

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 045351	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 01/17/2025
NAME OF PROVIDER OR SUPPLIER Care Manor Nursing and Rehab		STREET ADDRESS, CITY, STATE, ZIP CODE 804 Burnett Drive Mountain Home, AR 72653	

For information on the nursing home's plan to correct this deficiency, please contact the nursing home or the state survey agency.

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (Each deficiency must be preceded by full regulatory or LSC identifying information)
<p>F 0625</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Notify the resident or the resident's representative in writing how long the nursing home will hold the resident's bed in cases of transfer to a hospital or therapeutic leave.</p> <p>50924</p> <p>Based on interviews, record review, facility document review, and facility policy review, it was determined that the facility failed to ensure a written bed hold notification was issued prior to a hospital transfer for 1 (Resident #1) of 1 resident reviewed for transfer process.</p> <p>The findings include:</p> <p>A review of Resident #1's, Admission Agreement, signed 07/27/2021 by Resident #1's authorized representative indicated, except for emergent situations, before the facility transfers a resident to a hospital the facility will provide written information to the resident specifying the amount of time a bed will be held and any corresponding charges.</p> <p>A review of Resident #1's progress note dated 11/18/2024 at 10:53 PM revealed, Resident #1 was transferred via Emergency Medical Services (EMS) to the hospital at 10:00 PM for a fracture to the right femur neck.</p> <p>A review of Resident #1's hospital record titled, Patient Care Report for the ambulance run indicated the transport priority was Non-Emergent Stable.</p> <p>The quarterly Minimum Data Set (MDS), with an Assessment Reference Date (ARD) of 10/19/2024, revealed Resident #1 had a Brief Interview of Mental Status score of 12 which indicated the resident had moderate cognitive impairment.</p> <p>During an interview on 01/16/2025 at 9:07 AM, the resident's representative stated while in the hospital the facility stated they could only hold the resident's bed for 5 days then they would lose it. The resident's representative stated they did not know what to do. No other information was provided.</p> <p>During an interview on 01/16/2025 at 3:50 PM, Licensed Practical Nurse (LPN) #1 stated if a resident was transported to the hospital she printed a face sheet, a transfer sheet, the medication administration record (MAR), active orders, and a Do Not Resuscitate (DNR) order if applicable. She did not have any knowledge about a bed hold and stated it was above my pay grade.</p> <p>(continued on next page)</p>

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.

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
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<p>F 0625</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>During an interview on 01/16/2025 at 4:02 PM, the Business Office Manager (BOM) stated she had not generated a bed hold since she took over the position on 11/01/2024. She stated if one was required, she would either hand deliver one to the resident in the hospital, mail one to their representative, or just give it to the resident when they returned to the facility.</p> <p>During an interview on 01/16/2025 at 4:08 PM, the Director of Nursing (DON) stated she was unaware how a bed hold worked or who was responsible for it.</p> <p>During an interview on 01/16/2025 at 4:09 PM, the Administrator stated residents received information regarding bed holds upon admission in the admission packets. The Administrator stated we do not give one every time a resident goes to the hospital, residents come and go so often it would not be consistent.</p> <p>During an interview on 01/17/2025 at 11:00 AM, the Administrator stated he misunderstood the question about bed holds the prior day. He stated he answered regarding when the residents were educated on bed holds. He stated he was unaware as an administrator a bed hold regulation required notification given when a resident left the building and assumed the BOM must had been handling it. The Administrator stated the BOM was new to her position and was evidently never instructed by the BOM consultant who was previously filling the role.</p>		