

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 185418	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 10/25/2024
NAME OF PROVIDER OR SUPPLIER Boyd Nursing and Rehabilitation		STREET ADDRESS, CITY, STATE, ZIP CODE 12100 Princeland Spur Ashland, KY 41102	

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 0725</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Provide enough nursing staff every day to meet the needs of every resident; and have a licensed nurse in charge on each shift.</p> <p>46710</p> <p>Based on interview, review of the facility staffing sheets, review of the facility assessment, review of the payroll-based journal staffing information, and review of resident grievances, the facility failed to have adequate nursing staff to maintain the highest practicable physical, mental, and psychosocial well-being of each resident, considering the number, acuity, and diagnoses of the facility's resident population in accordance with the facility assessment.</p> <p>The findings include:</p> <p>Review of the payroll-based journal (PBJ) data, dated April-June 2024, revealed the facility had an overall staffing rating of one star.</p> <p>Review of the facility assessment, dated 10/17/2024, revealed the facility determined it required three state registered nurse aides (SRNAs) each shift to meet the needs of the residents. Further review revealed the facility required one to two Licensed Practical Nurses (LPNs) per shift.</p> <p>Review of the facility report Daily Census, dated 10/12/2024 and 10/13/2024 revealed the facility's census was 58 and 57 residents, respectively.</p> <p>Review of the facility monthly staff schedules for 05/2024, 06/2024, and 10/2024 revealed the facility had two SRNAs on night shift on 05/01/2024, 06/01/2024, 06/05/2024. Further review revealed the facility had two SRNAs on day and night shift on 10/12/2024 and 10/13/2024.</p> <p>Review of the monthly staffing data compared with the facility census revealed the total number of nursing services hours on 10/12/2024 and 10/13/2024 was 95.5 hours with 57-58 residents in the building. When divided by the number of residents in the facility on 10/12/2024 and 10/13/2024, the hours per patient day (PPD) was 1.6.</p> <p>Review of the facility form Report of Concern, dated 10/17/2024 revealed R8 filed a grievance that she did not receive her shower over the weekend of 10/12/2024 -10/13/2024. Further review revealed the facility found R8 received a shower on 10/14/2024, but did not confirm the grievance.</p> <p>In an interview on 10/22/2024 at 12:11 PM, R51 stated he often had to wait up to an hour for staff to answer his call light to help him with toileting needs. He further stated he felt frustrated by having to wait so long.</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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NAME OF PROVIDER OR SUPPLIER Boyd Nursing and Rehabilitation		STREET ADDRESS, CITY, STATE, ZIP CODE 12100 Princeland Spur Ashland, KY 41102	
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<p>F 0725</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>In an interview on 10/22/2024 at 12:14 PM, R55 stated he saw his roommate, R51, have to wait up to an hour for his call light to be answered and that made him worried about his roommate and other residents in the facility who</p> <p>could not get up on their own to go ask for help.</p> <p>In an interview on 10/25/2024 at 12:03 PM, R8 stated she did not get her shower on 10/12/2024 as she preferred because of staffing. She further stated when this occurred, she felt dirty and frustrated when staff told her they did not have enough time to give her shower because there were only two SRNAs working each shift that day. In continued interview, R8 stated when the facility was down to two SRNAs per shift, residents did not receive showers according to their preferences.</p> <p>In interview on 10/23/2024 at 2:03 PM, the long-term care ombudsman stated she heard repeated complaints from residents about long call light wait times and not getting showers due to short staffing.</p> <p>In an interview on 10/24/2024 at 1:20 PM, SRNA4 stated when there were only two SRNAs per shift, some, but not all, nurses would help the SRNAs complete tasks such as assisting with repositioning, incontinence care, and showering. In further interview, SRNA4 stated residents would eventually get care, but might have to wait longer than they should when staffing was that low.</p> <p>In an interview on 10/25/2024 at 11:39 AM, the Assistant Director of Nursing Services (ADNS) stated one of her responsibilities was managing the schedule. In further interview, the ADNS stated she tried to meet a staffing level of four SRNAs per shift. Per interview, members of the management team and office staff helped with meal pass and answering call lights on day shift but did not provide coverage as long as there was a licensed nurse in the building. Additionally, the ADNS stated she believed the one-star staffing rating for the 04/2024, 05/2024, and 06/2024 quarter was related to staff being less likely to pick up shifts for extra money due to having tax return money.</p> <p>In an interview on 10/25/2024 at 9:27 AM, the Director of Nursing Services (DNS) stated in addition to the estimates in the facility assessment, the facility used an hours per patient day (PPD) ratio to determine the level of staffing needed for current census. Per interview, the staffing level goal was a 2.8PPD for nurses and aides combined. She continued to state she would need to look up the census for 10/12/2024 and 10/13/2024 to see if that met the PPD goal. In further interview, the DNS stated for the average census, the facility required four or five SRNAs and two Licensed Practical Nurses (LPNs) on day shift, and three to four SRNAs and one LPN on night shift.</p> <p>In an interview on 10/25/2024 at 10:38 AM, the Executive Director (ED) stated the facility's process to cover staffing shortages caused by a call-in was to try to get staff to pick up the shifts using incentives. Per interview, if no staff came in to cover the shift, administration would be willing to come in to help, but night shift staff were generally more senior and able to work efficiently enough to get their work done, even with a heavy patient load. In further interview, the ED stated if day shift SRNAs knew night shift was short, they would do extra tasks to help out. When asked about specific dates with short staffing on both shifts, the ED stated an activities aide who was also an SRNA pitched in to help with patient care tasks on day shift, but he could not verify what was done on night shift. The ED continued to state that he understood the facility assessment was important and the facility management team, including himself and the DNS, determined three SRNAs per shift was what they needed to meet the needs of the residents. Additionally, the ED stated he was aware R8 did not receive her 10/12/2024 shower until 10/14/2024 and that he had apologized to the resident.</p>		