

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 245067	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 09/05/2024
NAME OF PROVIDER OR SUPPLIER The Emeralds at Faribault LLC		STREET ADDRESS, CITY, STATE, ZIP CODE 500 Southeast First Street Faribault, MN 55021	

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 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>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 48040</p> <p>Based on interview and document review, the facility failed to report an allegation of sexual abuse immediately (within two hours) to the State Agency (SA) for 1 of 3 residents (R1) reviewed for abuse.</p> <p>Findings include:</p> <p>R1's Admission Record dated 6/17/24, indicated R1's diagnoses included pain in left shoulder, weakness, history of falling and chronic kidney disease.</p> <p>R1's quarterly Minimum Data Set (MDS) dated [DATE] indicated R1 required extensive assistance with activities of daily living (ADLs) and had intact cognition.</p> <p>R1's care plan dated 6/17/24 indicated R1 was at risk for abuse with interventions including staff to follow facility vulnerable adult policies and procedures, and the State Agency will be notified of any suspected abuse.</p> <p>On 9/4/24 at 12:21 a.m. R1 stated he was sexually abused on 8/23/24 when a female nurse touched his penis inappropriately after putting a cream on his left hip. He was pissed off and not happy about the situation. He requested the nurse manager in his room and told him about the abuse. The following day, he went to the social worker's office to report the incident.</p> <p>On 9/4/24 at 1:13 p.m. registered nurse (RN-A) stated he became aware of the incident about two weeks ago when R1 told him nursing staff touched his penis inappropriately. He went straight to report it to social worker (SW)-A, but did not know if it was reported to the SA or not. The incident should have been reported immediately.</p> <p>On 9/4/24 at 1:43 p.m. SW-A stated R1 told her a nursing staff checked his junk on 8/23/24. When she asked R1 for more details, R1 pointed his fingers toward his penis and said he was inappropriately touched. She did not report the allegation of sexual abuse immediately to the SA.</p> <p>On 9/4/24 at 3:37 p.m. RN-B stated R1 fell on [DATE], and when law enforcement and the emergency medical services (EMS) arrived to take R1 to the hospital, he told law enforcement he had been sexually abused. Law enforcement told her about the sexual abuse allegation. She reported the sexual abuse allegation to the administrator right away over the phone.</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 The Emeralds at Faribault LLC		STREET ADDRESS, CITY, STATE, ZIP CODE 500 Southeast First Street Faribault, MN 55021	
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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>On 9/4/24 at 4:46 p.m. the administrator stated when RN-B told her of R1's sexual abuse allegations on 8/23/24, she directed RN-B to write her statement. The facility should report allegations of sexual abuse to the SA immediately. She acknowledged R1's sexual allegation was not reported within two hours.</p> <p>The facility Abuse Prohibition/Vulnerable Adult policy revised 3/24 directed facility staff, other residents, consultants, or volunteers' staff or other agencies serving the individual to promptly report, document and investigate all incidents of alleged or suspected abuse/neglect.</p>		

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(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (Each deficiency must be preceded by full regulatory or LSC identifying information)
<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>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 48040</p> <p>Based on interview and document review, the facility failed to ensure an allegation of sexual abuse was thoroughly investigated and adequate resident protection provided to ensure safety for 1 of 3 residents (R1) reviewed for abuse.</p> <p>Findings include:</p> <p>R1's Admission Record dated 6/17/24, indicated R1's diagnoses included pain in left shoulder, weakness, history of falling and chronic kidney disease.</p> <p>R1's quarterly Minimum Data Set (MDS) dated [DATE] indicated R1 required extensive assistance with activities of daily living (ADLs) and had intact cognition.</p> <p>R1's care plan dated 6/17/24 indicated R1 was at risk for abuse with instruction to staff to follow facility vulnerable adult policies and procedures.</p> <p>R1's medical record lacked evidence of the incident being investigated.</p> <p>On 9/4/24 at 12:21 a.m. R1 stated he was sexually abused on 8/23/24 when a female nurse touched his penis inappropriately after putting a cream on his left hip. He was pissed off and not happy about the situation. He requested the nurse manager in his room and told him about the abuse. The following day, he went to the social worker's office to report the incident.</p> <p>On 9/4/24 at 1:13 p.m. registered nurse (RN-A) stated he became aware of the incident about two weeks ago when R1 told him nursing staff touched his penis inappropriately. He went straight to report it to the social worker (SW)-A. The incident should have been investigated immediately.</p> <p>On 9/4/24 at 4:46 p.m. the administrator stated when RN-B told her of R1's sexual abuse allegations on 8/23/24, she directed RN-B to write her statement, and told the supervisor to initiate an investigation. She acknowledged R1's allegation of sexual abuse was not investigated.</p> <p>The facility Abuse Prohibition/Vulnerable Adult Abuse policy revised 3/24 directed facility staff, other residents, consultants, or volunteers' staff or other agencies serving the individual to promptly report, document and investigate all incidents of alleged or suspected abuse/neglect.</p>