

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  165601	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED  07/29/2024
NAME OF PROVIDER OR SUPPLIER  Harmony West Des Moines		STREET ADDRESS, CITY, STATE, ZIP CODE  5010 Grand Ridge Drive West Des Moines, IA 50265	

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 0550</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Honor the resident's right to a dignified existence, self-determination, communication, and to exercise his or her rights.</p> <p><b>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY**</b> 25854</p> <p>Based on observation, clinical record review and review of the facilities Resident Rights revealed the facility failed to provide privacy while providing perineal cares for 1 of 4 residents reviewed. (Resident #10) The facility identified a census of 90 residents.</p> <p>Findings include:</p> <p>1. An observation 7.25.24 at 2:03 p.m. revealed Staff C, Certified Nursing Assistant (CNA) and Staff D, CNA as they transferred Resident #10 from wheel chair to her bed per a lift device. The staff positioned the resident on her left side, pulled back Hoyer sling and pulled down the resident's pants. Staff positioned the resident on her right side and removed the lift device sling. Staff then positioned the resident on her back and removed her pants and pulled down her brief. Staff D provided anterior perineal care, positioned the resident on her right side, removed the soiled brief and cleansed the resident's gluteal region, placed a clean brief, applied barrier ointment to her buttocks and attached the clean brief. The staff members failed to close the shade/curtains to the resident's window located in direct view of the resident and faced a busy street while cars drove past the facility as viewed from the same window.</p> <p>The Quarterly Minimum Data Set (MDS) dated [DATE] documented that Resident#10 required total assistance from staff for personal hygiene, lower body dressing, and toileting hygiene. The MDS documented that the resident as always incontinent of bowel and bladder.</p> <p>A Resident's Rights - Dignity and Respect policy and procedure (not dated) described the Purpose as the foundation for treating all residents with dignity and respect and maintaining and enhancing his or her self-esteem and self-worth. The Procedure included the following:</p> <p>a. Each Resident had the right to considerate and respectful care and to have been treated with honesty, dignity, respect and with</p> <p>reasonable accommodation of individual needs except where the health, safety, or rights of the resident or other individuals in the facility would be endangered.</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 0677</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Provide care and assistance to perform activities of daily living for any resident who is unable.</p> <p>25854</p> <p>Based on observation, clinical record review and facility policy review, the facility failed to properly provide perineal cares for 1 of 4 residents reviewed (Resident #9) The facility identified a census of 90 residents.</p> <p>Findings include:</p> <p>1. A Minimum Data Set (MDS) assessment form dated 7.16.24 indicated Resident #9 had diagnosis that included Benign Prostatic Hyperplasia, Aphasia, Cerebrovascular Accident (CVA) and Non-Alzheimer's Dementia. The assessment indicated the resident had a Brief Interview for Mental Status (BIMS) score of 7 out of 15 (severely impaired cognitive skills), frequently incontinent of his bowel and bladder and as dependent on staff with toileting hygiene.</p> <p>An observation 7.25.24 at 1:42 p.m. revealed Staff A, Certified Nursing Assistant (CNA) and Staff B, CNA as they provided perineal care to Resident #9 as he had been positioned in bed. The staff members gloved their hands, prepared equipment/incontinent products. Staff A provided anterior perineal care as she confirmed the resident as incontinent of urine. The staff members positioned the resident on his right side as Staff A cleansed the resident's mid gluteal region several times with stool/bowel movement (BM). The same staff member failed to cleanse the resident's buttocks or hips.</p> <p>An Incontinent Care policy and procedure (8.2023) indicated the Purpose as an ensurance of cleanliness and comfort to the resident, infection prevention and skin irritation. The Procedure included the following:</p> <p>a. Cleansed the peri-area with a cleansing agent or disposable wipe as they wiped from the perineum toward the rectum.</p> <p>b. Turned the resident from side to side as staff cleansed all affected areas.</p>		

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<p>F 0880</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Provide and implement an infection prevention and control program.</p> <p>25854</p> <p>Based on observation, staff interview and facility policy review, the facility staff failed to remove soiled gloves during personal cares for 2 of 4 residents reviewed. (Resident #9 and Resident #10) The facility identified a census of 90 residents.</p> <p>Findings include:</p> <p>1. A Minimum Data Set (MDS) assessment form dated 7.16.24 indicated Resident #9 had diagnosis that included Benign Prostatic Hyperplasia, Aphasia, Cerebrovascular Accident (CVA) and Non-Alzheimer's Dementia. The assessment indicated the resident had a Brief Interview for Mental Status (BIMS) score of 7 out of 15 (severely impaired cognitive skills), frequently incontinent of his bowel and bladder and as dependent on staff with toileting hygiene.</p> <p>An observation 7.25.24 at 1:42 p.m. revealed Staff A, Certified Nursing Assistant (CNA) and Staff B, CNA as they entered the resident's room. The staff members gloved their hands, prepared equipment/incontinent products. The staff members pulled down his brief anteriorly as Staff A confirmed the resident as incontinent of urine. Staff A provided incontinent cares anteriorly with gloved hands and then positioned the resident on his right side with same gloved hands as she touched the resident's person and bedding. Staff A then cleansed the resident's mid gluteal region several times with stool/bowel movement (BM) return. Staff A then removed the soiled brief, changed gloves and placed a clean brief.</p> <p>2. A MDS assessment form dated 5.29.24 indicated Resident #10 had diagnosis that included a CVA and Non-Alzheimer's Dementia. The assessment indicated the resident had a BIMS score of 5 (severely impaired cognitive skills, always incontinent of her bowels and bladder and as dependent on staff with toileting hygiene.</p> <p>An observation 7.25.24 at 2:03 p.m. revealed Staff C, CNA and Staff D, CNA as they entered the resident's room, washed and gloved their hands. The staff members transferred the resident from her wheel chair to her bed, positioned the resident on her left side, pulled back sling and pulled down her pants. The staff members positioned the resident on her back and removed her pants and pulled down a soiled brief. Staff D cleansed the resident's anterior perineal area with the same gloved hands, positioned the resident on her right side, removed soiled brief and cleansed the gluteal region with he same gloved hands. The staff member placed a clean brief with the same gloved hands, opened bedside stand's top drawer, then removed barrier cream from basket on top of bedside stand with same gloved hands, applied to buttocks and attached the clean brief with the same gloved hand as she touched the resident, her clothing and bedding. Staff D then removed the soiled gloves. During an interview at the same time both staff members confirmed the above observation.</p> <p>3. An Incontinent Care policy and procedure (8.2023) indicated the Purpose as an ensurance of cleanliness and comfort to the resident, infection prevention and skin irritation. The Procedure included the following:</p> <p>a. Staff performed hand hygiene and placed on gloves</p> <p>(continued on next page)</p>		

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<p>F 0880</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>b. Cleansed the peri-area with a cleansing agent or disposable wipe as they wiped from the perineum toward the rectum.</p> <p>c. Removal of gloves, washed hands and application of clean gloves.</p> <p>d. Turned the resident from side to side as staff cleansed all affected areas.</p> <p>e. Removed gloves and disposed to a designated container.</p> <p>f. Performance of hand hygiene.</p>