

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 435119	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 11/13/2024
NAME OF PROVIDER OR SUPPLIER Wilmot Care Center Inc		STREET ADDRESS, CITY, STATE, ZIP CODE 501 4th St Wilmot, SD 57279	

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 0657</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Develop the complete care plan within 7 days of the comprehensive assessment; and prepared, reviewed, and revised by a team of health professionals.</p> <p>51094</p> <p>Based on South Dakota Department of Health (SD DOH) facility reported incident (FRI), record review, and policy review the provider failed to ensure that the care plan reflected the current individualized dietary needs for one of one sampled resident (1). Findings include:</p> <p>1. Review of the provider's DOH FRI report dated 9/26/24 revealed:</p> <p>*Resident 1 was provided with a peanut butter and jelly sandwich for lunch on 9/25/24 by CNA (certified nursing assistant) B.</p> <p>*Resident 1 had a recent decline in cognition, mobility, and chewing/swallowing.</p> <p>*Resident 1 tolerated tolerated the sandwich without choking or gagging.</p> <p>*Resident 1's care plan has been updated.</p> <p>2. Review of resident 1's electronic medical record revealed:</p> <p>*Her diagnoses included:</p> <p>-Alzheimer's disease (a brain disorder that causes a gradual decline in memory, thinking, and behavior).</p> <p>-Nutrition and metabolic disease.</p> <p>*A progress note dated 9/18/24 indicated that speech therapy evaluated the resident with new recommendations to: Change diet to pureed. Recommend all medications to be crushed in puree or in liquid form.</p> <p>*A progress note dated 9/20/24 indicated resident 1 was triggered for having had a weight loss and noted plans for her diet to be changed to pureed diet texture as ordered by speech therapy on 9/18/24.</p> <p>*A physician's order dated 9/24/24 for resident 1 to be provided a regular consistency diet, pureed texture [a smooth, soft, and uniform consistency that resembles pudding].</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 0657</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>*Resident 1's care plan:</p> <ul style="list-style-type: none"> -Did not reveal updated physician ordered diet changes to include a pureed diet. -Indicated that the kitchen is to serve meats cut up, including sandwiches/burgers. -Indicated Supervision of one [staff member] and sits at the assist table [for assistance with eating]. <p>3. Interview on 11/13/24 at 11:00 a.m. with director of nursing (DON) A revealed:</p> <ul style="list-style-type: none"> *Care plans were to be updated by the department managers immediately following an order change or resident status change. -The dietary manager had not updated resident 1's care plan immediately following the physician ordered diet change. <p>4. Review of the provider's Care Plan Policy dated 6/6/24 revealed:</p> <ul style="list-style-type: none"> *Assessments of residents are ongoing and care plans are revised as information about the resident and the resident's condition change. *The care planning/Interdisciplinary Team (IDT) is responsible for the review and updating of care plans: <ul style="list-style-type: none"> -When there has been a significant change in resident's condition. -When the desired outcome is not met. -When the resident has been readmitted from a hospital stay. -At least quarterly.

