

STATEMENT OF ISOLATED DEFICIENCIES WHICH CAUSE NO HARM WITH ONLY A POTENTIAL FOR MINIMAL HARM FOR SNFs AND NFs	PROVIDER #  <b>345254</b>	MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	DATE SURVEY COMPLETE:  <b>11/20/2014</b>
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NAME OF PROVIDER OR SUPPLIER  <b>MONROE REHABILITATION CENTER</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>1212 EAST SUNSET DRIVE MONROE, NC</b>
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ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES
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<b>F 280</b>	<p>483.20(d)(3), 483.10(k)(2) RIGHT TO PARTICIPATE PLANNING CARE-REVISE CP</p> <p>The resident has the right, unless adjudged incompetent or otherwise found to be incapacitated under the laws of the State, to participate in planning care and treatment or changes in care and treatment.</p> <p>A comprehensive care plan must be developed within 7 days after the completion of the comprehensive assessment; prepared by an interdisciplinary team, that includes the attending physician, a registered nurse with responsibility for the resident, and other appropriate staff in disciplines as determined by the resident's needs, and, to the extent practicable, the participation of the resident, the resident's family or the resident's legal representative; and periodically reviewed and revised by a team of qualified persons after each assessment.</p> <p>This REQUIREMENT is not met as evidenced by: Based on observation, resident interview, record review and staff interview, the facility failed to invite a resident to their care planning meeting for 1 of 1 residents. (Resident #8)</p> <p>Findings include:</p> <p>Resident #8 was admitted to the facility originally on 6/16/06 and re-admitted on 7/22/14. Diagnosis included: Cerebrovascular disease, Diabetes type II, Depressive Disorder, Hypertension, Peripheeral Vascular disease and pre-senile dementia with depressive features.</p> <p>A review of the quarterly Minimum Data Set dated 10/8/14 revealed the resident had a brief mental status score of 15; which indicates the resident was able to make her own decisions.</p> <p>On 11/17/14 at 3:52PM an interview with Resident #8 revealed that she had never been invited to attend a care plan meeting.</p> <p>A review of resident #8's medical record revealed there was no documentation available indicating the resident was invited to care plan meetings. A further review of the medical record for resident #8 revealed there was no documentation available documenting the resident had attended a care plan meeting.</p> <p>On 11/19/14 at 2:46pm an interview with MDS (Minimum Data Set) Nurse #1 and MDS Nurse #2 revealed the process for inviting a resident's legal representative to the care plan conference was that a letter was sent. When asked how residents were invited Nurse #2 stated a letter was hand delivered to the resident. Nurse #1 stated no documentation was completed in a medical record indicating if the resident or a responsible party were invited to the care plan conferences. Nurse #1 and Nurse #2 stated the decision to invite a resident or the legal representative was decided based on whether the face sheet in a resident's medical record indicated they</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 280</b>	<p>Continued From Page 1</p> <p>had a responsible party then the responsible party identified on the face sheet would receive a letter to invite them to the care plan conference. If the face sheet in the medical record indicated the resident was their own representative then the resident was invited to the care plan conference. When asked if Resident #8 had been invited to a care plan conference the response was that neither Nurse #1 or Nurse #2 could remember ever inviting Resident #8. Nurse #1 remembers inviting the named person on resident #8's face sheet. Further discussion revealed that the face sheet for residents was completed by the person who completed the admission process with a resident or family member.</p> <p>An interview with the admission staff on 11/19/14 at 3:13PM revealed that she imputed the name of the contact person on the residents face sheets. If that person is the responsible person or power of attorney for that resident "I identify that on the face sheet".</p> <p>On 11/19/14 at 3:24pm an interview with the business office staff person revealed that the corporation requires she mark a family member or other contact person as A/R guarantor; which means this person would be called if there were any problems that the facility may have regarding resident. Further discussion revealed that she discusses all financial issues with Resident #8 directly, as Resident #8 was cognitively capable of making all her own decisions. If I call the person indicated as the A/R guarantor "I always asked Resident #8's permission to do this".</p> <p>On 11/19/2014 at 3:39PM MDS Nurse #2 stated "I reviewed resident #8's face sheet and indicated the contact person listed as A/R guarantor was the responsible party. The MDS Nurse #2 said "I thought that A/R guarantor meant this was the responsible party.</p> <p>On 11/20/14 at 10:38 AM an interview with Resident #8 revealed that she would like to attend a care planing meeting. The resident stated "I have never been to one".</p>		