

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

PRINTED: 04/25/2024
FORM APPROVED
OMB NO. 0938-039

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 155196		X2) MULTIPLE CONSTRUCTION A. BUILDING 00 B. WING		X3) DATE SURVEY COMPLETED 04/01/2024	
NAME OF PROVIDER OR SUPPLIER ALTENHEIM HEALTH & LIVING COMMUNITY				STREET ADDRESS, CITY, STATE, ZIP CODE 3525 E HANNA AVE INDIANAPOLIS, IN 46237			
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F 0000 Bldg. 00	<p>This visit was for the Investigation of Complaints IN00430414 and IN00429968.</p> <p>Complaint IN00430414 - No deficiencies related to the allegations are cited.</p> <p>Complaint IN00429968 - Federal/State deficiencies related to the allegations are cited at F925.</p> <p>Survey date: April 1, 2024</p> <p>Facility number: 000103 Provider number: 155196 AIM number: 100290000</p> <p>Census Bed Type: SNF/NF: 58 SNF: 24 Residential: 62 Total: 144</p> <p>Census Payor Type: Medicare: 14 Medicaid: 32 Other: 36 Total: 82</p> <p>This deficiency reflects State Findings cited in accordance with 410 IAC 16.2-3.1.</p> <p>Quality review completed April 2, 2024.</p>			F 0000	<p>Please find enclosed the Plan of Correction to the complaint survey conducted on April 1st, 2024. This letter is to inform you that the plan of correction attached is to serve as The Altenheim's credible allegation of compliance. We allege compliance on 04/25/2024. Submission of this plan of correction does not constitute an admission by The Altenheim or its management company that the allegations contained in the survey report is a true and accurate portrayal of nursing care and other services in this facility. Nor does this provision constitute an agreement or admission of the survey allegations. We respectfully request desk review.</p>		
F 0925 SS=E Bldg. 00	483.90(i)(4) Maintains Effective Pest Control Program §483.90(i)(4) Maintain an effective pest control program so that the facility is free of pests and rodents.						

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

CHIRAG PATEL

Executive Director

04/22/2024

Any deficiency statement ending with an asterisk (*) denotes a deficiency which the institution may be excused from correcting providing it is determined other safeguards provide sufficient protection to the patients. (see instructions.) Except for nursing homes, the findings stated above are disclosable following the date of survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosed days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.

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	<p>Based on observation, interview, and record review, the facility failed to ensure an effective pest control program was maintained and the facility was free of rodents affecting 5 of 8 residents reviewed. (Resident D, Resident E, Resident J, Resident K, Resident M)</p> <p>Findings include:</p> <p>During the initial tour, on 4/1/24 from 9:26 a.m. to 9:50 a.m., Housekeeping (HSK) 2 indicated there were "issues with mice in several resident rooms." The Maintenance Department Director was notified of the mice. The following was observed during the facility tour:</p> <p>1. Room 1073 was observed to have one resident who resided in the room. The following was observed:</p> <p>- Resident J had a dresser with multiple drawers near the entry door and approximately 6 feet from the resident's bed. Inside the bottom drawer were multiple folded towels and wash cloths. Visible on the towels and wash cloths were multiple small black rice-like substances.</p> <p>2. Room 1089 was observed to have two residents who resided in the room. The following was observed:</p> <p>- On the floor inside Resident K's closet, located near the entry door, was a 6 inch "bait trap (mouse trap)" partially covered by a dark colored piece of clothing. On the dresser stand, approximately 5 feet from the resident's bed, was a mini-refrigerator unit. Near and on top of the mini-refrigerator unit were multiple small black rice-like substances.</p>			F 0925	<p>1. What corrective action(s) will be accomplished for those residents found to have been affected by the deficient practice? Resident D, Resident E, Resident J, Resident K, and Resident M's rooms were deep cleaned, and all small black rice-like substances were removed. Pest control vendor contacted for treatment of rooms.</p> <p>2. How other residents having the potential to be affected by the same deficient practice will be identified and what corrective action(s) will be taken? Residents who reside in the facility have the potential to be affected by the alleged deficient practice. All rooms have been audited for evidence of rodent activity. Rooms with evidence of rodent activity have been deep cleaned and pest control vendor has been notified and treatment completed.</p> <p>3. What measures will be put into place and what systematic changes will be made to ensure that the deficient practice does not recur? Housekeeping staff educated to notify the administrator regarding evidence of rodent activity and deep cleaning rooms with evidence of rodent activity. Pest control vendor will visit bi-weekly for treatment and observation for evidence of rodent activity.</p> <p>4. How the corrective action(s) will be monitored to ensure the</p>		04/25/2024

