

DEPARTMENT OF HEALTH AND HUMAN SERVICES

FORM APPROVED

CENTERS FOR MEDICARE & MEDICAID SERVICES

OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTIONS		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:		(X2) MULTIPLE CONSTRUCTION A. BUILDING B. WING		(X3) DATE SURVEY COMPLETED 06/16/2022	
NAME OF PROVIDER OR SUPPLIER OASIS AT 30TH		STREET ADDRESS, CITY, STATE, ZIP CODE 5651 E 30TH STREET, INDIANAPOLIS, , 46218					
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES...	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION...			(X5) COMPLETION DATE	
R 0000	INITIAL COMMENTS This visit was for the investigation of Complaints IN00382747, IN00382764, and IN00382173. Complaint IN00382747- Substantiated. State Residential Findings are cited at R145, R148, R179, R240, and R9999. Complaint IN00382764 - Substantiated. State Residential Findings are cited at R145, R148, R179, R240, and R9999. Complaint IN00382173 - Unsubstantiated due to lack of evidence. Survey Dates: June 15 and 16, 2022 Facility Number: 013347 Residential: 112 These State Residential Findings are cited in accordance with 410 IAC 16.2-5. Quality review completed on	R 0000					

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

	June 27, 2022			
R 0145	Sanitation and Safety Standards - Deficiency 410 IAC 16.2-5-1.5(b) (b) The facility shall maintain equipment and supplies in a safe and operational condition and in sufficient quantity to meet the needs of the residents. Based on observation, interview and record review, the facility failed to ensure a resident's ceiling was in good repair for 1 of 24 residents reviewed. (Resident Q) Findings include: The clinical record for Resident Q was reviewed on 6/14/22 at 1:00 p.m. The diagnoses included, but were not limited to, chronic obstructive pulmonary disease. A Level of Service Assessment dated 2/24/22, indicated Resident Q's receptive communication, judgement and awareness of needs were scored as the following: "...Receptive communication...Understands information conveyed with difficulty...Judgement...experiences difficulty in decision-making when faced with new tasks or situations...Awareness of own needs:...Has difficulty	R 0145	R 145: Sanitation and Safety Standards The facility shall maintain equipment and supplies in a safe and operational condition and in sufficient quality to meet the needs of the resident. (Apartment ceiling) 1. What corrective Actions will be accomplished for those residents found to have been affected by the deficient practice: A work order was placed and maintenance began repairs on affected resident apartment ceiling. Residents have shown no adverse effects of incident. 2. How the facility will identify other residents having the potential to be affected by the same deficient practices and what corrective actions will be taken: Staffing shall be sufficient to ensure that all residents have maintenance services offered per policy. 3. What measures will be put into place or what systematic changes the facility will make to ensure that the deficient practice does not recur: Employees and residents will be inserviced on identifying repairs and how to report them. 4. How the corrective action will be monitored to ensure the deficient practice will not recur, i.e., what	07/15/2022

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

understanding those needs, which must be met, but will cooperate when given direction or explanation..."

An observation was made of Resident Q's room on 6/14/22 at 12:00 p.m. The ceiling was observed with a large gray area on the white ceiling with a ruler length size crack in the middle of the gray area. There was exposure of drywall in the cracked portion of the ceiling. Resident Q indicated at that time, the ceiling had been cracked for about 2 weeks. The maintenance man was aware, and had stated he was unable to repair the crack until the ceiling dried. The resident was told something had occurred with the resident's apartment above him causing the ceiling damage. The maintenance man had not been back to repair.

An interview was conducted with the Maintenance Supervisor on 6/14/22 at 3:49 p.m. He indicated about 3 weeks ago he had been in Resident Q's room regarding a pipe that had clogged causing a flood in his room. The ceiling had the gray area on the ceiling from a previous repair in the past, but there had not been a crack in the ceiling at that time. The residents need to let the front desk receptionist aware of any repairs needed for their apartments. The receptionist will

quality assurance program will be put into place: Department Directors will walk through the building daily and will report to the appropriate department director. Maintenance Director to complete audit weekly to ensure no repair requests are missed.

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

then place a work order in the computer to inform the maintenance department the need of a repair in his or her apartment. They also can let nursing staff know, and they can report to the receptionist to put in a work order. He did not have a work order in his system Resident Q's ceiling needed repaired.

This Residential Tag relates to Complaints IN00382747 and IN00382764.

Based on observation, interview and record review, the facility failed to ensure a resident's ceiling was in good repair for 1 of 24 residents reviewed.
(Resident Q)

Findings include:

The clinical record for Resident Q was reviewed on 6/14/22 at 1:00 p.m. The diagnoses included, but were not limited to, chronic obstructive pulmonary disease.

A Level of Service Assessment dated 2/24/22, indicated Resident Q's receptive communication, judgement and awareness of needs were scored as the following:
"...Receptive communication...Understands information conveyed with difficulty...Judgement...experiences difficulty in decision-making when faced with new tasks or

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

situations...Awareness of own needs:...Has difficulty understanding those needs, which must be met, but will cooperate when given direction or explanation..."

An observation was made of Resident Q's room on 6/14/22 at 12:00 p.m. The ceiling was observed with a large gray area on the white ceiling with a ruler length size crack in the middle of the gray area. There was exposure of drywall in the cracked portion of the ceiling. Resident Q indicated at that time, the ceiling had been cracked for about 2 weeks. The maintenance man was aware, and had stated he was unable to repair the crack until the ceiling dried. The resident was told something had occurred with the resident's apartment above him causing the ceiling damage. The maintenance man had not been back to repair.

An interview was conducted with the Maintenance Supervisor on 6/14/22 at 3:49 p.m. He indicated about 3 weeks ago he had been in Resident Q's room regarding a pipe that had clogged causing a flood in his room. The ceiling had the gray area on the ceiling from a previous repair in the past, but there had not been a crack in the ceiling at that time. The residents need to let the front desk receptionist aware of

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

	any repairs needed for their apartments. The receptionist will then place a work order in the computer to inform the maintenance department the need of a repair in his or her apartment. They also can let nursing staff know, and they can report to the receptionist to put in a work order. He did not have a work order in his system Resident Q's ceiling needed repaired. This Residential Tag relates to Complaints IN00382747 and IN00382764.			
R 0148	Sanitation and Safety Standards - Deficiency 410 IAC 16.2-5-1.5(e)(1-4) (e) The facility shall maintain buildings, grounds, and equipment in a clean condition, in good repair, and free of hazards that may adversely affect the health and welfare of the residents or the public as follows: (1) Each facility shall establish and implement a written program for maintenance to ensure the continued upkeep of the facility. (2) The electrical system, including appliances, cords, switches, alternate power sources, fire alarm and detection systems, shall be maintained to guarantee safe functioning and compliance with state electrical codes.	R 0148	R 148: Sanitation and Safety Standards The facility shall maintain buildings, grounds, and equipment in a clean condition, in good repair, and free of hazards that may adversely affect the health and welfare of the residents or the public. (electrical outlets) 1. 1. What corrective Actions will be accomplished for those residents found to have been affected by the deficient practice: A work order was placed and maintenance began repairs on affected resident apartment electricity. Residents have shown no adverse effects of incident. 2. How the facility will identify other residents having the potential to be affected by the same deficient	07/15/2022

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

	(3) All plumbing shall function properly and comply with state plumbing codes. (4) At least yearly, heating and ventilating systems shall be inspected. Based on observation, interview, and record review, the facility failed to ensure proper functioning of a resident's electrical outlets for 1 of 112 residents in the facility. (Resident B) Findings include: The clinical record for Resident B was reviewed on 6/14/22 at 11:20 a.m. The diagnoses included, but were not limited to: anxiety, deafness, depression, and mood disorder. The 2/24/22 Level of Service Assessment/Evaluation indicated she rarely/never understood information conveyed. May or may not hear. May or may not understand the language. Her ability to express herself was limited to making concrete requests regarding basic needs. An interview was conducted with Resident B's father, Family Member 6, on 6/14/22 at 12:05 p.m. via video call in Resident B's apartment. He indicated he turned on the window unit air conditioner in Resident B's apartment 3 weeks ago, and		practices and what corrective actions will be taken: Staffing shall be sufficient to ensure that all residents have maintenance services offered per policy. 3. What measures will be put into place or what systematic changes the facility will make to ensure that the deficient practice does not recur: Employees and residents will be inserviced on identifying repairs and how to report them. 4. How the corrective action will be monitored to ensure the deficient practice will not recur, i.e., what quality assurance program will be put into place: Department Directors will walk through the building daily and will report to the appropriate department director. Maintenance Director to complete audit weekly to ensure no repair requests are missed.	
--	---	--	---	--

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

that was when he figured out the outlets were not working. He informed the lady at the front desk about the outlets at that time, because it was on a weekend, and the maintenance staff was already gone. She informed him she would let maintenance know the following Monday morning.

An observation and interview was conducted with Resident B in her apartment on 6/14/22 at 12:00 p.m. Resident B indicated 4 of the outlets in her living room/kitchen area were not working. She pointed to the one under the window containing a window unit air conditioner, one under the double window in the living room, one under the clock in the kitchen, and one by the television in the living room. A portable battery charger was plugged into a working outlet and blinking, indicating it was charging the batteries in it. The battery charger was unplugged from the working outlet and plugged into each of the 4 outlets Resident B indicated were not working. The battery charger did not light up for any of the 4 outlets, indicating the outlets were not working. MA (Maintenance Assistant) 2 entered Resident B's room during this observation.

An interview was conducted with MA 2 on 6/14/22 at 12:15 p.m. after he entered the

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

apartment. He indicated the MS (Maintenance Supervisor) just informed him half of Resident B's electrical outlets were not working. Today was the first he'd heard about it.

An interview was conducted with the MS on 6/14/22 at 12:15 p.m. He indicated the Administrator just informed him about the nonworking outlets today. If they couldn't fix them, they would have the electrical company look at them on their next scheduled visit on 6/27/22. The front desk never informed him of the nonworking outlets or received a work order for them. He'd taught the front desk how to complete work orders in the past.

An interview was conducted with the Administrator on 6/14/22 at 3:00 p.m. She indicated Family Member 6 called her earlier today and informed her of the nonworking outlets. There was no work order completed, and the front desk knew not to complete them.

The Work Orders policy was provided by the Administrator on 6/14/22 at 4:35 p.m. It read, "Purpose: ...A written document authorizing the completion of a specific task. A written request for work to be completed. Procedure: Work orders are to be completed for all

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

work/repairs required in the community....Levels of Work Order: All work orders are to be categorized into one of the following levels of importance:....C. Moderate - work orders that need attention and resolution as soon as possible, but come after Critical and High level. Examples would be resident apartment light bulb changes, dripping faucets, outlet changes, drywall cracking, carpet cleaning, landscaping."

This Residential Tag relates to Complaints IN00382747 and IN00382764.

Based on observation, interview, and record review, the facility failed to ensure proper functioning of a resident's electrical outlets for 1 of 112 residents in the facility.
(Resident B)

Findings include:

The clinical record for Resident B was reviewed on 6/14/22 at 11:20 a.m. The diagnoses included, but were not limited to: anxiety, deafness, depression, and mood disorder.

The 2/24/22 Level of Service Assessment/Evaluation indicated she rarely/never understood information conveyed. May or may not hear. May or may not understand the language. Her ability to express

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

herself was limited to making concrete requests regarding basic needs.

An interview was conducted with Resident B's father, Family Member 6, on 6/14/22 at 12:05 p.m. via video call in Resident B's apartment. He indicated he turned on the window unit air conditioner in Resident B's apartment 3 weeks ago, and that was when he figured out the outlets were not working. He informed the lady at the front desk about the outlets at that time, because it was on a weekend, and the maintenance staff was already gone. She informed him she would let maintenance know the following Monday morning.

An observation and interview was conducted with Resident B in her apartment on 6/14/22 at 12:00 p.m. Resident B indicated 4 of the outlets in her living room/kitchen area were not working. She pointed to the one under the window containing a window unit air conditioner, one under the double window in the living room, one under the clock in the kitchen, and one by the television in the living room. A portable battery charger was plugged into a working outlet and blinking, indicating it was charging the batteries in it. The battery charger was unplugged from the working outlet and plugged into each of the 4

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

outlets Resident B indicated were not working. The battery charger did not light up for any of the 4 outlets, indicating the outlets were not working. MA (Maintenance Assistant) 2 entered Resident B's room during this observation.

An interview was conducted with MA 2 on 6/14/22 at 12:15 p.m. after he entered the apartment. He indicated the MS (Maintenance Supervisor) just informed him half of Resident B's electrical outlets were not working. Today was the first he'd heard about it.

An interview was conducted with the MS on 6/14/22 at 12:15 p.m. He indicated the Administrator just informed him about the nonworking outlets today. If they couldn't fix them, they would have the electrical company look at them on their next scheduled visit on 6/27/22. The front desk never informed him of the nonworking outlets or received a work order for them. He'd taught the front desk how to complete work orders in the past.

An interview was conducted with the Administrator on 6/14/22 at 3:00 p.m. She indicated Family Member 6 called her earlier today and informed her of the nonworking outlets. There was no work order completed, and the front

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

	desk knew not to complete them. The Work Orders policy was provided by the Administrator on 6/14/22 at 4:35 p.m. It read, "Purpose: ...A written document authorizing the completion of a specific task. A written request for work to be completed. Procedure: Work orders are to be completed for all work/repairs required in the community....Levels of Work Order: All work orders are to be categorized into one of the following levels of importance:....C. Moderate - work orders that need attention and resolution as soon as possible, but come after Critical and High level. Examples would be resident apartment light bulb changes, dripping faucets, outlet changes, drywall cracking, carpet cleaning, landscaping." This Residential Tag relates to Complaints IN00382747 and IN00382764.			
R 0179	Physical Plant Standards - Deficiency 410 IAC 16.2-5-1.6(c) (c) Each facility shall have an adequate air conditioning system, as governed by applicable rules of the fire prevention and building safety commission (675 IAC). The air conditioning system shall be	R 0179	R 179: Physical Plant Standards Each facility shall have an adequate air conditioning system, as governed by applicable rules of the fire prevention and building safety commission. The air conditioning system shall be maintained in normal operating condition and utilized as necessary to provide comfortable	07/15/2022

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

maintained in normal operating condition and utilized as necessary to provide comfortable temperatures in all resident and public areas. Based on observation, interview, and record review, the facility failed to ensure air conditioner units in the residents' apartments were in working order and timely offer residents fans that were without working air conditioners for 9 of 112 residents reviewed for working air conditioners. (Residents C, E, R, S, Q, V, X, Y, and BB) Findings include: An interview and observation was conducted with Certified Nursing Assistant (CNA) 3 and CNA 4 on 6/14/22 at 11:43 a.m. on the 3rd floor hallway. The hallway temperature felt warm. CNA 3 was fanning herself with a sheet of paper and her hand. They indicated there were some residents that did not have working air conditioners. Resident Q was one of them. This had been going on all summer. The Indianapolis, Indiana Weather Forecast and Conditions at www.weather.com was retrieved on 6/16/22. It indicated the following days the temperatures had reached 90 degrees or above with heat	temperatures in all resident and common areas. 1. What corrective Actions will be accomplished for those residents found to have been affected by the deficient practice: A work order was placed and maintenance began repairs on affected resident apartment air conditioners. Additional apartments with maintenance needs were identified and HVAC company called to repair. Residents have shown no adverse effects of incident. 2. How the facility will identify other residents having the potential to be affected by the same deficient practices and what corrective actions will be taken: Staffing shall be sufficient to ensure that all residents have maintenance services offered per policy, a backup company was identified to be utilized if one company is unavailable for repairs. 3. What measures will be put into place or what systematic changes the facility will make to ensure that the deficient practice does not recur: Employees and residents will be inserviced on identifying repairs and how to report them. Resident apartments with an identified need will be placed on a monitoring log and nursing will perform wellness checks as	
---	---	--

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

advisory's in effect: 6/13/22, 6/14/22, and 6/15/22. According to fox59.com/weather, the 7 day weather forecast for Indianapolis, Indiana between 6/16/22 and 6/22/22 was as follows in Fahrenheit degrees: 6/16/22 - 92, 6/17/22 - 85, 6/18/22 - 83, 6/19/22 - 84, 6/20/22 - 92, 6/21/22 - 95, and 6/22/22 - 93. 1. The clinical record for Resident C was reviewed on 6/15/22 at 2:15 p.m. The diagnoses included, but were not limited to, dementia, anxiety, and depression. The 2/24/22 Level of Service Assessment/Evaluation indicated in regards to his adaptation to change, he needed daily support and reassurance while change was being discussed, when decisions were being made, and while changes were being implemented. He may be afraid or insecure. It indicated he had difficulty understanding his own needs, which must be met, but would cooperate when given direction or explanation. An interview was conducted with the Maintenance Supervisor (MS) on 6/14/22 at 12:15 p.m. He indicated Resident C's air conditioning in his room hadn't been working	indicated to ensure temperatures are comfortable for the resident. Affected apartments received a portable AC unit and/or a fan to circulate air. 5. How the corrective action will be monitored to ensure the deficient practice will not recur, i.e., what quality assurance program will be put into place: Department Directors will walk through the building daily and will report to the appropriate department director. Maintenance Director to complete audit weekly to ensure no repair requests are missed.	
--	---	--

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

since last week. The heating and cooling company they used looked at his unit on 6/9/22 and ordered parts for it. They were currently awaiting the parts to come in and for the company to come back and fix it.

An observation was conducted with Resident C in his 3rd floor apartment on 6/14/22 at 2:54 p.m. His thermostat read 88 degrees Fahrenheit, and it was very warm in his room. There was no fan in his room.

Resident C was feeding his cat at this time. There was a large bowl of chocolate ice cream on the coffee table.

An interview was conducted with Resident C on 6/14/22 at 2:54 p.m. during the above observation. He indicated he was hot, and his room had been hot for 2 or 3 days. He would like a fan, but no one had offered him one, and he didn't have any ice in his apartment either. He was eating the ice cream to keep cool. He was concerned about his cat and making sure she got plenty of water. He knew his cat was hot, because she was sleeping more and drinking a lot of water.

An interview was conducted with the MS on 6/14/22 at 3:14 p.m. He indicated no fan or temperature cooling unit was offered to Resident C, because everything additional was

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

already being used.

2. The clinical record for Resident E was reviewed on 6/15/22 at 2:20 p.m. The diagnoses included, but were not limited to, glaucoma.

The 4/1/22 Level of Service Assessment/Evaluation indicated in regards to his adaptation to change, he needed daily support and reassurance while change was being discussed, when decisions were being made, and while changes were being implemented. He may be afraid or insecure. It indicated he had difficulty understanding his own needs, which must be met, but would cooperate when given direction or explanation.

During an environmental tour on 6/15/22 at 10:00 a.m. with the MS (Maintenance Supervisor), an observation of Resident E's apartment was made. His thermostat read 83 degrees Fahrenheit and his room was very warm. The MS checked the thermostat and air conditioning unit, indicated it was not working, and was unaware it was not working.

3. The clinical record for Resident Q was reviewed on 6/14/22 at 1:00 p.m. The diagnosis included, but was not limited to, chronic obstructive pulmonary disease.

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

A Level of Service Assessment dated 2/24/22, indicated Resident Q's receptive communication, judgement and awareness of needs were scored as the following:
"...Receptive communication...Understands information conveyed. May miss some part or intent of the message...Judgement...experiences difficulty in decision-making when faced with new tasks or situations...Awareness of own needs:...Has difficulty understanding those needs, which must be met, but will cooperate when given direction or explanation..."

