

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

PRINTED: 04/24/2023
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 345339	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED C 03/08/2023
NAME OF PROVIDER OR SUPPLIER WINDSOR REHABILITATION AND HEALTHCARE CENTER			STREET ADDRESS, CITY, STATE, ZIP CODE 1306 SOUTH KING STREET WINDSOR, NC 27983	
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETION DATE
F 000	INITIAL COMMENTS A complaint investigation survey was conducted from 3/7/23 through 3/8/23. Event ID# 4TPN11. Intakes NC00199260, NC00198672, NC00198360, and NC00198675 were investigated. 2 of the 6 complaint allegations resulted in a deficiency.	F 000		
F 550 SS=D	Resident Rights/Exercise of Rights CFR(s): 483.10(a)(1)(2)(b)(1)(2) §483.10(a) Resident Rights. The resident has a right to a dignified existence, self-determination, and communication with and access to persons and services inside and outside the facility, including those specified in this section. §483.10(a)(1) A facility must treat each resident with respect and dignity and care for each resident in a manner and in an environment that promotes maintenance or enhancement of his or her quality of life, recognizing each resident's individuality. The facility must protect and promote the rights of the resident. §483.10(a)(2) The facility must provide equal access to quality care regardless of diagnosis, severity of condition, or payment source. A facility must establish and maintain identical policies and practices regarding transfer, discharge, and the provision of services under the State plan for all residents regardless of payment source. §483.10(b) Exercise of Rights. The resident has the right to exercise his or her rights as a resident of the facility and as a citizen or resident of the United States.	F 550		3/21/23

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

TITLE

(X6) DATE

Electronically Signed

03/14/2023

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 correction is requisite to continued program participation.

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F 550	<p>Continued From page 1</p> <p>§483.10(b)(1) The facility must ensure that the resident can exercise his or her rights without interference, coercion, discrimination, or reprisal from the facility.</p> <p>§483.10(b)(2) The resident has the right to be free of interference, coercion, discrimination, and reprisal from the facility in exercising his or her rights and to be supported by the facility in the exercise of his or her rights as required under this subpart.</p> <p>This REQUIREMENT is not met as evidenced by:</p> <p>Based on observations, record review, resident and staff interviews the facility failed to keep a resident's catheter bag covered and urine out of view of the hall for 1 of 3 residents reviewed for dignity (Resident #1).</p> <p>Findings included:</p> <p>Resident #1 was admitted to the facility on 12/14/22. His active diagnoses included acute pyelonephritis and obstructive uropathy.</p> <p>Resident #1's minimum data set assessment dated 12/21/22 revealed he was assessed as moderately cognitively impaired. Resident #1 had an indwelling urinary catheter.</p> <p>Resident #1's care plan dated 12/14/22 revealed he was care planned for the use of an urinary catheter. The interventions included to observe and document output as per facility policy, provide urinary catheter care as ordered, and notify the physician of any signs or symptoms of infection.</p> <p>During observation on 3/7/23 at 10:01 AM</p>	F 550	<p>Corrective Action On 3/7/23, resident #1 urostomy bag was covered for dignity by staff nurse.</p> <p>Identification of other On 3/8/23, the MDS Nurse completed an 100% audit of all residents with a urostomy or requiring catheter to ensure privacy bag/cover was in place.</p> <p>Measures to prevent reoccurrence On 3/7/23, the DON initiated a dignity in-service for all nursing staff to include, catheter covers and/or privacy bags, the in-service will be completed by 3/21/23. All staff that has not received education will be educated prior to the start of their next shift</p> <p>Ongoing Monitoring Quality audits will be completed by DON or designee of three residents with urostomies or catheters for privacy bag/cover utilizing the privacy cover audit tool weekly x 4 weeks and monthly x 2 months. Results will be reviewed with the</p>		

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F 550	<p>Continued From page 2</p> <p>Resident #1 was observed lying in bed in his room. Resident #1's urinary catheter bag was observed uncovered and urine was visible from the hallway.</p> <p>During an interview on 3/7/23 at 10:03 AM Resident #1 stated it bothered him that his urinary catheter bag was not covered, and the urine could be seen by anyone on the hall.</p> <p>During an interview on 3/7/23 at 10:22 AM Nurse #1 stated Resident #1 did not have a privacy cover on his catheter bag and the urine was visible from the hallway. She stated urine was to be covered for the resident's dignity and she would go get a privacy cover to put on it. She stated she had not noticed the bag did not have a privacy cover until it was pointed out to her.</p> <p>During an interview on 3/7/23 at 10:26 AM the Director of Nursing stated Resident #1's urine was visible from the hallways and the catheter bag should have had a privacy cover for the resident's dignity. She concluded she was not sure why the catheter bag was missing a privacy cover.</p>	F 550	QAPI committee.		