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	<p>During an interview at that time, Resident K indicated "about a week or so ago" there was a live mouse near the refrigerator unit and walking around on the floor in his room.</p> <p>- Visible on the windowsill, located next to Resident M's bed were multiple small black rice-like substances. On the other side of Resident M's bed was a three-drawer bedside table. Inside the second drawer were multiple small black rice-like substances.</p> <p>During an interview at that time, Resident M indicated several days ago, he saw multiple mice on the windowsill and on the floor between the two resident's beds.</p> <p>3. Room 1075 was observed to have two residents who resided in the room. The following was observed:</p> <p>- Resident D had an over-the bed table next to bed. On top of the over-the bed table was a medium-sized uncovered plastic tub. Inside the tub was an unopened plastic wrapped sleeve that held chocolate stuffed cookies. At the top of the sleeve of cookies was a dime-sized hole in the plastic wrap and the top part of a cookie had been chewed. At the bottom of the tub were multiple small black rice-like substances.</p> <p>During an interview at that time, Resident D indicated there had been mice in his room over the past several months. "About 2-3 weeks ago" there was a live mouse under his pillow while he was resting in bed. Resident D indicated he was "unable" to catch it.</p> <p>- Resident E's nightstand was located next to the bed. The third drawer of the nightstand had</p>				<p>deficient practice will not recur? Administrator or designee will audit 10 rooms to ensure they are free of rodent activity. Administrator or designee with interview 5 staff and 5 residents to monitor for potential rodent activity. Audits and interviews will occur daily x 30 days, weekly x 12 weeks, then monthly for 6 months. The results of these reviews will be discussed at the monthly facility Quality Assurance Committee meeting. Frequency and duration of reviews will be adjusted as needed if compliance is below 100%. Ongoing frequency and duration will be determined by the Quality Assurance Committee 5. Date of compliance: 04/25/2024</p>		

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	<p>multiple small black rice-like substances.</p> <p>During an interview at that time, Resident E indicated "there were problems with mice."</p> <p>During an interview on 4/1/24 at 9:55 a.m., LPN (Licensed Practice Nurse) 3 indicated "in the recent past" there were several resident rooms where "mice droppings" were observed. The Maintenance Director was notified of the "mice droppings."</p> <p>During an interview and facility tour on 4/1/24 at 12:30 p.m., the Director of Nursing Services (DNS) indicated the rodent/pest control provider had been treating the mice infestation for several months. The provider had treated the building twice weekly from early December to mid-February. Since that time, the provider had not seen any evidence of new mice in the building and so the scheduled treatment was changed to monthly. During a facility tour at that time, the DNS indicated she was unaware of additional mice issues again.</p> <p>During an interview on 4/1/24 at 1:07 p.m., the Maintenance Director indicated there was a mice infestation that started several months ago. The pest/rodent provider has been conducting the mice eradication since December 2023. They were coming to the building twice weekly. Since mid-February, the infestation had decreased and so the provider conducts the inspections monthly. The Maintenance Director indicated over the past couple of months, he had "caught" 157 mice. The mice infestation was on the A and B halls.</p> <p>On 4/1/24 at 1:20 p.m., the DNS provided a copy of the [Provider] Pest Sighting/Evidence Log. A</p>						

