

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  075222	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED  11/15/2023
NAME OF PROVIDER OR SUPPLIER  Civita Care Center at Cheshire		STREET ADDRESS, CITY, STATE, ZIP CODE  745 Highland Avenue Cheshire, CT 06410	

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 0602</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Protect each resident from the wrongful use of the resident's belongings or money.</p> <p><b>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 44675</b></p> <p>Based on review of the clinical record, facility documentation, facility policy, and interviews for Resident #1 reviewed for misappropriation, the facility failed to ensure the resident's money was that was placed in the facilities possession, was secured. The findings include:</p> <p>Resident #1 was admitted to the facility with diagnoses that included cerebrovascular disease and dementia.</p> <p>The care plan dated 8/18/23 identified Resident #1 had anxiety and agitation related to the loss of independence and strained relationships with family members with interventions included to encourage Resident #1 to become involved with activities, encourage the resident to verbalize feelings and spend time talking with the resident.</p> <p>The quarterly MDS dated [DATE] identified Resident #1 had no impairments in cognition and required two staff assistance for bed mobility and transfers.</p> <p>Review of the resident personal belongings form dated 6/6/23 identified the business office received \$2,000 in cash from Resident #1.</p> <p>The Accident and Incident form (A &amp; I) dated 10/23/23 at 3:55 PM identified Resident #1 went to collect his/her money from the business office however, when the manager went into the safe, the envelope containing Resident #1's \$2,000 was gone. Review of the summary identified on 6/6/23 Resident #1 gave the Business Manager \$2,000 in cash that was stored in the facility's safe which was unable to be locked. On 10/12/23 Resident #1's money was checked prior to a meeting with the Business Manager, and it was the last time the money was accounted for. On 10/23/23 Resident #1 returned to the business office and requested his/her money and the Business Manager observed the envelope that contained Resident #1's money was empty. Review of the statements identified the facility was unable to determine who misappropriated Resident #1's money. The form identified a locksmith was called to address the inability to lock. Subsequent to the event on 10/24/23 a locksmith opened the safe with the provided code and instructed employees on proper operation.</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 0602</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Interview with the Business Manager on 11/15/23 at 10:00 AM identified she received Resident #1's \$2,000 cash on 6/6/23 and placed it into an envelope then placed in Resident #1's container in the safe. She identified the money was last observed on 10/23/23 during a meeting with Resident #1. She identified she does not check the residents' contents once they are in the safe. Resident contents, once removed, are signed out by the resident. She further identified the safe's door was closed but not locked due to the inability of working the dial lock.</p> <p>An disservice dated 10/30/23 identified the Business Manager, involved with handling resident money, was to instructed on the steps to ensure proper safe keeping of valuables.</p> <p>Interview with the Administrator on 11/15/23 at 10:30 AM identified there is a safe in the business office where the residents' money and personal belongings are kept. He identified the safe had a turn dial lock and staff did not know how to use the lock, therefore the safe has been left unlocked and unsecured for at least the past two years. He identified only a few staff were aware that the safe was never locked. Although the Administrator identified he had previously called half a dozen locksmiths and they would not work on that type of safe, he could not provide documentation. He further identified he had never thought of getting a new safe because an event like this has not happened before in the facility. He identified the business office door was always locked and the people who had access to the key were the Administrator, Business Manager, Maintenance, and a key was placed in the key box in the maintenance room (that the Administrator identified is accessible to all staff). Subsequent to the event, a locksmith was found who would work on the safe and taught the staff how to use the dial code. The main door and conference room door entrances to the business office locks were replaced and the facility replaced resident #1's money.</p> <p>Review of the personal property policy directed that the facility will make reasonable efforts to safeguard the personal property of a resident.</p> <p>Review of the resident rights policy, in part, directed that residents have the right to be free from misappropriation of property.</p>		