

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 185467	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 08/14/2025
NAME OF PROVIDER OR SUPPLIER Cardinal Hill Skilled Rehabilitation Unit		STREET ADDRESS, CITY, STATE, ZIP CODE 2050 Versailles Road Lexington, KY 40504	

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)
F 0609 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	Timely report suspected abuse, neglect, or theft and report the results of the investigation to proper authorities. (continued on next page)

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 0609</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on interview, record review, and review of the facility's policy, the facility failed to report misappropriation within 24 hours for 1 of 2 sampled residents investigated for misappropriation, Resident (R) 74. It was reported on 11/09/2024 at 7:05 PM per e-mail to the Director of Nursing (DON) and the Administrator that R74 reported missing money from his wallet. However, the Administrator did not report the incident to the required entities until 11/11/2024. The findings include: Review of the facility's policy titled, Allegations of Abuse/Neglect, effective date 06/11/2025, revealed all alleged incidents involving mistreatment, neglect, or abuse including injuries of unknown origin and misappropriation of resident's property would be reported immediately to the facility Administration, and appropriate state agencies would be notified by the facility's Administration within two hours. Review of R74's admission Record revealed the facility initially admitted the resident on 09/21/2024 with diagnoses which included atrial fibrillation, osteoarthritis, and congestive heart failure. He was admitted to the hospital on [DATE] for altered mental status and shortness of air. Per the record, the facility readmitted R74 on 10/31/2024. Review of R74's admission Minimum Data Set [MDS], with an Assessment Reference Date of 09/23/2024, revealed the facility assessed the resident to have a Brief Interview for Mental Status [BIMS] score of 14 out of 15, indicating intact cognition. Review of the Belongings Section, of R74's electronic health record, dated 09/23/2024, revealed no mention of money. Review of the e-mail from Registered Nurse (RN) 1 to the Director of Nursing and the Administrator on 11/09/2024 at 7:05 PM revealed a nurse notified her that R74 reported he was missing money from his wallet. In an interview with R74 on 08/13/2025 at 12:56 PM, he stated he did not remember the details, but he did have money missing from his wallet while he was admitted to the facility. He stated he reported it to the nurse and had not heard anything about the issue. The State Survey Agency (SSA) Surveyor attempted to reach RN1 for a telephone interview on 08/13/2025 and left a voice message for a return call. However, RN1 did not return the call. In an interview with the Director of Nursing (DON) on 08/13/2025 at 1:35 PM, she stated when the facility admitted a resident, the nurse could either enter the resident's belongings in the computer or put the information on a paper list. She stated if the nurse documented the belongings on paper, it was scanned into the resident's chart. The DON further stated when there was misappropriation of property, it should be reported as quickly as possible. However, she stated she did not know the timeframe for the report. She stated she was not part of the on-call process. She stated the Administrator was responsible for reporting any allegation of abuse. In an interview with the Administrator on 08/13/2025 at 2:04 PM, she stated the process for reporting misappropriation of property on the weekends was to report to her as soon as possible. She stated she was not sure what the regulations stated about the time for reporting misappropriation of property, but she thought it was 24 to 48 hours. She stated she reported the incident as soon as she was made aware. She stated she remembered the case and could not validate that anyone took R74's money. She stated she also had all the residents in the area questioned, and no other resident reported missing money.</p>		