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| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 155531 | (X2) MULTIPLE CONSTRUCTION A. Building B. Wing | (X3) DATE SURVEY COMPLETED 09/19/2024 |
| NAME OF PROVIDER OR SUPPLIER Envive of Huntington | | STREET ADDRESS, CITY, STATE, ZIP CODE 850 Ash St Huntington, IN 46750 | |

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) |
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| <p>F 0600</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p> | <p>Protect each resident from all types of abuse such as physical, mental, sexual abuse, physical punishment, and neglect by anybody.</p> <p>09676</p> <p>Based on interview and record review, the facility failed to protect a resident from sexual abuse perpetrated by an employee engaging in sexually-toned conversations and behavior for 1 of 1 resident reviewed for sexual abuse. (Resident B)</p> <p>Findings include:</p> <p>During an interview on 9/18/24 at 10:51 a.m., Resident B indicated he and DE5 (Dietary Employee 5) had been Facebook Friends and communicated via Facebook Private Messenger. They had friendly conversations at first. It became obvious to him that DE 5 liked him more than a friend. She became flirty. She had sent him pictures of herself in pajamas. On another occasion, she had messaged him that she was wearing only a bra and panties. Because she had a fiancée, the resident ended the relationship. To Resident B, being engaged was the same as almost married or married. During the interview, Resident B displayed multiple conversations on Private Messenger between him and DE5. The last message was dated May 29, 2024. The message indicated he had felt the conversations should stop now because the employee was in a committed relationship. Resident B indicated their conversations had ended shortly after the May 29 message. Some time in May, he had told the Social Services Director (SSD) he thought DE5 liked him as more than friends. The SSD told him he should stop private messaging her. He had been trying to handle it all himself, but decided to tell the SSD. The SSD did not speak to him again about the matter. The Previous Administrator had never spoken with him about messaging with DE5. No employee in any department had asked him any questions regarding his conversation from May, when he told the SSD, until September 2024 when the new Administrator asked him questions one day ago.</p> <p>Resident B's clinical record was reviewed on 9/18/24 at 10:27 a.m. Current diagnoses included toxic encephalopathy, spastic hemiplegia of the left non-dominant side and depression.</p> <p>A 7/2/24, quarterly, MDS (Minimum Data Set) assessment indicated the resident was cognitively intact.</p> <p>The clinical record lacked documentation or care planning regarding the resident making false statements.</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.

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| LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE | TITLE | (X6) DATE |
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| <p>F 0600</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p> | <p>A copy of a messenger screen shot, provided by the Administrator on 9/18/24 at 1:09 p.m. and had been obtained as part of her incident investigation, indicated Laying on the bed I'm in just my bra and panties. The screen shots were identified as being provided by Resident B as part of the facility's investigation.</p> <p>The screen shots were consistent with the messages shown by Resident B during the 9/18/24 interview.</p> <p>During an interview on 9/18/24 at 11:49 a.m., the Administrator indicated, on 9/17/24, the facility received an anonymous call alleging Resident B and DE5 were having an unknown type of personal relationship. She asked questions of the caller and was provided no additional information. She began an investigation immediately and learned Resident B and DE5 had been conversational through Facebook Private Messenger. The conversations may have been inappropriate in nature. The resident had provided screen shoots of the messages and there was questionable content. She had suspended the employee. The Social Services Director (SSD) and Dietary Manager (DM) indicated they had both been aware of the messaging relationship. The DM told her she had informed the previous administrator. The current Administrator indicated she could not find a file, notes, an investigation, a facility reported incident, or other documentation regarding the allegation, nor an investigation by the previous administrator.</p> <p>During a phone interview on 9/18/24 at 1:21 p.m., DE5 indicated she had been Facebook Friends and Facebook Private Messaged with Resident B. She understood that the facility had expectations about what type of interactions staff could have with residents. She had a personality that could be seen as flirty. She had sent a photo of herself in pajamas, which covered her body, to Resident B. Sending that photo may have crossed the line for staff-resident interaction. She had once sent a message that stated she was wearing only her bra and panties while messaging. She indicated the message about her bra and panties may have crossed the line for staff to resident interaction. She had said I like you to the resident and it could have been romantic in nature. She thought he was a cutie. The DM had spoken to her once or twice about messaging with Resident B. Their conversations had continued after the DM had spoken to her. The previous administrator had never spoken to her about messaging with Resident B. Since the DM spoke to her in around May, no other facility leadership had ever spoken to her about messaging with Resident B until the new administrator did, and she was suspended. She and the resident had stopped messaging months ago maybe the end of May or first of June. They had definitely stopped messaging by the Fourth of July.</p> <p>During an interview on 9/18/24 at 12:14 p.m., the Social Services Director (SSD) indicated Resident B had spoken to her about thinking DE5 liked him as more than a friend. She told the resident to cease messaging DE5. She did not make an entry in the resident's clinical record. She did not know the date. It was more than a couple months ago. She did pass on the information to the previous administrator. The previous administrator did not ask her for a written statement and she put nothing in writing. The previous administrator indicated she was aware and the DM told her and it had been addressed. She did not follow-up with the resident to determine if the situation was resolved.</p> <p>(continued on next page)</p> | | |

