

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  165379	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED  10/31/2024
NAME OF PROVIDER OR SUPPLIER  Edgewood Convalescent Home		STREET ADDRESS, CITY, STATE, ZIP CODE  513 Bell Street Edgewood, IA 52042	

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 0725</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Many</p>	<p>Provide enough nursing staff every day to meet the needs of every resident; and have a licensed nurse in charge on each shift.</p> <p>49976</p> <p>Based on record review, Facility Assessment review, and resident and staff interviews the facility failed to employ sufficient numbers of staff on the weekends to meet resident needs. The facility reported a census of 43 residents.</p> <p>Findings include:</p> <p>A review of the Centers for Medicare &amp; Medicaid Services (CMS) PBJ Staffing Data Report revealed the facility triggered for excessively low weekend staffing for Quarter 3, 2024 (April 1-June 30).</p> <p>A review of the Edgewood Convalescent Home Shift assignment sheets from April 1st through June 30th, 2024 revealed required staff were absent for either partial or whole shifts as follows:</p> <p>First shift- Certified Nursing Aides (CNA) 23 days</p> <p>Second shift- CNA 19 days, Nurse 3 days</p> <p>Third shift- CNA 1 day</p> <p>In an interview on 10/30/24 at 9:25 AM Resident #2 expressed the facility needed more staff, especially CNA's on weekends. She noted there just didn't seem to be enough.</p> <p>In an interview on 10/30/24 at 9:32 AM Resident #21 verbalized they [the facility] needed more staff on the weekends. They treated her well but she has had several episodes of incontinence because she had to wait too long for them to come and help. They just run short on the weekends.</p> <p>In an interview on 10/30/24 at 10:13 AM Staff A, CNA reported she did not feel like they had enough staff during the weekend, and noted they can't get their normal tasks done during the day because of this.</p> <p>In an interview on 10/30/24 at 11:25 AM Staff B, CNA explained she did not feel they had enough staff on the weekends. When the facility was full, or even now, it was not enough. They did not have enough time to get everything done during the shift and didn't have the extra staff around like during the week. Toileting got missed the most.</p> <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 0725</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Many</p>	<p>In an interview on 10/30/24 at 12:59 PM the Administrator explained the facility receives a sheet from Corporate that tells them how many staff they should have per resident. It is a document based off of the census, not acuity. Corporate utilizes the Facility Assessment to create the sheets that inform the staffing numbers.</p> <p>In an interview on 10/30/24 at 1:04 PM the Director of Nursing (DON) explained Corporate decided what staffing ratios should be, based on census, not acuity. The facility goes off of the staffing sheets sent to the Administrator.</p> <p>The Facility Assessment Tool, undated expressed the following: The purpose of the assessment is to determine what resources are necessary to care for residents competently during both day-to-day operations and emergencies. Use this assessment to make decisions about your direct care staff needs, as well as your capabilities to provide services to the residents in your facility. Using a competency-based approach focuses on ensuring that each resident is provided care that allows the resident to maintain or attain their highest practicable physical, mental, and psychosocial well-being.</p> <p>The intent of the Facility Assessment is for the facility to evaluate its resident population and identify the resources needed to provide the necessary person-centered care and services the residents require.</p> <p>The facility assessment is used to inform staffing decisions to ensure that there are a sufficient number of staff with the appropriate competencies and skill set necessary to care for residents' needs as identified through resident assessments and plans of care. Staffing needs for each shift and each unit area adjusted as necessary based on changes to the resident population.</p> <p>It instructed staff ratios to be the following:</p> <p>First shift- 2 nurses, 5 CNA's</p> <p>Second shift- 2 nurses, 5 CNA's</p> <p>Third shift- 1 nurse, 2 CNA's</p>		