

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>345339</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>C</b> <b>10/19/2022</b>
NAME OF PROVIDER OR SUPPLIER  <b>BRIAN CENTER HEALTH &amp; REHABILITATION/WINDSOR</b>			STREET ADDRESS, CITY, STATE, ZIP CODE <b>1306 SOUTH KING STREET</b> <b>WINDSOR, NC 27983</b>	
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F 000	INITIAL COMMENTS  A complaint investigation survey was conducted from 10/18/22 through 10/19/22. Event ID# 7N1S11. The following intakes were investigated NC00193877 and NC00191990.	F 000		
F 745 SS=D	One of the eight complaint allegations was substantiated resulting in a deficiency. Provision of Medically Related Social Service CFR(s): 483.40(d)  §483.40(d) The facility must provide medically-related social services to attain or maintain the highest practicable physical, mental and psychosocial well-being of each resident. This REQUIREMENT is not met as evidenced by: Based on observation, record review, staff and physician interviews, the facility failed to schedule a follow up appointment with the oncologist for 1 of 3 residents (Resident #1) reviewed for professional standards.  The findings included:  Resident #1 was admitted to the facility on 5/3/2018 with diagnoses that included chronic obstructive pulmonary disease, and cancer that was diagnosed in 09/2022.  A review of a physician order dated 10/27/2021, by the oncologist, included (1) a repeat of a chest computerized tomography (CT) scan in three months, and (2) a recheck with the oncologist in three months to go over (the results) of the CT scan.  A review of Resident #1's medical record	F 745	Resident Identification  Resident #1 had follow-up appointments in relation to her Cancer diagnosis on the following dates: • 10/26/22 – CT Scan • 10/27/22 – Oncologist appointment  Other Residents Identified Residents with follow-up appointments have the potential to be affected by this alleged deficient practice.  Follow up appointments over the last ninety (90) days have been audited by the Social Service Manager utilizing the Facility Appointment/Consult Audit Tool. The auditing results were then reviewed by the Vice President of Operations for North and South Carolina. Auditing was completed and a second review	11/15/22

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

TITLE

(X6) DATE

Electronically Signed

11/04/2022

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 745	<p>Continued From page 1</p> <p>revealed she received a CT scan 01/2022 but did not have a follow up oncologist appointment in 01/2022.</p> <p>Resident #1's annual Minimum Data Set (MDS) dated 6/15/2022 revealed her cognition to be intact. The resident required extensive staff assistance for activities of daily living.</p> <p>A review of the oncologist progress note dated 09/28/2022 revealed Resident #1 was seen by the Oncologist on 08/04/2021 and had an abnormality in the left upper lobe that was 2 centimeters (cm) in size. The abnormality was stable between 7/20/2021 and 10/20/2021. The scan conducted in 01/2022 revealed the abnormality had increased in size to 2.8 cm. The resident did not return for a follow up visit as ordered in 01/2022. The resident was not seen until after a hospital visit on 09/05/2022. A scan at the hospital on 09/07/2022 revealed the mass had increased from 2.8 to 7.7 cm. The resident had a biopsy of an axillary node on 09/07/2022 and the result was metastatic small cell lung cancer. The most recent note revealed the resident was not interested in systemic chemotherapy.</p> <p>On 10/18/2022 at 12:44 PM, an interview was conducted with Resident #1. The resident was sitting up with no shortness of breath noted. Resident #1 stated she had no complaints of pain or discomfort to her chest and was feeling okay. The resident stated she had an appointment with the oncologist next week.</p> <p>On 10/18/2022 at 1:25 PM, an interview was conducted with the Unit Manager (UM). The UM stated the Social Worker (SW) was responsible</p>	F 745	<p>performed in order to identify whether any additional missed appointments occurred. No discrepancies were identified.</p> <p><b>Systemic Changes</b> The process for scheduling follow-up appointments has been reviewed and was amended on 11/1/22. The process includes validation of scheduling and completion by Social Services and the Director of Nursing (DON) or Unit Coordinator, initially, when the order for an outside appointment is received and again once the appointment has been completed with the detail as follows:</p> <p>When a resident is admitted, discharge paperwork will be reviewed by the Unit Manager or designee. Any preset appointments will be copied and given to the Social Worker and written in appointment book at nurses' station. Each appointment will include resident name, place and time of the appointment.</p> <p>A second check of discharge paperwork will be performed by DON or designated IDT member. The DON or designated IDT member will validate that preset appointments are documented in the appointment book and that the Social Worker received the appointment information.</p> <p>The following steps will then be completed:</p> <ul style="list-style-type: none"> <li>The Social Worker will schedule transportation</li> </ul>		

