

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

PRINTED: 01/29/2021
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 495201	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____		(X3) DATE SURVEY COMPLETED C 01/28/2021
NAME OF PROVIDER OR SUPPLIER PORTSIDE HEALTH & REHAB CENTER			STREET ADDRESS, CITY, STATE, ZIP CODE 4201 GREENWOOD DRIVE PORTSMOUTH, VA 23701		
(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
E 000	Initial Comments An unannounced Emergency Preparedness COVID-19 Focused Survey was conducted 1/26/21 through 1/27/21. The facility was in compliance with E0024 of 42 CFR Part 483.73, Requirements for Long-Term Care Facilities.	E 000			
F 000	INITIAL COMMENTS An unannounced Medicare/Medicaid abbreviated and Focused Infection Control survey was conducted 1/26/21 through 1/27/21. One complaint was investigated: VA00050013 was substantiated with deficiency. Corrections are required for compliance with 42 CFR Part 483 Federal Long Term Care requirements. The census in this 132 certified bed facility was 87 at the time of survey. The survey sample consisted of four current record reviews (Resident #1 and #4) and one closed record review, Resident #5. Since the start of the pandemic a total of 62 residents had tested positive for COVID-19 with a total of 54 resident recoveries. Since the start of the pandemic a total of 15 staff had tested positive for COVID-19 with a total of 13 staff recoveries.	F 000			
F 583 SS=D	Personal Privacy/Confidentiality of Records CFR(s): 483.10(h)(1)-(3)(i)(ii) §483.10(h) Privacy and Confidentiality. The resident has a right to personal privacy and confidentiality of his or her personal and medical records. §483.10(h)(l) Personal privacy includes accommodations, medical treatment, written and	F 583			

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

TITLE

(X6) DATE

James J. Parker ADMINISTRATOR 02/03/21

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 583	<p>Continued From page 1</p> <p>telephone communications, personal care, visits, and meetings of family and resident groups, but this does not require the facility to provide a private room for each resident.</p> <p>§483.10(h)(2) The facility must respect the residents right to personal privacy, including the right to privacy in his or her oral (that is, spoken), written, and electronic communications, including the right to send and promptly receive unopened mail and other letters, packages and other materials delivered to the facility for the resident, including those delivered through a means other than a postal service.</p> <p>§483.10(h)(3) The resident has a right to secure and confidential personal and medical records. (i) The resident has the right to refuse the release of personal and medical records except as provided at §483.70(i)(2) or other applicable federal or state laws. (ii) The facility must allow representatives of the Office of the State Long-Term Care Ombudsman to examine a resident's medical, social, and administrative records in accordance with State law. This REQUIREMENT is not met as evidenced by: Based on staff interview, clinical record review, and facility document review, facility staff failed to safeguard medical records at the time of a facility-initiated transfer on 10/2/20 for one of five sampled Residents; Resident #5.</p> <p>The findings included:</p> <p>Resident #5 was admitted to the facility on 9/25/19 and readmitted on 4/8/20 with diagnoses that included but were not limited to obsessive</p>	F 583	<ol style="list-style-type: none"> 1. Resident # 5 was discharged on 10/02/20. Resident #5 did not experience any adverse practice due to the transportation of Medical Records. 2. No other residents were are have been transported by LYFT. No other residents were affected by the deficient practice. 3. Social Worker has been educated on the resident's right to secure and confidential Medical Records and the safe guarding of Medical Records. 4. Medical Records and or Designee will monitor Discharge records bi weekly for one month. Variance will be reviewed in monthly QAPI and education and guidance provided if deficient practice is found. 		

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F 583	<p>Continued From page 2</p> <p>compulsive disorder, Alzheimer's Disease, and GAD (Generalized Anxiety Disorder).</p> <p>Resident #5's most recent MDS (Minimum Data Set) Assessment was a discharge assessment with an ARD (Assessment Reference Date) of 10/2/20. Resident #5 was coded as being severely impaired in cognitive function scoring 08 out of possible 15 on the BIMS (Brief Interview for Mental Status) exam.</p> <p>Review of a facility concern form dated 10/28/20 documented the following by the former facility Administrator: "Administrator received called from Ombudsman stating a family member for (Name of Resident #5) was upset about the method of transportation used to transfer (Name of Resident #5) to another facility and the fact that she did not have an escort."</p> <p>Review of a follow up letter signed by the former facility administrator dated 10/29/20, documented in part, the following: "On 10/28/20 this writer received a call from the Ombudsman (Name) inquiring about the discharge of (Name of Resident #5) (resident). During the call, (Name of ombudsman) stated that a family member of (Name of Resident #5) was upset about the method of transportation used to transfer (Name of Resident #5) to another facility and the fact that she did not have an escort. Initially, this writer was under the impression that the facility receiving (Name of Resident #5) had picked her up. Later, this writer found out that (Name of Resident #5) was transferred using Lyft services. This writer spoke with (Name of Social Worker) (OSM (Other Staff Member) #1) to find out the reason why this particular method of transportation was used. It was determined that</p>	F 583			