An observation was made of Caregiver 5 by the elevator on 6/14/22 at 11:56 a.m. Caregiver 5 was observed perspiring and fanning herself waiting for the elevator. She indicated Resident Q's room was "very hot". He did not have air condition, and he has been without it for a couple of weeks.

An observation was made of Resident Q's room on 6/14/22 at 12:00 p.m. The resident's apartment was observed with the front door to his room and the windows opened. The thermostat in the resident's room was reading 84 degrees Fahrenheit. He indicated, "it is so hot in here." The resident was unable to recall how long

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

the air condition had not been working. Resident Q indicated his room was so hot, Caregiver 5 had to leave and go downstairs. She couldn't stand the heat in the room any longer. The maintenance man had been in his apartment that morning and had told him a contractor would be coming out to fix the air condition. There was no observation of a fan in the resident's room.

An observation was made of Resident Q's room on 6/14/22 at 2:47 p.m. Resident Q's windows were observed opened, and the thermostat was reading 86 degrees Fahrenheit. The resident indicated the room was "very hot." He would like a fan, but no one has offered him one.

An observation was made of Resident Q's room with the Maintenance Supervisor on 6/14/22 at 3:49 p.m. The resident's apartment was observed with the windows opened. The resident's thermostat was reading 86 degrees Fahrenheit. There was no fan observed in the resident's apartment. He indicated a work order was placed about the resident's air conditioner not functioning yesterday evening. He was made aware that morning. There were no fans available to provide to Resident Q at that

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

time.

An interview was conducted with the Administrator on 6/14/22 at 4:45 p.m. She indicated she was leaving to purchase fans for the residents without air.

4. The clinical record for Resident Y was reviewed on 6/14/22 at 1:15 p.m. The diagnoses included, but were not limited to, chronic obstructive pulmonary disease and shortness of breath.

A Level of Service Assessment dated 2/25/22, indicated Resident Y's receptive communication, judgement and awareness of needs were scored as the following:
"...Receptive communication...Understands information conveyed. May miss some part or intent of the message...Judgement...decision s are poor, requiring cueing and supervision...Awareness of own needs:...Does not understand those needs that must be met..."

An interview was conducted with Resident Y on 6/14/22 at 12:25 p.m. She indicated she does not have air condition and has not had it for 3-4 weeks. The maintenance department was aware and has done nothing to address the problem. She doesn't even have a thermostat on her wall.

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

An observation was made of Resident Y's room with the resident on 6/14/22 at 1:24 p.m. The resident's room was observed with the windows opened with no thermostat plate on the wall. The wires to the thermostat was on the wall, but no cover plate was observed. The resident indicated at that time, the room was "hot." She had not been offered anything this whole time she has been without air until that morning. The housekeeper had came into her room to clean and brought her a fan. The maintenance department keeps telling her the air condition company was waiting for a part to come in to address the problem.

During an interview with the Maintenance Supervisor on 6/14/22 at 3:17 p.m., he indicated the air condition company had come out last Thursday (6/9/22), to repair Resident Y's air condition that had been ordered the week before. The part was incorrect, and they had to reorder.

5. The clinical record for Resident BB was reviewed on 6/14/22 at 12::00 p.m. The diagnoses included, but were not limited to, asthma and dementia.

A Level of Service Assessment dated 2/24/22, indicated Resident BB's receptive

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

communication, judgement and awareness of needs were scored as the following:
"...Receptive communication...Understands information conveyed without difficulty...Judgement...experiences difficulty in decision-making when faced with new tasks or situations...Awareness of own needs:...Has difficulty understanding those needs, which must be met, but will cooperate when given direction or explanation..."

A heating and air service invoice dated 8/2/21 was provided by the Administrator on 6/15/22 at 10:10 a.m. It indicated Resident BB's air condition had been serviced that day. It indicated "unit has failing compressor, added a super boost for temporarily cooling but will need a compressor soon.."

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

An observation was made of Resident BB's room on 6/14/22 at 2:52 p.m. The resident's thermostat was reading 86 degrees Fahrenheit. The resident indicated her air condition was not working. She was unable to recall how long it had been out, but she knew it had been atleast a couple of days. Her daughter had reported to the front desk and brought her a fan to keep cool. They were told someone would be coming out today to service it, but no one has came yet.

During a environmental tour with the Maintenance Supervisor on 6/15/22 at 10:00 a.m., Resident BB's room was observed. The resident's thermostat was reading 86 degrees Fahrenheit in heat setting. The Maintenance Supervisor switched the setting to air, and it did not work. He was made aware of her air condition not working on 6/13/22.

An observation was made of Resident BB's room with the Maintenance Assistant on 6/15/22 at 11:45 a.m. The resident's thermostat was reading 89 degrees Farenheit in the apartment. She had turned off her fan.

At the time of exit on 6/15/22 at 3:35 p.m., the Administrator had not been able to provide documentation the compressor

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

had been replaced in Resident BB's apartment.

6. The clinical record for Resident X was reviewed on 6/15/22 at 1:35 p.m. The diagnosis included, but was not limited to, Multiple Sclerosis.

A Level of Service Assessment dated 3/4/22, indicated Resident X's receptive communication, judgement and awareness of needs were scored as the following: "...Receptive communication...Understands information conveyed without difficulty...Judgement...decisions are made in an organized manner. daily routine and decisions are consistent, and reasonable...Awareness of own needs:...understands those needs that must be met for self-maintenance..."

An observation was made of Resident X's room on 6/15/22 at 10:25 a.m. The resident indicated she did not believe her air condition was working. It was "stuffy." It will not cool down. The resident's thermostat was reading 86 degrees Fahrenheit.

An observation was made of Resident X's room with the Maintenance Supervisor on 6/15/22 at 11:06 a.m. The thermostat in the room was reading 86 degrees Fahrenheit. The Maintenance Supervisor indicated the resident's air

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

condition needed recharged. It was blowing out air but not cool. He did not have a work order nor aware of Resident X's air conditioner was not working.

7. The clinical record for Resident R was reviewed on 6/15/22 at 1:45 p.m. The diagnosis included, but was not limited to, dementia.

A Level of Service Assessment dated 2/24/22, indicated Resident R's receptive communication, judgement and awareness of needs were scored as the following:
"...Receptive communication...Understands information conveyed. May miss some part or intent of the message...Judgement...decision s are poor, requiring cueing and supervision...Awareness of own needs:...Has difficulty understanding those needs, which must be met, but will cooperate when given direction or explanation..."

An observation was made of Resident R's room on 6/15/22 at 10:40 a.m. The resident's thermostat was reading 81 degrees Fahrenheit. The resident indicated the air conditioner was not working. It was running, but cool air was not coming out. The resident indicated the air conditioner had not been working for about a month now. He had told the

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

maintenance department, but nothing has been done.

During an environmental tour with the Maintenance Supervisor of Resident R's room on 6/15/22 at 11:14 a.m., the resident's thermostat was reading 81 degrees Fahrenheit in the apartment. After assessing the resident's air conditioner he indicated it needed to be recharged. He did have a work order for this resident's air conditioner not functioning.

8. The clinical record for Resident S was reviewed on 6/15/22 at 1:25 p.m. The diagnosis included, but was not limited to, kidney disease.

A Level of Service Assessment dated 3/23/22, indicated Resident S's receptive communication, judgement and awareness of needs were scored as the following:
"...Receptive communication...Understands information conveyed without difficulty...Judgement...decisions are made in an organized manner. daily routine and decisions are consistent, and reasonable...Awareness of own needs:...understands those needs that must be met for self-maintenance..."

During an environmental tour, with the Maintenance

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

Supervisor on 6/15/22 at 11:23 a.m., of Resident S's room, the thermostat was reading 82 degrees Fahrenheit, and it was warm. After assessing the resident's air conditioner, he indicated it was not working. He was unaware the resident's air conditioner was not functioning.

9. The clinical record for Resident V was reviewed on 6/15/22 at 1:15 p.m. The diagnoses included, but were not limited to, shortness of breath and cognitive deficit.

A Level of Service Assessment dated 5/23/22, indicated Resident V's receptive communication, judgement and awareness of needs were scored as the following:
"...Receptive communication...Understands information conveyed without difficulty...Judgement...decisions are made in an organized manner. daily routine and decisions are consistent, and reasonable...Awareness of own needs:...understands those needs that must be met for self-maintenance..."

During a environmental tour, with the Maintenance Supervisor on 6/15/22 at 11:41 a.m., Resident V's room was observed. The resident's thermostat was reading 83 degrees Fahrenheit. The Maintenance Supervisor

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

indicated after assessing the resident's air conditioners, it was not working. He was not aware nor had a work order the resident's air conditioner was not functioning.

An interview was conducted with the Maintenance Supervisor on 6/14/22 at 3:49 p.m. He indicated the residents that are in need of repairs in their apartments need to inform the receptionist at the front desk. She will then place a work order to inform the maintenance department of the needed repair. The residents may also let nursing know and they can inform the front desk receptionist so she can place a work order in the system. The work orders can be entered by maintenance department or the front desk receptionist in the computer. They do not use paper work orders.

A work order policy was provided by the Administrator on 6/14/22 at 4:35 p.m. It indicated, "...Procedure: Work orders are to be completed for all work/repairs required in the community. Work orders should not be completed for things such requests that can be completed in a short fix or normal maintenance, such as...thermostat education. Levels of work order: all work orders are to be categorized into one of the following levels of

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

importance. A. critical - work order that need immediate attention and resolution. Examples would include,...HVAC [heating, ventilation, and air conditioning] issues..."

This Residential Tag relates to Complaints IN00382747 and IN00382764.

Based on observation, interview, and record review, the facility failed to ensure air conditioner units in the residents' apartments were in working order and timely offer residents fans that were without working air conditioners for 9 of 112 residents reviewed for working air conditioners. (Residents C, E, R, S, Q, V, X, Y, and BB)

Findings include:

An interview and observation was conducted with Certified Nursing Assistant (CNA) 3 and CNA 4 on 6/14/22 at 11:43 a.m. on the 3rd floor hallway. The hallway temperature felt warm. CNA 3 was fanning herself with a sheet of paper and her hand. They indicated there were some residents that did not have working air conditioners. Resident Q was one of them. This had been going on all summer.

The Indianapolis, Indiana
Weather Forecast and

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

Conditions at www.weather.com was retrieved on 6/16/22. It indicated the following days the temperatures had reached 90 degrees or above with heat advisory's in effect: 6/13/22, 6/14/22, and 6/15/22.

According to fox59.com/weather, the 7 day weather forecast for Indianapolis, Indiana between 6/16/22 and 6/22/22 was as follows in Fahrenheit degrees:
6/16/22 - 92, 6/17/22 - 85,
6/18/22 - 83, 6/19/22 - 84,
6/20/22 - 92, 6/21/22 - 95, and
6/22/22 - 93.

1. The clinical record for Resident C was reviewed on 6/15/22 at 2:15 p.m. The diagnoses included, but were not limited to, dementia, anxiety, and depression.

The 2/24/22 Level of Service Assessment/Evaluation indicated in regards to his adaptation to change, he needed daily support and reassurance while change was being discussed, when decisions were being made, and while changes were being implemented. He may be afraid or insecure. It indicated he had difficulty understanding his own needs, which must be met, but would cooperate when given direction or explanation.

An interview was conducted

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

with the Maintenance Supervisor (MS) on 6/14/22 at 12:15 p.m. He indicated Resident C's air conditioning in his room hadn't been working since last week. The heating and cooling company they used looked at his unit on 6/9/22 and ordered parts for it. They were currently awaiting the parts to come in and for the company to come back and fix it.

An observation was conducted with Resident C in his 3rd floor apartment on 6/14/22 at 2:54 p.m. His thermostat read 88 degrees Fahrenheit, and it was very warm in his room. There was no fan in his room. Resident C was feeding his cat at this time. There was a large bowl of chocolate ice cream on the coffee table.

An interview was conducted with Resident C on 6/14/22 at 2:54 p.m. during the above observation. He indicated he was hot, and his room had been hot for 2 or 3 days. He would like a fan, but no one had offered him one, and he didn't have any ice in his apartment either. He was eating the ice cream to keep cool. He was concerned about his cat and making sure she got plenty of water. He knew his cat was hot, because she was sleeping more and drinking a lot of water.

An interview was conducted

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

with the MS on 6/14/22 at 3:14 p.m. He indicated no fan or temperature cooling unit was offered to Resident C, because everything additional was already being used.

2. The clinical record for Resident E was reviewed on 6/15/22 at 2:20 p.m. The diagnoses included, but were not limited to, glaucoma.

The 4/1/22 Level of Service Assessment/Evaluation indicated in regards to his adaptation to change, he needed daily support and reassurance while change was being discussed, when decisions were being made, and while changes were being implemented. He may be afraid or insecure. It indicated he had difficulty understanding his own needs, which must be met, but would cooperate when given direction or explanation.

During an environmental tour on 6/15/22 at 10:00 a.m. with the MS (Maintenance Supervisor), an observation of Resident E's apartment was made. His thermostat read 83 degrees Fahrenheit and his room was very warm. The MS checked the thermostat and air conditioning unit, indicated it was not working, and was unaware it was not working.

3. The clinical record for

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

Resident Q was reviewed on 6/14/22 at 1:00 p.m. The diagnosis included, but was not limited to, chronic obstructive pulmonary disease.

A Level of Service Assessment dated 2/24/22, indicated Resident Q's receptive communication, judgement and awareness of needs were scored as the following:
"...Receptive communication...Understands information conveyed. May miss some part or intent of the message...Judgement...experiences difficulty in decision-making when faced with new tasks or situations...Awareness of own needs:...Has difficulty understanding those needs, which must be met, but will cooperate when given direction or explanation..."

An observation was made of Caregiver 5 by the elevator on 6/14/22 at 11:56 a.m. Caregiver 5 was observed perspiring and fanning herself waiting for the elevator. She indicated Resident Q's room was "very hot". He did not have air condition, and he has been without it for a couple of weeks.

An observation was made of Resident Q's room on 6/14/22 at 12:00 p.m. The resident's apartment was observed with the front door to his room and

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

the windows opened. The thermostat in the resident's room was reading 84 degrees Fahrenheit. He indicated, "it is so hot in here." The resident was unable to recall how long the air condition had not been working. Resident Q indicated his room was so hot, Caregiver 5 had to leave and go downstairs. She couldn't stand the heat in the room any longer. The maintenance man had been in his apartment that morning and had told him a contractor would be coming out to fix the air condition. There was no observation of a fan in the resident's room.

An observation was made of Resident Q's room on 6/14/22 at 2:47 p.m. Resident Q's windows were observed opened, and the thermostat was reading 86 degrees Fahrenheit. The resident indicated the room was "very hot." He would like a fan, but no one has offered him one.

An observation was made of Resident Q's room with the Maintenance Supervisor on 6/14/22 at 3:49 p.m. The resident's apartment was observed with the windows opened. The resident's thermostat was reading 86 degrees Fahrenheit. There was no fan observed in the resident's apartment. He indicated a work order was

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

placed about the resident's air conditioner not functioning yesterday evening. He was made aware that morning. There were no fans available to provide to Resident Q at that time.

An interview was conducted with the Administrator on 6/14/22 at 4:45 p.m. She indicated she was leaving to purchase fans for the residents without air.

4. The clinical record for Resident Y was reviewed on 6/14/22 at 1:15 p.m. The diagnoses included, but were not limited to, chronic obstructive pulmonary disease and shortness of breath.

A Level of Service Assessment dated 2/25/22, indicated Resident Y's receptive communication, judgement and awareness of needs were scored as the following:
"...Receptive communication...Understands information conveyed. May miss some part or intent of the message...Judgement...decisions are poor, requiring cueing and supervision...Awareness of own needs:...Does not understand those needs that must be met..."

An interview was conducted with Resident Y on 6/14/22 at 12:25 p.m. She indicated she does not have air condition and

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

has not had it for 3-4 weeks. The maintenance department was aware and has done nothing to address the problem. She doesn't even have a thermostat on her wall.

An observation was made of Resident Y's room with the resident on 6/14/22 at 1:24 p.m. The resident's room was observed with the windows opened with no thermostat plate on the wall. The wires to the thermostat was on the wall, but no cover plate was observed. The resident indicated at that time, the room was "hot." She had not been offered anything this whole time she has been without air until that morning. The housekeeper had come into her room to clean and brought her a fan. The maintenance department keeps telling her the air condition company was waiting for a part to come in to address the problem.

During an interview with the Maintenance Supervisor on 6/14/22 at 3:17 p.m., he indicated the air condition company had come out last Thursday (6/9/22), to repair Resident Y's air condition that had been ordered the week before. The part was incorrect, and they had to reorder.

5. The clinical record for Resident BB was reviewed on 6/14/22 at 12::00 p.m. The

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

diagnoses included, but were not limited to, asthma and dementia.

A Level of Service Assessment dated 2/24/22, indicated Resident BB's receptive communication, judgement and awareness of needs were scored as the following:
"...Receptive communication...Understands information conveyed without difficulty...Judgement...experiences difficulty in decision-making when faced with new tasks or situations...Awareness of own needs:...Has difficulty understanding those needs, which must be met, but will cooperate when given direction or explanation..."

A heating and air service invoice dated 8/2/21 was provided by the Administrator on 6/15/22 at 10:10 a.m. It indicated Resident BB's air condition had been serviced that day. It indicated "unit has failing compressor, added a super boost for temporarily cooling but will need a compressor soon.."

An observation was made of Resident BB's room on 6/14/22 at 2:52 p.m. The resident's thermostat was reading 86 degrees Fahrenheit. The resident indicated her air condition was not working. She was unable to recall how long it had been out, but she knew it

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

had been atleast a couple of days. Her daughter had reported to the front desk and brought her a fan to keep cool. They were told someone would be coming out today to service it, but no one has came yet.

During a environmental tour with the Maintenance Supervisor on 6/15/22 at 10:00 a.m., Resident BB's room was observed. The resident's thermostat was reading 86 degrees Fahrenheit in heat setting. The Maintenance Supervisor switched the setting to air, and it did not work. He was made aware of her air condition not working on 6/13/22.

An observation was made of Resident BB's room with the Maintenance Assistant on 6/15/22 at 11:45 a.m. The resident's thermostat was reading 89 degrees Farenheit in the apartment. She had turned off her fan.

At the time of exit on 6/15/22 at 3:35 p.m., the Administrator had not been able to provide documentation the compressor had been replaced in Resident BB's apartment.

6. The clinical record for Resident X was reviewed on 6/15/22 at 1:35 p.m. The diagnosis included, but was not limited to, Multiple Sclerosis.

A Level of Service Assessment

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

dated 3/4/22, indicated Resident X's receptive communication, judgement and awareness of needs were scored as the following: "...Receptive communication...Understands information conveyed without difficulty...Judgement...decisions are made in an organized manner. daily routine and decisions are consistent, and reasonable...Awareness of own needs:...understands those needs that must be met for self-maintenance..."

An observation was made of Resident X's room on 6/15/22 at 10:25 a.m. The resident indicated she did not believe her air condition was working. It was "stuffy." It will not cool down. The resident's thermostat was reading 86 degrees Fahrenheit.

An observation was made of Resident X's room with the Maintenance Supervisor on 6/15/22 at 11:06 a.m. The thermostat in the room was reading 86 degrees Fahrenheit. The Maintenance Supervisor indicated the resident's air condition needed recharged. It was blowing out air but not cool. He did not have a work order nor aware of Resident X's air conditioner was not working.

