STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTIONS	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
		A. BUILDING B. WING	05/31/2023

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
OASIS AT 56TH	4940 WEST 56TH STREET, INDIANAPOLIS, , 46254

(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 IN00406978, IN00408715, IN00408977, IN00409101, IN00409503, and IN00409553. Complaint IN00406978 - No deficiencies related to the allegations are cited. Complaint IN00408715 - State deficiencies related to the allegations are cited at R0149. Complaint IN00408977 - No deficiencies related to the allegations are cited. Complaint IN00409101 - State deficiencies related to the allegations are cited at R0149. Complaint IN00409503 - State deficiencies related to the allegations are cited at R0149. Complaint IN00409553 - No deficiencies related to the allegations were cited. Survey date: May 30 and 31,	R 0000		

	2023 Facility number: 014279 Residential Census: 114 These State Residential Findings are cited in accordance with 410 IAC 16.2-5. Quality review completed on June 2, 2023			
R 0027	Residents' Rights - Deficiency 410 IAC 16.2-5-1.2(b) (b) Residents have the right to a dignified existence, self-determination, and communication with and access to persons and services inside and outside the facility. Residents have the right to exercise their rights as a resident of the facility and as a citizen or resident of the United States. Based on interview and record review, the facility failed to ensure a dignified existence by providing facility activities for only certain individuals. This had the potential to affect 108 out of 114 residents that reside in the facility. Findings: An interview conducted with Resident H on 5/31/23 at 12:00 p.m., indicated a couple of weeks ago there was a cookout	R 0027	R 0027 Plan of Correction: Facility 014279 Survey Event ID PK4411 R0027 **1. What Corrective action(s) will be accomplished for those residents found to have been affected by the deficient practice** a. All residents had the potential to be affected by the alleged deficient practice. **2. How the facility will identify other residents having the potential to be affected by the same deficient practice and what corrective will be**	07/01/2023

	on the back patio to where multiple residents were located. They were enjoying shrimp skewers and other great food while the other residents were in the dining room watching them have a good time outside. She believed it's discriminatory because most of the residents here are not able to afford the food program that was offered. An interview conducted with an anonymous staff member during the survey indicated there was an enhanced nutrition program (ENP) and referred to as ENP. Those residents pay $250.00 a month for additional options, snacks to their apartments, and events that are held on a monthly basis. About 2 weeks ago there was a luau to where there was someone cooking out on the grill that included shrimp skewers and crab legs. The other residents, not on the ENP program, did receive barbeque but not the same as the residents on ENP. They believe it comes off as discriminatory and residents will ask them frequently "what makes them [people on ENP] different than me"? An interview conducted with an anonymous staff member during the survey indicated the ENP program consisted of 2 events and 1 snack box a month that was hand delivered to the individual's apartment. There		**taken** a. The executive Director will meet with the residents during the Resident Council Meeting and explain and discuss the Core Values of Gardant Management which is Love, Compassion and Dignity issues. b. The Executive Director will explain the Enriched Nutritional Program at the Resident Council Meeting and how to obtain it, while explaining it is not met to show a lack of respect to those who do not want to participate. **3.** **What measures will be put into place or what systemic changes the** **facility will make to ensure that the deficient practice does not recur:** a. All staff will be in-serviced on Love, Compassion and Dignity, the core values of Gardant Management. b. All new staff will be in-serviced on Love, Compassion and Dignity as part of their department orientation	

	was a luau approximately 2 weeks ago and they had fabric boxes that were filled with $20.00 to $22.00 worth of snacks. Some residents like bananas or sandwiches so, they attempt to purchase items for the boxes based on the residents' preferences on ENP. There wasn't a set layout for the program, so they try to be creative with what they offer every month. Previous months consisted of providing custom cups with their names printed on such. They had a cocktail party and then scheduled to take the residents on ENP to a restaurant in Greenwood, Indiana. They (corporate) continue to add items to include on the ENP program. There was a discussion to create a store in the facility for residents on ENP to obtain food items included in the program. They didn't believe the items in the store would not be available to residents not on the ENP program. They believe it comes off as discriminatory because a majority of the residents cannot afford $250.00 a month for additional food services. The residents will come and ask them "why do they [residents on ENP] get better things than us?" Those questions break their heart, and it doesn't appear to be fair. An interview conducted with an anonymous staff member during the survey indicated the		before working independently. **c.** All new admissions and their family/POA will be introduced to the ENP program**.** **d.** During ENP events alternate events will be offered to maintain a quality of dignity being worthy of respect**.** **4. How the corrective action(s) will be monitored to ensure the deficient practice will not recur, i.e what quality assurance program will be put into place:** a. The ED or designee will complete a random sampling of the residents weekly with a general questioner concerning Love, Compassion and Dignity, for 2 months (8 weeks), then the survey will be completed monthly for 4 months, and then as needed to ensure compliance.	

