the nursing facility staff.</p> <p>3. On 7/9/24 at 2:55 p.m., Resident 67's clinical record was reviewed. The diagnoses included, but were not limited to, dependence on renal dialysis and ESRD.</p> <p>The Quarterly MDS assessment, dated 5/13/24, indicated Resident 67 was cognitively intact and had ESRD and was dependent upon dialysis.</p> <p>Resident 67's care plan included but was not limited to the following:</p> <p>- .Problem start date: 3/4/24; Resident receives Hemodialysis due to end stage renal disease and is at risk for complications. Goal target date: 8/15/24; Resident will have effective fluid management, hemodynamically stable, without complications. Approach start date: 3/4/24; Report fluid excess [weight gain] .</p> <p>Physician orders included, but were not limited to:</p> <p>- .daily weight, notify [Physician] if weight gain greater than 3 pounds overnight or 5 pounds in one week. Start date 3/5/24 with no end date noted .</p> <p>- .Resident to receive dialysis at [dialysis provider], on Monday, Wednesday, and Friday .start date 3/5/24 with no end date noted .</p> <p>On 7/16/24 at 11:20 a.m., the DNS provided copies of the Treatment Administration Records. A review of the records indicated the physician's prescribed daily weights, as it related to the dialysis services, were documented. The following documents identified the dates and the nursing staff's reasons the weights had not been performed.</p> <p>- from 3/5/24 to 3/31/24, the record lacked 8 daily weights:</p> <p>3/5/24 - record lacked a reason for not obtaining the weight</p> <p>(continued on next page)</p>		

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<p>F 0698</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>During an interview on 7/12/24 at 9:45 a.m., Resident 67 indicated the dialysis staff weighed her during the dialysis session. The nursing staff generally did not weigh her.</p> <p>During an interview on 7/11/24 at 1:05 p.m., the DNS indicated staff were to follow the physician's orders regarding resident's daily weights related to their dialysis services. The resident's Treatment Administration Records identified the physician prescribed daily weights that had not been obtained.</p> <p>During an interview on 7/16/24 at 11:00 a.m., the Corporate Clinical Support Director indicated not all of the resident's prescribed daily weights were obtained. The dialysis protocol was to monitor the resident's weights.</p> <p>On 7/11/24 at 2:55 p.m., the DNS provided a copy of the Hemodialysis policy, dated 6/4/19, and indicated it was the current policy in use by the facility. A review of the policy indicated, .will ensure that residents who require dialysis receive such services, consistent with professional standards of practice, the comprehensive person-centered care plan .</p> <p>On 7/11/24 at 1:50 p.m., the DNS provided a copy of the Protocol for Following Physician Orders policy, dated 4/3/17, and indicated it was the current policy in use by the facility. A review of the policy indicated, .It is the goal of [NAME] to provide care to our facility residents that will promote support for the optimal quality of life for the resident .associates .will provide the appropriate physician prescribed care to residents .all licensed staff will verify and follow the physician orders as written .the resident's plan of care will reflect the physician's orders and direction for the resident's plan of care .</p> <p>3.1-37(a)</p>		