7. The clinical record for Resident R was reviewed on 6/15/22 at 1:45 p.m. The diagnosis included, but was not

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

limited to, dementia.

A Level of Service Assessment dated 2/24/22, indicated Resident R's receptive communication, judgement and awareness of needs were scored as the following:

"...Receptive communication...Understands information conveyed. May miss some part or intent of the message...Judgement...decision s are poor, requiring cueing and supervision...Awareness of own needs:...Has difficulty understanding those needs, which must be met, but will cooperate when given direction or explanation..."

An observation was made of Resident R's room on 6/15/22 at 10:40 a.m. The resident's thermostat was reading 81 degrees Fahrenheit. The resident indicated the air conditioner was not working. It was running, but cool air was not coming out. The resident indicated the air conditioner had not been working for about a month now. He had told the maintenance department, but nothing has been done.

During an environmental tour with the Maintenance Supervisor of Resident R's room on 6/15/22 at 11:14 a.m., the resident's thermostat was reading 81 degrees Fahrenheit in the apartment. After

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

assessing the resident's air conditioner he indicated it needed to be recharged. He did have a work order for this resident's air conditioner not functioning.

8. The clinical record for Resident S was reviewed on 6/15/22 at 1:25 p.m. The diagnosis included, but was not limited to, kidney disease.

A Level of Service Assessment dated 3/23/22, indicated Resident S's receptive communication, judgement and awareness of needs were scored as the following:
"...Receptive communication...Understands information conveyed without difficulty...Judgement...decisions are made in an organized manner. daily routine and decisions are consistent, and reasonable...Awareness of own needs:...understands those needs that must be met for self-maintenance..."

During an environmental tour, with the Maintenance Supervisor on 6/15/22 at 11:23 a.m., of Resident S's room, the thermostat was reading 82 degrees Fahrenheit, and it was warm. After assessing the resident's air conditioner, he indicated it was not working. He was unaware the resident's air conditioner was not functioning.

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

9. The clinical record for Resident V was reviewed on 6/15/22 at 1:15 p.m. The diagnoses included, but were not limited to, shortness of breath and cognitive deficit.

A Level of Service Assessment dated 5/23/22, indicated Resident V's receptive communication, judgement and awareness of needs were scored as the following:
"...Receptive communication...Understands information conveyed without difficulty...Judgement...decisions are made in an organized manner. daily routine and decisions are consistent, and reasonable...Awareness of own needs:...understands those needs that must be met for self-maintenance..."

During a environmental tour, with the Maintenance Supervisor on 6/15/22 at 11:41 a.m., Resident V's room was observed. The resident's thermostat was reading 83 degrees Fahrenheit. The Maintenance Supervisor indicated after assessing the resident's air conditioners, it was not working. He was not aware nor had a work order the resident's air conditioner was not functioning.

An interview was conducted with the Maintenance Supervisor on 6/14/22 at 3:49

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

p.m. He indicated the the residents that are in need of repairs in their apartments need to inform the receptionist at the front desk. She will then place a work order to inform the maintenance department of the needed repair. The residents may also let nursing know and they can inform the front desk receptionist so she can place a work order in the system. The work orders can be entered by maintenance department or the front desk receptionist in the computer. They do not use paper work orders.

A work order policy was provided by the Administrator on 6/14/22 at 4:35 p.m. It indicated, "...Procedure: Work orders are to be completed for all work/repairs required in the community. Work orders should not be completed for things such requests that can be completed in a short fix or normal maintenance, such as...thermostat education. Levels of work order: all work orders are to be categorized into one of the following levels of importance. A. critical - work order that need immediate attention and resolution. Examples would include,...HVAC [heating, ventilation, and air conditioning] issues..."

This Residential Tag relates to Complaints IN00382747 and

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

IN00382764.

Based on observation, interview, and record review, the facility failed to ensure air conditioner units in the residents' apartments were in working order and timely offer residents fans that were without working air conditioners for 9 of 112 residents reviewed for working air conditioners. (Residents C, E, R, S, Q, V, X, Y, and BB)

Findings include:

An interview and observation was conducted with Certified Nursing Assistant (CNA) 3 and CNA 4 on 6/14/22 at 11:43 a.m. on the 3rd floor hallway. The hallway temperature felt warm. CNA 3 was fanning herself with a sheet of paper and her hand. They indicated there were some residents that did not have working air conditioners. Resident Q was one of them. This had been going on all summer.

The Indianapolis, Indiana Weather Forecast and Conditions at www.weather.com was retrieved on 6/16/22. It indicated the following days the temperatures had reached 90 degrees or above with heat advisory's in effect: 6/13/22, 6/14/22, and 6/15/22.

According to fox59.com/weather, the 7 day

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

weather forecast for Indianapolis, Indiana between 6/16/22 and 6/22/22 was as follows in Fahrenheit degrees: 6/16/22 - 92, 6/17/22 - 85, 6/18/22 - 83, 6/19/22 - 84, 6/20/22 - 92, 6/21/22 - 95, and 6/22/22 - 93.

1. The clinical record for Resident C was reviewed on 6/15/22 at 2:15 p.m. The diagnoses included, but were not limited to, dementia, anxiety, and depression.

The 2/24/22 Level of Service Assessment/Evaluation indicated in regards to his adaptation to change, he needed daily support and reassurance while change was being discussed, when decisions were being made, and while changes were being implemented. He may be afraid or insecure. It indicated he had difficulty understanding his own needs, which must be met, but would cooperate when given direction or explanation.

An interview was conducted with the Maintenance Supervisor (MS) on 6/14/22 at 12:15 p.m. He indicated Resident C's air conditioning in his room hadn't been working since last week. The heating and cooling company they used looked at his unit on 6/9/22 and ordered parts for it. They were currently awaiting the parts to

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

come in and for the company to come back and fix it.

An observation was conducted with Resident C in his 3rd floor apartment on 6/14/22 at 2:54 p.m. His thermostat read 88 degrees Fahrenheit, and it was very warm in his room. There was no fan in his room. Resident C was feeding his cat at this time. There was a large bowl of chocolate ice cream on the coffee table.

An interview was conducted with Resident C on 6/14/22 at 2:54 p.m. during the above observation. He indicated he was hot, and his room had been hot for 2 or 3 days. He would like a fan, but no one had offered him one, and he didn't have any ice in his apartment either. He was eating the ice cream to keep cool. He was concerned about his cat and making sure she got plenty of water. He knew his cat was hot, because she was sleeping more and drinking a lot of water.

An interview was conducted with the MS on 6/14/22 at 3:14 p.m. He indicated no fan or temperature cooling unit was offered to Resident C, because everything additional was already being used.

2. The clinical record for Resident E was reviewed on 6/15/22 at 2:20 p.m. The

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

diagnoses included, but were not limited to, glaucoma.

The 4/1/22 Level of Service Assessment/Evaluation indicated in regards to his adaptation to change, he needed daily support and reassurance while change was being discussed, when decisions were being made, and while changes were being implemented. He may be afraid or insecure. It indicated he had difficulty understanding his own needs, which must be met, but would cooperate when given direction or explanation.

During an environmental tour on 6/15/22 at 10:00 a.m. with the MS (Maintenance Supervisor), an observation of Resident E's apartment was made. His thermostat read 83 degrees Fahrenheit and his room was very warm. The MS checked the thermostat and air conditioning unit, indicated it was not working, and was unaware it was not working.

3. The clinical record for Resident Q was reviewed on 6/14/22 at 1:00 p.m. The diagnosis included, but was not limited to, chronic obstructive pulmonary disease.

A Level of Service Assessment dated 2/24/22, indicated Resident Q's receptive communication, judgement and

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

awareness of needs were scored as the following:
"...Receptive communication...Understands information conveyed. May miss some part or intent of the message...Judgement...experiences difficulty in decision-making when faced with new tasks or situations...Awareness of own needs:...Has difficulty understanding those needs, which must be met, but will cooperate when given direction or explanation..."

An observation was made of Caregiver 5 by the elevator on 6/14/22 at 11:56 a.m. Caregiver 5 was observed perspiring and fanning herself waiting for the elevator. She indicated Resident Q's room was "very hot". He did not have air condition, and he has been without it for a couple of weeks.

An observation was made of Resident Q's room on 6/14/22 at 12:00 p.m. The resident's apartment was observed with the front door to his room and the windows opened. The thermostat in the resident's room was reading 84 degrees Fahrenheit. He indicated, "it is so hot in here." The resident was unable to recall how long the air condition had not been working. Resident Q indicated his room was so hot, Caregiver 5 had to leave and go

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

downstairs. She couldn't stand the heat in the room any longer. The maintenance man had been in his apartment that morning and had told him a contractor would be coming out to fix the air condition. There was no observation of a fan in the resident's room.

An observation was made of Resident Q's room on 6/14/22 at 2:47 p.m. Resident Q's windows were observed opened, and the thermostat was reading 86 degrees Fahrenheit. The resident indicated the room was "very hot." He would like a fan, but no one has offered him one.

An observation was made of Resident Q's room with the Maintenance Supervisor on 6/14/22 at 3:49 p.m. The resident's apartment was observed with the windows opened. The resident's thermostat was reading 86 degrees Fahrenheit. There was no fan observed in the resident's apartment. He indicated a work order was placed about the resident's air conditioner not functioning yesterday evening. He was made aware that morning. There were no fans available to provide to Resident Q at that time.

An interview was conducted with the Administrator on

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

6/14/22 at 4:45 p.m. She indicated she was leaving to purchase fans for the residents without air.

4. The clinical record for Resident Y was reviewed on 6/14/22 at 1:15 p.m. The diagnoses included, but were not limited to, chronic obstructive pulmonary disease and shortness of breath.

A Level of Service Assessment dated 2/25/22, indicated Resident Y's receptive communication, judgement and awareness of needs were scored as the following:
"...Receptive communication...Understands information conveyed. May miss some part or intent of the message...Judgement...decisions are poor, requiring cueing and supervision...Awareness of own needs:...Does not understand those needs that must be met..."

An interview was conducted with Resident Y on 6/14/22 at 12:25 p.m. She indicated she does not have air condition and has not had it for 3-4 weeks. The maintenance department was aware and has done nothing to address the problem. She doesn't even have a thermostat on her wall.

An observation was made of Resident Y's room with the resident on 6/14/22 at 1:24 p.m.

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

The resident's room was observed with the windows opened with no thermostat plate on the wall. The wires to the thermostat was on the wall, but no cover plate was observed. The resident indicated at that time, the room was "hot." She had not been offered anything this whole time she has been without air until that morning. The housekeeper had come into her room to clean and brought her a fan. The maintenance department keeps telling her the air condition company was waiting for a part to come in to address the problem.

During an interview with the Maintenance Supervisor on 6/14/22 at 3:17 p.m., he indicated the air condition company had come out last Thursday (6/9/22), to repair Resident Y's air condition that had been ordered the week before. The part was incorrect, and they had to reorder.

5. The clinical record for Resident BB was reviewed on 6/14/22 at 12::00 p.m. The diagnoses included, but were not limited to, asthma and dementia.

A Level of Service Assessment dated 2/24/22, indicated Resident BB's receptive communication, judgement and awareness of needs were scored as the following:

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

"...Receptive communication...Understands information conveyed without difficulty...Judgement...experiences difficulty in decision-making when faced with new tasks or situations...Awareness of own needs:...Has difficulty understanding those needs, which must be met, but will cooperate when given direction or explanation..."

A heating and air service invoice dated 8/2/21 was provided by the Administrator on 6/15/22 at 10:10 a.m. It indicated Resident BB's air condition had been serviced that day. It indicated " unit has failing compressor, added a super boost for temporarily cooling but will need a compressor soon.."

An observation was made of Resident BB's room on 6/14/22 at 2:52 p.m. The resident's thermostat was reading 86 degrees Fahrenheit. The resident indicated her air condition was not working. She was unable to recall how long it had been out, but she knew it had been atleast a couple of days. Her daughter had reported to the front desk and brought her a fan to keep cool. They were told someone would be coming out today to service it, but no one has came yet.

During a environmental tour with the Maintenance Supervisor on

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

6/15/22 at 10:00 a.m., Resident BB's room was observed. The resident's thermostat was reading 86 degrees Fahrenheit in heat setting. The Maintenance Supervisor switched the setting to air, and it did not work. He was made aware of her air condition not working on 6/13/22.

An observation was made of Resident BB's room with the Maintenance Assistant on 6/15/22 at 11:45 a.m. The resident's thermostat was reading 89 degrees Fahrenheit in the apartment. She had turned off her fan.

At the time of exit on 6/15/22 at 3:35 p.m., the Administrator had not been able to provide documentation the compressor had been replaced in Resident BB's apartment.

6. The clinical record for Resident X was reviewed on 6/15/22 at 1:35 p.m. The diagnosis included, but was not limited to, Multiple Sclerosis.

A Level of Service Assessment dated 3/4/22, indicated Resident X's receptive communication, judgement and awareness of needs were scored as the following: "...Receptive communication...Understands information conveyed without difficulty...Judgement...decisions are made in an organized

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

manner. daily routine and decisions are consistent, and reasonable...Awareness of own needs:...understands those needs that must be met for self-maintenance..."

An observation was made of Resident X's room on 6/15/22 at 10:25 a.m. The resident indicated she did not believe her air condition was working. It was "stuffy." It will not cool down. The resident's thermostat was reading 86 degrees Fahrenheit.

An observation was made of Resident X's room with the Maintenance Supervisor on 6/15/22 at 11:06 a.m. The thermostat in the room was reading 86 degrees Fahrenheit. The Maintenance Supervisor indicated the resident's air condition needed recharged. It was blowing out air but not cool. He did not have a work order nor aware of Resident X's air conditioner was not working.

7. The clinical record for Resident R was reviewed on 6/15/22 at 1:45 p.m. The diagnosis included, but was not limited to, dementia.

A Level of Service Assessment dated 2/24/22, indicated Resident R's receptive communication, judgement and awareness of needs were scored as the following:
"...Receptive

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

communication...Understands information conveyed. May miss some part or intent of the message...Judgement...decision s are poor, requiring cueing and supervision...Awareness of own needs:...Has difficulty understanding those needs, which must be met, but will cooperate when given direction or explanation..."

An observation was made of Resident R's room on 6/15/22 at 10:40 a.m. The resident's thermostat was reading 81 degrees Fahrenheit. The resident indicated the air conditioner was not working. It was running, but cool air was not coming out. The resident indicated the air conditioner had not been working for about a month now. He had told the maintenance department, but nothing has been done.

During an environmental tour with the Maintenance Supervisor of Resident R's room on 6/15/22 at 11:14 a.m., the resident's thermostat was reading 81 degrees Fahrenheit in the apartment. After assessing the resident's air conditioner he indicated it needed to be recharged. He did have a work order for this resident's air conditioner not functioning.

8. The clinical record for Resident S was reviewed on

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

6/15/22 at 1:25 p.m. The diagnosis included, but was not limited to, kidney disease.

A Level of Service Assessment dated 3/23/22, indicated Resident S's receptive communication, judgement and awareness of needs were scored as the following:
"...Receptive communication...Understands information conveyed without difficulty...Judgement...decisions are made in an organized manner. daily routine and decisions are consistent, and reasonable...Awareness of own needs:...understands those needs that must be met for self-maintenance..."

During an environmental tour, with the Maintenance Supervisor on 6/15/22 at 11:23 a.m., of Resident S's room, the thermostat was reading 82 degrees Fahrenheit, and it was warm. After assessing the resident's air conditioner, he indicated it was not working. He was unaware the resident's air conditioner was not functioning.

9. The clinical record for Resident V was reviewed on 6/15/22 at 1:15 p.m. The diagnoses included, but were not limited to, shortness of breath and cognitive deficit.

A Level of Service Assessment dated 5/23/22, indicated

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

Resident V's receptive communication, judgement and awareness of needs were scored as the following:
"...Receptive communication...Understands information conveyed without difficulty...Judgement...decisions are made in an organized manner. daily routine and decisions are consistent, and reasonable...Awareness of own needs:...understands those needs that must be met for self-maintenance..."

During a environmental tour, with the Maintenance Supervisor on 6/15/22 at 11:41 a.m., Resident V's room was observed. The resident's thermostat was reading 83 degrees Fahrenheit. The Maintenance Supervisor indicated after assessing the resident's air conditioners, it was not working. He was not aware nor had a work order the resident's air conditioner was not functioning.

An interview was conducted with the Maintenance Supervisor on 6/14/22 at 3:49 p.m. He indicated the the residents that are in need of repairs in their apartments need to inform the receptionist at the front desk. She will then place a work order to inform the maintenance department of the needed repair. The residents may also let nursing know and

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

they can inform the front desk receptionist so she can place a work order in the system. The work orders can be entered by maintenance department or the front desk receptionist in the computer. They do not use paper work orders.

A work order policy was provided by the Administrator on 6/14/22 at 4:35 p.m. It indicated, "...Procedure: Work orders are to be completed for all work/repairs required in the community. Work orders should not be completed for things such requests that can be completed in a short fix or normal maintenance, such as...thermostat education. Levels of work order: all work orders are to be categorized into one of the following levels of importance. A. critical - work order that need immediate attention and resolution. Examples would include,...HVAC [heating, ventilation, and air conditioning] issues..."

This Residential Tag relates to Complaints IN00382747 and IN00382764.

Based on observation, interview, and record review, the facility failed to ensure air conditioner units in the residents' apartments were in working order and timely offer residents fans that were without

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

working air conditioners for 9 of 112 residents reviewed for working air conditioners. (Residents C, E, R, S, Q, V, X, Y, and BB)

Findings include:

An interview and observation was conducted with Certified Nursing Assistant (CNA) 3 and CNA 4 on 6/14/22 at 11:43 a.m. on the 3rd floor hallway. The hallway temperature felt warm. CNA 3 was fanning herself with a sheet of paper and her hand. They indicated there were some residents that did not have working air conditioners. Resident Q was one of them. This had been going on all summer.

The Indianapolis, Indiana Weather Forecast and Conditions at www.weather.com was retrieved on 6/16/22. It indicated the following days the temperatures had reached 90 degrees or above with heat advisory's in effect: 6/13/22, 6/14/22, and 6/15/22.

According to fox59.com/weather, the 7 day weather forecast for Indianapolis, Indiana between 6/16/22 and 6/22/22 was as follows in Fahrenheit degrees: 6/16/22 - 92, 6/17/22 - 85, 6/18/22 - 83, 6/19/22 - 84, 6/20/22 - 92, 6/21/22 - 95, and 6/22/22 - 93.

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

1. The clinical record for Resident C was reviewed on 6/15/22 at 2:15 p.m. The diagnoses included, but were not limited to, dementia, anxiety, and depression.

The 2/24/22 Level of Service Assessment/Evaluation indicated in regards to his adaptation to change, he needed daily support and reassurance while change was being discussed, when decisions were being made, and while changes were being implemented. He may be afraid or insecure. It indicated he had difficulty understanding his own needs, which must be met, but would cooperate when given direction or explanation.

An interview was conducted with the Maintenance Supervisor (MS) on 6/14/22 at 12:15 p.m. He indicated Resident C's air conditioning in his room hadn't been working since last week. The heating and cooling company they used looked at his unit on 6/9/22 and ordered parts for it. They were currently awaiting the parts to come in and for the company to come back and fix it.

