

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

PRINTED: 05/02/2022
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 345489	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____		(X3) DATE SURVEY COMPLETED C 04/06/2022
NAME OF PROVIDER OR SUPPLIER SATURN NURSING AND REHABILITATION CENTER			STREET ADDRESS, CITY, STATE, ZIP CODE 1930 WEST SUGAR CREEK ROAD CHARLOTTE, NC 28262		
(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 An onsite complaint investigation survey was conducted 04/04/22 through 04/06/22. 22 of 22 allegations were not substantiated. Event ID: 1PZK11.	F 000			
F 732 SS=B	Posted Nurse Staffing Information CFR(s): 483.35(g)(1)-(4) §483.35(g) Nurse Staffing Information. §483.35(g)(1) Data requirements. The facility must post the following information on a daily basis: (i) Facility name. (ii) The current date. (iii) The total number and the actual hours worked by the following categories of licensed and unlicensed nursing staff directly responsible for resident care per shift: (A) Registered nurses. (B) Licensed practical nurses or licensed vocational nurses (as defined under State law). (C) Certified nurse aides. (iv) Resident census. §483.35(g)(2) Posting requirements. (i) The facility must post the nurse staffing data specified in paragraph (g)(1) of this section on a daily basis at the beginning of each shift. (ii) Data must be posted as follows: (A) Clear and readable format. (B) In a prominent place readily accessible to residents and visitors. §483.35(g)(3) Public access to posted nurse	F 732		5/13/22	

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

TITLE

(X6) DATE

Electronically Signed

04/27/2022

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 732	<p>Continued From page 1</p> <p>staffing data. The facility must, upon oral or written request, make nurse staffing data available to the public for review at a cost not to exceed the community standard.</p> <p>§483.35(g)(4) Facility data retention requirements. The facility must maintain the posted daily nurse staffing data for a minimum of 18 months, or as required by State law, whichever is greater.</p> <p>This REQUIREMENT is not met as evidenced by:</p> <p>Based on staff interviews and record review, the facility failed to post complete and accurate nurse staffing data for 15 of 42 days of nurse staffing data reviewed.</p> <p>The findings included:</p> <p>A review of the posted nurse staffing data from 2/18/22 - 3/31/22 revealed the following:</p> <p>1a. A review of Daily Staffing Hours data sheets from 2/18/22 - 3/31/22 revealed resident census data was not recorded per shift on 10 of 42 days reviewed. The dates were 2/18/22, 2/20/22, 3/12/22, 3/14/22, 3/15/22, 3/21/22, 3/24/22, 3/25/22, 3/27/22, and 3/30/22.</p> <p>1b. A review of Daily Staffing Hours data sheets for the 7A - 3P shift, revealed licensed and unlicensed nursing staff was not recorded accurately for the following days:</p> <ul style="list-style-type: none"> ·2/20/22, Daily Staffing Hours data sheets recorded 8 nurse aides (NA) provided 64 hours of nursing care; staff assignment data recorded 9 NA ·3/26/22, Daily Staffing Hours data sheets recorded 6 Licensed Practical Nurses (LPN) 	F 732	<p>The statements included are not an admission and do not constitute agreement with the alleged deficiencies herein. The plan of correction is completed in the compliance of state and federal regulations as outlined. To remain in compliance with all federal and state regulations the center has taken or will take the actions set forth in the following plan of correction. The following plan of correction constitutes the center's allegation of compliance. All alleged deficiencies cited have been.</p> <p>How corrective action will be accomplished for those residents found to have been affected by the deficient practice:</p> <p>There was no Resident identified to be affected by this alleged deficient practice. The Director of Nursing Services corrected the inaccurate staff postings to ensure the accurate daily census and staffing numbers on 4/6/2022. The facility's staff posting is being posted accurately daily as of 4/7/2022.</p> <p>How the facility will identify other residents having the potential to be affected by the</p>		

