

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

PRINTED: 03/02/2021
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 495388	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____		(X3) DATE SURVEY COMPLETED C 02/11/2021
NAME OF PROVIDER OR SUPPLIER GAINESVILLE HEALTH AND REHAB CENTER			STREET ADDRESS, CITY, STATE, ZIP CODE 7501 HERITAGE VILLAGE PLAZA GAINESVILLE, VA 20155		
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E 000	Initial Comments	E 000			
F 000	An unannounced abbreviated Emergency Preparedness COVID-19 Focused Survey was conducted onsite and remotely 02/09/2021 through 02/11/2021. The facility was in substantial compliance with 42 CFR Part 483.73, Requirement for Long-Term Care Facilities. INITIAL COMMENTS	F 000			
F 602 SS=D	An unannounced abbreviated COVID-19 Focused Survey was conducted onsite and remotely from 02/09/2021 through 02/11/2021. Three complaints [VA00049609, VA00048969, and VA000050265] were investigated during the survey. Corrections are required for compliance with 42 CFR Part 483 Federal Long Term Care requirements for the level II deficiency at F602. The deficient Practice was deemed Past Non Compliance with an AOC date of 5/21/20. The census in this 120 certified bed facility was 81. Of the 81 current residents, two residents were positive for the COVID-19 virus. The survey sample consisted of one closed record review and 12 current resident reviews. Free from Misappropriation/Exploitation CFR(s): 483.12 §483.12 The resident has the right to be free from abuse, neglect, misappropriation of resident property, and exploitation as defined in this subpart. This includes but is not limited to freedom from corporal punishment, involuntary seclusion and any physical or chemical restraint not required to treat the resident's medical symptoms. This REQUIREMENT is not met as evidenced by:	F 602			
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE			TITLE		(X6) DATE

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 602	<p>Continued From page 1</p> <p>Based on staff interview, facility document review, clinical record review, and in the course of a complaint investigation, it was determined the facility staff failed to ensure one of 13 residents in the survey sample were free from misappropriation of personal property, Resident #1.</p> <p>The findings include:</p> <p>Resident #1 was admitted to the facility on 4/18/2012 with a readmission on 5/11/19, with diagnoses that included but were not limited to: high blood pressure, Alzheimer's disease (a progressive loss of mental ability and function, often accompanied by personality changes and emotional instability.) (1), depression, gastroesophageal reflux disease (backflow of the contents of the stomach into the esophagus, usually caused by malfunction of the sphincter muscle between the two organs) (2) and COVID (A novel coronavirus is a new coronavirus that has not been previously identified. The virus causing coronavirus disease 2019 {COVID-19}, is not the same as the coronaviruses that commonly circulate among humans and cause mild illness, like the common cold. (3)</p> <p>The most recent MDS (minimum data set) assessment, a Medicare five day assessment, with an assessment reference date of 4/28/2020, coded Resident #1 as having both short and long-term memory difficulties and being moderately impaired to make daily cognitive decisions. The resident was coded as requiring extensive assistance of one or more staff members for most of her activities of daily living, except eating in which she required limited assistance of one staff member.</p>	F 602	Past noncompliance: no plan of correction required.		

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F 602	<p>Continued From page 2</p> <p>Review of the clinical record revealed a nurse's note dated, 5/3/2020 at 7:15 p.m. that documented, "Expired 5/3/20. MD (medical doctor) aware. RP (responsible party) notified. 1 personal effect (jewelry - 1 ring) placed in cabinet drawer. RP aware (son)."</p> <p>Further review of the clinical record, failed to evidence documentation of the resident's inventory list (a document stating all of the resident's belongings that were brought to the nursing home).</p> <p>The "Grievance Logs" were reviewed for April 2020 and May 2020. The May 2020 logs documented a concern on 5/6 regarding Resident #1's "missing items." The follow up was assigned to the administrator. The administrator at that time is no longer employed by the facility and was unavailable for interview. The "Resolved Date" documented, "Reimbursed."</p> <p>A "Facility Reported Incident" dated 5/6/2020, documented in part, "Describe incident, including location and action taken: This resident passed away on 5/3/2020. The family came to pick up her belongings on 5/4/2020. On 5/5/2020, they informed us that items are missing. On 5/5/20, we informed the family that we discarded some of her belongings due to them saying they did not want them. On 5/6/2020 a family member accused the staff of stealing the missing items."</p> <p>The "Final 5 Day Investigation Letter" dated 5/13/2020, documented in part, "On May 4th, the facility was informed by (Resident #1)'s Son-in-law informed the facility that they would like to pick up her clothes and pictures. The</p>	F 602			

