

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 235486	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 06/13/2024
NAME OF PROVIDER OR SUPPLIER Medilodge of Richmond		STREET ADDRESS, CITY, STATE, ZIP CODE 34901 Division Rd Richmond, MI 48062	

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 0584</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 safe, clean, comfortable and homelike environment, including but not limited to receiving treatment and supports for daily living safely.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 49102</p> <p>Based on observation and interview, the facility failed to maintain a clean, homelike environment for three residents R9, R31, and R60 out of three residents reviewed for environment. Findings include:</p> <p>R9</p> <p>On 06/11/24 at 9:30 AM, R9 was observed lying in bed in their room watching television. An observation of the privacy cubical curtains revealed several round brown stains on it. When asked about the dirty curtains, R9 nodded his head and stated clean.</p> <p>A record review revealed that R9 was admitted on [DATE] with the medical diagnoses of Hemiplegia and Hemiparesis following Cerebral Infarction affecting Right Dominant Side; Chronic Obstructive Pulmonary Disease, Apasia and Muscle Weakness. A review of the most recent Minimum Data Set Assessment (MDS) dated [DATE] was completed with a Brief Interview for Mental Status (BIMS) score of 0 which indicates impaired cognition.</p> <p>R31</p> <p>On 6/11/24 at 9:32 AM, R31 was observed lying in bed in their room watching television. An observation of the privacy cubical curtains revealed several round brown stains on it. When asked about the curtains, R31 stated I would prefer a clean curtain in his room.</p> <p>A record review revealed that R31 was admitted on [DATE] with the medical diagnoses of Hemiplegia and Hemiparesis following Cerebral Infarction affecting Left Dominant Side; Hyperlipidemia, Anxiety and Major Depressive Disorder. A review of the most recent Minimum Data Set Assessment (MDS) dated [DATE] was completed with a Brief Interview for Mental Status (BIMS) score of 13 which indicates intact cognition.</p> <p>R60</p> <p>On 06/11/24 at 11:50 AM, R60 observed sitting up in bed watching television. An observation of the privacy cubical curtains revealed several dark black splatter and stains on it. When asked about the curtains, R60 stated It is not good and should be cleaned.</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 0584</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>A record review revealed that R31 was admitted on [DATE] with the medical diagnoses of Hemiplegia and Hemiparesis following Cerebral Infarction affecting Right Dominant Side; Diabetes Type II, and Mood Disorder. A review of the most recent Minimum Data Set Assessment (MDS) dated [DATE] was completed with a Brief Interview for Mental Status (BIMS) score of 14 which indicates intact cognition.</p> <p>On 6/13/24 at 10:30 AM during an observation and interview with the Housekeeping Supervisor, (Staff A) they confirmed, These curtains are dirty. It is my expectation the curtains are clean in the resident rooms. Residents should have a clean home like environment.</p> <p>A review of the facility policy titled Safe and Homelike Environment which was implemented on 7/28/20 and revised on 1/01/22, revealed the following, The facility will provide a safe, clean, comfortable and home-like environment.</p>

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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>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 46956</p> <p>This citation pertains to Intake MI00143507.</p> <p>Based on observation, interview, and record review, the facility failed to provide twice weekly showers for one (R33) of five residents reviewed for showers.</p> <p>Review of the facility record for R33 revealed an admitted [DATE] with diagnoses that included Multiple Sclerosis, Neuromuscular Dysfunction of the Bladder and Urinary Tract Infection. The Brief Interview for Mental Status (BIMS) assessment dated [DATE] was scored 15/15 indicating intact cognitive function.</p> <p>On 06/11/24 at 11:15 AM, R33 reported they had not consistently been assisted with a shower twice weekly as they had in the past. R33's spouse was on speaker phone at the time of the interview and reported they visit regularly and stated I know [R33] doesn't always get a shower twice a week.</p> <p>On 06/12/24 at 1:26 PM, R33 was observed to appear generally well groomed and clean. When asked about the frequency of being showered R33 stated I just had one on Sunday. I got them (showers) on the regular schedule last week but before that I think I only had one for a couple weeks. R33 was asked how they felt about the missed showers and stated I know they're busy sometimes but I don't think twice a week is too much to ask. I feel dirty going that long without a shower.</p> <p>Review of the facility Task item that documents shower completion indicated that R33 received one shower the week of 05/19/24 and no showers the week of 05/26/24. No resident refusal of showers were documented for those weeks.</p> <p>Documentation of R33's shower completion was requested from the facility to rule out additional sources of documentation such as hand written shower sheets. A shower report document was provided that matched the shower completion dates from the Task record and no additional information.</p> <p>On 06/13/24 at 12:09 PM, the facility Director of Nursing (DON) reviewed R33's record and agreed that no shower or shower refusal was documented between 5/23/24 and 06/02/24. The DON reported their expectation is resident's are offered a shower or bath twice weekly and any completion or refusal should be documented.</p> <p>Review of the facility policy Activities of Daily Living dated 12/28/23 revealed the entry 3. A resident who is unable to carry out activities of daily living receives the necessary services to maintain good nutrition, grooming, and personal and oral hygiene. A facility policy specifically addressing the frequency of bathing services being offered/provided was requested but not provided.</p>		