An observation was conducted with Resident C in his 3rd floor apartment on 6/14/22 at 2:54 p.m. His thermostat read 88 degrees Fahrenheit, and it was very warm in his room. There

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

was no fan in his room.
Resident C was feeding his cat at this time. There was a large bowl of chocolate ice cream on the coffee table.

An interview was conducted with Resident C on 6/14/22 at 2:54 p.m. during the above observation. He indicated he was hot, and his room had been hot for 2 or 3 days. He would like a fan, but no one had offered him one, and he didn't have any ice in his apartment either. He was eating the ice cream to keep cool. He was concerned about his cat and making sure she got plenty of water. He knew his cat was hot, because she was sleeping more and drinking a lot of water.

An interview was conducted with the MS on 6/14/22 at 3:14 p.m. He indicated no fan or temperature cooling unit was offered to Resident C, because everything additional was already being used.

2. The clinical record for Resident E was reviewed on 6/15/22 at 2:20 p.m. The diagnoses included, but were not limited to, glaucoma.

The 4/1/22 Level of Service Assessment/Evaluation indicated in regards to his adaptation to change, he needed daily support and reassurance while change was

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

being discussed, when decisions were being made, and while changes were being implemented. He may be afraid or insecure. It indicated he had difficulty understanding his own needs, which must be met, but would cooperate when given direction or explanation.

During an environmental tour on 6/15/22 at 10:00 a.m. with the MS (Maintenance Supervisor), an observation of Resident E's apartment was made. His thermostat read 83 degrees Fahrenheit and his room was very warm. The MS checked the thermostat and air conditioning unit, indicated it was not working, and was unaware it was not working.

3. The clinical record for Resident Q was reviewed on 6/14/22 at 1:00 p.m. The diagnosis included, but was not limited to, chronic obstructive pulmonary disease.

A Level of Service Assessment dated 2/24/22, indicated Resident Q's receptive communication, judgement and awareness of needs were scored as the following:
"...Receptive communication...Understands information conveyed. May miss some part or intent of the message...Judgement...experiences difficulty in decision-making when faced

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

	with new tasks or situations...Awareness of own needs:...Has difficulty understanding those needs, which must be met, but will cooperate when given direction or explanation..." An observation was made of Caregiver 5 by the elevator on 6/14/22 at 11:56 a.m. Caregiver 5 was observed perspiring and fanning herself waiting for the elevator. She indicated Resident Q's room was "very hot". He did not have air condition, and he has been without it for a couple of weeks.			
--	---	--	--	--

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

An observation was made of Resident Q's room on 6/14/22 at 12:00 p.m. The resident's apartment was observed with the front door to his room and the windows opened. The thermostat in the resident's room was reading 84 degrees Fahrenheit. He indicated, "it is so hot in here." The resident was unable to recall how long the air condition had not been working. Resident Q indicated his room was so hot, Caregiver 5 had to leave and go downstairs. She couldn't stand the heat in the room any longer. The maintenance man had been in his apartment that morning and had told him a contractor would be coming out to fix the air condition. There was no observation of a fan in the resident's room.

An observation was made of Resident Q's room on 6/14/22 at 2:47 p.m. Resident Q's windows were observed opened, and the thermostat was reading 86 degrees Fahrenheit. The resident indicated the room was "very hot." He would like a fan, but no one has offered him one.

An observation was made of Resident Q's room with the Maintenance Supervisor on 6/14/22 at 3:49 p.m. The resident's apartment was observed with the windows opened. The resident's

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

thermostat was reading 86 degrees Fahrenheit. There was no fan observed in the resident's apartment. He indicated a work order was placed about the resident's air conditioner not functioning yesterday evening. He was made aware that morning. There were no fans available to provide to Resident Q at that time.

An interview was conducted with the Administrator on 6/14/22 at 4:45 p.m. She indicated she was leaving to purchase fans for the residents without air.

4. The clinical record for Resident Y was reviewed on 6/14/22 at 1:15 p.m. The diagnoses included, but were not limited to, chronic obstructive pulmonary disease and shortness of breath.

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

A Level of Service Assessment dated 2/25/22, indicated Resident Y's receptive communication, judgement and awareness of needs were scored as the following:
"...Receptive communication...Understands information conveyed. May miss some part or intent of the message...Judgement...decision s are poor, requiring cueing and supervision...Awareness of own needs:...Does not understand those needs that must be met..."

An interview was conducted with Resident Y on 6/14/22 at 12:25 p.m. She indicated she does not have air condition and has not had it for 3-4 weeks. The maintenance department was aware and has done nothing to address the problem. She doesn't even have a thermostat on her wall.

An observation was made of Resident Y's room with the resident on 6/14/22 at 1:24 p.m. The resident's room was observed with the windows opened with no thermostat plate on the wall. The wires to the thermostat was on the wall, but no cover plate was observed. The resident indicated at that time, the room was "hot." She had not been offered anything this whole time she has been without air until that morning. The housekeeper had came into her room to clean and brought

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

her a fan. The maintenance department keeps telling her the air condition company was waiting for a part to come in to address the problem.

During an interview with the Maintenance Supervisor on 6/14/22 at 3:17 p.m., he indicated the air condition company had come out last Thursday (6/9/22), to repair Resident Y's air condition that had been ordered the week before. The part was incorrect, and they had to reorder.

5. The clinical record for Resident BB was reviewed on 6/14/22 at 12::00 p.m. The diagnoses included, but were not limited to, asthma and dementia.

A Level of Service Assessment dated 2/24/22, indicated Resident BB's receptive communication, judgement and awareness of needs were scored as the following:

"...Receptive communication...Understands information conveyed without difficulty...Judgement...experiences difficulty in decision-making when faced with new tasks or situations...Awareness of own needs:...Has difficulty understanding those needs, which must be met, but will cooperate when given direction or explanation..."

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

A heating and air service invoice dated 8/2/21 was provided by the Administrator on 6/15/22 at 10:10 a.m. It indicated Resident BB's air condition had been serviced that day. It indicated " unit has failing compressor, added a super boost for temporarily cooling but will need a compressor soon.."

An observation was made of Resident BB's room on 6/14/22 at 2:52 p.m. The resident's thermostat was reading 86 degrees Fahrenheit. The resident indicated her air condition was not working. She was unable to recall how long it had been out, but she knew it had been atleast a couple of days. Her daughter had reported to the front desk and brought her a fan to keep cool. They were told someone would be coming out today to service it, but no one has came yet.

During a environmental tour with the Maintenance Supervisor on 6/15/22 at 10:00 a.m., Resident BB's room was observed. The resident's thermostat was reading 86 degrees Fahrenheit in heat setting. The Maintenance Supervisor switched the setting to air, and it did not work. He was made aware of her air condition not working on 6/13/22.

An observation was made of Resident BB's room with the

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

Maintenance Assistant on 6/15/22 at 11:45 a.m. The resident's thermostat was reading 89 degrees Farenheit in the apartment. She had turned off her fan.

At the time of exit on 6/15/22 at 3:35 p.m., the Administrator had not been able to provide documentation the compressor had been replaced in Resident BB's apartment.

6. The clinical record for Resident X was reviewed on 6/15/22 at 1:35 p.m. The diagnosis included, but was not limited to, Multiple Sclerosis.

A Level of Service Assessment dated 3/4/22, indicated Resident X's receptive communication, judgement and awareness of needs were scored as the following: "...Receptive communication...Understands information conveyed without difficulty...Judgement...decisions are made in an organized manner. daily routine and decisions are consistent, and reasonable...Awareness of own needs:...understands those needs that must be met for self-maintenance..."

An observation was made of Resident X's room on 6/15/22 at 10:25 a.m. The resident indicated she did not believe her air condition was working. It was "stuffy." It will not cool down.

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

The resident's thermostat was reading 86 degrees Fahrenheit.

An observation was made of Resident X's room with the Maintenance Supervisor on 6/15/22 at 11:06 a.m. The thermostat in the room was reading 86 degrees Fahrenheit. The Maintenance Supervisor indicated the resident's air condition needed recharged. It was blowing out air but not cool. He did not have a work order nor aware of Resident X's air conditioner was not working.

7. The clinical record for Resident R was reviewed on 6/15/22 at 1:45 p.m. The diagnosis included, but was not limited to, dementia.

A Level of Service Assessment dated 2/24/22, indicated Resident R's receptive communication, judgement and awareness of needs were scored as the following:
"...Receptive communication...Understands information conveyed. May miss some part or intent of the message...Judgement...decisions are poor, requiring cueing and supervision...Awareness of own needs:...Has difficulty understanding those needs, which must be met, but will cooperate when given direction or explanation..."

An observation was made of

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

Resident R's room on 6/15/22 at 10:40 a.m. The resident's thermostat was reading 81 degrees Fahrenheit. The resident indicated the air conditioner was not working. It was running, but cool air was not coming out. The resident indicated the air conditioner had not been working for about a month now. He had told the maintenance department, but nothing has been done.

During an environmental tour with the Maintenance Supervisor of Resident R's room on 6/15/22 at 11:14 a.m., the resident's thermostat was reading 81 degrees Fahrenheit in the apartment. After assessing the resident's air conditioner he indicated it needed to be recharged. He did have a work order for this resident's air conditioner not functioning.

8. The clinical record for Resident S was reviewed on 6/15/22 at 1:25 p.m. The diagnosis included, but was not limited to, kidney disease.

A Level of Service Assessment dated 3/23/22, indicated Resident S's receptive communication, judgement and awareness of needs were scored as the following:
"...Receptive communication...Understands information conveyed without

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

difficulty...Judgement...decisions are made in an organized manner. daily routine and decisions are consistent, and reasonable...Awareness of own needs:...understands those needs that must be met for self-maintenance..."

During an environmental tour, with the Maintenance Supervisor on 6/15/22 at 11:23 a.m., of Resident S's room, the thermostat was reading 82 degrees Fahrenheit, and it was warm. After assessing the resident's air conditioner, he indicated it was not working. He was unaware the resident's air conditioner was not functioning.

9. The clinical record for Resident V was reviewed on 6/15/22 at 1:15 p.m. The diagnoses included, but were not limited to, shortness of breath and cognitive deficit.

A Level of Service Assessment dated 5/23/22, indicated Resident V's receptive communication, judgement and awareness of needs were scored as the following:
"...Receptive communication...Understands information conveyed without difficulty...Judgement...decisions are made in an organized manner. daily routine and decisions are consistent, and reasonable...Awareness of own needs:...understands those

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

needs that must be met for self-maintenance..."

During a environmental tour, with the Maintenance Supervisor on 6/15/22 at 11:41 a.m., Resident V's room was observed. The resident's thermostat was reading 83 degrees Fahrenheit. The Maintenance Supervisor indicated after assessing the resident's air conditioners, it was not working. He was not aware nor had a work order the resident's air conditioner was not functioning.

An interview was conducted with the Maintenance Supervisor on 6/14/22 at 3:49 p.m. He indicated the the residents that are in need of repairs in their apartments need to inform the receptionist at the front desk. She will then place a work order to inform the maintenance department of the needed repair. The residents may also let nursing know and they can inform the front desk receptionist so she can place a work order in the system. The work orders can be entered by maintenance department or the front desk receptionist in the computer. They do not use paper work orders.

A work order policy was provided by the Administrator on 6/14/22 at 4:35 p.m. It indicated, "...Procedure: Work orders are

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

	to be completed for all work/repairs required in the community. Work orders should not be completed for things such requests that can be completed in a short fix or normal maintenance, such as...thermostat education. Levels of work order: all work orders are to be categorized into one of the following levels of importance. A. critical - work order that need immediate attention and resolution. Examples would include,...HVAC [heating, ventilation, and air conditioning] issues..." This Residential Tag relates to Complaints IN00382747 and IN00382764.			
R 0240	Health Services - Deficiency 410 IAC 16.2-5-4(d) (d) Personal care, and assistance with activities of daily living, shall be provided based upon individual needs and preferences. 7. The clinical record for Resident H was reviewed on 6/15/22 at 11:10 a.m. The Resident's diagnosis include, but were not limited to, renal failure and diabetes. A Level of Services Assessment, dated 3/23/22, indicated that she had poor	R 0240	R 240: Health Services Personal care, and assistance with ADLs, shall be provided based upon individual needs and preferences. (assist cognitively impaired residents with adjusting the temperature of their apartments) What corrective Actions will be accomplished for those residents found to have been affected by the deficient practice: A work order was placed and maintenance began repairs on affected resident apartment air conditioners. Additional apartments with maintenance needs were identified and HVAC company called to	07/15/2022

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

decision making and required cueing and supervision with planning, organizing, and correcting daily routine. She had difficulty understanding needs which needed to be met but would cooperate when given directions or explanations. On 6/15/22 at 11:10 a.m., her room was observed with the MS (Maintenance Supervisor). Upon entering the room, the temperature was 79 degrees Fahrenheit. He indicated that the thermostat was set to heat. He reset the thermostat for cool and the air conditioner came began to run. 8. The clinical record for Resident J was reviewed on 6/15/22 at 10:40 a.m. The Resident's diagnosis included, but was not limited to, dementia. A Level of Services Assessment, dated 5/23/22, indicated he had had trouble understanding information told to him and expressing his needs. He experienced difficulty in decision-making when faced with new tasks or situation. He had difficulty understanding needs which must be met but would cooperate when given directions or explanations. On 6/15/22 at 10:40 a.m., he was observed sitting in his apartment. He was dressed in a long-sleeved button up shirt and	repair. Residents have shown no adverse effects of incident. 2. How the facility will identify other residents having the potential to be affected by the same deficient practices and what corrective actions will be taken: Staffing shall be sufficient to ensure that all residents have maintenance services offered per policy, a backup company was identified to be utilized if one company is unavailable for repairs. Nursing will monitor and complete wellness checks on residents with an identified need and report needs changing to the appropriate team member. 3. What measures will be put into place or what systematic changes the facility will make to ensure that the deficient practice does not recur: Employees and residents will be inserviced on identifying repairs and how to report them. Resident apartments with an identified need will be placed on a monitoring log and nursing will perform wellness checks as indicated to ensure temperatures are comfortable for the resident. Affected apartments received a portable AC unit and/or a fan to circulate air. 5. How the corrective action will be monitored to ensure the deficient practice will not recur, i.e., what quality assurance program will be put into place: Department	
---	---	--

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

blue jeans. He indicated that he didn't know if his air conditioning was working. The thermostat read 88 degrees Fahrenheit. He was not sure if it was too hot, but he wasn't "feeling very well".

On 6/15/22 at 11:15 a.m., Resident J's apartment was observed with the MS, who indicated that the thermostat had not been properly set to cool. He adjusted the thermostat to cool, and the air conditioner began to operate. He asked Resident J what temperature he wanted the thermostat set on and Resident J was unable to answer him with a temperature he preferred. The MS suggested 77 degrees Fahrenheit and Resident J agreed because he didn't want it "too cold".

9. The clinical record for Resident K was reviewed on 6/15/22 at 11:20 p.m. The Resident's diagnosis included, but were not limited to, hypertension and environmental allergies.

A SLUM (St Louis University Mental Status) Examination Assessment, dated 5/16/22, indicated he had mild neurocognitive impairment.

A Comprehensive Resident Assessment Instrument, dated 5/11/22, indicated he had long and short-term memory problems. He needed some

Directors will walk through the building daily and will report to the appropriate department director. Director of Nursing to complete audit weekly to ensure monitoring is completed and any identified cognitively residents are added to monitor list.

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

assistance with decision making in new situation.

On 6/15/22 at 11:20 a.m., Resident K's room was observed with the MS. Upon entering the room, the temperature was 78 degrees Fahrenheit. Resident K was laying in his bed. He indicated that he was unsure if his air conditioning was working. The MS informed him that his air conditioner had not been turned on. The MS adjusted the thermostat to cool, and the air conditioner began to operate.

10. The clinical record for Resident L was reviewed on 5/16/22 at 11:25 a.m. The Resident's diagnosis included, but were not limited to, abnormal gait and hemiplegia (weakness on one side of the body).

A Level of Services Assessment, dated 2/24/22, indicated he had severely impaired decision-making and rarely made decisions. He had difficulty understanding needs which must be met but was cooperative when given directions or explanations.

On 6/15/22 at 11:25 a.m., Resident L's room was observed with the MS. Upon entering the room, the temperature was 82 degrees Fahrenheit. The MS checked

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

the thermostat and indicated it was not working. He removed the thermostat from the wall and reset it. He then replaced the thermostat on the wall and the air conditioner began to operate.

During an interview on 6/15/22 at 11:28 a.m., the MS indicated he had not been in Resident L's room previously to check the thermostat.

This Residential Tag relates to Complaints IN00382747 and IN00382764.

4. The clinical record for Resident Z was reviewed on 6/14/22 at 3:00 p.m. The diagnosis included, but was not limited to, chronic obstructive pulmonary disease.

A Level of Service Assessment dated 4/1/22, indicated Resident Z's receptive communication, judgement and awareness of needs were scored as the following: "...Receptive communication...Understands information conveyed. May miss some part or intent of the message...Judgement...experiences difficulty in decision-making when faced with new tasks or situations...Awareness of own needs:...Has difficulty understanding those needs, which must be met, but will cooperate when given direction

or explanation..."

An observation of Resident Z's room was made with the Maintenance Supervisor on 6/14/22 at 3:07 p.m. The resident's thermostat was reading 78 degrees Fahrenheit. The Maintenance Supervisor then placed the air setting to on. He indicated the unit was turned off. Resident Z indicated her apartment was hot, but she does not like to touch the thermostat. She "always messes it up." After assessing the unit, he indicated the air was working fine.

5. The clinical record for Resident T was reviewed on 6/15/22 at 1:00 p.m. The diagnosis included, but was not limited to, Alzheimer's Disease.

The SLUMS (The Saint Louis University Mental Status Examination) assessment dated 6/7/21 indicated Resident T scored a total of 13 out of 30 with a cognitive result of dementia.

An observation was made of Resident T's room on 6/15/22 at 9:30 a.m. She indicated it was hot in her apartment. She was unsure if the air condition was working right. She does not know how to work the thermostat. At that time, the resident's thermostat was reading 82 degrees Fahrenheit

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

on heat setting.

6. The clinical record for Resident W was reviewed on 6/15/22 at 12:55 p.m. The diagnoses included, but were not limited to, mild cognitive impairment, loss of memory and kidney disease.

A Level of Service Assessment dated 5/23/22, indicated Resident W's receptive communication, judgement and awareness of needs were scored as the following:
"...Receptive communication...Understands information conveyed without difficulty...Judgement...experiences difficulty in decision-making when faced with new tasks or situations...Awareness of own needs:...understand those needs that must be met for self-maintenance..."

An observation was made of Resident W's room on 6/15/22 at 10:05 a.m. The resident's thermostat was reading 82 degrees Fahrenheit, and the unit was turned off. Resident W indicated "it is so hot in here," but "I don't know how to work the thermostat."

An observation was made of Resident W's room with the Maintenance Supervisor on 6/15/22 at 11:55 a.m. Resident W's room was cooler, and the thermostat was reading 78

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

degrees Fahrenheit. The Maintenance Supervisor indicated the resident's air conditioner was working fine.

An interview was conducted with the Maintenance Supervisor on 6/14/22 at 3:10 p.m. He indicated there were residents and staff that do not know how to work the thermostats in the apartments.