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F 602	<p>Continued From page 3</p> <p>family then stated that the rest of her things and furniture should be donated or discarded. The facility staff also located a watch, a gold ring and three dollars, which were packed with (Resident #1)'s other belonging for the family to pick up. On May 5th, everything in the room except the items the family requested were discarded. On May 6th, the family contacted the Administrator and stated that they are missing her CD's, DVDs, boom box and jewelry. The Administrator apologized, and then informed the family that there was a miscommunication and those items were discard, other that the gold ring, watch and cash that was given back to the family along with her clothes and pictures. The family members then alleged that the staff stole her items. The staff went through the facility's dumpster and was able to locate the boom box, but none of the other items. The boom box was returned to the family. An interview was conducted with the facility's housekeeping staff, and the nursing staff that cared for (Resident #1) who denied that they had taken (Resident #1)'s CDs, DVDs or jewelry. Based on the interviews I am unable to substantiate the family's allegation of misappropriation. However, after this event we have changed our procedure, and no longer discard resident items when they discharge. Our procedure is now to return all times to the resident family upon death or discharge. The staff have been educated and we will continue to monitor to ensure we are following this new procedure."</p> <p>An interview was conducted with OSM (other staff member) #1, the social services director, on 2/9/2021 at 3:37 p.m. When asked if she remembered Resident #1, OSM #1 stated that she did. When asked what she could recall about</p>	F 602			

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F 602	<p>Continued From page 4</p> <p>Resident #1's belongings after she passed, OSM #1 stated that she believed she passed off hours. I got in and had a message from the son-in-law. She stated that this was the beginning of COVID so she didn't know how things would be handled. OSM #1 stated the son-in-law told her what items they wanted and what they wanted to donate. I informed (ASM - administrative staff member) #3, the former administrator, and OSM (other staff member) #2, the director of environmental services, as to what they (the family) wanted. Housekeeping started packing her belongings. I reiterated to the staff what the son-in-law told me. They wanted her clothing right away, as they had to travel to her burial destination. The clothing had already been sent to the laundry. The family came and picked up her belongings. After that, I got a call and the son-in-law was irate, that her personal belongings were not there. He mentioned Christmas decorations and a music box. I went to (ASM #3) and told him this. When asked if anything else occurred, OSM #1 stated that she recalled the police coming at some point. When asked if there were any valuables missing, OSM #1 stated she could not recall. When asked the process for documenting what a resident brings into a building, OSM #1 stated nursing does an inventory list. When asked if she was aware of any resident's personal belongings being thrown away, OSM #1 stated, "Not that I'm aware of."</p> <p>An interview was conducted with OSM #2, the environmental services director, on 2/9/2020 at 3:47 p.m. When asked what happens to the resident's belongings when someone dies, OSM #2 stated the social worker contacts the family. We box everything up and hold them for the family. When asked about Resident #1 and what</p>	F 602			

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F 602	<p>Continued From page 5</p> <p>happened with her belongings when she died, OSM #2 stated I was told her personal belongings were to be washed and placed in the admission office and all other things, pictures, were packed up and put in the admissions office. When asked if anyone found anything valuable, OSM #2 stated his staff found a ring and gave it to the ADON (assistant director of nursing). OSM #2 stated the rest of the things were placed in the dumpster. OSM #2 further stated that he spoke with (ASM #3) and informed him that any other jewelry, CD players were missing. Everything else was put in the compactor (trash). OSM #2 stated the resident's daughter was very upset that things went into the dumpster. OSM #2 stated he had given a statement to the police. OSM #2 stated two of his employees gave statements to (ASM #3).</p> <p>An interview was conducted with ASM #2, the director of nursing, on 2/9/2021 at 3:59 p.m. When asked about the process staff follows for resident's personal belongings brought to the nursing home, ASM #2 stated that upon admission an inventory sheet is completed and scanned into the medical record. When asked who completes the inventory sheet, ASM #2 stated, the CNAs (certified nursing assistants).</p> <p>An interview was conducted with RN (registered nurse) # 1, the assistant director of nursing, on 2/9/2021 at 4:10 p.m. When asked what happened to Resident #1's belongings after her death, RN #1 stated her belongings stayed in her room because I knew our area for storage was full. We were told not to touch. On Monday, after she died, we will find out what to do with them, usually pack them in boxes. RN #1 stated that ASM #3 called the family and they didn't want</p>	F 602			

