Quarterly IJ Summary Report
January 2021 – March 2021

The following report presents information regarding all tags cited at the Immediate Jeopardy (IJ) level during licensing and certification surveys and complaint or incident investigations performed in nursing facilities during the first quarter of 2021 (01/01/2021 – 03/31/2021).

Immediate Jeopardy is “a situation in which the provider's noncompliance with one or more requirements of participation has caused, or is likely to cause, serious injury, harm, impairment, or death to a resident” (42 CFR 489.3).

During this period, an IJ level tag was cited for twenty-five of the surveys and investigations conducted, resulting in twenty-six citations of nine unique federal tags. The following tables provide the percentage at which each unique tag was cited (Table 1), the percent of IJs per nursing facility (NF) by region (Table 2) and the number of IJs per type of investigation (Table 3).

Descriptions of the situations and the deficient practices are derived from each event’s *Form CMS-2567 - Statement of Deficiencies and Plan of Correction*, which is available to the public through a Freedom of Information Act (FOIA) request.

Table 1

F-Tag (Sorted by Tag Number)	**% Cited***	**F-Tag** (Sorted by Frequency Cited)	**% Cited***
600	4%	880	27%
678	8%	689	23%
684	19%	684	19%
686	8%	678	8%
689	23%	686	8%
692	4%	600	4%
695	4%	692	4%
725	4%	695	4%
880	27%	725	4%

*Rounded to the nearest tent

Table 2

Region	**# of IJs**	**# of NFs**	**% of IJs/NF**
1	1	90	1.11%
2	0	135	0.00%
3	4	229	1.75%
4	4	192	2.08%

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Region	# of IJs	# of NFs	% of IJs/NF
5	7	188	3.72%
6	3	173	1.73%
7	6	225	2.67%
1	1	90	1.11%

Table 3
Number of IJs

from Complaints	from Incidents	from Surveys	From Other	Total
20	2	3	7	59

Tag References

483.12 - Freedom from Abuse, Neglect, and Exploitation:

600 Free from Abuse and Neglect

483.24 - Quality of Life:

678 – Cardio-Pulmonary Resuscitation

483.25 - Quality of Care:

684 Quality of Care
686 Treatment/Svcs to Prevent/Heal Pressure Ulcers
689 Free of Accident Hazards/Supervision/Devices
692 Nutrition/Hydration Status Maintenance
695 Respiratory/Tracheostomy Care and Suctioning

483.35 Nursing Services

725 Sufficient Nursing Staff

483.70 - Administration:

880 Infection Prevention & Control

Acronyms

CDC – Centers for Disease Control
CPR – Cardio-Pulmonary Resuscitation
DNR – Do Not Resuscitate
PPE – Personal Protective Equipment

Region 6 **Exit Date**: 01/02/2021 **Purpose of Visit:** Complaint Investigation; Focused Infection Control **Tags**: F880/N1647; N2166 **Situations:** The facility failed to cohort staff and residents based on their COVID-19 status.
Deficient Practice: The facility failed to ensure an effective infection control program to help prevent the development and transmission of communicable diseases and infections was maintained.

Region 5 **Exit Date**: 01/03/2021 **Purpose of Visit**: Complaint/Incident Investigation; Focused Infection Control Survey **Tags**: F689/N1416 **Situations**: The facility failed to ensure a resident with exit-seeking behaviors was effectively supervised. The resident eloped from the facility and was missing for over an hour.
Deficient Practice: The facility failed to ensure adequate supervision was provided to prevent accidents.

Region 5 **Exit Date**: 01/04/2021 **Purpose of Visit**: Complaint/Incident Investigation; Focused Infection Control Survey **Tags**: F880/N1647 **Situations:** The facility failed to cohort residents based on their COVID-19 status, failed to effectively identify rooms in which residents who were COVID-positive were residing, failed to ensure effective use of PPE, and failed to implement effective sanitation practices.
Deficient Practice: The facility failed to ensure an effective infection control program to help prevent the development and transmission of communicable diseases and infections was maintained.

Region 5 **Exit Date**: 01/05/2021 **Purpose of Visit**: Complaint/Incident Investigation; Focused Infection Control Survey **Tags**: F880/N1647 **Situations:** The facility failed to cohort staff and residents based on their COVID-19 status and failed to screen residents three times per day, per CDC guidelines.
Deficient Practice: The facility failed to ensure an effective infection control program to help prevent the development and transmission of communicable diseases and infections was maintained.