Based on observation, interview, and record review, the facility failed to assist cognitively impaired residents with adjusting the temperatures of their apartments for 10 of 112 residents in the facility. (Residents D, F, G, H, J, K, L, T, W, and Z)

Findings include:

An interview and observation was conducted with Certified Nursing Assistant (CNA) 3 and CNA 4 on 6/14/22 at 11:43 a.m. on the 3rd floor hallway. The hallway temperature felt warm. CNA 3 was fanning herself with a sheet of paper and her hand. They indicated there were some residents that did not have working air conditioners. Resident Q was one of them. This had been going on all summer.

The Indianapolis, Indiana Weather Forecast and Conditions at www.weather.com was retrieved on 6/16/22. It

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

indicated the following days the temperatures had reached 90 degrees or above with heat advisory's in effect: 6/13/22, 6/14/22, and 6/15/22.

According to fox59.com/weather, the 7 day weather forecast for Indianapolis, Indiana between 6/16/22 and 6/22/22 was as follows in Fahrenheit degrees:
6/16/22 - 92, 6/17/22 - 85, 6/18/22 - 83, 6/19/22 - 84, 6/20/22 - 92, 6/21/22 - 95, and 6/22/22 - 93.

1. The clinical record for Resident D was reviewed on 6/15/22 at 2:25 p.m. The diagnoses included, but were not limited to, schizophrenia.

The 3/31/22 Level of Service Assessment/Evaluation indicated his decisions were poor, requiring cueing and supervision in planning, organizing and correcting daily routines. He had difficulty understanding his own needs, which must be met, but would cooperate when given direction or explanation.

During an environmental tour with the MS (Maintenance Supervisor) on 6/15/22 at 10:00 a.m., Resident D's apartment was observed. His thermostat read 84 degrees Fahrenheit and was in the off setting. His room was very warm. The MS turned

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

his thermostat setting to air, and cool air began blowing out of the vents.

2. The clinical record for Resident G was reviewed on 6/15/22 at 2:30 p.m. The diagnoses included, but were not limited to, Alzheimer's disease, dementia, and depression.

The 3/23/22 Level of Service Assessment/Evaluation indicated her decisions were poor, requiring cueing and supervision in planning, organizing and correcting daily routines. She did not understand her own needs that must be met for maintenance and would not consistently cooperate even though given direction or explanation.

Her 3/23/22 SLUMS (St. Louis University Mental Status Status) Exam score indicated she had dementia.

During an environmental tour with the MS (Maintenance Supervisor) on 6/15/22 at 10:00 a.m., Resident G's apartment was observed. Her thermostat read 82 degrees Fahrenheit and was in the off setting. Her room was very warm. The MS turned her thermostat setting to air, and cool air began blowing out of the vents. The MS suggested to Resident G that she ask nursing for assistance. Resident G

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

indicated she needed help, but nursing did not help her, and she did not know her air was not on.

3. The clinical record for Resident F was reviewed on 6/15/22 at 2:35 p.m. The diagnoses included, but were not limited to, anxiety, depression, and mental retardation.

The 3/23/22 Level of Service Assessment/Evaluation indicated her decisions were poor, requiring cueing and supervision in planning, organizing and correcting daily routines. She did not understand her own needs that must be met for maintenance and would not consistently cooperate even though given direction or explanation.

Her 8/11/21 SLUMS (St. Louis University Mental Status Status) Exam score indicated she had dementia.

During an environmental tour with the MS (Maintenance Supervisor) on 6/15/22 at 10:00 a.m., Resident F's apartment was observed. Her thermostat read 78 degrees Fahrenheit and was on the heat setting. Her room was warm. Resident F indicated she wanted air. The MS turned her thermostat setting to air, and cool air began blowing out of the vents.

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

An interview was conducted with the MS on 6/14/22 at 3:14 p.m. He indicated residents needed to be capable of asking for help or doing it themselves.

7. The clinical record for Resident H was reviewed on 6/15/22 at 11:10 a.m. The Resident's diagnosis include, but were not limited to, renal failure and diabetes.

A Level of Services Assessment, dated 3/23/22, indicated that she had poor decision making and required cueing and supervision with planning, organizing, and correcting daily routine. She had difficulty understanding needs which needed to be met but would cooperate when given directions or explanations.

On 6/15/22 at 11:10 a.m., her room was observed with the MS (Maintenance Supervisor). Upon entering the room, the temperature was 79 degrees Fahrenheit. He indicated that the thermostat was set to heat. He reset the thermostat for cool and the air conditioner came began to run.

8. The clinical record for Resident J was reviewed on 6/15/22 at 10:40 a.m. The Resident's diagnosis included, but was not limited to, dementia.

A Level of Services Assessment, dated 5/23/22,

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

indicated he had had trouble understanding information told to him and expressing his needs. He experienced difficulty in decision-making when faced with new tasks or situation. He had difficulty understanding needs which must be met but would cooperate when given directions or explanations.

On 6/15/22 at 10:40 a.m., he was observed sitting in his apartment. He was dressed in a long-sleeved button up shirt and blue jeans. He indicated that he didn't know if his air conditioning was working. The thermostat read 88 degrees Fahrenheit. He was not sure if it was too hot, but he wasn't "feeling very well".

On 6/15/22 at 11:15 a.m., Resident J's apartment was observed with the MS, who indicated that the thermostat had not been properly set to cool. He adjusted the thermostat to cool, and the air conditioner began to operate. He asked Resident J what temperature he wanted the thermostat set on and Resident J was unable to answer him with a temperature he preferred. The MS suggested 77 degrees Fahrenheit and Resident J agreed because he didn't want it "too cold".

9. The clinical record for Resident K was reviewed on 6/15/22 at 11:20 p.m. The Resident's diagnosis included,

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

but were not limited to, hypertension and environmental allergies.

A SLUM (St Louis University Mental Status) Examination Assessment, dated 5/16/22, indicated he had mild neurocognitive impairment.

A Comprehensive Resident Assessment Instrument, dated 5/11/22, indicated he had long and short-term memory problems. He needed some assistance with decision making in new situation.

On 6/15/22 at 11:20 a.m., Resident K's room was observed with the MS. Upon entering the room, the temperature was 78 degrees Fahrenheit. Resident K was laying in his bed. He indicated that he was unsure if his air conditioning was working. The MS informed him that his air conditioner had not been turned on. The MS adjusted the thermostat to cool, and the air conditioner began to operate.

10. The clinical record for Resident L was reviewed on 5/16/22 at 11:25 a.m. The Resident's diagnosis included, but were not limited to, abnormal gait and hemiplegia (weakness on one side of the body).

A Level of Services Assessment, dated 2/24/22,

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

indicated he had severely impaired decision-making and rarely made decisions. He had difficulty understanding needs which must be met but was cooperative when given directions or explanations.

On 6/15/22 at 11:25 a.m., Resident L's room was observed with the MS. Upon entering the room, the temperature was 82 degrees Fahrenheit. The MS checked the thermostat and indicated it was not working. He removed the thermostat from the wall and reset it. He then replaced the thermostat on the wall and the air conditioner began to operate.

During an interview on 6/15/22 at 11:28 a.m., the MS indicated he had not been in Resident L's room previously to check the thermostat.

This Residential Tag relates to Complaints IN00382747 and IN00382764.

4. The clinical record for Resident Z was reviewed on 6/14/22 at 3:00 p.m. The diagnosis included, but was not limited to, chronic obstructive pulmonary disease.

A Level of Service Assessment dated 4/1/22, indicated Resident Z's receptive communication, judgement and awareness of needs were scored as the

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

following: "...Receptive communication...Understands information conveyed. May miss some part or intent of the message...Judgement...experiences difficulty in decision-making when faced with new tasks or situations...Awareness of own needs:...Has difficulty understanding those needs, which must be met, but will cooperate when given direction or explanation..."

An observation of Resident Z's room was made with the Maintenance Supervisor on 6/14/22 at 3:07 p.m. The resident's thermostat was reading 78 degrees Fahrenheit. The Maintenance Supervisor then placed the air setting to on. He indicated the unit was turned off. Resident Z indicated her apartment was hot, but she does not like to touch the thermostat. She "always messes it up." After assessing the unit, he indicated the air was working fine.

5. The clinical record for Resident T was reviewed on 6/15/22 at 1:00 p.m. The diagnosis included, but was not limited to, Alzheimer's Disease.

The SLUMS (The Saint Louis University Mental Status Examination) assessment dated 6/7/21 indicated Resident T scored a total of 13 out of 30

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

with a cognitive result of dementia.

An observation was made of Resident T's room on 6/15/22 at 9:30 a.m. She indicated it was hot in her apartment. She was unsure if the air condition was working right. She does not know how to work the thermostat. At that time, the resident's thermostat was reading 82 degrees Fahrenheit on heat setting.

6. The clinical record for Resident W was reviewed on 6/15/22 at 12:55 p.m. The diagnoses included, but were not limited to, mild cognitive impairment, loss of memory and kidney disease.

A Level of Service Assessment dated 5/23/22, indicated Resident W's receptive communication, judgement and awareness of needs were scored as the following:
"...Receptive communication...Understands information conveyed without difficulty...Judgement...experiences difficulty in decision-making when faced with new tasks or situations...Awareness of own needs:...understand those needs that must be met for self-maintenance..."

An observation was made of Resident W's room on 6/15/22 at 10:05 a.m. The resident's

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

thermostat was reading 82 degrees Fahrenheit, and the unit was turned off. Resident W indicated "it is so hot in here," but "I don't know how to work the thermostat."

An observation was made of Resident W's room with the Maintenance Supervisor on 6/15/22 at 11:55 a.m. Resident W's room was cooler, and the thermostat was reading 78 degrees Fahrenheit. The Maintenance Supervisor indicated the resident's air conditioner was working fine.

An interview was conducted with the Maintenance Supervisor on 6/14/22 at 3:10 p.m. He indicated there were residents and staff that do not know how to work the thermostats in the apartments.

Based on observation, interview, and record review, the facility failed to assist cognitively impaired residents with adjusting the temperatures of their apartments for 10 of 112 residents in the facility. (Residents D, F, G, H, J, K, L, T, W, and Z)

Findings include:

An interview and observation was conducted with Certified Nursing Assistant (CNA) 3 and CNA 4 on 6/14/22 at 11:43 a.m. on the 3rd floor hallway. The hallway temperature felt warm.

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

CNA 3 was fanning herself with a sheet of paper and her hand. They indicated there were some residents that did not have working air conditioners. Resident Q was one of them. This had been going on all summer.

The Indianapolis, Indiana Weather Forecast and Conditions at www.weather.com was retrieved on 6/16/22. It indicated the following days the temperatures had reached 90 degrees or above with heat advisory's in effect: 6/13/22, 6/14/22, and 6/15/22.

According to fox59.com/weather, the 7 day weather forecast for Indianapolis, Indiana between 6/16/22 and 6/22/22 was as follows in Fahrenheit degrees:
6/16/22 - 92, 6/17/22 - 85,
6/18/22 - 83, 6/19/22 - 84,
6/20/22 - 92, 6/21/22 - 95, and
6/22/22 - 93.

1. The clinical record for Resident D was reviewed on 6/15/22 at 2:25 p.m. The diagnoses included, but were not limited to, schizophrenia.

The 3/31/22 Level of Service Assessment/Evaluation indicated his decisions were poor, requiring cueing and supervision in planning, organizing and correcting daily routines. He had difficulty

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

understanding his own needs, which must be met, but would cooperate when given direction or explanation.

During an environmental tour with the MS (Maintenance Supervisor) on 6/15/22 at 10:00 a.m., Resident D's apartment was observed. His thermostat read 84 degrees Fahrenheit and was in the off setting. His room was very warm. The MS turned his thermostat setting to air, and cool air began blowing out of the vents.

2. The clinical record for Resident G was reviewed on 6/15/22 at 2:30 p.m. The diagnoses included, but were not limited to, Alzheimer's disease, dementia, and depression.

The 3/23/22 Level of Service Assessment/Evaluation indicated her decisions were poor, requiring cueing and supervision in planning, organizing and correcting daily routines. She did not understand her own needs that must be met for maintenance and would not consistently cooperate even though given direction or explanation.

Her 3/23/22 SLUMS (St. Louis University Mental Status Status) Exam score indicated she had dementia.

During an environmental tour

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

with the MS (Maintenance Supervisor) on 6/15/22 at 10:00 a.m., Resident G's apartment was observed. Her thermostat read 82 degrees Fahrenheit and was in the off setting. Her room was very warm. The MS turned her thermostat setting to air, and cool air began blowing out of the vents. The MS suggested to Resident G that she ask nursing for assistance. Resident G indicated she needed help, but nursing did not help her, and she did not know her air was not on.

3. The clinical record for Resident F was reviewed on 6/15/22 at 2:35 p.m. The diagnoses included, but were not limited to, anxiety, depression, and mental retardation.

The 3/23/22 Level of Service Assessment/Evaluation indicated her decisions were poor, requiring cueing and supervision in planning, organizing and correcting daily routines. She did not understand her own needs that must be met for maintenance and would not consistently cooperate even though given direction or explanation.

Her 8/11/21 SLUMS (St. Louis University Mental Status Status) Exam score indicated she had dementia.

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

During an environmental tour with the MS (Maintenance Supervisor) on 6/15/22 at 10:00 a.m., Resident F's apartment was observed. Her thermostat read 78 degrees Fahrenheit and was on the heat setting. Her room was warm. Resident F indicated she wanted air. The MS turned her thermostat setting to air, and cool air began blowing out of the vents.

An interview was conducted with the MS on 6/14/22 at 3:14 p.m. He indicated residents needed to be capable of asking for help or doing it themselves.

7. The clinical record for Resident H was reviewed on 6/15/22 at 11:10 a.m. The Resident's diagnosis include, but were not limited to, renal failure and diabetes.

A Level of Services Assessment, dated 3/23/22, indicated that she had poor decision making and required cueing and supervision with planning, organizing, and correcting daily routine. She had difficulty understanding needs which needed to be met but would cooperate when given directions or explanations.

On 6/15/22 at 11:10 a.m., her room was observed with the MS (Maintenance Supervisor). Upon entering the room, the temperature was 79 degrees

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

Fahrenheit. He indicated that the thermostat was set to heat. He reset the thermostat for cool and the air conditioner came began to run.

8. The clinical record for Resident J was reviewed on 6/15/22 at 10:40 a.m. The Resident's diagnosis included, but was not limited to, dementia.

A Level of Services Assessment, dated 5/23/22, indicated he had had trouble understanding information told to him and expressing his needs. He experienced difficulty in decision-making when faced with new tasks or situation. He had difficulty understanding needs which must be met but would cooperate when given directions or explanations.

On 6/15/22 at 10:40 a.m., he was observed sitting in his apartment. He was dressed in a long-sleeved button up shirt and blue jeans. He indicated that he didn't know if his air conditioning was working. The thermostat read 88 degrees Fahrenheit. He was not sure if it was too hot, but he wasn't "feeling very well".

On 6/15/22 at 11:15 a.m., Resident J's apartment was observed with the MS, who indicated that the thermostat had not been properly set to cool. He adjusted the thermostat to cool, and the air conditioner

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

began to operate. He asked Resident J what temperature he wanted the thermostat set on and Resident J was unable to answer him with a temperature he preferred. The MS suggested 77 degrees Fahrenheit and Resident J agreed because he didn't want it "too cold".

9. The clinical record for Resident K was reviewed on 6/15/22 at 11:20 p.m. The Resident's diagnosis included, but were not limited to, hypertension and environmental allergies.

A SLUM (St Louis University Mental Status) Examination Assessment, dated 5/16/22, indicated he had mild neurocognitive impairment.

A Comprehensive Resident Assessment Instrument, dated 5/11/22, indicated he had long and short-term memory problems. He needed some assistance with decision making in new situation.

On 6/15/22 at 11:20 a.m., Resident K's room was observed with the MS. Upon entering the room, the temperature was 78 degrees Fahrenheit. Resident K was laying in his bed. He indicated that he was unsure if his air conditioning was working. The MS informed him that his air conditioner had not been turned

on. The MS adjusted the thermostat to cool, and the air conditioner began to operate.

10. The clinical record for Resident L was reviewed on 5/16/22 at 11:25 a.m. The Resident's diagnosis included, but were not limited to, abnormal gait and hemiplegia (weakness on one side of the body).

A Level of Services Assessment, dated 2/24/22, indicated he had severely impaired decision-making and rarely made decisions. He had difficulty understanding needs which must be met but was cooperative when given directions or explanations.

On 6/15/22 at 11:25 a.m., Resident L's room was observed with the MS. Upon entering the room, the temperature was 82 degrees Fahrenheit. The MS checked the thermostat and indicated it was not working. He removed the thermostat from the wall and reset it. He then replaced the thermostat on the wall and the air conditioner began to operate.

During an interview on 6/15/22 at 11:28 a.m., the MS indicated he had not been in Resident L's room previously to check the thermostat.

This Residential Tag relates to

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

Complaints IN00382747 and IN00382764.

4. The clinical record for Resident Z was reviewed on 6/14/22 at 3:00 p.m. The diagnosis included, but was not limited to, chronic obstructive pulmonary disease.

A Level of Service Assessment dated 4/1/22, indicated Resident Z's receptive communication, judgement and awareness of needs were scored as the following: "...Receptive communication...Understands information conveyed. May miss some part or intent of the message...Judgement...experiences difficulty in decision-making when faced with new tasks or situations...Awareness of own needs:...Has difficulty understanding those needs, which must be met, but will cooperate when given direction or explanation..."

An observation of Resident Z's room was made with the Maintenance Supervisor on 6/14/22 at 3:07 p.m. The resident's thermostat was reading 78 degrees Fahrenheit. The Maintenance Supervisor then placed the air setting to on. He indicated the unit was turned off. Resident Z indicated her apartment was hot, but she does not like to touch the thermostat. She "always

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

messes it up." After assessing the unit, he indicated the air was working fine.

5. The clinical record for Resident T was reviewed on 6/15/22 at 1:00 p.m. The diagnosis included, but was not limited to, Alzheimer's Disease.

The SLUMS (The Saint Louis University Mental Status Examination) assessment dated 6/7/21 indicated Resident T scored a total of 13 out of 30 with a cognitive result of dementia.

An observation was made of Resident T's room on 6/15/22 at 9:30 a.m. She indicated it was hot in her apartment. She was unsure if the air condition was working right. She does not know how to work the thermostat. At that time, the resident's thermostat was reading 82 degrees Fahrenheit on heat setting.

6. The clinical record for Resident W was reviewed on 6/15/22 at 12:55 p.m. The diagnoses included, but were not limited to, mild cognitive impairment, loss of memory and kidney disease.

A Level of Service Assessment dated 5/23/22, indicated Resident W's receptive communication, judgement and awareness of needs were scored as the following:

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

"...Receptive communication...Understands information conveyed without difficulty...Judgement...experiences difficulty in decision-making when faced with new tasks or situations...Awareness of own needs:...understand those needs that must be met for self-maintenance..."

An observation was made of Resident W's room on 6/15/22 at 10:05 a.m. The resident's thermostat was reading 82 degrees Fahrenheit, and the unit was turned off. Resident W indicated "it is so hot in here," but "I don't know how to work the thermostat."

An observation was made of Resident W's room with the Maintenance Supervisor on 6/15/22 at 11:55 a.m. Resident W's room was cooler, and the thermostat was reading 78 degrees Fahrenheit. The Maintenance Supervisor indicated the resident's air conditioner was working fine.

An interview was conducted with the Maintenance Supervisor on 6/14/22 at 3:10 p.m. He indicated there were residents and staff that do not know how to work the thermostats in the apartments.