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<p>F 0805</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Ensure each resident receives and the facility provides food prepared in a form designed to meet individual needs.</p> <p>51094</p> <p>Based on South Dakota Department of Health (SD DOH) facility reported incident (FRI), record review, interview, and policy review, and interview, the provider failed to ensure the care plan reflected the current individualized diet plan ordered by the resident's physician for one of one sampled resident (1). Findings include:</p> <p>1. Review of provider's DOH FRI report dated 9/26/24 revealed:</p> <p>* Resident was fed a peanut butter and jelly sandwich for lunch on 9/25/24 by CNA (certified nursing assistant) B.</p> <p>*Resident's care plan has been updated.</p> <p>*Resident has had a recent decline in cognition, mobility, and chewing/swallowing.</p> <p>2. Review of resident 1's electronic medical record revealed:</p> <p>*Her brief Interview for Mental Status (BIMS) assessment score dated 7/27/24 was 2, which indicated she had severe cognitive impairment.</p> <p>*Physician's order dated 9/24/24 for a regular consistency diet, pureed texture (a smooth, soft, and uniform consistency that resembles pudding).</p> <p>*Progress note dated 9/18/24 revealing that speech therapy evaluated the resident with new recommendations: Change diet to pureed. Recommend all meds crushed in puree or in liquid form.</p> <p>*Progress note dated 9/20/24 revealing that resident 1 triggered for weight loss and noted plans for diet change to pureed diet texture as previously ordered by speech therapy on 9/18/24.</p> <p>*Her diagnoses included:</p> <p>-hyperlipidemia (high cholesterol).</p> <p>-Alzheimer's disease (a brain disorder that causes a gradual decline in memory, thinking, and behavior).</p> <p>-Nutrition and metabolic disease.</p> <p>*Resident 1's care plan:</p> <p>-Did not reflect a pureed diet.</p> <p>-Indicated that the kitchen is to serve meats cut up, including sandwiches/burgers.</p> <p>(continued on next page)</p>		

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<p>F 0805</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>-Supervision of one and sits at the assist table.</p> <p>3. Interview on 11/12/24 at 4:25 p.m. with certified nursing assistant (CNA) B regarding the above incident involving resident 1 revealed:</p> <p>*CNA B provided and assisted resident 1 with eating a peanut butter and jelly sandwich.</p> <p>-She was aware of the order for resident 1 to eat pureed foods.</p> <p>-She was instructed by the nurse on duty that day to assist resident 1 in eating the sandwich.</p> <p>-She had been concerned about the resident as she had not eaten much for three days before that.</p> <p>4. Interview on 11/13/24 at 8:35 a.m. with dietary aide C revealed:</p> <p>*He had worked in the facility for 3 years.</p> <p>*The process when a resident's diet would change was as follows:</p> <p>-Speech therapy would evaluate the resident.</p> <p>-Speech therapy would notify the administrator of the suggested changes.</p> <p>-The doctor would send new dietary orders for the resident.</p> <p>-Dietary staff would be notified of the resident's diet changes.</p> <p>5. Interview on 11/13/24 at 9:02 a.m. with registered nurse (RN) D revealed:</p> <p>*She was not aware of the above incident regarding resident 1 having been provided with a sandwich that was the wrong diet type.</p> <p>*Weekly resident updates are located on a clipboard at the nurses' station.</p> <p>-Weekly resident updates are the responsibility of the staff nurses during each shift.</p> <p>6. Interview on 11/13/24 at 11:00 a.m. with director of nursing (DON) A revealed:</p> <p>No education or staff training had been completed with staff since resident 1 was given the peanut butter and sandwich on 9/25/24.</p> <p>*She attended one meal daily to complete the dining observation.</p> <p>*No documented auditing regarding resident's diets or diet changes has been completed since the above incident that involved resident 1.</p> <p>7. Review of the provider's Alteration of Texture and Consistency Diet Policy dated 1/2007 reveals:</p> <p>(continued on next page)</p>

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<p>F 0805</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>*Consistency modifications were to be a part of the resident's physician diet order.</p> <p>*Procedures for levels of blended diets will be followed for the resident who tolerates some softer foods in whole form.</p> <p>*Foods that must be pureed or ground will be done by the dietary department.</p> <p>*At no time will dietary personnel or Nurse Aide make a diet order change without a written order. All consistency changes are ultimately approved by the physician.</p> <p>8. Review of the provider's Blended/Pureed Foods Policy dated 1/2007 revealed:</p> <p>*All foods must be pureed using a blender or food processor.</p> <p>*A complete meal consisting of meat, potato or substitute, milk, vegetable, fruit or dessert must be served.</p> <p>*All foods should be served with a consistency of mashed potatoes, if added moisture needs to be added, a pot of warm milk should be put on the cart for nursing to use in thinning the puree.</p> <p>*Blended (pureed) diets would be individualized according to individual residents needs or diet restrictions.</p>