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| <p>F 0600</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p> | <p>During an interview on 9/18/24 at 1:32 p.m., the DM indicated she had been aware of DE5 and Resident B messaging on their phones, in approximately May 2024. Her first understanding was they were just talking and saying good night and such. She had told DE5 to stop because these things can go too far and bad things could come from it. Then two employees came to her again (DE6 and DE7) and one or both of them said the two were now messaging inappropriate things like the size of male genitals. On both occasions, she went to the previous administrator and reported her concerns. When told about the messaging about genitals, the previous administrated responded we facility could not do anything unless they were actually having sex. The DM had no documentation or notes regarding when she reported to the previous administrator, statements from staff, when she told DE5 to cease messaging, or any information related to the resident and staff messaging one another.</p> <p>During an interview on 9/19/24 at 9:53 a.m., DE6 (Dietary Employee 6) indicated she worked with DE5. She had reported concerns regarding DE5 messaging with Resident B to the DM. She believed she told the DM two or more times about her concerns with DE5 and the resident messaging. At first it seemed too friendly, and maybe flirty. DE5 talked to her about the resident and called him a cutie. DE5 would talk about Resident B regularly. Then she learned the two were talking about inappropriate thing like the size of male genitalia. She then reported her concerns again to the DM. She had reported her concerns more than a couple of months ago.</p> <p>A current, 1/1/23, policy titled, Abuse and Neglect Policy, provided by the Administrator on 9/18/24 at 1:56 p. m., indicated sexual abuse includes, but is not limited to, sexual harassment, sexual coercion, or sexual assault.</p> <p>A current, 8/2024, facility policy titled, Abuse, Neglect, Exploitation and Misappropriation, Reporting and Investigating, provided by the Administrator on 9/19/24 at 10:45 a.m., indicated the administrator or the individual making the allegation immediately reports .to the following agencies:</p> <p>a. The state licensing/certification agency .</p> <p>Investigation:</p> <p>1. All allegations are thoroughly investigated. The administrator initiates the investigation.</p> <p>6. Any employee who has been accused of resident abuse is placed on leave with no resident contact until the investigation is complete.</p> <p>7. The individual conducting the investigation as a minimum:</p> <p>. t. interview the person(s) reporting the incident;</p> <p>u. interview any witnesses to the incident;</p> <p>w. interview the resident (as medically appropriate) or the resident's representative;</p> <p>.bb. document the investigation completely and thoroughly.</p> <p>(continued on next page)</p> | | |

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| <p>F 0600</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p> | <p>A current, July 2016, policy, titled E-mail, Internet and Social Media Use, provided by the Administrator on 9/18/24 at 2:00 p.m., indicated social media platform will be used only within the legal, ethical and professional boundaries established by state and federal privacy laws, professional standards of practice, and facility policy.</p> <p>This citation relates to Complaint IN00443474.</p> <p>3.1-27(a)</p> | | |

