

STATEMENT OF ISOLATED DEFICIENCIES WHICH CAUSE NO HARM WITH ONLY A POTENTIAL FOR MINIMAL HARM FOR SNFs AND NFs	PROVIDER #  <b>345362</b>	MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	DATE SURVEY COMPLETE:  <b>9/11/2014</b>
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NAME OF PROVIDER OR SUPPLIER  <b>BRIAN CENTER HEALTH &amp; RETIREMENT/CABAR</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>250 BISHOP LANE CONCORD, NC</b>
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<b>F 285</b>	<p>483.20(m), 483.20(e) PASRR REQUIREMENTS FOR MI &amp; MR</p> <p>A facility must coordinate assessments with the pre-admission screening and resident review program under Medicaid in part 483, subpart C to the maximum extent practicable to avoid duplicative testing and effort.</p> <p>A nursing facility must not admit, on or after January 1, 1989, any new residents with:</p> <ul style="list-style-type: none"> <li>(i) Mental illness as defined in paragraph (m)(2)(i) of this section, unless the State mental health authority has determined, based on an independent physical and mental evaluation performed by a person or entity other than the State mental health authority, prior to admission;             <ul style="list-style-type: none"> <li>(A) That, because of the physical and mental condition of the individual, the individual requires the level of services provided by a nursing facility; and</li> <li>(B) If the individual requires such level of services, whether the individual requires specialized services for mental retardation.</li> </ul> </li> <li>(ii) Mental retardation, as defined in paragraph (m)(2)(ii) of this section, unless the State mental retardation or developmental disability authority has determined prior to admission--             <ul style="list-style-type: none"> <li>(A) That, because of the physical and mental condition of the individual, the individual requires the level of services provided by a nursing facility; and</li> <li>(B) If the individual requires such level of services, whether the individual requires specialized services for mental retardation.</li> </ul> </li> </ul> <p>For purposes of this section:</p> <ul style="list-style-type: none"> <li>(i) An individual is considered to have "mental illness" if the individual has a serious mental illness defined at §483.102(b)(1).</li> <li>(ii) An individual is considered to be "mentally retarded" if the individual is mentally retarded as defined in §483.102(b)(3) or is a person with a related condition as described in 42 CFR 1009.</li> </ul> <p>This REQUIREMENT is not met as evidenced by: Based on record review and staff interviews, the facility failed to renew the expired Preadmission Screening Resident Review (PASRR) for 1 of 1 (Resident #178) sampled resident.</p> <p>The findings included:</p> <p>Resident #178 was admitted to the facility on 8/4/14 with multiple diagnoses including bipolar disorder, schizophrenia, a fracture of the lumbar vertebrae, bilateral calcaneous fractures and depression.</p> <p>A review of the Preadmission Screening Resident Review (PASRR) Level II Determination Notification dated 8/1/14 was conducted. The PASRR Number was noted to end in the letter E. The PASRR Expiration Date was 8/31/14. The notification stated " If the resident is expected to extend beyond the end date, further approval and screening must be obtained through N.C. Medicaid Uniform Screening Program. The admitting facility is responsible for initiating further screening through a Level II evaluation process, if appropriate, within five</p>
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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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<b>F 285</b>	<p>Continued From Page 1</p> <p>(5) calendar days of the PASSR expiration date. "</p> <p>An interview was conducted with Administrative Staff #2 on 9/10/14 at 11:06 AM. She stated the social worker did not submit a renewal application for PASSR Level II for resident #178. She also stated the Social Worker was not returning the her phone calls and the facility was unable to speak with the him regarding this issue.</p> <p>An interview was conducted with Administrative Staff #3 on 9/10/14 5:49 PM. She stated the social worker was expected to submit a PASSR Level II reapplication at least 5 days prior to the expiration date listed on the notification.</p>		