

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

PRINTED: 07/25/2023  
FORM APPROVED  
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>345449</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>C</b> <b>06/14/2023</b>
NAME OF PROVIDER OR SUPPLIER  <b>UNIVERSAL HEALTH CARE/KING</b>			STREET ADDRESS, CITY, STATE, ZIP CODE <b>115 WHITE ROAD</b> <b>KING, NC 27021</b>	
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E 000	Initial Comments  An unannounced COVID-19 Focused Infection Control Survey was conducted from 6/13/2023 through 6/14/2023. The facility was found to be in compliance with 42 CFR §483.73 related to E-0024 (b)(6), Subpart-B-Requirements for Long Term Care Facilities. Event ID# CUSR11.	E 000		
F 000	INITIAL COMMENTS  An unannounced COVID-19 Focused Infection Control Survey and complaint investigation were conducted from 6/13/23 through 6/14/23. The facility was found to be in compliance with 42 CFR §483.80 infection control regulations and has implemented the CMS and Centers for Disease Control and Prevention (CDC) recommended practices to prepare for COVID-19. Event ID# CUSR11. The following intakes were investigated NC00200594, NC00202826, NC00202828, NC00203131. 1 of the 13 complaint allegations resulted in deficiency.	F 000		
F 623 SS=B	Notice Requirements Before Transfer/Discharge CFR(s): 483.15(c)(3)-(6)(8)  §483.15(c)(3) Notice before transfer. Before a facility transfers or discharges a resident, the facility must- (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. (ii) Record the reasons for the transfer or discharge in the resident's medical record in accordance with paragraph (c)(2) of this section;	F 623		7/3/23

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

TITLE

(X6) DATE

Electronically Signed

06/28/2023

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 623	Continued From page 1 and (iii) Include in the notice the items described in paragraph (c)(5) of this section.  §483.15(c)(4) Timing of the notice. (i) Except as specified in paragraphs (c)(4)(ii) and (c)(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. (ii) Notice must be made as soon as practicable before transfer or discharge when- (A) The safety of individuals in the facility would be endangered under paragraph (c)(1)(i)(C) of this section; (B) The health of individuals in the facility would be endangered, under paragraph (c)(1)(i)(D) of this section; (C) The resident's health improves sufficiently to allow a more immediate transfer or discharge, under paragraph (c)(1)(i)(B) of this section; (D) An immediate transfer or discharge is required by the resident's urgent medical needs, under paragraph (c)(1)(i)(A) of this section; or (E) A resident has not resided in the facility for 30 days.  §483.15(c)(5) Contents of the notice. The written notice specified in paragraph (c)(3) of this section must include the following: (i) The reason for transfer or discharge; (ii) The effective date of transfer or discharge; (iii) The location to which the resident is transferred or discharged; (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	F 623			

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F 623	<p>Continued From page 2</p> <p>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>§483.15(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>§483.15(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</p>	F 623			

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F 623	<p>Continued From page 3</p> <p>relocation of the residents, as required at § 483.70(I).</p> <p>This REQUIREMENT is not met as evidenced by:</p> <p>Based on staff interviews, interview with the Resident Representative and record reviews, the facility failed to provide the Resident Representative a written notification for the reason for transfer to the hospital for 2 of 2 residents (Resident #4 and Resident #1) reviewed for hospitalization.</p> <p>Findings included:</p> <p>1. Resident #4 was admitted to the facility on 1/31/23. She discharged to the hospital on 2/15/23 and was re-admitted to the facility on 2/20/23.</p> <p>The medical record revealed Resident #4's contact person was a family member. The medical record demonstrated the resident was transferred to the hospital on 2/15/23 due to a change in condition. Resident #4 returned to the facility on 2/20/23. No written notice of transfer was documented to have been provided to the Resident Representative.</p> <p>The quarterly Minimum Data Set (MDS) assessment dated 5/3/23 indicated Resident #4 had moderately impaired cognition.</p> <p>An attempt to interview Nurse #1, the nurse on duty when Resident #4 was transferred to the hospital, was unsuccessful.</p> <p>During an interview with the Social Worker (SW) on 6/13/23 at 2:31 PM, she explained when a resident transferred to the hospital, a copy of the</p>	F 623	<p>F-623</p> <p>30-day Discharge Notices and the Appeal Forms were not mailed to family members, resident's representatives, or guardians.</p> <p>Resident #4 was discharged on 2/15/2023 and returned to the facility on 2/20/2023. Resident #1 was discharged on 4/3/3023 and did not return to the facility.</p> <p>On 6/28/2023 the Social Worker completed a 100% audit of residents' discharges to the hospital in the last 14 days to ensure the 30-day Discharge Notice of Discharge and Appeal Form has been provided to residents and to a family member, resident's representative, or guardian of each resident. A copy is then placed in the resident's financial file.</p> <p>The administrative staff and licensed nurses were educated regarding the need to inform families as well as, residents of the resident's right to receive the Written 30-day Discharge Notice of Discharge and the Appeal Form. This education was provided by the administrator and staff development RN and completed on June 30, 2023. Staff will not be permitted to work until education is completed. Education will be added to the new hire orientation package.</p>		

