

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 505099	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 06/28/2024
NAME OF PROVIDER OR SUPPLIER Spokane Valley Health and Rehabilitation of Cascad		STREET ADDRESS, CITY, STATE, ZIP CODE East 17121 Eighth Avenue Spokane Valley, WA 99016	

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 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>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 38527</p> <p>Based on observation, interview, and record review, the facility failed to ensure 1 of 3 sampled residents (Resident 1), reviewed for food and nutrition services, was served the appropriate diet texture to prevent choking hazards. This failed practice placed the resident at risk for decreased nutritional intake, serious injury, and diminished quality of life.</p> <p>Findings included .</p> <p>Review of the annual assessment dated [DATE] showed Resident had diagnoses of dementia, stroke, aspiration (inhalation of foreign material into the respiratory tract), and received a mechanically altered diet (modification to the texture of food secondary to a physician order).</p> <p>Review of a 06/07/2024 facility investigation showed Resident 1 was coughing/gagging on their meal and required staff to provide suctioning to clear their airway. Per the investigation report, the resident was served a fish sandwich, tater tots and coleslaw, but had only consumed the tater tots at the time of the incident.</p> <p>Review of the electronic physician orders for Resident 1 showed on 03/08/2024 the resident's food texture was downgraded from L7: Regular texture to L5: Minced and Moist texture. On 05/23/2024 the resident's food texture was again downgraded from L5 to L3: Advanced texture (transitional level of texture that excludes hard, crunchy and sticky foods).</p> <p>Review of the 06/07/2024 Diet Spread Sheet showed residents with orders for L3 diet types should receive the following substitutions:</p> <ul style="list-style-type: none"> - The fish sandwich should be ground - Mashed potatoes instead of tater tots - Steamed cabbage instead of coleslaw <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 0805</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>In an interview on 06/25/2024 at 2:30 PM Staff C, Nursing Assistant (NA), stated on 06/07/2024 Resident 1 had an aspiration event a few weeks prior when they were served a meal that included crunchy foods. Staff C stated the resident was not chewing their tater tots and was swallowing them whole. Staff C stated they worked for an agency and were less familiar with the resident, so they asked another unidentified NA who was familiar with the resident and was told the resident had eaten tater tots before so it was okay with their diet.</p> <p>In an interview at 3:38 PM the same day, Staff B, Cook, stated the Diet Spread Sheet was posted daily by the dietary manager or the cook in charge for staff to reference when preparing resident meals. Per Staff B, residents' diet orders were identified on the diet slips on their meal trays. Staff B stated residents who were ordered an L3 diet should have mashed potatoes instead of tater tots, or whatever was identified on the spread sheet.</p> <p>Observation on 06/28/2024 at 12:09 PM showed Resident 1 was seated in their wheelchair at the nurse's station in view of multiple staff members, slowly feeding themselves lunch. The resident's foods were pureed (smooth and creamy texture) and the resident showed no signs of aspiration/coughing/gagging.</p> <p>In an interview on 06/28/2024 at 12:32 PM, Staff A, Cook, stated it was the responsibility of the cook to make sure dietary staff prepared resident meal trays properly. Staff A stated in the past the spreadsheets were not always correct, so staff were not always in the habit of checking the spreadsheet.</p> <p>Reference: WAC 388-97-1100 (1); -1220</p>		