Region 4 **Exit Date**: 01/07/2021 **Purpose of Visit**: Complaint Investigation **Tags**: F725/N1446 **Situations:** The facility failed to have sufficient nursing staff on their COVID unit to provide wound care according to physicians' orders for two residents. The facility failed to perform effective skin assessments and to provide showers or baths to seventeen residents.
Deficient Practice: The facility failed to provide sufficient nursing staff to provide nursing services to assure resident safety and maintain the highest practicable well-being.

Region 3 **Exit Date**: 01/17/2021 **Purpose of Visit**: Incident Investigation; Focused Infection Control Survey **Tags**: F880/N1647 **Situations:** The facility failed to ensure a staff member displaying symptoms of COVID-19 did not work with residents. After the staff member tested positive, the facility failed to perform contract tracing to determine who the staff member had cared for.
Deficient Practice: The facility failed to ensure an effective infection control program to help prevent the development and transmission of communicable diseases and infections was maintained.

Region 6 **Exit Date**: 01/21/2021 **Purpose of Visit**: Complaint Investigation **Tags**: F692/N1434 **Situations:** The facility failed to identify significant weight loss in several residents and did not report the weight loss to the residents' physicians. The facility failed to provide physician-ordered therapeutic diets and nutritional supplements in a timely manner for those same residents.
Deficient Practice: The facility failed to ensure residents reviewed for weight loss maintained acceptable parameters of nutritional status and failed to offer a therapeutic diet when there is a nutritional problem.

Region 5 **Exit Date**: 01/25/2021 **Purpose of Visit**: Complaint/Incident Investigation; Focused Infection Control Survey **Tags**: F880/N1647 **Situations:** The facility failed to set up a unit for residents of unknown COVID status, failed to ensure effective use of PPE, and failed to implement effective sanitation practices.

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Deficient Practice: The facility failed to ensure an effective infection control program to help prevent the development and transmission of communicable diseases and infections was maintained.

Region 5
Exit Date: 01/25/2021
Purpose of Visit: Complaint/Incident Investigation
Tags: F695/N1446
Situations: The facility failed to ensure a resident received oxygen as ordered by a physician. The resident began experiencing respiratory distress and subsequently died.

Deficient Practice: The facility failed to ensure residents who needed respiratory care were provided such care, consistent with professional standards of practice, for oxygen therapy.

Region 7
Exit Date: 01/26/2021
Purpose of Visit: Complaint/Incident Investigation
Tags: F689/N1477
Situations: The facility failed to implement interventions and provide adequate supervision after two residents eloped from the facility. The facility did not ensure all doors were equipped with alarms to alert staff of a resident’s exit and failed to ensure those with alarms equipped were functional.

Deficient Practice: The facility failed to ensure residents received appropriate supervision to prevent accidents.

Region 4
Exit Date: 01/28/2021
Purpose of Visit: Standard Survey; Focused Infection Control Survey
Tags: F686/N1449
Situations: The facility failed to assess and treat a resident’s pressure ulcer, resulting in deterioration of the wound, which became infected and began to drain. The resident was ultimately sent to the hospital and placed in ICU where they were diagnosed with an unstageable pressure ulcer, sepsis (infection in the blood), and osteomyelitis (bone infection).

Deficient Practice: The facility failed to provide the necessary treatment and services, based on the comprehensive assessment and consistent with professional standards of practice to prevent development and worsening of pressure ulcers.

Region 6
Exit Date: 01/29/2021
Purpose of Visit: Complaint Investigation; Focused Infection Control Survey
Tags: F686/N1450

Situations: The facility failed to ensure that two residents with pressure ulcers were provided care in accordance with physician orders. Both residents' pressure ulcers became infected and one resident required hospitalization.

Deficient Practice: The facility failed to provide the necessary treatment and services, based on the comprehensive assessment and consistent with professional standards of practice to prevent development and worsening of pressure ulcers.

Region 5
Exit Date: 01/30/2021
Purpose of Visit: Complaint Investigation; Focused Infection Control Survey
Tags: F880/N1647
Situations: The facility failed to cohort staff and residents based on their COVID-19 status.

Deficient Practice: The facility failed to ensure an effective infection control program to help prevent the development and transmission of communicable diseases and infections was maintained.

Region 4
Exit Date: 01/30/2021
Purpose of Visit: Complaint Investigation; Focused Infection Control Survey
Tags: F684/N1416
Situations: The facility failed to implement interventions when a resident would not eat, drink, or take medications, and had an infiltrated IV for two days. The resident required hospitalization and died within three days.

Deficient Practice: The facility failed to ensure residents received treatment and care in accordance with professional standards of practice and the comprehensive, person-centered care plan.