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| <p>F 0609</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p> | <p>Timely report suspected abuse, neglect, or theft and report the results of the investigation to proper authorities.</p> <p>09676</p> <p>Based on interview and record review, the facility failed to report an allegation of sexual abuse to the Indiana Department of Health when the concern was initially identified for 1 of 1 residents reviewed for reporting abuse to the state agency. (Resident B)</p> <p>Findings include:</p> <p>During an interview on 9/18/24 at 10:51 a.m., Resident B indicated he and DE5 (Dietary Employee 5) had been Facebook Friends and communicated via Facebook Private Messenger. They had friendly conversations at first. It became obvious to him that DE 5 liked him more than a friend. She became flirty. She had sent him pictures of herself in pajamas. On another occasion, she had messaged him that she was wearing only a bra and panties. Because she had a fiancée, the resident ended the relationship. To Resident B, being engaged was the same as almost married or married. During the interview, Resident B displayed multiple conversations on Private Messenger between him and DE5. The last message was dated May 29, 2024. The message indicated he had felt the conversations should stop now because the employee was in a committed relationship. Resident B indicated their conversations had ended shortly after the May 29 message. Some time in May, he had told the Social Services Director (SSD) he thought DE5 liked him as more than friends. The SSD told him he should stop private messaging her. He had been trying to handle it all himself, but decided to tell the SSD. The SSD did not speak to him again about the matter. The Previous Administrator had never spoken with him about messaging with DE5. No employee in any department had asked him any questions regarding his conversation from May, when he told the SSD, until September 2024 when the new Administrator asked him questions one day ago.</p> <p>A copy of a messenger screen shot, provided by the Administrator on 9/18/24 at 1:09 p.m. and had been obtained as part of her incident investigation, indicated Laying on the bed I'm in just my bra and panties. The screen shots were identified as being provided by Resident B as part of the facility's investigation.</p> <p>The screen shots were consistent with the messages shown by Resident B during the 9/18/24 interview.</p> <p>During an interview on 9/18/24 at 11:49 a.m., the Administrator indicated, on 9/17/24, the facility received an anonymous call alleging Resident B and DE5 were having an unknown type of personal relationship. She asked questions of the caller and was provided no additional information. She began an investigation immediately and learned Resident B and DE5 had been conversational through Facebook Private Messenger. The conversations may have been inappropriate in nature. The resident had provided screen shoots of the messages and there was questionable content. She had suspended the employee. The Social Services Director (SSD) and Dietary Manager (DM) indicated they had both been aware of the messaging relationship. The DM told her she had informed the previous administrator. The current Administrator indicated she could not find a file, notes, an investigation, a facility reported incident, or other documentation regarding the allegation, nor an investigation by the previous administrator.</p> <p>(continued on next page)</p> | | |

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| <p>F 0609</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p> | <p>During an interview on 9/18/24 at 12:14 p.m., the Social Services Director (SSD) indicated Resident B had spoken to her about thinking DE5 liked him as more than a friend. She told the resident to cease messaging DE5. She did not make an entry in the resident's clinical record. She did not know the date. It was more than a couple months ago. She did pass on the information to the previous administrator. The previous administrator did not ask her for a written statement and she put nothing in writing. The previous administrator indicated she was aware and the DM told her and it had been addressed. She did not follow-up with the resident to determine if the situation was resolved.</p> <p>During a phone interview on 9/18/24 at 1:21 p.m., DE5 indicated she had been Facebook Friends and Facebook Private Messaged with Resident B. She understood that the facility had expectations about what type of interactions staff could have with residents. She had a personality that could be seen as flirty. She had sent a photo of herself in pajamas, which covered her body, to Resident B. Sending that photo may have crossed the line for staff-resident interaction. She had once sent a message that stated she was wearing only her bra and panties while messaging. She indicated the message about her bra and panties may have crossed the line for staff to resident interaction. She had said I like you to the resident and it could have been romantic in nature. She thought he was a cutie. The DM had spoken to her once or twice about messaging with Resident B. Their conversations had continued after the DM had spoken to her. The previous administrator had never spoken to her about messaging with Resident B. Since the DM spoke to her in around May, no other facility leadership had ever spoken to her about messaging with Resident B until the new administrator did, and she was suspended. She and the resident had stopped messaging months ago maybe the end of May or first of June. They had definitely stopped messaging by the Fourth of July.</p> <p>During an interview on 9/18/24 at 1:32 p.m., the DM indicated she had been aware of DE5 and Resident B messaging on their phones, in approximately May 2024. Her first understanding was they were just talking and saying good night and such. She had told DE5 to stop because these things can go too far and bad things could come from it. Then two employees came to her again (DE6 and DE7) and one or both of them said the two were now messaging inappropriate things like the size of male genitals. On both occasions, she went to the previous administrator and reported her concerns. When told about the messaging about genitals, the previous administrator responded we facility could not do anything unless they were actually having sex. The DM had no documentation or notes regarding when she reported to the previous administrator, statements from staff, when she told DE5 to cease messaging, or any information related to the resident and staff messaging one another.</p> <p>During an interview on 9/19/24 at 9:53 a.m., DE6 (Dietary Employee 6) indicated she worked with DE5. She had reported concerns regarding DE5 messaging with Resident B to the DM. She believed she told the DM two or more times about her concerns with DE5 and the resident messaging. At first it seemed too friendly, and maybe flirty. DE5 talked to her about the resident and called him a cutie. DE5 would talk about Resident B regularly. Then she learned the two were talking about inappropriate thing like the size of male genitalia. She then reported her concerns again to the DM. She had reported her concerns more than a couple of months ago.</p> <p>A current, 1/1/23, policy titled, Abuse and Neglect Policy, provided by the Administrator on 9/18/24 at 1:56 p. m., indicated sexual abuse includes, but is not limited to, sexual harassment, sexual coercion, or sexual assault.</p> <p>(continued on next page)</p> | | |