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F 732	Continued From page 2 provided 45 hours of nursing care; staff assignment data recorded 5 LPN ·3/29/22, Daily Staffing Hours data sheets recorded 2 LPN provided 16 hours of nursing care; staff assignment data recorded 3 LPN ·3/31/22, Daily Staffing Hours data sheets recorded 2 Registered Nurses (RN) provided 16 hours of nursing care and 12 NA provided 90 hours of nursing care; staff assignment data recorded 3 RN and 11 NA 1c. A review of Daily Staffing Hours data sheets for the 3P - 11P shift, revealed licensed and unlicensed nursing staff was not recorded accurately for the following days: ·3/14/22, Daily Staffing Hours data sheets recorded 4 LPN provided 32 hours of nursing care; staff assignment data recorded 5 LPN ·3/21/22, Daily Staffing Hours data sheets recorded 4 LPN provided 32 hours of nursing care and 9.5 NA provided 76 hours of nursing care; staff assignment data recorded 4.5 LPN and 10.5 NA ·3/25/22, Daily Staffing Hours data sheets recorded 5 LPN provided 80 hours of nursing care and 8 NA provided 60 hours of nursing care; staff assignment data recorded 6 LPN and 7.5 NA ·3/27/22, Daily Staffing Hours data sheets recorded 6 NA provided 40 hours of nursing care and 14 NA provided 80 hours of nursing care; staff assignment data recorded 5 LPN and 12.5 NA ·3/28/22, Daily Staffing Hours data sheets recorded 4.5 LPN provided 36 hours of nursing care; staff assignment data recorded 6 LPN ·3/29/22, Daily Staffing Hours data sheets recorded 0 Registered Nurses (RN) and 5 LPN provided 40 hours of nursing care; staff	F 732	same deficient practice: Any resident could have been affected by this alleged deficient practice. The Facility Administrator and DON completed an audit of current facility staffing sheets for the last 30 days to ensure accuracy of the census and staffing numbers, this was completed on 4/6/2022. Any facility staffing sheets that were noted to have inaccurate census or staffing numbers were corrected by the DON and/or Facility Administrator on 4/6/2022. Address what measures will be put into place or systemic changes made to ensure that the deficient practice will not recur: The facility scheduler will maintain the Daily Staffing Sheets daily to include daily census and accurate staffing numbers. The Daily Staffing sheets will be updated throughout the workday of any census or staffing numbers as needed by the facility scheduler and/or receptionist. The facility Administrator and/or Manager on Duty will review these staffing sheets daily to ensure accuracy of census and staffing numbers. These audits will be completed daily for 5 days for 2 weeks, then weekly for 3 months, to ensure continued compliance. Facility Administrator completed training with the facility scheduler, receptionist and manager on duty on 04/7/2022, on the content of F732, including but not limited to, timely posting, documenting accurate census/staffing numbers (licensed & unlicensed staff) and updating of the staffing sheet as needed when changes		

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F 732	<p>Continued From page 3</p> <p>assignment data recorded .5 RN and 5.5 LPN ·3/30/22, Daily Staffing Hours data sheets recorded 1 RN provided 8 hours of nursing care, 4.5 LPN provided 36 hours of nursing care, and 9 NA provided 72 hours of nursing care; staff assignment data recorded .5 RN, 7 LPN and 8.5 NA ·3/31/22, Daily Staffing Hours data sheets recorded 0 RN, and 5 LPN provided 40 hours of nursing care; staff assignment data recorded .5 RN and 6 LPN</p> <p>1d. A review of Daily Staffing Hours data sheets for the 11P - 7A shift, revealed licensed and unlicensed nursing staff was not recorded accurately for the following days: ·2/18/22, Daily Staffing Hours data sheets recorded 6.5 NA provided 52 hours of nursing care; staff assignment data recorded 7 NA ·2/20/22, Daily Staffing Hours data sheets recorded 4 NA provided 32 hours of nursing care; staff assignment data recorded 5 NA ·3/24/22, Daily Staffing Hours data sheets recorded 3 LPN provided 24 hours of nursing care and 0 Medication Aides (MA); staff assignment data recorded 2 LPN and 1 MA ·3/25/22, Daily Staffing Hours data sheets recorded 1 LPN provided 8 hours of nursing care and 7 NA provided 52.5 hours of nursing care; staff assignment data recorded 3 LPN and 6 NA ·3/27/22, Daily Staffing Hours data sheets recorded 2 LPN provided 16 hours of nursing care; staff assignment data recorded 3 LPN ·3/28/22, Daily Staffing Hours data sheets recorded 3 LPN provided 24 hours of nursing care and 5 NA provided 37.5 hours of nursing care; staff assignment data recorded 2 LPN and 7 NA</p>	F 732	<p>occur throughout the workday</p> <p>Indicate how the facility plans to monitor its performance to make sure that solutions are sustained: The Scheduler will complete a summary of audit results and present monthly at the Quarterly QAPI committee to ensure continued compliance. Completion Date: May 13th 2022</p>		

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F 732	Continued From page 4 The Director of Nursing (DON) stated in interview on 4/6/22 at 10:15 AM that she was trained to only record the census once on the Daily Staffing Hours data sheets and to update only if the census changed. The DON stated that since the facility did not currently have a scheduler, she was responsible for updating the staffing data records and at times she did not get a chance to update the records to reflect the actual staffing assignment. An interview with the administrator on 4/6/22 at 12:00 PM revealed he expected the Daily Staffing Hours data sheets to be accurately recorded and when posted the data should reflect the current staffing patterns in the facility.	F 732		