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F 583	<p>Continued From page 3</p> <p>Anthem arranged for transportation using Lyft Services. (Name of Ombudsman) was notified of this after writer discovered this information. (Name of Ombudsman) stated that he was going to notify Anthem and question why they sent a resident who was cognitively impaired via Lyft during transport to another facility. While this method of transportation is not preferred, the resident was not at risk for harm as all Lyft drivers do receive background checks. (Name of Resident #5) was transferred to (Name of receiving nursing facility) on 10/2/2020. In speaking with (Name of OSM #1), she stated that she escorted (Name of Resident #5) to the Lyft car upon arrival. Upon approaching the vehicle, (Name of OSM #1) observed a male driver in a silver 4-door sedan who was friendly and courteous in their approach. (Name of Resident #5's) sealed medical records were given to the driver. (Name of Resident #5) was safely placed in the back seat and the seat belt was placed on her. (Name of OSM #1) did not think that there any risks associated with this transfer as the insurance company set it up. Using Lyft services is not ideal but is no different than any other transportation services used to transport residents to appointments, outings, etc. (Name of OSM #1) also had (Name of Resident #5)'s personal belongings in her vehicle and followed the Lyft driver to (Name of receiving facility) to ensure she arrived safely...(Name of Social Service Agency) (Resident's guardian) was alerted of the transfer to the new facility and gave approval. As a courtesy (Name of OSM #1) also notified (Name of Resident #5's daughter)..."</p> <p>On 1/27/21 at 10:13 a.m., an interview was conducted with the Long Term Care Ombudsman. The LTC Ombudsman stated that</p>	F 583			

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F 583	<p>Continued From page 4</p> <p>he received a call by the resident's family member who heard (Name of Resident #5) was transferred to a new nursing facility by the method of a Lyft car on 10/2/20. During the conversation, the LTC Ombudsman stated that he was concerned that Resident #5's medical records were handed to the Lyft driver. The LTC ombudsman stated that he received this information from the transferring facility when he was investigating Resident #5's discharge.</p> <p>On 1/27/21 at 10:41 p.m., an interview was conducted with the social worker and the receptionist who were present when Resident #5 arrived to the receiving facility on 10/2/20. The social worker and receptionist interviewed at this time were employees of the receiving nursing facility. The social worker stated that she was present the night Resident #5 arrived to the building. The social worker stated that a man was knocking on the lobby door. The social worker stated that when she answered the door, the Lyft driver had stated that he had (Name of Resident #5) in his car and had been waiting for some time. The social worker stated that the Lyft driver had stated that Resident #5 would not get out of his car. The social worker went down the hall to grab additional personnel and stated that by the time she got back to the lobby, the former facility administrator was walking the resident inside the building. When asked if the Lyft driver had handed her any discharge paperwork from the transferring facility, the social worker stated that she was not handed anything.</p> <p>The receptionist that was also present the night Resident #5 was transferred to the receiving building stated that the Lyft car had been waiting for some time, but that she didn't realize that</p>	F 583			

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F 583	<p>Continued From page 5</p> <p>Resident #5 was in the Lyft car. The receptionist stated that she was aware that a new resident was coming into the building but that she was looking for a medical transport van. The receptionist denied receiving any discharge paperwork from the Lyft driver.</p> <p>On 1/27/21 at 11:26 a.m., an interview was conducted with the former administrator of the receiving facility who had assisted Resident #5 into the building on 10/2/20. The former administrator stated that he was not handed any discharge instructions from the Lyft driver.</p> <p>On 1/27/21 at 11:41 p.m., an interview was conducted with LPN (Licensed Practical Nurse) #1, a nurse who worked the shift when Resident #5 was discharged. LPN #1 stated that he will print the medication list and give that information to the resident or whoever is accompanying the resident. LPN #1 stated that the medication list may also be given to the social worker if the resident is not cognitively intact. LPN #1 stated that social worker completes all the facility planned discharges. When asked if he recalled giving Resident #5's medication list or any other medical records to her Lyft driver, LPN #1 stated, "We don't give that information to an Uber or Lyft driver." When asked why he wouldn't give personal medical information to an Uber or Lyft driver, LPN #1 stated, "That is classified information and against HIPPA (Health Insurance Portability and Accountability Act)."</p> <p>On 1/27/21 at 11:42 p.m., an interview was conducted with OSM (Other staff Member) #1, the facility social worker. When asked if she could explain the discharge process for Resident #5 on 10/2/20, OSM #1 stated that she had been in</p>			F 583			

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F 583	<p>Continued From page 6</p> <p>communication with the social worker from the receiving facility. OSM #1 stated that on 10/2/20 she received notification that a bed had opened up and that the facility wanted her there by 4 p.m. When asked OSM #1 why Resident #5 was being transferred, OSM #1 stated that Resident #5 had to be placed on memory care unit due to her exit seeking behaviors. OSM #1 stated that she contacted Resident #5 insurance Anthem House Keepers who had set up transportation via a Lyft vehicle. When asked if she had the contact information for the Lyft driver, OSM #1 that she did not because Anthem had set up transportation. OSM #1 stated that she only had a trip number. When asked what documents she sends with a resident at the time of discharge, OSM #1 stated that she faxes over to the receiving provider information such as a history and physical, progress, notes, and any other pertinent information they need. OSM #1 stated that she will send the residents prescriptions and any upcoming appointments with the resident or RP (Representative). OSM #1 stated that she put that information in a sealed envelope and placed it with Resident #5's belongings. When asked if she recalled handing the envelope to the Lyft driver, OSM #1 stated that she could not recall. The above concern follow up letter dated 10/29/20 was then read to OSM #1. OSM #1 then confirmed that she did hand Resident #5's medical information to the Lyft driver. OSM #1 stated that Resident #5's medical information was in a sealed envelope.</p> <p>On 1/27/20 at 4:00 p.m., ASM (Administrative Staff Member) #1, the Administrator and ASM #2 the DON (Director of Nursing) were made aware of the above concerns.</p>	F 583			

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F 583	Continued From page 7 No further information was presented prior to exit. A policy could not be provided. COMPLAINT DEFICIENCY	F 583			

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