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| <p>F 0609</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p> | <p>A current, 8/2024, facility policy titled, Abuse, Neglect, Exploitation and Misappropriation, Reporting and Investigating, provided by the Administrator on 9/19/24 at 10:45 a.m., indicated the administrator or the individual making the allegation immediately reports .to the following agencies:</p> <p>a. The state licensing/certification agency .</p> <p>Investigation:</p> <p>1. All allegations are thoroughly investigated. The administrator initiates the investigation.</p> <p>6. Any employee who has been accused of resident abuse is placed on leave with no resident contact until the investigation is complete.</p> <p>7. The individual conducting the investigation as a minimum:</p> <p>. t. interview the person(s) reporting the incident;</p> <p>u. interview any witnesses to the incident;</p> <p>w. interview the resident (as medically appropriate) or the resident's representative;</p> <p>.bb. document the investigation completely and thoroughly.</p> <p>This finding relates to IN00443474.</p> <p>3.1-28(c)</p> |

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| <p>F 0610</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p> | <p>Respond appropriately to all alleged violations.</p> <p>09676</p> <p>Based on interview and record review, the facility failed to complete a thorough investigation regarding sexual misconduct of an employee until approximately 4 months following the facility being informed for 1 of 1 resident reviewed for timely investigation of allegations of abuse. (Resident B)</p> <p>Findings include:</p> <p>During an interview on 9/18/24 at 10:51 a.m., Resident B indicated he and DE5 (Dietary Employee 5) had been Facebook Friends and communicated via Facebook Private Messenger. They had friendly conversations at first. It became obvious to him that DE 5 liked him more than a friend. She became flirty. She had sent him pictures of herself in pajamas. On another occasion, she had messaged him that she was wearing only a bra and panties. Because she had a fiancée, the resident ended the relationship. To Resident B, being engaged was the same as almost married or married. During the interview, Resident B displayed multiple conversations on Private Messenger between him and DE5. The last message was dated May 29, 2024. The message indicated he had felt the conversations should stop now because the employee was in a committed relationship. Resident B indicated their conversations had ended shortly after the May 29 message. Some time in May, he had told the Social Services Director (SSD) he thought DE5 liked him as more than friends. The SSD told him he should stop private messaging her. He had been trying to handle it all himself, but decided to tell the SSD. The SSD did not speak to him again about the matter. The Previous Administrator had never spoken with him about messaging with DE5. No employee in any department had asked him any questions regarding his conversation from May, when he told the SSD, until September 2024 when the new Administrator asked him questions one day ago.</p> <p>Resident B's clinical record was reviewed on 9/18/24 at 10:27 a.m. Current diagnoses included toxic encephalopathy, spastic hemiplegia of the left non-dominant side and depression.</p> <p>A 7/2/24, quarterly, MDS (Minimum Data Set) assessment indicated the resident was cognitively intact.</p> <p>The clinical record lacked documentation or care planning regarding the resident making false statements.</p> <p>A copy of a messenger screen shot, provided by the Administrator on 9/18/24 at 1:09 p.m. and had been obtained as part of her incident investigation, indicated Laying on the bed I'm in just my bra and panties. The screen shots were identified as being provided by Resident B as part of the facility's investigation.</p> <p>The screen shots were consistent with the messages shown by Resident B during the 9/18/24 interview.</p> <p>(continued on next page)</p> | | |