Based on observation, interview, and record review, the facility failed to assist cognitively

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

impaired residents with adjusting the temperatures of their apartments for 10 of 112 residents in the facility.
(Residents D, F, G, H, J, K, L, T, W, and Z)

Findings include:

An interview and observation was conducted with Certified Nursing Assistant (CNA) 3 and CNA 4 on 6/14/22 at 11:43 a.m. on the 3rd floor hallway. The hallway temperature felt warm. CNA 3 was fanning herself with a sheet of paper and her hand. They indicated there were some residents that did not have working air conditioners. Resident Q was one of them. This had been going on all summer.

The Indianapolis, Indiana Weather Forecast and Conditions at www.weather.com was retrieved on 6/16/22. It indicated the following days the temperatures had reached 90 degrees or above with heat advisory's in effect: 6/13/22, 6/14/22, and 6/15/22.

According to fox59.com/weather, the 7 day weather forecast for Indianapolis, Indiana between 6/16/22 and 6/22/22 was as follows in Fahrenheit degrees:
6/16/22 - 92, 6/17/22 - 85,
6/18/22 - 83, 6/19/22 - 84,
6/20/22 - 92, 6/21/22 - 95, and

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

6/22/22 - 93.

1. The clinical record for Resident D was reviewed on 6/15/22 at 2:25 p.m. The diagnoses included, but were not limited to, schizophrenia.

The 3/31/22 Level of Service Assessment/Evaluation indicated his decisions were poor, requiring cueing and supervision in planning, organizing and correcting daily routines. He had difficulty understanding his own needs, which must be met, but would cooperate when given direction or explanation.

During an environmental tour with the MS (Maintenance Supervisor) on 6/15/22 at 10:00 a.m., Resident D's apartment was observed. His thermostat read 84 degrees Fahrenheit and was in the off setting. His room was very warm. The MS turned his thermostat setting to air, and cool air began blowing out of the vents.

2. The clinical record for Resident G was reviewed on 6/15/22 at 2:30 p.m. The diagnoses included, but were not limited to, Alzheimer's disease, dementia, and depression.

The 3/23/22 Level of Service Assessment/Evaluation indicated her decisions were poor, requiring cueing and

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

supervision in planning, organizing and correcting daily routines. She did not understand her own needs that must be met for maintenance and would not consistently cooperate even though given direction or explanation.

Her 3/23/22 SLUMS (St. Louis University Mental Status Status) Exam score indicated she had dementia.

During an environmental tour with the MS (Maintenance Supervisor) on 6/15/22 at 10:00 a.m., Resident G's apartment was observed. Her thermostat read 82 degrees Fahrenheit and was in the off setting. Her room was very warm. The MS turned her thermostat setting to air, and cool air began blowing out of the vents. The MS suggested to Resident G that she ask nursing for assistance. Resident G indicated she needed help, but nursing did not help her, and she did not know her air was not on.

3. The clinical record for Resident F was reviewed on 6/15/22 at 2:35 p.m. The diagnoses included, but were not limited to, anxiety, depression, and mental retardation.

The 3/23/22 Level of Service Assessment/Evaluation indicated her decisions were

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

poor, requiring cueing and supervision in planning, organizing and correcting daily routines. She did not understand her own needs that must be met for maintenance and would not consistently cooperate even though given direction or explanation.

Her 8/11/21 SLUMS (St. Louis University Mental Status Status) Exam score indicated she had dementia.

During an environmental tour with the MS (Maintenance Supervisor) on 6/15/22 at 10:00 a.m., Resident F's apartment was observed. Her thermostat read 78 degrees Fahrenheit and was on the heat setting. Her room was warm. Resident F indicated she wanted air. The MS turned her thermostat setting to air, and cool air began blowing out of the vents.

An interview was conducted with the MS on 6/14/22 at 3:14 p.m. He indicated residents needed to be capable of asking for help or doing it themselves.

7. The clinical record for Resident H was reviewed on 6/15/22 at 11:10 a.m. The Resident's diagnosis include, but were not limited to, renal failure and diabetes.

A Level of Services Assessment, dated 3/23/22, indicated that she had poor

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

decision making and required cueing and supervision with planning, organizing, and correcting daily routine. She had difficulty understanding needs which needed to be met but would cooperate when given directions or explanations.

On 6/15/22 at 11:10 a.m., her room was observed with the MS (Maintenance Supervisor). Upon entering the room, the temperature was 79 degrees Fahrenheit. He indicated that the thermostat was set to heat. He reset the thermostat for cool and the air conditioner came began to run.

8. The clinical record for Resident J was reviewed on 6/15/22 at 10:40 a.m. The Resident's diagnosis included, but was not limited to, dementia.

A Level of Services Assessment, dated 5/23/22, indicated he had had trouble understanding information told to him and expressing his needs. He experienced difficulty in decision-making when faced with new tasks or situation. He had difficulty understanding needs which must be met but would cooperate when given directions or explanations.

On 6/15/22 at 10:40 a.m., he was observed sitting in his apartment. He was dressed in a long-sleeved button up shirt and

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

blue jeans. He indicated that he didn't know if his air conditioning was working. The thermostat read 88 degrees Fahrenheit. He was not sure if it was too hot, but he wasn't "feeling very well".

On 6/15/22 at 11:15 a.m., Resident J's apartment was observed with the MS, who indicated that the thermostat had not been properly set to cool. He adjusted the thermostat to cool, and the air conditioner began to operate. He asked Resident J what temperature he wanted the thermostat set on and Resident J was unable to answer him with a temperature he preferred. The MS suggested 77 degrees Fahrenheit and Resident J agreed because he didn't want it "too cold".

9. The clinical record for Resident K was reviewed on 6/15/22 at 11:20 p.m. The Resident's diagnosis included, but were not limited to, hypertension and environmental allergies.

A SLUM (St Louis University Mental Status) Examination Assessment, dated 5/16/22, indicated he had mild neurocognitive impairment.

A Comprehensive Resident Assessment Instrument, dated 5/11/22, indicated he had long and short-term memory problems. He needed some

assistance with decision making in new situation.

On 6/15/22 at 11:20 a.m., Resident K's room was observed with the MS. Upon entering the room, the temperature was 78 degrees Fahrenheit. Resident K was laying in his bed. He indicated that he was unsure if his air conditioning was working. The MS informed him that his air conditioner had not been turned on. The MS adjusted the thermostat to cool, and the air conditioner began to operate.

10. The clinical record for Resident L was reviewed on 5/16/22 at 11:25 a.m. The Resident's diagnosis included, but were not limited to, abnormal gait and hemiplegia (weakness on one side of the body).

A Level of Services Assessment, dated 2/24/22, indicated he had severely impaired decision-making and rarely made decisions. He had difficulty understanding needs which must be met but was cooperative when given directions or explanations.

On 6/15/22 at 11:25 a.m., Resident L's room was observed with the MS. Upon entering the room, the temperature was 82 degrees Fahrenheit. The MS checked

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

the thermostat and indicated it was not working. He removed the thermostat from the wall and reset it. He then replaced the thermostat on the wall and the air conditioner began to operate.

During an interview on 6/15/22 at 11:28 a.m., the MS indicated he had not been in Resident L's room previously to check the thermostat.

This Residential Tag relates to Complaints IN00382747 and IN00382764.

4. The clinical record for Resident Z was reviewed on 6/14/22 at 3:00 p.m. The diagnosis included, but was not limited to, chronic obstructive pulmonary disease.

A Level of Service Assessment dated 4/1/22, indicated Resident Z's receptive communication, judgement and awareness of needs were scored as the following: "...Receptive communication...Understands information conveyed. May miss some part or intent of the message...Judgement...experiences difficulty in decision-making when faced with new tasks or situations...Awareness of own needs:...Has difficulty understanding those needs, which must be met, but will cooperate when given direction

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

or explanation..."

An observation of Resident Z's room was made with the Maintenance Supervisor on 6/14/22 at 3:07 p.m. The resident's thermostat was reading 78 degrees Fahrenheit. The Maintenance Supervisor then placed the air setting to on. He indicated the unit was turned off. Resident Z indicated her apartment was hot, but she does not like to touch the thermostat. She "always messes it up." After assessing the unit, he indicated the air was working fine.

5. The clinical record for Resident T was reviewed on 6/15/22 at 1:00 p.m. The diagnosis included, but was not limited to, Alzheimer's Disease.

The SLUMS (The Saint Louis University Mental Status Examination) assessment dated 6/7/21 indicated Resident T scored a total of 13 out of 30 with a cognitive result of dementia.

An observation was made of Resident T's room on 6/15/22 at 9:30 a.m. She indicated it was hot in her apartment. She was unsure if the air condition was working right. She does not know how to work the thermostat. At that time, the resident's thermostat was reading 82 degrees Fahrenheit

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

on heat setting.

6. The clinical record for Resident W was reviewed on 6/15/22 at 12:55 p.m. The diagnoses included, but were not limited to, mild cognitive impairment, loss of memory and kidney disease.

A Level of Service Assessment dated 5/23/22, indicated Resident W's receptive communication, judgement and awareness of needs were scored as the following:
"...Receptive communication...Understands information conveyed without difficulty...Judgement...experiences difficulty in decision-making when faced with new tasks or situations...Awareness of own needs:...understand those needs that must be met for self-maintenance..."

An observation was made of Resident W's room on 6/15/22 at 10:05 a.m. The resident's thermostat was reading 82 degrees Fahrenheit, and the unit was turned off. Resident W indicated "it is so hot in here," but "I don't know how to work the thermostat."

An observation was made of Resident W's room with the Maintenance Supervisor on 6/15/22 at 11:55 a.m. Resident W's room was cooler, and the thermostat was reading 78

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

degrees Fahrenheit. The Maintenance Supervisor indicated the resident's air conditioner was working fine.

An interview was conducted with the Maintenance Supervisor on 6/14/22 at 3:10 p.m. He indicated there were residents and staff that do not know how to work the thermostats in the apartments.

Based on observation, interview, and record review, the facility failed to assist cognitively impaired residents with adjusting the temperatures of their apartments for 10 of 112 residents in the facility. (Residents D, F, G, H, J, K, L, T, W, and Z)

Findings include:

An interview and observation was conducted with Certified Nursing Assistant (CNA) 3 and CNA 4 on 6/14/22 at 11:43 a.m. on the 3rd floor hallway. The hallway temperature felt warm. CNA 3 was fanning herself with a sheet of paper and her hand. They indicated there were some residents that did not have working air conditioners. Resident Q was one of them. This had been going on all summer.

The Indianapolis, Indiana Weather Forecast and Conditions at www.weather.com was retrieved on 6/16/22. It

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

indicated the following days the temperatures had reached 90 degrees or above with heat advisory's in effect: 6/13/22, 6/14/22, and 6/15/22.

According to fox59.com/weather, the 7 day weather forecast for Indianapolis, Indiana between 6/16/22 and 6/22/22 was as follows in Fahrenheit degrees:
6/16/22 - 92, 6/17/22 - 85, 6/18/22 - 83, 6/19/22 - 84, 6/20/22 - 92, 6/21/22 - 95, and 6/22/22 - 93.

1. The clinical record for Resident D was reviewed on 6/15/22 at 2:25 p.m. The diagnoses included, but were not limited to, schizophrenia.

The 3/31/22 Level of Service Assessment/Evaluation indicated his decisions were poor, requiring cueing and supervision in planning, organizing and correcting daily routines. He had difficulty understanding his own needs, which must be met, but would cooperate when given direction or explanation.

During an environmental tour with the MS (Maintenance Supervisor) on 6/15/22 at 10:00 a.m., Resident D's apartment was observed. His thermostat read 84 degrees Fahrenheit and was in the off setting. His room was very warm. The MS turned

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

his thermostat setting to air, and cool air began blowing out of the vents.

2. The clinical record for Resident G was reviewed on 6/15/22 at 2:30 p.m. The diagnoses included, but were not limited to, Alzheimer's disease, dementia, and depression.

The 3/23/22 Level of Service Assessment/Evaluation indicated her decisions were poor, requiring cueing and supervision in planning, organizing and correcting daily routines. She did not understand her own needs that must be met for maintenance and would not consistently cooperate even though given direction or explanation.

Her 3/23/22 SLUMS (St. Louis University Mental Status Status) Exam score indicated she had dementia.

During an environmental tour with the MS (Maintenance Supervisor) on 6/15/22 at 10:00 a.m., Resident G's apartment was observed. Her thermostat read 82 degrees Fahrenheit and was in the off setting. Her room was very warm. The MS turned her thermostat setting to air, and cool air began blowing out of the vents. The MS suggested to Resident G that she ask nursing for assistance. Resident G

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

indicated she needed help, but nursing did not help her, and she did not know her air was not on.

3. The clinical record for Resident F was reviewed on 6/15/22 at 2:35 p.m. The diagnoses included, but were not limited to, anxiety, depression, and mental retardation.

The 3/23/22 Level of Service Assessment/Evaluation indicated her decisions were poor, requiring cueing and supervision in planning, organizing and correcting daily routines. She did not understand her own needs that must be met for maintenance and would not consistently cooperate even though given direction or explanation.

Her 8/11/21 SLUMS (St. Louis University Mental Status Status) Exam score indicated she had dementia.

During an environmental tour with the MS (Maintenance Supervisor) on 6/15/22 at 10:00 a.m., Resident F's apartment was observed. Her thermostat read 78 degrees Fahrenheit and was on the heat setting. Her room was warm. Resident F indicated she wanted air. The MS turned her thermostat setting to air, and cool air began blowing out of the vents.

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

An interview was conducted with the MS on 6/14/22 at 3:14 p.m. He indicated residents needed to be capable of asking for help or doing it themselves.

7. The clinical record for Resident H was reviewed on 6/15/22 at 11:10 a.m. The Resident's diagnosis include, but were not limited to, renal failure and diabetes.

A Level of Services Assessment, dated 3/23/22, indicated that she had poor decision making and required cueing and supervision with planning, organizing, and correcting daily routine. She had difficulty understanding needs which needed to be met but would cooperate when given directions or explanations.

On 6/15/22 at 11:10 a.m., her room was observed with the MS (Maintenance Supervisor). Upon entering the room, the temperature was 79 degrees Fahrenheit. He indicated that the thermostat was set to heat. He reset the thermostat for cool and the air conditioner came began to run.

8. The clinical record for Resident J was reviewed on 6/15/22 at 10:40 a.m. The Resident's diagnosis included, but was not limited to, dementia.

A Level of Services Assessment, dated 5/23/22,

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

indicated he had had trouble understanding information told to him and expressing his needs. He experienced difficulty in decision-making when faced with new tasks or situation. He had difficulty understanding needs which must be met but would cooperate when given directions or explanations.

On 6/15/22 at 10:40 a.m., he was observed sitting in his apartment. He was dressed in a long-sleeved button up shirt and blue jeans. He indicated that he didn't know if his air conditioning was working. The thermostat read 88 degrees Fahrenheit. He was not sure if it was too hot, but he wasn't "feeling very well".

On 6/15/22 at 11:15 a.m., Resident J's apartment was observed with the MS, who indicated that the thermostat had not been properly set to cool. He adjusted the thermostat to cool, and the air conditioner began to operate. He asked Resident J what temperature he wanted the thermostat set on and Resident J was unable to answer him with a temperature he preferred. The MS suggested 77 degrees Fahrenheit and Resident J agreed because he didn't want it "too cold".

9. The clinical record for Resident K was reviewed on 6/15/22 at 11:20 p.m. The Resident's diagnosis included,

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

but were not limited to, hypertension and environmental allergies.

A SLUM (St Louis University Mental Status) Examination Assessment, dated 5/16/22, indicated he had mild neurocognitive impairment.

A Comprehensive Resident Assessment Instrument, dated 5/11/22, indicated he had long and short-term memory problems. He needed some assistance with decision making in new situation.

On 6/15/22 at 11:20 a.m., Resident K's room was observed with the MS. Upon entering the room, the temperature was 78 degrees Fahrenheit. Resident K was laying in his bed. He indicated that he was unsure if his air conditioning was working. The MS informed him that his air conditioner had not been turned on. The MS adjusted the thermostat to cool, and the air conditioner began to operate.

10. The clinical record for Resident L was reviewed on 5/16/22 at 11:25 a.m. The Resident's diagnosis included, but were not limited to, abnormal gait and hemiplegia (weakness on one side of the body).

A Level of Services Assessment, dated 2/24/22,

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

indicated he had severely impaired decision-making and rarely made decisions. He had difficulty understanding needs which must be met but was cooperative when given directions or explanations.

On 6/15/22 at 11:25 a.m., Resident L's room was observed with the MS. Upon entering the room, the temperature was 82 degrees Fahrenheit. The MS checked the thermostat and indicated it was not working. He removed the thermostat from the wall and reset it. He then replaced the thermostat on the wall and the air conditioner began to operate.

During an interview on 6/15/22 at 11:28 a.m., the MS indicated he had not been in Resident L's room previously to check the thermostat.

This Residential Tag relates to Complaints IN00382747 and IN00382764.

4. The clinical record for Resident Z was reviewed on 6/14/22 at 3:00 p.m. The diagnosis included, but was not limited to, chronic obstructive pulmonary disease.

A Level of Service Assessment dated 4/1/22, indicated Resident Z's receptive communication, judgement and awareness of needs were scored as the

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

following: "...Receptive communication...Understands information conveyed. May miss some part or intent of the message...Judgement...experiences difficulty in decision-making when faced with new tasks or situations...Awareness of own needs:...Has difficulty understanding those needs, which must be met, but will cooperate when given direction or explanation..."

An observation of Resident Z's room was made with the Maintenance Supervisor on 6/14/22 at 3:07 p.m. The resident's thermostat was reading 78 degrees Fahrenheit. The Maintenance Supervisor then placed the air setting to on. He indicated the unit was turned off. Resident Z indicated her apartment was hot, but she does not like to touch the thermostat. She "always messes it up." After assessing the unit, he indicated the air was working fine.

5. The clinical record for Resident T was reviewed on 6/15/22 at 1:00 p.m. The diagnosis included, but was not limited to, Alzheimer's Disease.

The SLUMS (The Saint Louis University Mental Status Examination) assessment dated 6/7/21 indicated Resident T scored a total of 13 out of 30

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

with a cognitive result of dementia.

An observation was made of Resident T's room on 6/15/22 at 9:30 a.m. She indicated it was hot in her apartment. She was unsure if the air condition was working right. She does not know how to work the thermostat. At that time, the resident's thermostat was reading 82 degrees Fahrenheit on heat setting.

6. The clinical record for Resident W was reviewed on 6/15/22 at 12:55 p.m. The diagnoses included, but were not limited to, mild cognitive impairment, loss of memory and kidney disease.

A Level of Service Assessment dated 5/23/22, indicated Resident W's receptive communication, judgement and awareness of needs were scored as the following:
"...Receptive communication...Understands information conveyed without difficulty...Judgement...experiences difficulty in decision-making when faced with new tasks or situations...Awareness of own needs:...understand those needs that must be met for self-maintenance..."

An observation was made of Resident W's room on 6/15/22 at 10:05 a.m. The resident's

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

thermostat was reading 82 degrees Fahrenheit, and the unit was turned off. Resident W indicated "it is so hot in here," but "I don't know how to work the thermostat."

An observation was made of Resident W's room with the Maintenance Supervisor on 6/15/22 at 11:55 a.m. Resident W's room was cooler, and the thermostat was reading 78 degrees Fahrenheit. The Maintenance Supervisor indicated the resident's air conditioner was working fine.