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	<p>review of the log indicated the following:</p> <table><thead><tr><th>Date</th><th>Pest/issue</th><th>Exact location</th></tr></thead><tbody><tr><td>12/26/23</td><td>mice</td><td>Resident rooms - 1119, 1098, 1099, 1093</td></tr><tr><td>12/27/23</td><td>mice</td><td>Resident room - 2120</td></tr><tr><td>12/27/23</td><td>mice</td><td>Resident room - 1122</td></tr><tr><td>1/8/24</td><td>mice</td><td>Resident room 1112</td></tr><tr><td>1/9/24</td><td>mice</td><td>Resident rooms 1116, 1117, 1127, 1115, 1122, 1124</td></tr><tr><td>1/15/24</td><td>mice</td><td>Resident rooms 1082, 2115</td></tr><tr><td>1/16/24</td><td>mice</td><td>Resident room 1124</td></tr><tr><td>1/24/24</td><td>mice</td><td>Resident room 2120</td></tr><tr><td>1/25/24</td><td>mice</td><td>Resident room 2121</td></tr><tr><td>2/2/24</td><td>mice</td><td>Resident rooms 1077, 1075</td></tr></tbody></table> <p>On 4/1/24 at 1:40 p.m., the DNS provided a copy of the Customer Service Report. A review of the report indicated the provider implemented or continued the rodent program on the following dates: 1/2/24; 1/5/24; 1/10/24; 1/16/24; and 1/30/24. The provider indicated no sightings of rodent activity were visible on the following dates: 1/12/24; 1/19/24; 1/23/24; 2/2/24; 2/6/24; 2/9/24; 2/13/24; 2/14/24; 2/23/24; 3/13/24; and 3/15/24.</p> <p>On 4/1/24 at 2:15 p.m., the DNS provided an undated statement, titled Mouse Identification, and indicated it was a summary of the facility's process for eradicating the mice infestation. A review of the document indicated, "December 5, 2023 - [provider] commenced treatments for activity [evidence of mice in the facility] two times per week. Per verbal agreement, [provider] would continue treating two times per week unless no activity was noted for 3 weeks. On 2/13/24, there was no noted activity for 4 weeks. The treatment was changed back to the regular once per month</p>			Date	Pest/issue	Exact location	12/26/23	mice	Resident rooms - 1119, 1098, 1099, 1093	12/27/23	mice	Resident room - 2120	12/27/23	mice	Resident room - 1122	1/8/24	mice	Resident room 1112	1/9/24	mice	Resident rooms 1116, 1117, 1127, 1115, 1122, 1124	1/15/24	mice	Resident rooms 1082, 2115	1/16/24	mice	Resident room 1124	1/24/24	mice	Resident room 2120	1/25/24	mice	Resident room 2121	2/2/24	mice	Resident rooms 1077, 1075			
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	<p>schedule. [Provider] treated the facility on 2/14/24; 2/23/24; 3/13/24; and 3/15/24 with no findings." During an interview at that time, the DNS indicated she was unaware of additional mice issues since mid March. Staff were to report all mice issues so that it could be addressed.</p> <p>On 4/1/24 at 11:33 a.m., the Administrator provided an undated copy of the [Provider] Pest Elimination Scope of Service policy and indicated it was the current policy in use by the facility. A review of the policy indicated, "...[Provider] will proactively eliminate the pests you are concerned about...the facility will be serviced monthly...Rodent program is an integrated system that combines patented rodent station technology with discreet devices, regular service visits and detailed inspections...conduct a thorough inspection...to identify rodent breeding areas and facility access points...inspect interior...to identify current rodent issues as well as structural and sanitation issues..."</p> <p>This citation relates to Compliant IN00429968.</p> <p>3.1-19(f)(4)</p>						