

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  235623	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED  06/06/2024
NAME OF PROVIDER OR SUPPLIER  Royalton Manor, L L C		STREET ADDRESS, CITY, STATE, ZIP CODE 288 Peace Blvd St Joseph, MI 49085	

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 0689</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Ensure that a nursing home area is free from accident hazards and provides adequate supervision to prevent accidents.</p> <p><b>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY**</b> 48637</p> <p>Based on interview and record review, the facility failed to ensure safe transfer in 1 of 3 residents (Resident #101) reviewed for falls resulting in an unsafe transfer, fall and potential for injury.</p> <p>Findings include:</p> <p>Review of the Face Sheet and Minimum Data Set (MDS) dated [DATE] revealed R101's initial admitted was 2/20/2024 and had diagnoses of pulmonary embolism (condition where one or more arteries become blocked by a blood clot) and anxiety. Brief Interview for Mental Status (BIMS) reflected a score of 9 out of 15 which indicated R101 had moderate cognitive impairment (8-12 moderately impaired).</p> <p>During an interview on 6/4/2024 at 2:54 pm, R101 was sitting in her wheelchair and was confused and unable to answer questions regarding her falls.</p> <p>Review of the R101's Fall Report dated 5/26/2024 at 2130 revealed CNA (Certified Nursing Assistant (CNA II)) called writer into resident's room (R101) stating that she had to ease resident to the floor because resident (R101) was off balance when she was helping resident (R101) to transfer from her bed to her w/c (wheelchair) at 2130 (9:30 PM). Under immediate action taken, Staff will transfer resident with two persons using a gait belt. Educated CNA on proper transfer approach.</p> <p>Review of Post Fall Evaluation dated 5/26/2024, under #7 revealed, What type of assistance was guest/resident receiving at the time of fall? The box labeled other was checked and said, Assisted with less help than care plan describes. Under #10, Gait assist devices at time of fall: None. Under root cause of this fall, Describe initial intervention to prevent future falls: CNA (CNA II) instructed by writer to use two people and gait belt when transferring resident per care plan. New interventions after IDT (interdisciplinary) review, Educate CNA on reading the Kardex.</p> <p>Review of Certified Nursing Assistant Department Orientation Checklist for CNA II revealed Body mechanics, Positioning and Transfers which included gait belts was discussed on 1/23/2024 and signed off by CNA II and the Staff Development Coordinator/Designee on 1/25/2024.</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 0689</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>During an interview on 6/5/2024 at 2:20 PM, CNA II stated that she was trying to get R101 to the bathroom and R101 lost her balance so she was lowered to the floor. When asked if she used a gait belt, CNA II said, I think so. CNA II also reported that she didn't know R101 was changed to a 2 person assist because she was a 1 person assist until recently.</p> <p>On 6/6/2024 at 8:35 AM, Certified Occupational Therapist Assistant (COTA) MM was finishing working with R101 in therapy and reported that she had leg weakness and a cognitive decline so a gait belt should be used with all transfers with her. COTA MM said, Gait belts should be used with all transfers in general.</p> <p>During an interview on 6/6/2024 at 8:50 AM, Therapy Director (TD) LL stated that gait belts should be used for every transfer.</p> <p>Review of R101's care plan revealed, substantial/maximal assistance with two helpers with a revision date of 5/24/2024 made by Regional Registered Nurse (RRN) HH.</p> <p>During an interview on 6/5/2024 at 2:35 PM, DON B stated that a gait belt should be used with all transfers and if he sees something he will follow up with education and correct the behavior. DON also stated that CNA II was provided education since she was unclear if R101 was a 1 or 2 person transfer. He said that he wasn't sure if CNA II used a gait belt during the transfer. While reviewing R101's chart, DON B verified that RRN HH changed R101 to a 2 person assist from a 1 person assist on 5/24/2024. DON B stated that CNAs are trained and know how to look at the Kardex.</p> <p>Review of the Physical Function Policy with an origination date of 3/1/2013 and a revision date of 8/15/2023 under guidelines #6 revealed staff uses gait belts for safety during transfers, as needed.</p>		