An interview was conducted with the Maintenance Supervisor on 6/14/22 at 3:10 p.m. He indicated there were residents and staff that do not know how to work the thermostats in the apartments.

Based on observation, interview, and record review, the facility failed to assist cognitively impaired residents with adjusting the temperatures of their apartments for 10 of 112 residents in the facility. (Residents D, F, G, H, J, K, L, T, W, and Z)

Findings include:

An interview and observation was conducted with Certified Nursing Assistant (CNA) 3 and CNA 4 on 6/14/22 at 11:43 a.m. on the 3rd floor hallway. The hallway temperature felt warm.

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

CNA 3 was fanning herself with a sheet of paper and her hand. They indicated there were some residents that did not have working air conditioners. Resident Q was one of them. This had been going on all summer.

The Indianapolis, Indiana Weather Forecast and Conditions at www.weather.com was retrieved on 6/16/22. It indicated the following days the temperatures had reached 90 degrees or above with heat advisory's in effect: 6/13/22, 6/14/22, and 6/15/22.

According to fox59.com/weather, the 7 day weather forecast for Indianapolis, Indiana between 6/16/22 and 6/22/22 was as follows in Fahrenheit degrees:
6/16/22 - 92, 6/17/22 - 85,
6/18/22 - 83, 6/19/22 - 84,
6/20/22 - 92, 6/21/22 - 95, and
6/22/22 - 93.

1. The clinical record for Resident D was reviewed on 6/15/22 at 2:25 p.m. The diagnoses included, but were not limited to, schizophrenia.

The 3/31/22 Level of Service Assessment/Evaluation indicated his decisions were poor, requiring cueing and supervision in planning, organizing and correcting daily routines. He had difficulty

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

understanding his own needs, which must be met, but would cooperate when given direction or explanation.

During an environmental tour with the MS (Maintenance Supervisor) on 6/15/22 at 10:00 a.m., Resident D's apartment was observed. His thermostat read 84 degrees Fahrenheit and was in the off setting. His room was very warm. The MS turned his thermostat setting to air, and cool air began blowing out of the vents.

2. The clinical record for Resident G was reviewed on 6/15/22 at 2:30 p.m. The diagnoses included, but were not limited to, Alzheimer's disease, dementia, and depression.

The 3/23/22 Level of Service Assessment/Evaluation indicated her decisions were poor, requiring cueing and supervision in planning, organizing and correcting daily routines. She did not understand her own needs that must be met for maintenance and would not consistently cooperate even though given direction or explanation.

Her 3/23/22 SLUMS (St. Louis University Mental Status Status) Exam score indicated she had dementia.

During an environmental tour

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

with the MS (Maintenance Supervisor) on 6/15/22 at 10:00 a.m., Resident G's apartment was observed. Her thermostat read 82 degrees Fahrenheit and was in the off setting. Her room was very warm. The MS turned her thermostat setting to air, and cool air began blowing out of the vents. The MS suggested to Resident G that she ask nursing for assistance. Resident G indicated she needed help, but nursing did not help her, and she did not know her air was not on.

3. The clinical record for Resident F was reviewed on 6/15/22 at 2:35 p.m. The diagnoses included, but were not limited to, anxiety, depression, and mental retardation.

The 3/23/22 Level of Service Assessment/Evaluation indicated her decisions were poor, requiring cueing and supervision in planning, organizing and correcting daily routines. She did not understand her own needs that must be met for maintenance and would not consistently cooperate even though given direction or explanation.

Her 8/11/21 SLUMS (St. Louis University Mental Status Status) Exam score indicated she had dementia.

During an environmental tour with the MS (Maintenance Supervisor) on 6/15/22 at 10:00 a.m., Resident F's apartment was observed. Her thermostat read 78 degrees Fahrenheit and was on the heat setting. Her room was warm. Resident F indicated she wanted air. The MS turned her thermostat setting to air, and cool air began blowing out of the vents.

An interview was conducted with the MS on 6/14/22 at 3:14 p.m. He indicated residents needed to be capable of asking for help or doing it themselves.

7. The clinical record for Resident H was reviewed on 6/15/22 at 11:10 a.m. The Resident's diagnosis include, but were not limited to, renal failure and diabetes.

A Level of Services Assessment, dated 3/23/22, indicated that she had poor decision making and required cueing and supervision with planning, organizing, and correcting daily routine. She had difficulty understanding needs which needed to be met but would cooperate when given directions or explanations.

On 6/15/22 at 11:10 a.m., her room was observed with the MS (Maintenance Supervisor). Upon entering the room, the temperature was 79 degrees

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

Fahrenheit. He indicated that the thermostat was set to heat. He reset the thermostat for cool and the air conditioner came began to run.

8. The clinical record for Resident J was reviewed on 6/15/22 at 10:40 a.m. The Resident's diagnosis included, but was not limited to, dementia.

A Level of Services Assessment, dated 5/23/22, indicated he had had trouble understanding information told to him and expressing his needs. He experienced difficulty in decision-making when faced with new tasks or situation. He had difficulty understanding needs which must be met but would cooperate when given directions or explanations.

On 6/15/22 at 10:40 a.m., he was observed sitting in his apartment. He was dressed in a long-sleeved button up shirt and blue jeans. He indicated that he didn't know if his air conditioning was working. The thermostat read 88 degrees Fahrenheit. He was not sure if it was too hot, but he wasn't "feeling very well".

On 6/15/22 at 11:15 a.m., Resident J's apartment was observed with the MS, who indicated that the thermostat had not been properly set to cool. He adjusted the thermostat to cool, and the air conditioner

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

began to operate. He asked Resident J what temperature he wanted the thermostat set on and Resident J was unable to answer him with a temperature he preferred. The MS suggested 77 degrees Fahrenheit and Resident J agreed because he didn't want it "too cold".

9. The clinical record for Resident K was reviewed on 6/15/22 at 11:20 p.m. The Resident's diagnosis included, but were not limited to, hypertension and environmental allergies.

A SLUM (St Louis University Mental Status) Examination Assessment, dated 5/16/22, indicated he had mild neurocognitive impairment.

A Comprehensive Resident Assessment Instrument, dated 5/11/22, indicated he had long and short-term memory problems. He needed some assistance with decision making in new situation.

On 6/15/22 at 11:20 a.m., Resident K's room was observed with the MS. Upon entering the room, the temperature was 78 degrees Fahrenheit. Resident K was laying in his bed. He indicated that he was unsure if his air conditioning was working. The MS informed him that his air conditioner had not been turned

on. The MS adjusted the thermostat to cool, and the air conditioner began to operate.

10. The clinical record for Resident L was reviewed on 5/16/22 at 11:25 a.m. The Resident's diagnosis included, but were not limited to, abnormal gait and hemiplegia (weakness on one side of the body).

A Level of Services Assessment, dated 2/24/22, indicated he had severely impaired decision-making and rarely made decisions. He had difficulty understanding needs which must be met but was cooperative when given directions or explanations.

On 6/15/22 at 11:25 a.m., Resident L's room was observed with the MS. Upon entering the room, the temperature was 82 degrees Fahrenheit. The MS checked the thermostat and indicated it was not working. He removed the thermostat from the wall and reset it. He then replaced the thermostat on the wall and the air conditioner began to operate.

During an interview on 6/15/22 at 11:28 a.m., the MS indicated he had not been in Resident L's room previously to check the thermostat.

This Residential Tag relates to

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

Complaints IN00382747 and IN00382764.

4. The clinical record for Resident Z was reviewed on 6/14/22 at 3:00 p.m. The diagnosis included, but was not limited to, chronic obstructive pulmonary disease.

A Level of Service Assessment dated 4/1/22, indicated Resident Z's receptive communication, judgement and awareness of needs were scored as the following: "...Receptive communication...Understands information conveyed. May miss some part or intent of the message...Judgement...experiences difficulty in decision-making when faced with new tasks or situations...Awareness of own needs:...Has difficulty understanding those needs, which must be met, but will cooperate when given direction or explanation..."

An observation of Resident Z's room was made with the Maintenance Supervisor on 6/14/22 at 3:07 p.m. The resident's thermostat was reading 78 degrees Fahrenheit. The Maintenance Supervisor then placed the air setting to on. He indicated the unit was turned off. Resident Z indicated her apartment was hot, but she does not like to touch the thermostat. She "always

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

messes it up." After assessing the unit, he indicated the air was working fine.

5. The clinical record for Resident T was reviewed on 6/15/22 at 1:00 p.m. The diagnosis included, but was not limited to, Alzheimer's Disease.

The SLUMS (The Saint Louis University Mental Status Examination) assessment dated 6/7/21 indicated Resident T scored a total of 13 out of 30 with a cognitive result of dementia.

An observation was made of Resident T's room on 6/15/22 at 9:30 a.m. She indicated it was hot in her apartment. She was unsure if the air condition was working right. She does not know how to work the thermostat. At that time, the resident's thermostat was reading 82 degrees Fahrenheit on heat setting.

6. The clinical record for Resident W was reviewed on 6/15/22 at 12:55 p.m. The diagnoses included, but were not limited to, mild cognitive impairment, loss of memory and kidney disease.

A Level of Service Assessment dated 5/23/22, indicated Resident W's receptive communication, judgement and awareness of needs were scored as the following:

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

"...Receptive communication...Understands information conveyed without difficulty...Judgement...experiences difficulty in decision-making when faced with new tasks or situations...Awareness of own needs:...understand those needs that must be met for self-maintenance..."

An observation was made of Resident W's room on 6/15/22 at 10:05 a.m. The resident's thermostat was reading 82 degrees Fahrenheit, and the unit was turned off. Resident W indicated "it is so hot in here," but "I don't know how to work the thermostat."

An observation was made of Resident W's room with the Maintenance Supervisor on 6/15/22 at 11:55 a.m. Resident W's room was cooler, and the thermostat was reading 78 degrees Fahrenheit. The Maintenance Supervisor indicated the resident's air conditioner was working fine.

An interview was conducted with the Maintenance Supervisor on 6/14/22 at 3:10 p.m. He indicated there were residents and staff that do not know how to work the thermostats in the apartments.

Based on observation, interview, and record review, the facility failed to assist cognitively

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

impaired residents with adjusting the temperatures of their apartments for 10 of 112 residents in the facility.
(Residents D, F, G, H, J, K, L, T, W, and Z)

Findings include:

An interview and observation was conducted with Certified Nursing Assistant (CNA) 3 and CNA 4 on 6/14/22 at 11:43 a.m. on the 3rd floor hallway. The hallway temperature felt warm. CNA 3 was fanning herself with a sheet of paper and her hand. They indicated there were some residents that did not have working air conditioners. Resident Q was one of them. This had been going on all summer.

The Indianapolis, Indiana Weather Forecast and Conditions at www.weather.com was retrieved on 6/16/22. It indicated the following days the temperatures had reached 90 degrees or above with heat advisory's in effect: 6/13/22, 6/14/22, and 6/15/22.

According to fox59.com/weather, the 7 day weather forecast for Indianapolis, Indiana between 6/16/22 and 6/22/22 was as follows in Fahrenheit degrees:
6/16/22 - 92, 6/17/22 - 85,
6/18/22 - 83, 6/19/22 - 84,
6/20/22 - 92, 6/21/22 - 95, and

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

6/22/22 - 93.

1. The clinical record for Resident D was reviewed on 6/15/22 at 2:25 p.m. The diagnoses included, but were not limited to, schizophrenia.

The 3/31/22 Level of Service Assessment/Evaluation indicated his decisions were poor, requiring cueing and supervision in planning, organizing and correcting daily routines. He had difficulty understanding his own needs, which must be met, but would cooperate when given direction or explanation.

During an environmental tour with the MS (Maintenance Supervisor) on 6/15/22 at 10:00 a.m., Resident D's apartment was observed. His thermostat read 84 degrees Fahrenheit and was in the off setting. His room was very warm. The MS turned his thermostat setting to air, and cool air began blowing out of the vents.

2. The clinical record for Resident G was reviewed on 6/15/22 at 2:30 p.m. The diagnoses included, but were not limited to, Alzheimer's disease, dementia, and depression.

The 3/23/22 Level of Service Assessment/Evaluation indicated her decisions were poor, requiring cueing and

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

supervision in planning, organizing and correcting daily routines. She did not understand her own needs that must be met for maintenance and would not consistently cooperate even though given direction or explanation.

Her 3/23/22 SLUMS (St. Louis University Mental Status Status) Exam score indicated she had dementia.

During an environmental tour with the MS (Maintenance Supervisor) on 6/15/22 at 10:00 a.m., Resident G's apartment was observed. Her thermostat read 82 degrees Fahrenheit and was in the off setting. Her room was very warm. The MS turned her thermostat setting to air, and cool air began blowing out of the vents. The MS suggested to Resident G that she ask nursing for assistance. Resident G indicated she needed help, but nursing did not help her, and she did not know her air was not on.

3. The clinical record for Resident F was reviewed on 6/15/22 at 2:35 p.m. The diagnoses included, but were not limited to, anxiety, depression, and mental retardation.

The 3/23/22 Level of Service Assessment/Evaluation indicated her decisions were

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

	poor, requiring cueing and supervision in planning, organizing and correcting daily routines. She did not understand her own needs that must be met for maintenance and would not consistently cooperate even though given direction or explanation. Her 8/11/21 SLUMS (St. Louis University Mental Status Status) Exam score indicated she had dementia. During an environmental tour with the MS (Maintenance Supervisor) on 6/15/22 at 10:00 a.m., Resident F's apartment was observed. Her thermostat read 78 degrees Fahrenheit and was on the heat setting. Her room was warm. Resident F indicated she wanted air. The MS turned her thermostat setting to air, and cool air began blowing out of the vents. An interview was conducted with the MS on 6/14/22 at 3:14 p.m. He indicated residents needed to be capable of asking for help or doing it themselves.			
R 9999	FINAL OBSERVATIONS 3. The clinical record for Resident Q was reviewed on 6/14/22 at 1:00 p.m. The diagnosis included, but was not limited to, chronic obstructive pulmonary disease.	R 9999	R 9999: Informing the division within twenty-four (24) hours of becoming aware of an unusual occurrence that directly threatens the welfare, safety, or health of a resident. Notice of unusual occurrence may be made by telephone, followed by	07/15/2022

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

A Level of Service Assessment dated 2/24/22, indicated Resident Q's receptive communication, judgement and awareness of needs were scored as the following:
"...Receptive communication...Understands information conveyed. May miss some part or intent of the message...Judgement...experiences difficulty in decision-making when faced with new tasks or situations...Awareness of own needs:...Has difficulty understanding those needs, which must be met, but will cooperate when given direction or explanation..."

An observation was made of Caregiver 5 by the elevator on 6/14/22 at 11:56 a.m. Caregiver 5 was observed perspiring and fanning herself waiting for the elevator. She indicated Resident Q's room was "very hot". He did not have air condition, and he has been without it for a couple of weeks.

An observation was made of Resident Q's room on 6/14/22 at 12:00 p.m. The resident's apartment was observed with the front door to his room and the windows opened. The thermostat in the resident's room was reading 84 degrees Fahrenheit. He indicated "it is so hot in here." The resident was unable to recall how long the air

a written report, or by a written report only that is faxed or sent by electronic mail to the division within the twenty-four (24) hour time period. Unusual occurrences include, but are not limited to: (A) epidemic outbreaks; (B) poisonings; (C) fires; or (D) major accidents.

Based on observation, interview and record review, the facility failed to report residents were without air conditioning for more than 4 hours to the Indiana Department of Health for 5 of 112 residents in the facility. (Residents C, Q, R, Y, and ZZ)

What corrective Actions will be accomplished for those residents found to have been affected by the deficient practice: An incident report was made to show apartments in need of AC repair that were out for 4 or more hours. Additional apartments with maintenance needs were identified and HVAC company called to repair. Residents have shown no adverse effects of incident.

2. How the facility will identify other residents having the potential to be affected by the same deficient practices and what corrective actions will be taken: Department Directors will communicate with Administrator or Designee regarding AC and heat not working so that appropriate incident reporting occurs.

condition had not been working. Resident Q indicated his room was so hot, Caregiver 5 had to leave and go downstairs. She couldn't stand the heat in the room any longer. The maintenance man had been in his room that morning and had told him a contractor would be coming out to fix the air condition.

An observation was made of Resident Q's room with the Maintenance Supervisor on 6/14/22 at 3:49 p.m. The resident's apartment was observed with the windows opened. The resident's thermostat was reading 86 degrees Fahrenheit. There was no fan observed in the resident's apartment. He indicated a work order was placed about the resident's air conditioner not functioning yesterday evening. He was made aware that morning. There were no fans available to provide to Resident Q at that time.

4. The clinical record for Resident Y was reviewed on 6/14/22 at 1:15 p.m. The diagnoses included, but were not limited to, chronic obstructive pulmonary disease and shortness of breath.

A Level of Service Assessment dated 2/25/22, indicated Resident Y's receptive

3. What measures will be put into place or what systematic changes the facility will make to ensure that the deficient practice does not recur: Employees and residents will be inserviced on identifying repairs and how to report them. Resident apartments with an identified need will be placed on a monitoring log and communicated to Administrator or Designee so that appropriate incident reporting occurs.

5. How the corrective action will be monitored to ensure the deficient practice will not recur, i.e., what quality assurance program will be put into place: Department Directors will address any issues in the daily stand up meeting. Staff inserviced to communicate facility and resident needs after hours via telephone with the appropriate Department Director.

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

FORM APPROVED

OMB NO. 0938-0391

communication, judgement and awareness of needs were scored as the following:
"...Receptive communication...Understands information conveyed. May miss some part or intent of the message...Judgement...decisions are poor, requiring cueing and supervision...Awareness of own needs:...Does not understand those needs that must be met..."

An interview was conducted with Resident Y on 6/14/22 at 12:25 p.m. She indicated she does not have air condition and has not had it for 3-4 weeks. The maintenance department was aware and has done nothing to address the problem. She doesn't even have a thermostat on her wall.

An observation was made of Resident Y's room with the resident on 6/14/22 at 1:24 p.m. The resident's room was observed with the windows opened with no thermostat plate on the wall. The wires to the thermostat was on the wall, but no cover plate was observed. The maintenance department keeps telling her the air condition company was waiting for a part to come in to address the problem.

During an interview with the Maintenance Supervisor on 6/14/22 at 3:17 p.m., he indicated the air condition

company had come out last Thursday (6/9/22), to repair Resident Y's air condition that had been ordered the week before. The part was incorrect, and they had to reorder.

5. The clinical record for Resident R was reviewed on 6/15/22 at 1:45 p.m. The diagnosis included, but was not limited to, dementia.

A Level of Service Assessment dated 2/24/22, indicated Resident R's receptive communication, judgement and awareness of needs were scored as the following:

"...Receptive communication...Understands information conveyed. May miss some part or intent of the message...Judgement...decisions are poor, requiring cueing and supervision...Awareness of own needs:...Has difficulty understanding those needs, which must be met, but will cooperate when given direction or explanation..."

An observation was made of Resident R's room on 6/15/22 at 10:40 a.m. The resident's thermostat was reading 81 degrees Fahrenheit. The resident indicated the air conditioner was not working. It was running, but cool air was not coming out. The resident indicated the air conditioner had not been working for about a

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

month now. He had told the maintenance department, but nothing has been done.