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F 745	<p>Continued From page 2</p> <p>for setting up appointments. The UM stated he had looked at her records and saw that a CT scan had been done in 01/2022, and he thought that the next appointment was to the oncologist in 10/2022. The UM stated there had been three SWs since 2021 and he was not sure who was supposed to have made the appointment with the oncologist.</p> <p>On 10/18/2022 at 2:02 PM, an interview was conducted with the SW who stated she was responsible for making resident appointments. The SW stated she had made an appointment for Resident #1 and her family to meet with the Oncologist during the week of 10/24/2022. The SW stated she had started at the facility in 07/2022 and did not know what had happened with Resident #1's appointments prior to that time.</p> <p>On 10/18/2022 at 2:37 PM, an interview was conducted with the Director of Nursing (DON). The DON stated Resident #1 had a CT scan in 01/2022 and thought the resident was to follow up with the oncologist in 10/2022. The DON stated Resident #1's primary physician saw her in 01/2022 and thought that was for the follow up.</p> <p>On 10/18/2022 at 3:47 PM, an interview was conducted with the Administrator who stated he expected staff to have scheduled an appointment as ordered by the physician.</p> <p>On 10/18/2022 at 3:21 PM, an interview was conducted with Resident #1's primary physician. The physician stated he knew of Resident #1's lung diagnosis, but he did not know the resident had not gone back to see the oncologist. The physician stated Resident #1 was asymptomatic</p>	F 745	<ul style="list-style-type: none"> <li>· The Social Worker notifies the family and/or responsible party of the appointment</li> <li>· The Social Worker will then highlight the scheduled appointment in the appointment book to alert nursing that transportation has been made.</li> <li>· The Social Worker will also place a typed list of the appointments at the nurses' station the day before the appointments.</li> <li>· All appointments will be reviewed with the IDT Team in morning meeting daily Monday thru Friday</li> </ul> <p>If appointment/consults are ordered by the MD:</p> <ul style="list-style-type: none"> <li>· The nurse will transcribe the order into the resident's medical record</li> <li>· The nurse will inform the Social Worker of the appointment</li> <li>· The Social Worker will schedule the appointment and/or set up transportation</li> <li>· The Social Worker will document the appointment in the appointment book.</li> <li>· The Social Worker will also place a typed list of the appointments at the nurses' station the day before the appointments.</li> <li>· All appointments will be reviewed with</li> </ul>		

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F 745	<p>Continued From page 3</p> <p>for her lung cancer and had indicated she was not interested in treatment which he noted in his progress notes through 2022. The physician stated he did not think Resident #1 was a candidate, or could survive surgery or chemotherapy, even at a year ago, because of her many serious co-morbidities.</p> <p>On 10/19/2022 at 3:29 PM, an interview was conducted with the oncologist. The oncologist stated Resident #1's lung mass was slow growing for about six months after it was found. He stated it would be impossible to know when the mass started growing unless CT scans were done</p>	F 745	<p>the IDT Team in morning meeting daily Monday thru Friday</p> <p>When the resident returns from an appointment:</p> <p>The Director of Nursing or designated licensed nurse receives paperwork/ MD notes from the appointment and reviews for any follow up appointments.</p> <p>The following steps will then be completed:</p> <ul style="list-style-type: none"> <li>· The Social Worker will schedule transportation</li> <li>· The Social Worker notifies the family and/or responsible party of the appointment</li> <li>· The Social Worker will then highlight the scheduled appointment in the appointment book to alert nursing that transportation has been made.</li> <li>· The Social Worker will also place a typed list of the appointments at the nurses' station the day before the appointments.</li> <li>· All appointments will be reviewed with the Interdisciplinary Team (IDT) team in morning meeting daily Monday through Friday</li> </ul> <p>Facility licensed nurses, the Interdisciplinary team (IDT) which includes the Social Service Manager, the</p>	

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OMB NO. 0938-0391

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F 745	Continued From page 4	F 745	<p>Rehab Program Manager, the Activity Manager, the Administrator, the Director of Nursing, the Resident Care Management Director (MDS) and the Business Office Manager will be educated to the 11/1/22 amended resident appointment process. The facility attending physicians and the facility's Medical Director will also be educated to the 11/1/22 amended resident appointment process. The education on the 11/1/22 amended resident appointment process will be provided by the Director of Nursing.</p> <p>Any facility licensed nurse, member of the IDT Team, attending physician or facility Medical Director not completing the education on the 11/1/22 amended resident appointment process by 11/15/22 will be unable to work in the facility until the education is completed.</p> <p>Monitoring</p> <p>Auditing will be completed by the Administrator during the Daily Morning Meeting. Resident appointments will be reviewed from the date the order for an appointment is received through the date of completion of the appointment using the Appointment/Consult Audit Tool.</p> <p>Auditing will be performed daily Monday thru Friday and will be daily times four (4) weeks, weekly times four (4) weeks and then monthly times one (1).</p> <p>Issues identified will be rectified</p>		

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