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F 623	<p>Continued From page 4</p> <p>transfer/discharge notice was sent with the resident. She stated the business office then sent a copy of the notice to the resident's representative.</p> <p>The Business Office Manager was interviewed on 6/13/23 at 2:19 PM. She said when a resident transferred to the hospital, a copy of the transfer/discharge notice was sent with the resident. She thought a copy of the notice was also sent to the Resident Representative, but it was not anyone in the business office who typically sent the written notification.</p> <p>On 6/13/23 at 11:55 AM an interview was completed with the Director of Nursing (DON). She shared when a resident was transferred to the hospital, the facility sent the following paperwork with the resident: medication administration record, face sheet, a transfer summary that included clinical information, bed hold policy and transfer/discharge notice. The DON added she didn't think written notification was provided to the Resident Representative, but that the business office called and verbally notified the Resident Representative.</p> <p>Resident #4's Representative was interviewed by telephone on 6/14/23 at 10:27 AM. She recalled the facility notified her by telephone when Resident #4 was sent to the hospital. She said after the resident went to the hospital, the facility had not sent a written notice of transfer/discharge to her.</p> <p>On 6/14/23 at 11:15 AM an interview was completed with the Administrator. He shared nursing staff sent a transfer/discharge notice with the resident when the resident was transferred to</p>	F 623	<p>A copy of the Written 30-Day Notice of Discharge after being completed, and sent with the resident to the hospital, will given to the facility administrator who will ensure the letter is mailed to the family, resident's representative, or guardian. A copy of the Written 30-Day Discharge Notice, Appeal Form, Bed Hold Policy, Bed Hold Notice, and envelope with the post marked will be kept in a binder in the business office.</p> <p>The administrator will monitor the process 5 times per week Monday through Friday. Monitoring will be done 5 times per week, for four weeks, then three times per week for four weeks, then 1 time per week for 4 weeks.</p> <p>The administrator will provide a summary of findings to the facilities QAPI Committee monthly for 3 months until substantial compliance is obtained and sustained.</p>		

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F 623	<p>Continued From page 5</p> <p>the hospital. The facility had not sent a written notification for transfer/discharge to a Resident Representative when a resident went to the hospital and was expected to return to the facility. He was unable to demonstrate that a notice was sent to Resident #4's Representative and said he didn't think nursing staff made a copy of the notice when they sent a resident to the hospital.</p> <p>2. Resident #1 was admitted to the facility on 3/24/23. He discharged to the hospital on 4/3/23 and had not returned to the facility.</p> <p>The admission MDS assessment dated 3/31/23 indicated Resident #1 had severely impaired cognition.</p> <p>The medical record revealed Resident #1's family member was listed as a contact person. The medical record demonstrated the resident was transferred to the hospital on 4/3/23 due to a change in condition. No written notice of transfer was documented to have been provided to the Resident Representative.</p> <p>On 6/13/23 at 11:00 AM, an interview was conducted with Nurse #2. She stated she was the nurse on duty when Resident #1 was transferred to the hospital. She revealed Resident #1 demonstrated a change of condition and the nurse practitioner gave an order for him to be sent to the hospital. Nurse #2 said when she sent a resident to the hospital, she typically sent a copy of the medication administration record, face sheet, advance directives information, transfer/discharge notice and bed hold policy. She recalled Resident #1 had a family member whom she spoke to regarding his care. She was unable to recall if she contacted</p>	F 623			

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F 623	<p>Continued From page 6</p> <p>Resident #1's family member when he transferred to the hospital but added she normally would call a representative when a resident was sent to the hospital.</p> <p>During an interview with the Social Worker (SW) on 6/13/23 at 2:31 PM, she explained when a resident transferred to the hospital, a copy of the transfer/discharge notice was sent with the resident. She stated the business office then sent a copy of the notice to the resident's representative.</p> <p>The Business Office Manager was interviewed on 6/13/23 at 2:19 PM. She said when a resident transferred to the hospital, a copy of the transfer/discharge notice was sent with the resident. She thought a copy of the notice was also sent to the Resident Representative, but it was not anyone in the business office who typically sent the written notification.</p> <p>On 6/13/23 at 11:55 AM an interview was completed with the Director of Nursing (DON). She shared when a resident was transferred to the hospital, the facility sent the following paperwork with the resident: medication administration record, face sheet, a transfer summary that included clinical information, bed hold policy and transfer/discharge notice. The DON added she didn't think a written notification was provided to the Resident Representative, but that the business office called and verbally notified the Resident Representative.</p> <p>Attempts to interview Resident #1's Representative by telephone were unsuccessful.</p> <p>On 6/13/23 at 2:41 PM and 6/14/23 at 11:15 AM</p>	F 623			

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F 623	Continued From page 7 interviews were completed with the Administrator. He shared nursing staff sent a transfer/discharge notice with the resident when the resident was transferred to the hospital. He added, if there was a "responsible party," the facility made a copy of the notice and sent it to the family member. He recalled Resident #1's family member was called after he transferred to the hospital and informed of the discharge notice but wasn't sure the family member was provided with a written notification of the transfer/discharge.	F 623			