

STATEMENT OF ISOLATED DEFICIENCIES WHICH CAUSE NO HARM WITH ONLY A POTENTIAL FOR MINIMAL HARM FOR SNFs AND NFs	PROVIDER # 345377	MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	DATE SURVEY COMPLETE: 3/31/2017
NAME OF PROVIDER OR SUPPLIER EAST CAROLINA REHAB AND WELLNESS	STREET ADDRESS, CITY, STATE, ZIP CODE 2575 W 5TH STREET GREENVILLE, NC		
ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES		
F 203	<p>483.15(c)(3)-(6)(8) NOTICE REQUIREMENTS BEFORE TRANSFER/DISCHARGE</p> <p>(c) (3) Notice before transfer. Before a facility transfers or discharges a resident, the facility must-</p> <p>(i) Notify the resident and the resident's representative(s) of the transfer or discharge and the reasons for the move in writing and in a language and manner they understand. The facility must send a copy of the notice to a representative of the Office of the State Long-Term Care Ombudsman.</p> <p>(ii) Record the reasons for the transfer or discharge in the resident's medical record in accordance with paragraph (c)(2) of this section; and</p> <p>(iii) Include in the notice the items described in paragraph (b)(5) of this section.</p> <p>(c) (4) Timing of the notice.</p> <p>(i) Except as specified in paragraphs (b)(4)(ii) and (b)(8) of this section, the notice of transfer or discharge required under this section must be made by the facility at least 30 days before the resident is transferred or discharged.</p> <p>(ii) Notice must be made as soon as practicable before transfer or discharge when-</p> <p>(A) The safety of individuals in the facility would be endangered under paragraph (b)(1)(ii)(C) of this section;</p> <p>(B) The health of individuals in the facility would be endangered, under paragraph (b)(1)(ii)(D) of this section;</p> <p>(C) The resident's health improves sufficiently to allow a more immediate transfer or discharge, under paragraph (b)(1)(ii)(B) of this section;</p> <p>(D) An immediate transfer or discharge is required by the resident's urgent medical needs, under paragraph (b)(1)(ii)(A) of this section; or</p> <p>(E) A resident has not resided in the facility for 30 days.</p> <p>(c) (5) Contents of the notice. The written notice specified in paragraph (c)(3) of this section must include the following:</p> <p>(i) The reason for transfer or discharge;</p> <p>(ii) The effective date of transfer or discharge;</p>		

Any deficiency statement ending with an asterisk (*) denotes a deficiency which the institution may be excused from correcting providing it is determined that other safeguards provide sufficient protection to the patients. (See instructions.) Except for nursing homes, the findings stated above are disclosable 90 days 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 disclosable 14 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of

The above isolated deficiencies pose no actual harm to the residents

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F 203	<p>Continued From Page 1</p> <p>(iii) The location to which the resident is transferred or discharged;</p> <p>(iv) A statement of the resident's appeal rights, including the name, address (mailing and email), and telephone number of the entity which receives such requests; and information on how to obtain an appeal form and assistance in completing the form and submitting the appeal hearing request;</p> <p>(v) The name, address (mailing and email) and telephone number of the Office of the State Long-Term Care Ombudsman;</p> <p>(vi) For nursing facility residents with intellectual and developmental disabilities or related disabilities, the mailing and email address and telephone number of the agency responsible for the protection and advocacy of individuals with developmental disabilities established under Part C of the Developmental Disabilities Assistance and Bill of Rights Act of 2000 (Pub. L. 106-402, codified at 42 U.S.C. 15001 et seq.); and</p> <p>(vii) For nursing facility residents with a mental disorder or related disabilities, the mailing and email address and telephone number of the agency responsible for the protection and advocacy of individuals with a mental disorder established under the Protection and Advocacy for Mentally Ill Individuals Act.</p> <p>(c)(6) Changes to the notice. If the information in the notice changes prior to effecting the transfer or discharge, the facility must update the recipients of the notice as soon as practicable once the updated information becomes available.</p> <p>(c)(8) Notice in advance of facility closure. In the case of facility closure, the individual who is the administrator of the facility must provide written notification prior to the impending closure to the State Survey Agency, the Office of the State Long-Term Care Ombudsman, residents of the facility, and the resident representatives, as well as the plan for the transfer and adequate relocation of the residents, as required at § 483.70(l). This REQUIREMENT is not met as evidenced by: Based on staff and family interviews and record review, the facility failed to provide a written discharge notice with appeal rights and explanation to the resident or responsible party and failed to notify the ombudsman of the discharge for one of one residents reviewed for discharge (Resident #87). Findings included: A review of the medical record revealed Resident #87 was admitted on 3/15/2017 with diagnoses of advanced dementia, altered mental status and history of falls. No Minimum Data Set (MDS) available. The care plan dated 3/16/2017 noted Resident #87's discharge to the community was feasible and a goal was that Resident #87 would understand discharge plan to the community through the next review. Interventions included: Discuss all discharge plans with the resident prior to discharge. Provide referral to community resources and necessary equipment. Resident to discuss fears or ask questions about pending discharge. Encourage resident family to participate in discharge plans.</p>
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F 203	<p>Continued From Page 2</p> <p>A review of the facility admission packet for Resident #87 revealed the Responsible Party (RP) was listed as Resident #87's family member. The admission packet also had an acknowledgement of Medicare as the only payer source, and this was signed by the RP. Included in the admission packet was a Facility Guide with a list of forms, rights, policies and notices to be supplied to the RP. The highlighted areas were #6 A description of the Facility's policy regarding discharge and #9 Information on applying for and using Medicaid and Medicare benefits, and this guide was signed by the RP.</p> <p>The facility discharge policy was reviewed and revealed the Policy stated: The facility will provide sufficient preparation and orientation to residents to ensure safe and orderly discharges from the facility.</p> <p>In an interview on 3/30/2017 at 11:15 AM, the facility Administrator stated when Resident #87 was admitted, it was to be a short term stay and this was reflected in the admission packet. The Administrator stated Resident #87 only had a payer source of Medicare, had applied for Medicaid and been denied due to ownership of a home. The Administrator stated it was his understanding the home had been sold and the family could pay the Medicare copay. The Administrator stated Resident #87 was being discharged for non-payment. The Administrator noted when Resident #87 was admitted, the Resident was planned for discharge.</p> <p>In a telephone interview on 3/30/2017 at 12:10 PM, the RP stated when Resident #87 was admitted, her idea was therapy would help and the Resident would improve and could come home. The RP stated Resident #87 had not improved. The RP stated she worked 11PM to 7AM and the only person who was in the home at that time was another family member with Alzheimer's disease and was unable to care for Resident #87. The RP stated no one from the facility had explained any of the discharge procedures.</p> <p>In an interview on 3/31/2017 at 12 noon, the Administrator stated the facility had been in touch with the family about Resident #87 going home since admission. This was not a forced discharge because it had been planned since admission. The Administrator stated there was not a forced discharge.</p> <p>A review of records revealed the facility had not provided Resident #87 or the RP any discharge notice about the planned discharge. The review revealed the Long Term Care ombudsman had not been notified of the discharge.</p> <p>On 3/31/2017 at 1:10 PM the Region Q Ombudsman stated she had not received any discharge notices for any residents in that region, which included the facility in which Resident #87 resided. The Ombudsman stated she had visited the facility and gone to the SW office and the SW pulled up the form on her computer because the Ombudsman wanted her to see it and know what it was. The Ombudsman indicated she had sent all of the providers in her area the notification of the new regulation regarding discharge and appeal rights.</p>
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