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<p>F 0684</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Provide appropriate treatment and care according to orders, resident's preferences and goals.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 44750</p> <p>Based on interview and record review, the facility failed to administration an intravenous (IV) antibiotic as ordered for one resident (R105) out of two reviewed for IV antibiotic use, resulting in missing eight doses of IV antibiotics. Findings Include:</p> <p>On 06/11/24 at 11:35 AM, R105 reported when they were admitted into the facility, they were on IV antibiotics and the medication ran out and they were without the treatment for at least a day.</p> <p>A review of the medical record revealed that R105 admitted into the facility on [DATE] with the following diagnoses, Acute Osteomyelitis, Right Ankle and Foot and Non-Pressure Chronic Ulcer of Right Heel and Midfoot with Fat Layer Exposed. A review of the Minimum Data Set assessment revealed a Brief Interview of Mental status score of 15/15 indicating an intact cognition. R105 also required assistance with bed mobility and transfers.</p> <p>Further review of the physician orders revealed the following orders;</p> <p>-Ampicillin-Sulbactam Sodium Injection Solution Reconstituted 3 (2-1) GM (Ampicillin & Sulbactam Sodium) Directions: Use 3 gram intravenously every 6 hours related to OTHER ACUTE OSTEOMYELITIS, RIGHT ANKLE AND FOOT until 06/10/2024 23:59 .</p> <p>-Lab (name of lab tests) weekly. Directions: every day shift every Fri (Friday) for Infection.</p> <p>A review of the Medication Administration Record (MAR) revealed a number 9 documented on May 28th and May 29th indicating that R105 missed eight doses of their IV antibiotic. Further MAR notes stated the IV antibiotic was On order on these days. No note was observed stating the physician was notified.</p> <p>A review of R105's laboratory did not show any results for 6/7.</p> <p>On 6/13/2024 at 10:57 AM, an interview was conducted with Infection Control Preventionist (ICP) C. ICP C stated if R105 medication was on order then the physician should have been notified. ICP C stated they have been having problems with the lab and they are unsure why it was not drawn on 6/7 as it was ordered.</p> <p>On 6/13/2024 at 11:16 AM, an interview was completed with the Director of Nursing (DON). The DON stated if a medication is not available, the nurses should look in the back up system first, call the pharmacy and see where the medication is and then notify the physician. The DON stated there should have been some follow up with R105's IV Antibiotics.</p> <p>A review of a facility policy titled, Antibiotic Stewardship program noted the following, b. Monitoring antibiotic use: i. Monitor response to antibiotics, and laboratory results when available, to determine if the antibiotic is still indicated or adjustments should be made (e.g., antibiotic time-out) .v. Random audits of antibiotic prescriptions may be performed to verify completeness and appropriateness (Process measure).</p>		

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<p>F 0695</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Provide safe and appropriate respiratory care for a resident when needed.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 50223</p> <p>Based on observation, interview, and record review the facility failed to ensure oxygen tubing was changed and ensure residents on oxygen had full oxygen tanks available for three residents (R8, R59, R39) out of three residents reviewed for respiratory care. Findings include:</p> <p>R8</p> <p>On 06/11/24 at 10:06 AM, R8 was observed sitting in their wheelchair at the sink in room. R8's oxygen tubing on the back of their wheelchair was in a bag and dated 5/28/24. Additional oxygen tubing was attached to a portable oxygen tank and dated 5/14/24. The oxygen tank on the back of the wheelchair was empty. R8 was not wearing oxygen at this time.</p> <p>On 06/11/24 at 12:17 PM, R8 was observed sitting in their wheelchair in the hallway. The oxygen tubing on the back of the wheelchair was still dated 5/14/24 and the oxygen tank was empty. R8 was not wearing oxygen at this time.</p> <p>On 06/12/24 at 08:18 AM, R8 was observed awake lying in bed using oxygen at two liters per nasal cannula (NC) by concentrator. Portable oxygen tank on back of wheelchair remained empty.</p> <p>On 06/12/24 at 11:37 AM and 12:44 PM, R8 was observed sitting up in their wheelchair. Oxygen tubing on back of wheelchair was still dated 5/14/24 and 5/28/24. Oxygen tank on wheelchair remained empty. R8 was not wearing oxygen at this time.</p> <p>On 06/12/24 at 01:31 PM, R8 was observed sitting in their wheelchair in the hallway and was asked if they ever wear oxygen during the day R8 stated not usually but if they feel they need it they ask for it.</p> <p>A review of the medical record revealed that R8 admitted into the facility on [DATE] with the following diagnosis, Chronic obstructive pulmonary disease. A review of the Minimum Data Set assessment revealed a Brief Interview for Mental status score of 11/15, indicating an impaired cognition. R8 also required assistance with bed mobility and transfers.</p> <p>Further record review of R8's care plan stated the following: R8 will periodically remove their oxygen. Encourage them to wear. Administer Oxygen at 2L (liters) NC continuous as ordered. Provide oxygen as needed when resident exhibits signs/symptoms of difficulty breathing (short of breath, cyanosis, low O2 sats)</p> <p>R8's physician order documented the following: Oxygen: Run at 2L/MIN via N/C continous. Oxygen tubing/filter change every week.</p> <p>R59</p> <p>On 06/11/24 at 01:01 PM, R59 was observed sitting in their wheelchair in the hallway talking to R8 with oxygen two liters via nasal canula with portable tank. Oxygen tubing dated 5/28/24.</p> <p>(continued on next page)</p>		