During an environmental tour with the Maintenance Supervisor of Resident R's room on 6/15/22 at 11:14 a.m., the resident's thermostat was reading 81 degrees Fahrenheit in the apartment. After assessing the resident's air conditioner he indicated it needed to be recharged. He did have a work order for this resident's air conditioner not functioning.

During an interview on 6/15/22 at 3:33 p.m., the Administrator indicated that she had not reported the non- functioning air conditioning units to the Indiana Department of Health. She was unaware that was needed.

On 6/16/22 at 11:20 a.m., the Division of Long Term Care Reportable Incident Policy was retrieved from the IN.GOV website which read "...Indiana State Department of Health Division of Long Term Care... Effective 7/15/15...Incident Reporting Policy ... II. Residential Care Facilities...B. Types of incidents reportable under Residential State Rules...k. Utility interruptions of more than four (4) hours in length in one or more major utilities to the facility, (such as fire alarm, sprinkler system,

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

phone service, electrical, water supply, plumbing, i.e., sewage disposal / back up, heat or air conditioning..."

This Residential Tag relates to Complaints IN00382747 and IN00382764.

2. The clinical record for Resident C was reviewed on 6/15/22 at 2:15 p.m. The diagnoses included, but were not limited to, dementia, anxiety, and depression.

An interview and observation was conducted with CNA (Certified Nursing Assistant) 3 on 6/14/22 at 11:43 a.m. on the 3rd floor hallway. The hallway temperature felt warm. She was fanning herself with a sheet of paper and her hand. She indicated there was an issue with the air conditioning in the facility that had been going on all summer.

An interview was conducted with the Maintenance Supervisor (MS) on 6/14/22 at 12:15 p.m. He indicated Resident C's air conditioning in his room hadn't been working since last week. The heating and cooling company they used looked at his unit on 6/9/22 and ordered parts for it. They were currently awaiting the parts to come in and for the company to come back and fix it.

An observation was conducted

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

with Resident C in his 3rd floor apartment on 6/14/22 at 2:54 p.m. His thermostat read 88 degrees Fahrenheit, and it was very warm in his room. There was no fan in his room. Resident C was feeding his cat at this time. There was a large bowl of chocolate ice cream on the coffee table.

An interview was conducted with Resident C on 6/14/22 at 2:54 p.m. during the above observation. He indicated he was hot, and his room had been hot for 2 or 3 days. He would like a fan, but no one had offered him one, and he didn't have any ice in his apartment either. He was eating the ice cream to keep cool. He was concerned about his cat and making sure she got plenty of water. He knew his cat was hot, because she was sleeping more and drinking a lot of water.

An interview was conducted with the MS on 6/14/22 at 3:14 p.m. He indicated no fan or temperature cooling unit was offered to Resident C, because everything additional was already being used.

410 IAC 16.2-5-1.3(g)(1)
Informing the division within twenty-four (24) hours of becoming aware of an unusual occurrence that directly threatens the welfare, safety, or health of a resident. Notice of

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

unusual occurrence may be made by telephone, followed by a written report, or by a written report only that is faxed or sent by electronic mail to the division within the twenty-four (24) hour time period. Unusual occurrences include, but are not limited to: (A) epidemic outbreaks; (B) poisonings; (C) fires; or (D) major accidents.

Based on observation, interview and record review, the facility failed to report residents were without air conditioning for more than 4 hours to the Indiana Department of Health for 5 of 112 residents in the facility. (Residents C, Q, R, Y, and ZZ)

Findings include:

1. The clinical record for Resident ZZ was reviewed on 6/15/22 at 1:00 p.m. The Resident's diagnosis included, but were not limited to, anemia and arthritis.

A SLUM (St Louis University Mental Status) Examination Assessment, dated 8/20/21, indicated he was cognitively intact.

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

During an interview on 6/15/22 at 1:00 p.m., Resident ZZ indicated his air conditioning had broken and a company had come on Saturday, 6/11/22, and attempted to fix it. They were unable to fix it and had to order a part. It was still not operating.

3. The clinical record for Resident Q was reviewed on 6/14/22 at 1:00 p.m. The diagnosis included, but was not limited to, chronic obstructive pulmonary disease.

A Level of Service Assessment dated 2/24/22, indicated Resident Q's receptive communication, judgement and awareness of needs were scored as the following:
"...Receptive communication...Understands information conveyed. May miss some part or intent of the message...Judgement...experiences difficulty in decision-making when faced with new tasks or situations...Awareness of own needs:...Has difficulty understanding those needs, which must be met, but will cooperate when given direction or explanation..."

An observation was made of Caregiver 5 by the elevator on 6/14/22 at 11:56 a.m. Caregiver 5 was observed perspiring and fanning herself waiting for the elevator. She indicated Resident

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

FORM APPROVED

OMB NO. 0938-0391

Q's room was "very hot". He did not have air condition, and he has been without it for a couple of weeks.

An observation was made of Resident Q's room on 6/14/22 at 12:00 p.m. The resident's apartment was observed with the front door to his room and the windows opened. The thermostat in the resident's room was reading 84 degrees Fahrenheit. He indicated "it is so hot in here." The resident was unable to recall how long the air condition had not been working. Resident Q indicated his room was so hot, Caregiver 5 had to leave and go downstairs. She couldn't stand the heat in the room any longer. The maintenance man had been in his room that morning and had told him a contractor would be coming out to fix the air condition.

An observation was made of Resident Q's room with the Maintenance Supervisor on 6/14/22 at 3:49 p.m. The resident's apartment was observed with the windows opened. The resident's thermostat was reading 86 degrees Fahrenheit. There was no fan observed in the resident's apartment. He indicated a work order was placed about the resident's air conditioner not functioning yesterday evening. He was

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

made aware that morning.
There were no fans available to provide to Resident Q at that time.

4. The clinical record for Resident Y was reviewed on 6/14/22 at 1:15 p.m. The diagnoses included, but were not limited to, chronic obstructive pulmonary disease and shortness of breath.

A Level of Service Assessment dated 2/25/22, indicated Resident Y's receptive communication, judgement and awareness of needs were scored as the following:
"...Receptive communication...Understands information conveyed. May miss some part or intent of the message...Judgement...decisions are poor, requiring cueing and supervision...Awareness of own needs:...Does not understand those needs that must be met..."

An interview was conducted with Resident Y on 6/14/22 at 12:25 p.m. She indicated she does not have air condition and has not had it for 3-4 weeks. The maintenance department was aware and has done nothing to address the problem. She doesn't even have a thermostat on her wall.

An observation was made of Resident Y's room with the resident on 6/14/22 at 1:24 p.m.

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

The resident's room was observed with the windows opened with no thermostat plate on the wall. The wires to the thermostat was on the wall, but no cover plate was observed. The maintenance department keeps telling her the air condition company was waiting for a part to come in to address the problem.

During an interview with the Maintenance Supervisor on 6/14/22 at 3:17 p.m., he indicated the air condition company had come out last Thursday (6/9/22), to repair Resident Y's air condition that had been ordered the week before. The part was incorrect, and they had to reorder.

5. The clinical record for Resident R was reviewed on 6/15/22 at 1:45 p.m. The diagnosis included, but was not limited to, dementia.

A Level of Service Assessment dated 2/24/22, indicated Resident R's receptive communication, judgement and awareness of needs were scored as the following:
"...Receptive communication...Understands information conveyed. May miss some part or intent of the message...Judgement...decision s are poor, requiring cueing and supervision...Awareness of own needs:...Has difficulty

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

understanding those needs, which must be met, but will cooperate when given direction or explanation..."

An observation was made of Resident R's room on 6/15/22 at 10:40 a.m. The resident's thermostat was reading 81 degrees Fahrenheit. The resident indicated the air conditioner was not working. It was running, but cool air was not coming out. The resident indicated the air conditioner had not been working for about a month now. He had told the maintenance department, but nothing has been done.

During an environmental tour with the Maintenance Supervisor of Resident R's room on 6/15/22 at 11:14 a.m., the resident's thermostat was reading 81 degrees Fahrenheit in the apartment. After assessing the resident's air conditioner he indicated it needed to be recharged. He did have a work order for this resident's air conditioner not functioning.

During an interview on 6/15/22 at 3:33 p.m., the Administrator indicated that she had not reported the non- functioning air conditioning units to the Indiana Department of Health. She was unaware that was needed.

On 6/16/22 at 11:20 a.m., the

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

Division of Long Term Care Reportable Incident Policy was retrieved from the IN.GOV website which read "...Indiana State Department of Health Division of Long Term Care... Effective 7/15/15...Incident Reporting Policy ... II. Residential Care Facilities...B. Types of incidents reportable under Residential State Rules...k. Utility interruptions of more than four (4) hours in length in one or more major utilities to the facility, (such as fire alarm, sprinkler system, phone service, electrical, water supply, plumbing, i.e., sewage disposal / back up, heat or air conditioning..."

This Residential Tag relates to Complaints IN00382747 and IN00382764.

2. The clinical record for Resident C was reviewed on 6/15/22 at 2:15 p.m. The diagnoses included, but were not limited to, dementia, anxiety, and depression.

An interview and observation was conducted with CNA (Certified Nursing Assistant) 3 on 6/14/22 at 11:43 a.m. on the 3rd floor hallway. The hallway temperature felt warm. She was fanning herself with a sheet of paper and her hand. She indicated there was an issue with the air conditioning in the facility that had been going on

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

all summer.

An interview was conducted with the Maintenance Supervisor (MS) on 6/14/22 at 12:15 p.m. He indicated Resident C's air conditioning in his room hadn't been working since last week. The heating and cooling company they used looked at his unit on 6/9/22 and ordered parts for it. They were currently awaiting the parts to come in and for the company to come back and fix it.

An observation was conducted with Resident C in his 3rd floor apartment on 6/14/22 at 2:54 p.m. His thermostat read 88 degrees Fahrenheit, and it was very warm in his room. There was no fan in his room. Resident C was feeding his cat at this time. There was a large bowl of chocolate ice cream on the coffee table.

An interview was conducted with Resident C on 6/14/22 at 2:54 p.m. during the above observation. He indicated he was hot, and his room had been hot for 2 or 3 days. He would like a fan, but no one had offered him one, and he didn't have any ice in his apartment either. He was eating the ice cream to keep cool. He was concerned about his cat and making sure she got plenty of water. He knew his cat was hot, because she was sleeping more

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

and drinking a lot of water.

An interview was conducted with the MS on 6/14/22 at 3:14 p.m. He indicated no fan or temperature cooling unit was offered to Resident C, because everything additional was already being used.

410 IAC 16.2-5-1.3(g)(1)
Informing the division within twenty-four (24) hours of becoming aware of an unusual occurrence that directly threatens the welfare, safety, or health of a resident. Notice of unusual occurrence may be made by telephone, followed by a written report, or by a written report only that is faxed or sent by electronic mail to the division within the twenty-four (24) hour time period. Unusual occurrences include, but are not limited to: (A) epidemic outbreaks; (B) poisonings; (C) fires; or (D) major accidents.

Based on observation, interview and record review, the facility failed to report residents were without air conditioning for more than 4 hours to the Indiana Department of Health for 5 of 112 residents in the facility. (Residents C, Q, R, Y, and ZZ)

Findings include:

1. The clinical record for Resident ZZ was reviewed on 6/15/22 at 1:00 p.m. The Resident's diagnosis included,

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

but were not limited to, anemia and arthritis.

A SLUM (St Louis University Mental Status) Examination Assessment, dated 8/20/21, indicated he was cognitively intact.

During an interview on 6/15/22 at 1:00 p.m., Resident ZZ indicated his air conditioning had broken and a company had come on Saturday, 6/11/22, and attempted to fix it. They were unable to fix it and had to order a part. It was still not operating.

3. The clinical record for Resident Q was reviewed on 6/14/22 at 1:00 p.m. The diagnosis included, but was not limited to, chronic obstructive pulmonary disease.

A Level of Service Assessment dated 2/24/22, indicated Resident Q's receptive communication, judgement and awareness of needs were scored as the following:
"...Receptive communication...Understands information conveyed. May miss some part or intent of the message...Judgement...experiences difficulty in decision-making when faced with new tasks or situations...Awareness of own needs:...Has difficulty understanding those needs, which must be met, but will

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

cooperate when given direction or explanation..."

An observation was made of Caregiver 5 by the elevator on 6/14/22 at 11:56 a.m. Caregiver 5 was observed perspiring and fanning herself waiting for the elevator. She indicated Resident Q's room was "very hot". He did not have air condition, and he has been without it for a couple of weeks.

An observation was made of Resident Q's room on 6/14/22 at 12:00 p.m. The resident's apartment was observed with the front door to his room and the windows opened. The thermostat in the resident's room was reading 84 degrees Fahrenheit. He indicated "it is so hot in here." The resident was unable to recall how long the air condition had not been working. Resident Q indicated his room was so hot, Caregiver 5 had to leave and go downstairs. She couldn't stand the heat in the room any longer. The maintenance man had been in his room that morning and had told him a contractor would be coming out to fix the air condition.

An observation was made of Resident Q's room with the Maintenance Supervisor on 6/14/22 at 3:49 p.m. The resident's apartment was observed with the windows

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

opened. The resident's thermostat was reading 86 degrees Fahrenheit. There was no fan observed in the resident's apartment. He indicated a work order was placed about the resident's air conditioner not functioning yesterday evening. He was made aware that morning. There were no fans available to provide to Resident Q at that time.

4. The clinical record for Resident Y was reviewed on 6/14/22 at 1:15 p.m. The diagnoses included, but were not limited to, chronic obstructive pulmonary disease and shortness of breath.

A Level of Service Assessment dated 2/25/22, indicated Resident Y's receptive communication, judgement and awareness of needs were scored as the following:
"...Receptive communication...Understands information conveyed. May miss some part or intent of the message...Judgement...decision s are poor, requiring cueing and supervision...Awareness of own needs:...Does not understand those needs that must be met..."

An interview was conducted with Resident Y on 6/14/22 at 12:25 p.m. She indicated she does not have air condition and has not had it for 3-4 weeks.

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

The maintenance department was aware and has done nothing to address the problem. She doesn't even have a thermostat on her wall.

An observation was made of Resident Y's room with the resident on 6/14/22 at 1:24 p.m. The resident's room was observed with the windows opened with no thermostat plate on the wall. The wires to the thermostat was on the wall, but no cover plate was observed. The maintenance department keeps telling her the air condition company was waiting for a part to come in to address the problem.

During an interview with the Maintenance Supervisor on 6/14/22 at 3:17 p.m., he indicated the air condition company had come out last Thursday (6/9/22), to repair Resident Y's air condition that had been ordered the week before. The part was incorrect, and they had to reorder.

5. The clinical record for Resident R was reviewed on 6/15/22 at 1:45 p.m. The diagnosis included, but was not limited to, dementia.

A Level of Service Assessment dated 2/24/22, indicated Resident R's receptive communication, judgement and awareness of needs were

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

FORM APPROVED

OMB NO. 0938-0391

scored as the following:

"...Receptive communication...Understands information conveyed. May miss some part or intent of the message...Judgement...decision s are poor, requiring cueing and supervision...Awareness of own needs:...Has difficulty understanding those needs, which must be met, but will cooperate when given direction or explanation..."

An observation was made of Resident R's room on 6/15/22 at 10:40 a.m. The resident's thermostat was reading 81 degrees Fahrenheit. The resident indicated the air conditioner was not working. It was running, but cool air was not coming out. The resident indicated the air conditioner had not been working for about a month now. He had told the maintenance department, but nothing has been done.

During an environmental tour with the Maintenance Supervisor of Resident R's room on 6/15/22 at 11:14 a.m., the resident's thermostat was reading 81 degrees Fahrenheit in the apartment. After assessing the resident's air conditioner he indicated it needed to be recharged. He did have a work order for this resident's air conditioner not functioning.

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

During an interview on 6/15/22 at 3:33 p.m., the Administrator indicated that she had not reported the non- functioning air conditioning units to the Indiana Department of Health. She was unaware that was needed.

On 6/16/22 at 11:20 a.m., the Division of Long Term Care Reportable Incident Policy was retrieved from the IN.GOV website which read "...Indiana State Department of Health Division of Long Term Care... Effective 7/15/15...Incident Reporting Policy ... II. Residential Care Facilities...B. Types of incidents reportable under Residential State Rules...k. Utility interruptions of more than four (4) hours in length in one or more major utilities to the facility, (such as fire alarm, sprinkler system, phone service, electrical, water supply, plumbing, i.e., sewage disposal / back up, heat or air conditioning..."

This Residential Tag relates to Complaints IN00382747 and IN00382764.

2. The clinical record for Resident C was reviewed on 6/15/22 at 2:15 p.m. The diagnoses included, but were not limited to, dementia, anxiety, and depression.

An interview and observation was conducted with CNA

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

(Certified Nursing Assistant) 3 on 6/14/22 at 11:43 a.m. on the 3rd floor hallway. The hallway temperature felt warm. She was fanning herself with a sheet of paper and her hand. She indicated there was an issue with the air conditioning in the facility that had been going on all summer.

An interview was conducted with the Maintenance Supervisor (MS) on 6/14/22 at 12:15 p.m. He indicated Resident C's air conditioning in his room hadn't been working since last week. The heating and cooling company they used looked at his unit on 6/9/22 and ordered parts for it. They were currently awaiting the parts to come in and for the company to come back and fix it.

An observation was conducted with Resident C in his 3rd floor apartment on 6/14/22 at 2:54 p.m. His thermostat read 88 degrees Fahrenheit, and it was very warm in his room. There was no fan in his room. Resident C was feeding his cat at this time. There was a large bowl of chocolate ice cream on the coffee table.

An interview was conducted with Resident C on 6/14/22 at 2:54 p.m. during the above observation. He indicated he was hot, and his room had been hot for 2 or 3 days. He would

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

like a fan, but no one had offered him one, and he didn't have any ice in his apartment either. He was eating the ice cream to keep cool. He was concerned about his cat and making sure she got plenty of water. He knew his cat was hot, because she was sleeping more and drinking a lot of water.

An interview was conducted with the MS on 6/14/22 at 3:14 p.m. He indicated no fan or temperature cooling unit was offered to Resident C, because everything additional was already being used.

410 IAC 16.2-5-1.3(g)(1)
Informing the division within twenty-four (24) hours of becoming aware of an unusual occurrence that directly threatens the welfare, safety, or health of a resident. Notice of unusual occurrence may be made by telephone, followed by a written report, or by a written report only that is faxed or sent by electronic mail to the division within the twenty-four (24) hour time period. Unusual occurrences include, but are not limited to: (A) epidemic outbreaks; (B) poisonings; (C) fires; or (D) major accidents.

Based on observation, interview and record review, the facility failed to report residents were without air conditioning for more than 4 hours to the Indiana

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

Department of Health for 5 of
112 residents in the facility.
(Residents C, Q, R, Y, and ZZ)

Findings include:

1. The clinical record for
Resident ZZ was reviewed on
6/15/22 at 1:00 p.m. The
Resident's diagnosis included,
but were not limited to, anemia
and arthritis.

A SLUM (St Louis University
Mental Status) Examination
Assessment, dated 8/20/21,
indicated he was cognitively
intact.

During an interview on 6/15/22
at 1:00 p.m., Resident ZZ
indicated his air conditioning
had broken and a company had
come on Saturday, 6/11/22, and
attempted to fix it. They were
unable to fix it and had to order
a part. It was still not operating.

Any deficiency statement ending with an asterisk (*) denotes a deficiency which the institution may be excused from correcting provided it is determined that other safeguards provide sufficient protection to the patients. (See instructions.)

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
---	-------	-----------