	residents' on ENP had a brunch, a cookout, and other special events only for those residents on ENP. It makes the other residents, not on ENP, upset to see others engaging in activities that they are not permitted to join. A lot of residents here are low income and cannot afford to join such program. An interview conducted with the Interim Executive Director, on 5/31/23 at 2:00 p.m., indicated in the least it does discuss what the ENP program consisted of. The residents can select anytime to be on the ENP. There are some people that cannot afford it. Every facility she's worked in previously they have conducted the ENP differently. There was no policy specific to ENP but it's mentioned in the lease. A part of the lease, provided by the Interim Executive Director, on 5/31/23 at 2:00 p.m., indicated the ENP was optional that was above and beyond such basic food and meal preparation services. The ENP included additional food options and delivery of snacks to their unit up to a certain number of times a month. There was no mentioning of special events in such lease. This Residential Tag relates to Complaint IN00409553		b. The results will be reviewed at monthly QI meetings and make further recommendations based on questioner results. **By** **what date will the systematic changes be completed**: July 31, 2023	

	Based on interview and record review, the facility failed to ensure a dignified existence by providing facility activities for only certain individuals. This had the potential to affect 108 out of 114 residents that reside in the facility. Findings: An interview conducted with Resident H on 5/31/23 at 12:00 p.m., indicated a couple of weeks ago there was a cookout on the back patio to where multiple residents were located. They were enjoying shrimp skewers and other great food while the other residents were in the dining room watching them have a good time outside. She believed it's discriminatory because most of the residents here are not able to afford the food program that was offered. An interview conducted with an anonymous staff member during the survey indicated there was an enhanced nutrition program (ENP) and referred to as ENP. Those residents pay $250.00 a month for additional options, snacks to their apartments, and events that are held on a monthly basis. About 2 weeks ago there was a luau to where there was someone cooking out on the grill that included shrimp skewers and crab legs. The other residents, not on the ENP program, did receive barbeque			

	but not the same as the residents on ENP. They believe it comes off as discriminatory and residents will ask them frequently "what makes them [people on ENP] different than me"? An interview conducted with an anonymous staff member during the survey indicated the ENP program consisted of 2 events and 1 snack box a month that was hand delivered to the individual's apartment. There was a luau approximately 2 weeks ago and they had fabric boxes that were filled with $20.00 to $22.00 worth of snacks. Some residents like bananas or sandwiches so, they attempt to purchase items for the boxes based on the residents' preferences on ENP. There wasn't a set layout for the program, so they try to be creative with what they offer every month. Previous months consisted of providing custom cups with their names printed on such. They had a cocktail party and then scheduled to take the residents on ENP to a restaurant in Greenwood, Indiana. They (corporate) continue to add items to include on the ENP program. There was a discussion to create a store in the facility for residents on ENP to obtain food items included in the program. They didn't believe the items in the store would not be available to residents not on			

	the ENP program. They believe it comes off as discriminatory because a majority of the residents cannot afford $250.00 a month for additional food services. The residents will come and ask them "why do they [residents on ENP] get better things than us?" Those questions break their heart, and it doesn't appear to be fair. An interview conducted with an anonymous staff member during the survey indicated the residents' on ENP had a brunch, a cookout, and other special events only for those residents on ENP. It makes the other residents, not on ENP, upset to see others engaging in activities that they are not permitted to join. A lot of residents here are low income and cannot afford to join such program. An interview conducted with the Interim Executive Director, on 5/31/23 at 2:00 p.m., indicated in the least it does discuss what the ENP program consisted of. The residents can select anytime to be on the ENP. There are some people that cannot afford it. Every facility she's worked in previously they have conducted the ENP differently. There was no policy specific to ENP but it's mentioned in the lease. A part of the lease, provided by the Interim Executive Director,			

	on 5/31/23 at 2:00 p.m., indicated the ENP was optional that was above and beyond such basic food and meal preparation services. The ENP included additional food options and delivery of snacks to their unit up to a certain number of times a month. There was no mentioning of special events in such lease. This Residential Tag relates to Complaint IN00409553			
R 0149	Sanitation and Safety Standards - Deficiency 410 IAC 16.2-5-1.5(f) (f) The facility shall have a pest control program in operation in compliance with 410 IAC 7-24. Based on interview and record review, the facility failed to ensure an effective pest control program that included drying residents' clothing on high heat for a certain period of time to kill bed bugs and eggs. This affected 7 out of 114 residents that reside in the facility. Findings include: A document titled "Bed Bud Log 2023", was provided by the Maintenance Director on 5/30/23 at 12:30 p.m. The document indicated there were 6 apartments in May of 2023	R 0149	Plan of Correction 06/16/23 Facility ID: 014279 Survey Event ID: PK4411 R149 **1. What Corrective action(s) will be accomplished for those residents found to have been affected by the deficient practice**	06/16/2023

