

NON-CORE ISSUES

Facility	License #	Physical Address	Phone Number
Pleasant Valley Shelter Home	RC-226	1911 17th Avenue	208-743-0026
Administrator	City	Zip Code	Survey Date
Joy Cook	Lewiston	83501	08/11/2022
Survey Team Leader	Survey Type		Response Due
Perry, Bradley	health care licensure and follow-up		09/10/2022

Item #	Rule (16.03.22)	Description
1	.260.06. Housekeeping and Maintenance Services.	The facility was not maintained in a clean, safe and orderly manner. For example: paint was missing on multiple areas of the walls in the hallways and dining room; a living room recliner had a broken handle; the shower pad in the east bathroom was dirty; the backyard had old pieces of metal and unused furniture; part of the siding was peeling; patio furniture was dirty; there was dirt and lint build up behind the washer and dryer; a bloody alcohol pad was on the kitchen table; linoleum flooring was peeling in the west bathroom; bathroom floors and sinks were dirty; several resident rooms had dirty window sills; there was a hole in Resident #3's wall; the back patio planks were unstable, and carpets in the living room and hallways were stained.
2	.310.04.a. Psychotropic or Behavior Modifying Medication.	Residents #1 exhibited multiple maladaptive behaviors as described in the noncore citation for rule 330.06.b., and no behavior plan was developed. When the resident exhibited behaviors, the facility contacted the resident's physician, and their escitalopram (Lexapro) was increased from 5 mg to 10 mg. Subsequently, on 7/19/22, the facility faxed a request to the physician, which documented, "We have been having some severe issues with {Resident #1}...the increase in Lexapro

		<p>did not work....{Resident #1} is disruption (sic) the whole house...can you try to make it to one that has an OTD (Orally disintegrating) tablet that will dissolve quickly and take effect fast." The resident's provider prescribed a scheduled dose of the antipsychotic medication olanzapine in response to this request. The facility's administrator/licensed practical nurse stated a behavior plan was not developed with interventions to respond to Resident #1's behaviors, prior to requesting medications from the resident's provider.</p>
3	.330.04.c.vii. Resident Care Records.	<p>Change of condition assessments had not been consistently documented. For example, Resident #1 soiled themselves on 4/17/22 and felt "too sick to move," experienced diarrhea and marked nausea on 5/22/22 and 5/23/22 which precipitated an Emergency Room visit, and suffered from an "infected hair follicle" in their pubic area on 6/20/22. Resident #2 had a skin tear on their arm on 6/5/22 and 6/26/22, and had a bruise on their leg on 7/5/22. The administrator/licensed practical nurse stated she had assessed these residents for these issues but had not documented the assessments.</p>
4	.330.06.b. Behavior Documentation.	<p>The facility did not develop a behavior plan, with at least one intervention for each maladaptive behavior. For example: Resident #1 exhibited behaviors of yelling at staff, upsetting other residents by "demanding" the other residents "start praying and watching church shows," refusing cares such as changing their soiled clothes, accusing caregivers of poisoning their food, and slapping a caregiver. Resident #1 did not have a current behavior management plan in place to direct caregivers how to respond to these maladaptive behaviors. The administrator/licensed practical nurse stated Resident #1 did not have a behavior plan in place.</p>
5	.451.01.d. Menu.	<p>The facility did not follow a dietician approved menu. For example: on the four week menu cycle, dated 7/10/22 to 8/10/22, 29 of 31 days had substitutions to items on the menu. On 8/10/22, the menu documented residents were to be</p>

		served salmon, yams, vegetables, a roll, and a mixed berry crisp for lunch. Residents were observed to receive chicken, cottage cheese, vegetables and fig newton cookies.
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