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<p>F 0695</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>On 06/12/24 at 08:20 AM and 1:33 PM, R59 was observed sleeping in bed wearing oxygen two liters nasal canula via concentrator. Portable oxygen tank in wheelchair was empty.</p> <p>On 06/12/24 at 02:24 PM, R59 was observed being pushed in their wheelchair in the hall without wearing oxygen.</p> <p>On 06/13/24 at 09:38 AM, R59 was observed sleeping in bed with oxygen on per concentrator. Oxygen tank in wheelchair was empty.</p> <p>A review of the medical record revealed that R59 admitted into the facility on [DATE] with the following diagnosis, Chronic obstructive pulmonary disease. A review of the Minimum Data Set assessment revealed a Brief Interview for Mental status score of 14/15 impaired cognition. R59 also required assistance with bed mobility and transfers.</p> <p>Further record review of R59's care plan stated the following: Resident has an impaired pulmonary/respiratory status related to chronic respiratory failure with COPD and requires supplemental oxygen. Administer Oxygen at 2L NC continuous as ordered.</p> <p>The Physician order documented Oxygen: Run at [2]L/MIN via N/C continuous.</p> <p>R39</p> <p>On 06/13/24 at 02:00 PM, R39 was observed sitting in their motorized wheelchair in a common area at a table with other residents. R39 had an oxygen nasal cannula in place and the oxygen tank on the back of the wheelchair was empty.</p> <p>A review of the medical record revealed that R39 admitted into the facility on [DATE] with the following diagnosis, Chronic obstructive pulmonary disease. A review of the Minimum Data Set assessment revealed a Brief Interview for Mental status score of 14/15 impaired cognition. R39 also required assistance with bed mobility and transfers.</p> <p>Further record review of R39's care plan documented the following: Resident has an impaired pulmonary/respiratory status related to COPD (chronic obstructive pulmonary disease)/Emphysema, obesity, respiratory failure, shortness of breath, sleep apnea. Oxygen continuous 3L NC as ordered.</p> <p>The Physicians orders documented: Oxygen: Run at [3]L/MIN via N/C continuous.</p> <p>On 06/13/24 at 09:43 AM, during an interview, Certified Nurse Assistant (CNA) D states the oxygen tanks are changed by the CNA's and that the oxygen tubing is located in the supply room and is changed by supply people.</p> <p>On 06/13/24 at 10:14 AM, during an interview the Unit Manager (UM) E stated a company comes every Tuesday to change oxygen tubing and confirmed that oxygen tubing should be dated.</p> <p>On 06/13/24 at 1035 AM, during an interview Infection Control Preventionist (ICP) C stated they believed oxygen tubing should be changed by a company and stated the unit manager usually rounds to ensure it was completed. ICP C was unsure of the time frame they needed to be changed.</p> <p>(continued on next page)</p>		

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<p>F 0695</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>In an additional interview the Director of Nursing (DON), stated residents on oxygen should have full oxygen tanks and have oxygen available is something happens. The DON stated it is the expectation that oxygen tubing be changed weekly.</p> <p>34851</p> <p>R78</p> <p>On 6/11/24 at 12:50 PM, R78 was observed in bed with a trach (tracheostomy - surgical hole in neck to assist with breathing) collar on their neck. The oxygen (O2) concentrator and trach tubing were observed without a date.</p> <p>On 6/12/24 at 9:53 AM, R78 was observed in bed with the O2 tubing and trach tubing undated.</p> <p>A review of R78's orders did not reveal orders regarding the frequency to change the tubing.</p> <p>On 6/13/24 at 10:19 AM, Unit Manager E was observed to look for dates on the tubing on R78's equipment and was unable to locate a date as to when the tubing was last changed. Unit Manager E was asked how often is the tubing changed. Unit Manager E explained, the tubing is to be changed weekly and labeled with a date.</p> <p>A review of R78's medical record revealed, R78 was admitted to the facility on [DATE] with diagnosis of Anoxic Brain Damage. R78's care plan noted, Focus: Resident has an impaired pulmonary/respiratory failure, tracheostomy, asthma. Date initiated: 05/26/2024. Goal: Resident will have reduced complications related to their altered pulmonary/respiratory status through next review. Date Initiated: 05/26/24. Intervention: Provide oxygen as needed when the resident exhibits signs/symptoms of difficulty breathing (short of breath, cyanosis, low O2 sats). Date Initiated: 05/30/2024.</p> <p>A review of the facility policy titled Oxygen Administration noted the following: change oxygen tubing and mask/cannula weekly and as needed if it becomes soiled or contaminated. Change nebulizer tubing and delivery devices every 72 hours, or per manufacturer recommendation, and as needed if they become soiled or contaminated.</p>		