	that reported and/or was treated for bed bugs and 7 apartments in April of 2023. An interview conducted with the Interim Executive Director (IED), on 5/30/23 at 12:30 p.m., indicated she found out on 5/25/23, that the facility has "smart washers and dryers". These dryers do not have the ability to stay on high heat for up to 20 minutes that's required to kill bed bugs. So, the staff have been taking the clothing to the local laundry mat. The Scheduling Coordinator has been taking the clothing to the laundry mat. An interview conducted with the Director of Nursing (DON), on 5/30/23 at 2:00 p.m., indicated the Scheduling Coordinator was the one taking residents clothing to the laundry mat. There was no setting on the "smart dryers" to be able to place clothing on high heat for up to 20 minutes. The facility has been in a "staffing crunch" lately and the Scheduling Coordinator has been needed on the floor to work. The Scheduling Coordinator has been working on the floor for the past month, so she didn't know the ability for the Scheduling Coordinator to take clothing to the laundry mat. An interview conducted with the DON, on 5/30/23 at 3:10 p.m., indicated the previous Executive		a. All residents had the potential to be affected by the alleged deficient practice. **2. How the facility will identify other residents having the potential to be affected by the same deficient practice and what corrective will be taken** a. All residents requiring laundry services, had the potential to be affected by the alleged deficient practice. DON or designee will provide an in-service to all nursing staff on Laundry Services and Preparation for room, including laundry services and resident treatment of an infestation. Employees found to be out of compliance with following proper protocol will receive additional education and possible corrective action.	

	Director (ED), ED 2's last day to work was 5/19/23. She didn't recall the Scheduling Coordinator taking residents' clothing to the laundry mat since 5/19/23. An interview conducted with the Maintenance Director, on 5/31/23 at 10:34 a.m., indicated the pest control company was coming on 5/31/23 between 2:00 p.m. and 4:00 p.m. He communicates with nursing in regards to bed bug activity and nursing is responsible for laundry. He stated the facility was "waiting from corporate on how they want us to move forward" in regards to the handling of pests in the facility. Since the facility has smart dryers that do not meet the temperature requirements to kill bed bugs and eggs. He was not able to manually adjust the dryer to ensure a high temperature for a certain period of time. That was why the facility came up with the idea to take clothing to the laundry mat. An anonymous interview conducted during the survey indicated there are only certain individuals that were permitted to driving the facility bus. The facility bus was utilized to take residents clothing to the laundry mat. They indicated there was only one occasion, in April of 2023, to where 2 residents clothing items were taken to the		**3.** **What measures will be put into place or what systemic changes the facility will make to ensure that the deficient practice does not recur:**	

	laundry mat. ED 2 would use their own personal change for the laundry mat service. ED 2 would communicate with applicable staff for such need to take items to the laundry mat. An interview conducted with the IED, on 5/31/23 at 2:00 p.m., indicated she just received approval for a conventional dryer to have and she also found out, on 5/31/23, that the Maintenance Director located one that was already in the facility and was not connected. The Maintenance Director has it connected so the facility doesn't need to utilize the laundry mat anymore. An interview conducted with the IED, on 5/31/23 at 4:05 p.m., indicated there was no policy related to bed bugs. The facility follows the pest control company's recommendations. An interview conducted with the Maintenance Director, on 5/31/23 at 4:00 p.m., indicated the pest control company had just left the facility and there was a significant infestation of bed bugs to Resident E's wheelchair. He indicated they were going to ensure that the resident's wheelchair be checked each time to ensure it's clear from pests. A document from the United States Environmental Protection		a. A conventional dryer has been placed in the laundry room to be used for drying items from a room with an infestation. This dryer is able to hold the temperature for 20 minutes to efficiently kill any bugs. The Maintenance Director will add to his preventative maintenance list the maintenance on the dryer to assure it continues to be in working order. DON or designee will do an audit on the schedule of laundry services, ensuring organized and timely completion. DON or designee will work closely with the Maintenance Director on the scheduling of treatments for an infestation and will schedule the preparation of resident laundry and ensure complete and timely communication to the staff. **4. How the corrective action(s) will be monitored to ensure the deficient practice will not recur, i.e what quality assurance program will be put into place:**	

Agency (EPA), updated 7/19/2022, indicated the following, "...Preparing for Treatment Against Bed Bugs...Clean All Items Within a Bed-Bug-Infested Living Area...Heat treat clothing, bedding, and other items that can withstand a hot dryer (household dryer at high heat for 30 minutes), which will kill bed bugs and eggs...Washing along might not do the job...."