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F 602	<p>Continued From page 6</p> <p>anything other than the clothes and pictures. I told housekeeping staff and (OSM #2) that the family only wanted clothes and pictures. OSM #2 asked me again and told him only the clothes and pictures. Housekeeping staff was cleaning the room and found a ring. It was put into a bag and the rest of her belongings were thrown away in the trash. When asked if was the facility's habit to go through all of the belongings, RN #1 stated, the social worker routinely calls the family and they tell us what they want to keep and what to donate or trash. When asked how many things did the family pick up, RN #1 stated he believed it was five trash bags full of things.</p> <p>An interview was conducted with CNA # 1 on 2/10/2021 at 8:50 a.m., regarding what happens with a resident's personal belongings after they expire. CNA #1 stated that upon admission, we catalog their belongings and when they are discharged or die, we check the list and coordinate it with the social worker for a second check.</p> <p>An interview was conducted with OSM # 3, a housekeeper, on 2/10/2021 at 9:07 a.m., regarding the role of housekeeping when a resident expires. OSM #3 stated they wait for the supervisor to tell us what to do. He tells us what the family wants or doesn't want. We pack it up in boxes for the family to pick up.</p> <p>An interview was conducted with ASM # 1, the regional director of operations, on 2/10/2021 at approximately 12:05 p.m. When asked if some of Resident #1's personal belongings were thrown away, ASM #1 stated that some items were thrown away. ASM #1 stated there was a miscommunication of what the family wanted and</p>	F 602			

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F 602	<p>Continued From page 7</p> <p>didn't want. ASM #1 further stated that the facility did dispose of things and the family received some of her things. It was in the middle of a COVID outbreak so the family couldn't come in to go through her belongings. When asked if there was an inventory list of the resident's belongings, ASM #1 stated that they could not locate one in the clinical record. When asked if there have been any other concerns related to personal belongings being thrown away, ASM #1 stated there have not been any further concerns.</p> <p>The facility policy, "Abuse Prevention" documented in part, "Misappropriation of Resident Property: The deliberate misplacement, exploitation, or wrongful, temporary or permanent use of a resident's belongings or money without the resident's consent."</p> <p>The facility policy, "Residents' Personal Belongings & Inventory Policy" documented in part, "1. All resident possessions, regardless of their apparent value to others, will be treated with respect...3. All resident personal items will be inventoried at the time of admission by a staff member and documentation shall be retained in the medical record. 4. Additional possessions brought in during the duration of the individual's stay shall be added to the existing personal belongings inventory listing... 9. Following the discharge or death of a resident, all personal clothing and items of a customized personal nature are to be given to the designated resident representative. 10. Inventories of all items are to be reviewed and examined by designee and the resident's representative. Recipients of such personal items at the time of discharge or death shall sign-off with their legal signature, acknowledging receipt of all personal belongings</p>	F 602			

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F 602	<p>Continued From page 8 presented."</p> <p>The facility presented a "QA (quality Assurance) Action Plan" dated 5/7/2020. The "Area of Concern: Throwing Away Resident Items." The "Corrective Action" documented:</p> <ol style="list-style-type: none"> 1. (Resident #1) expired in the center on 5/3/2020. On 5/6/2020, the family notified the center that items were missing and accused staff of stealing them. FRI [facility reported incident] done and investigation began on 5/7/2020. 2. Any resident/family has the potential to be negatively affected if center staff does not complete inventory sheet and ensure that belongings left at the center after discharge are given back to the responsible party according to center's Resident Belonging P&P (policy and procedure). 3. In-service all environmental service department on the process of not throwing any resident's belonging away and following center's Resident Belongings P&P. 4. Review discharges for the next three months to ensure that center staff does not throw away resident's belongings and monitor through observation and concern form reviews. Review findings to the QAPI (quality assurance performance improvement) committee and address any variances. 5. Target Completion Date: 5/21/2020. <p>Comments: (initials of corporation) completed investigation and family provided a list of belongings that were not returned that included more than the initial accusation of theft. Reimbursement was made to the family.</p> <p>The Grievance Logs for the past three months were reviewed. There were no concerns made regarding the loss or throwing out of resident</p>	F 602			

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