Region 7
Exit Date: 02/01/2021
Purpose of Visit: Standard Survey
Tags: F684/N1446
Situations: The facility failed to provide four residents with their blood pressure medication, meant to raise the blood pressure, as ordered by a physician. The medication was administered during times when it was not needed.

Deficient Practice: The facility failed to ensure that residents received treatment and care in accordance with the professional standards of practice and comprehensive person-centered care plan.

Region 7
Exit Date: 02/03/2021
Purpose of Visit: Complaint Investigation; Focused Infection Control Survey
Tags: F880/N1647

Situations: The facility failed to ensure residents who were COVID-positive were moved out of rooms where a resident was negative for the disease.

Deficient Practice: The facility failed to ensure an effective infection control program to help prevent the development and transmission of communicable diseases and infections was maintained.

Region 3
Exit Date: 02/04/2021
Purpose of Visit: Complaint/Incident Investigation; Focused Infection Control Survey
Tags: F684/N1446
Situations: The facility failed to ensure a resident received care and treatment for twenty-two hours following admission. The resident was placed in a room in an unstaffed hallway and the facility remained unaware of their presence. The resident was found covered in urine and feces.

Deficient Practice: The facility failed to ensure that residents received treatment and care in accordance with the professional standards of practice and comprehensive person-centered care plan.

Region 7
Exit Date: 02/05/2021
Purpose of Visit: Standard Survey
Tags: F689/N1477
Situations: The facility failed to implement interventions to prevent residents from falling. One resident fell fifteen times within a seven-month period, another resident fell six times during a six-month period, both sustaining lacerations and fractures.

Deficient Practice: The facility failed to ensure adequate supervision was provided to prevent accidents.

Region 1
Exit Date: 02/06/2021
Purpose of Visit: Complaint/Incident Investigation
Tags: F600/N1283; F684/N1446
Situations: The facility failed to assess and observe a resident following a report of a change in condition. The resident was left unobserved for over twelve hours and was found dead.

Deficient Practice: The facility failed to implement policies and procedures to prevent neglect and failed to ensure that residents received treatment and care in accordance with the professional standards of practice and comprehensive person-centered care plan.

Region 3
Exit Date: 02/25/2021
Purpose of Visit: Complaint/Incident Investigation; Focused Infection Control Survey
Tags: F689/N1477

Situations: The facility failed to ensure proper resident transfer techniques were utilized for a resident on two occasions. The resident was dropped during two separate transfers, both times sustaining fractures.

Deficient Practice: The facility failed to ensure adequate supervision was provided to prevent accidents.

Region 4
Exit Date: 03/01/2021
Purpose of Visit: Complaint/Incident Investigation; Focused Infection Control Survey
Tags: F689/N1479
Situations: The facility failed to implement interventions to prevent a resident with a history of exit-seeking behavior from eloping. The resident eloped from the facility and was found outside the secure gate be a staff member returning to work.

Deficient Practice: The facility failed to ensure adequate supervision was provided to prevent accidents.

Region 7
Exit Date: 03/12/2021
Purpose of Visit: Complaint/Incident Investigation; Focused Infection Control Survey
Tags: F678/N1488
Situations: The facility failed to honor a resident's DNR status and performed CPR when the resident was unresponsive. The resident died at the facility.

Deficient Practice: The facility failed to ensure that a resident's CPR orders were followed.

Region 7
Exit Date: 03/18/2021
Purpose of Visit: Incident Investigation; Focused Infection Control Survey
Tags: F678
Situations: The facility failed to honor a resident's DNR plan and performed CPR when the resident was unresponsive. CPR was initiated at the facility before the resident was transferred to the hospital where they died.

Deficient Practice: The facility failed to ensure that a resident's CPR orders were followed.

Region 5
Exit Date: 03/30/2021
Purpose of Visit: Complaint Investigation
Tags: F684/N1446
Situations: The facility failed to administer fast-acting insulin to a resident with significantly high blood glucose levels.

Deficient Practice: The facility failed to ensure that residents received treatment and care in accordance with the professional standards of practice and comprehensive person-centered care plan.

Region 3
Exit Date: 03/31/2021
Purpose of Visit: Complaint/Incident Investigation; Focused Infection Control Survey
Tags: F689/N1477
Situations: The facility failed to implement interventions to prevent a resident with a history of exit-seeking behavior from eloping. The resident eloped from the facility and was found by the local police department.

Deficient Practice: The facility failed to ensure adequate supervision was provided to prevent accidents.