This Residential Tag relates to Complaint IN00408715, IN00409101 and IN00409503.

Based on interview and record review, the facility failed to ensure an effective pest control program that included drying residents' clothing on high heat for a certain period of time to kill bed bugs and eggs. This affected 7 out of 114 residents that reside in the facility.

Findings include:

A document titled "Bed Bud Log 2023", was provided by the Maintenance Director on 5/30/23 at 12:30 p.m. The document indicated there were 6 apartments in May of 2023 that reported and/or was treated for bed bugs and 7 apartments in April of 2023.

An interview conducted with the Interim Executive Director (IED), on 5/30/23 at 12:30 p.m., indicated she found out on

a. The DON or designee will oversee the preparation for each treatment for 6 weeks, then every other treatment for 8 weeks. The Maintenance Director will add to his preventative maintenance list the maintenance on the dryer to assure it continues to be in working order. Results to be reviewed at monthly QI Meetings and make recommendations based off results.

5. By what date will the systematic changes be completed:

a. June 16th, 2023

5/25/23, that the facility has "smart washers and dryers". These dryers do not have the ability to stay on high heat for up to 20 minutes that's required to kill bed bugs. So, the staff have been taking the clothing to the local laundry mat. The Scheduling Coordinator has been taking the clothing to the laundry mat.

An interview conducted with the Director of Nursing (DON), on 5/30/23 at 2:00 p.m., indicated the Scheduling Coordinator was the one taking residents clothing to the laundry mat. There was no setting on the "smart dryers" to be able to place clothing on high heat for up to 20 minutes. The facility has been in a "staffing crunch" lately and the Scheduling Coordinator has been needed on the floor to work. The Scheduling Coordinator has been working on the floor for the past month, so she didn't know the ability for the Scheduling Coordinator to take clothing to the laundry mat.

An interview conducted with the DON, on 5/30/23 at 3:10 p.m., indicated the previous Executive Director (ED), ED 2's last day to work was 5/19/23. She didn't recall the Scheduling Coordinator taking residents' clothing to the laundry mat since 5/19/23.

An interview conducted with the

Maintenance Director, on 5/31/23 at 10:34 a.m., indicated the pest control company was coming on 5/31/23 between 2:00 p.m. and 4:00 p.m. He communicates with nursing in regards to bed bug activity and nursing is responsible for laundry. He stated the facility was "waiting from corporate on how they want us to move forward" in regards to the handling of pests in the facility. Since the facility has smart dryers that do not meet the temperature requirements to kill bed bugs and eggs. He was not able to manually adjust the dryer to ensure a high temperature for a certain period of time. That was why the facility came up with the idea to take clothing to the laundry mat.

An anonymous interview conducted during the survey indicated there are only certain individuals that were permitted to driving the facility bus. The facility bus was utilized to take residents clothing to the laundry mat. They indicated there was only one occasion, in April of 2023, to where 2 residents clothing items were taken to the laundry mat. ED 2 would use their own personal change for the laundry mat service. ED 2 would communicate with applicable staff for such need to take items to the laundry mat.

An interview conducted with the

IED, on 5/31/23 at 2:00 p.m., indicated she just received approval for a conventional dryer to have and she also found out, on 5/31/23, that the Maintenance Director located one that was already in the facility and was not connected. The Maintenance Director has it connected so the facility doesn't need to utilize the laundry mat anymore.

An interview conducted with the IED, on 5/31/23 at 4:05 p.m., indicated there was no policy related to bed bugs. The facility follows the pest control company's recommendations.

An interview conducted with the Maintenance Director, on 5/31/23 at 4:00 p.m., indicated the pest control company had just left the facility and there was a significant infestation of bed bugs to Resident E's wheelchair. He indicated they were going to ensure that the resident's wheelchair be checked each time to ensure it's clear from pests.

A document from the United States Environmental Protection Agency (EPA), updated 7/19/2022, indicated the following, "...Preparing for Treatment Against Bed Bugs...Clean All Items Within a Bed-Bug-Infested Living Area...Heat treat clothing, bedding, and other items that

	can withstand a hot dryer (household dryer at high heat for 30 minutes), which will kill bed bugs and eggs...Washing along might not do the job...." This Residential Tag relates to Complaint IN00408715, IN00409101 and IN00409503.			

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