

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER / SUPPLIER / CLIA IDENTIFICATION NUMBER 235294	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 07/08/2020
NAME OF PROVIDER OF SUPPLIER MISSION POINT NSG & PHY REHAB CTR OF CEDAR SPRINGS		STREET ADDRESS, CITY, STATE, ZIP 400 JEFFREY CEDAR SPRINGS, MI 49319	
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 F 0580	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)		
<p>Level of harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Immediately tell the resident, the resident's doctor, and a family member of situations (injury/decline/room, etc.) that affect the resident.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY**</p> <p>Based on observation, interview and record review the facility failed to notify physician of a change in resident condition for 1 of 3 residents (Resident #101) reviewed for physician notification resulting in the potential for worsening resident condition and a delay in resident treatment. Findings include: Review of the Policy Novel Coronavirus Prevention and Response dated 5/12/20 revealed, This facility will respond promptly upon suspicion of illness associated with the novel Coronavirus in effort to identify, treat, and prevent the spread of [MEDICAL CONDITION]. The policy further revealed, Staff shall be alert to the signs of Covid 19 (novel Coronavirus) and notify the resident's physician if evident: fever; cough or shortness of breath. Review of Fundamentals of Nursing (Potter and Perry) 9th edition revealed, The temperature of older adults is at the lower end of the normal temperature range, 36 to 36.8 C (96.8 to 98.3 F) orally and 36.6 to 37.2 C (98 to 99 F) rectally. Therefore temperatures considered within normal range sometimes reflect a fever in an older adult. Older adults are very sensitive to slight changes in environmental temperature because their thermoregulatory systems are not as efficient. Be especially attentive to subtle temperature changes and other manifestations of fever in this population such as tachypnea, anorexia, falls, [MEDICAL CONDITION], and overall functional decline. Older adults without teeth or with poor muscle control may be unable to close their mouths tightly to obtain accurate oral temperature readings. Potter, Patricia A.; Perry, Anne Griffin; Stockert, Patricia; Hall, Amy. Fundamentals of Nursing - E-Book (Kindle Locations -). Elsevier Health Sciences. Kindle Edition. Review of the Face Sheet revealed Resident #101 was a [AGE] year old male admitted to the facility on [DATE] and diagnosed with [REDACTED]. Review of the Minimum Data Set ((MDS) dated [DATE] revealed Resident #101 had a brief interview for mental status (BIMS) score of 15 out of 15 which indicated he was cognitively intact. During an observation on 7/7/20 at 1:00 pm, Resident #101 was noted to be in his room in his wheelchair. During an interview on 7/7/20 at 1:00 pm, Resident #101 stated he had moved rooms in the facility on the 4th (7/4/20) and entered the facility on the 16th (6/16/20). Review of the Nurses Notes dated 6/29/20 at 5:19 am revealed, Resident (Resident #101) is being monitored for 14 days for fever T-98.9 cough, SOB, sore throat, headache, chills, diarrhea, none noted this shift, will continue to monitor. Review of the Skilled Evaluation dated 6/29/20 at 6:43 pm revealed Resident #101 had an oral temperature of 100.7 degrees Fahrenheit. The Skilled Evaluation revealed no documentation of physician notification or nursing supervisor notification. During an interview on 7/7/20 at 1:20 pm, Licensed Practical Nurse (LPN) D stated the signs and symptoms of Covid 19 were high fever, shortness of breath, cough, headache and stated a temperature greater than 100 degrees Fahrenheit was questionable. LPN D reviewed the Skilled Evaluation report dated 6/29/20 and stated, no she did not contact the physician about the elevated temperature of Resident #101. LPN D further stated, no she did not contact the Director of Nursing (DON) or unit manager about the elevated temperature. During an interview on 7/7/20 at 1:47 pm, LPN C reviewed Resident #101 vital signs and stated, on 6/29/20 Resident #101's temperature was 100.7 degrees Fahrenheit and there's not notes (nurses notes) to indicate a communication with the physician, DON or supervising nurse. During an interview on 7/8/20 at 1:02 pm, DON B stated Resident #101's recorded temperature was 100.7 degrees Fahrenheit. DON B stated, nobody talked to me about Resident #101's elevated temperature. DON B stated staff were always asked to call the DON when residents had a low grade fever. DON B stated Resident #101 was being monitored daily for temperature and respiratory concerns related to Covid 19 symptoms.</p>		
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE	

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.