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| <p>F 0610</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p> | <p>During an interview on 9/18/24 at 11:49 a.m., the Administrator indicated, on 9/17/24, the facility received an anonymous call alleging Resident B and DE5 were having an unknown type of personal relationship. She asked questions of the caller and was provided no additional information. She began an investigation immediately and learned Resident B and DE5 had been conversational through Facebook Private Messenger. The conversations may have been inappropriate in nature. The resident had provided screen shoots of the messages and there was questionable content. She had suspended the employee. The Social Services Director (SSD) and Dietary Manager (DM) indicated they had both been aware of the messaging relationship. The DM told her she had informed the previous administrator. The current Administrator indicated she could not find a file, notes, an investigation, a facility reported incident, or other documentation regarding the allegation, nor an investigation by the previous administrator.</p> <p>During a phone interview on 9/18/24 at 1:21 p.m., DE5 indicated she had been Facebook Friends and Facebook Private Messaged with Resident B. She understood that the facility had expectations about what type of interactions staff could have with residents. She had a personality that could be seen as flirty. She had sent a photo of herself in pajamas, which covered her body, to Resident B. Sending that photo may have crossed the line for staff-resident interaction. She had once sent a message that stated she was wearing only her bra and panties while messaging. She indicated the message about her bra and panties may have crossed the line for staff to resident interaction. She had said I like you to the resident and it could have been romantic in nature. She thought he was a cutie. The DM had spoken to her once or twice about messaging with Resident B. Their conversations had continued after the DM had spoken to her. The previous administrator had never spoken to her about messaging with Resident B. Since the DM spoke to her in around May, no other facility leadership had ever spoken to her about messaging with Resident B until the new administrator did, and she was suspended. She and the resident had stopped messaging months ago maybe the end of May or first of June. They had definitely stopped messaging by the Fourth of July.</p> <p>During an interview on 9/18/24 at 12:14 p.m., the Social Services Director (SSD) indicated Resident B had spoken to her about thinking DE5 liked him as more than a friend. She told the resident to cease messaging DE5. She did not make an entry in the resident's clinical record. She did not know the date. It was more than a couple months ago. She did pass on the information to the previous administrator. The previous administrator did not ask her for a written statement and she put nothing in writing. The previous administrator indicated she was aware and the DM told her and it had been addressed. She did not follow-up with the resident to determine if the situation was resolved.</p> <p>During an interview on 9/18/24 at 1:32 p.m., the DM indicated she had been aware of DE5 and Resident B messaging on their phones, in approximately May 2024. Her first understanding was they were just talking and saying good night and such. She had told DE5 to stop because these things can go too far and bad things could come from it. Then two employees came to her again (DE6 and DE7) and one or both of them said the two were now messaging inappropriate things like the size of male genitals. On both occasions, she went to the previous administrator and reported her concerns. When told about the messaging about genitals, the previous administrated responded we facility could not do anything unless they were actually having sex. The DM had no documentation or notes regarding when she reported to the previous administrator, statements from staff, when she told DE5 to cease messaging, or any information related to the resident and staff messaging one another.</p> <p>(continued on next page)</p> | | |

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| <p>F 0610</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p> | <p>During an interview on 9/19/24 at 9:53 a.m., DE6 (Dietary Employee 6) indicated she worked with DE5. She had reported concerns regarding DE5 messaging with Resident B to the DM. She believed she told the DM two or more times about her concerns with DE5 and the resident messaging. At first it seemed too friendly, and maybe flirty. DE5 talked to her about the resident and called him a cutie. DE5 would talk about Resident B regularly. Then she learned the two were talking about inappropriate thing like the size of male genitalia. She then reported her concerns again to the DM. She had reported her concerns more than a couple of months ago.</p> <p>A current, 1/1/23, policy titled, Abuse and Neglect Policy, provided by the Administrator on 9/18/24 at 1:56 p. m., indicated sexual abuse includes, but is not limited to, sexual harassment, sexual coercion, or sexual assault.</p> <p>A current, 8/2024, facility policy titled, Abuse, Neglect, Exploitation and Misappropriation, Reporting and Investigating, provided by the Administrator on 9/19/24 at 10:45 a.m., indicated the administrator or the individual making the allegation immediately reports .to the following agencies:</p> <p>a. The state licensing/certification agency .</p> <p>Investigation:</p> <p>1. All allegations are thoroughly investigated. The administrator initiates the investigation.</p> <p>6. Any employee who has been accused of resident abuse is placed on leave with no resident contact until the investigation is complete.</p> <p>7. The individual conducting the investigation as a minimum:</p> <p>. t. interview the person(s) reporting the incident;</p> <p>u. interview any witnesses to the incident;</p> <p>w. interview the resident (as medically appropriate) or the resident's representative;</p> <p>.bb. document the investigation completely and thoroughly.</p> <p>This finding relates to IN00443474.</p> <p>3.1-28(c)</p> <p>3.1-28 (d)</p> | | |