

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 24E150	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 04/15/2024
NAME OF PROVIDER OR SUPPLIER Grand Avenue Rest Home		STREET ADDRESS, CITY, STATE, ZIP CODE 3956 Grand Avenue S0uth Minneapolis, MN 55409	

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 0568</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Properly hold, secure, and manage each resident's personal money which is deposited with the nursing home.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 49338</p> <p>Based on observation, interview, and document review the facility failed to maintain a system that assured full and complete accounting of resident personal funds entrusted to the facility which had the potential to affect 14 of 14 residents who had trust fund accounts. In addition, the facility failed to provide quarterly statements for individual resident trust fund accounts for 5 of 14 residents (R6, R9, R1, R10, R14) reviewed who had resident trust accounts accounts.</p> <p>Findings include:</p> <p>On 4/11/24 at 10:09 a.m., the director of nursing (DON) stated the facility kept petty cash withdrawn from the resident trust funds in two locations, a cash box for use during business hours and a cash box in the nursing cart for use after hours. The DON counted the cash in the business hours box which totaled \$293.59 and the cash in the after hours box which totaled \$99.05. The DON confirmed the combined total cash was \$392.64. The business hours box also contained receipts for two resident withdrawals from 4/10/24 totaling \$57. The DON stated these withdrawals had not yet been entered into the accounting system in the EHR and had not been subtracted from the total it reflected of \$485.84. Including these withdrawals, the total accounted for resident trust fund petty cash totaled \$449.64. The DON confirmed this total and confirmed that it was \$36.20 less than the total cash reflected in the EHR accounting system. The business hours cash box total of \$293.59 plus the \$57 in withdrawals totaled \$350.59. The DON confirmed this matched the total listed on the last cash box reconciliation sheet dated 4/8/24. The DON confirmed the after hours box total of \$99.05 was \$0.95 short of the total listed on the after hours cash box ledger. The DON confirmed a total of \$36.20 in cash noted in the EHR's resident trust fund cash balance was unaccounted for.</p> <p>The facility's electronic health record system (EHR) included tracking of resident trust fund accounts. The trust current account balance report dated 4/11/24, indicated the facility's on-hand balance of petty cash from the resident trust funds totaled \$485.84. The balance of resident trust funds in the bank totaled \$17,394.12. The combined total balance of all resident trust funds was \$17,822.96.</p> <p>In an interview on 4/11/24 at 4:07 p.m., the administrator confirmed the current balance of resident trust funds reflected in the EHR accounting system was \$485.84 in cash and \$17,394.12 in the bank. The administrator stated the cash in the business hours cash box and after hours cash box together would equal the cash balance listed in the EHR.</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 0568</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>A transaction history from 4/1/24 to 4/11/24 for the resident trust fund savings account (Grand Avenue Savings account), listed a current balance of \$21,783.88. A transaction history from 4/1/24 to 4/11/24 for the resident trust fund checking account (Grand Avenue Trust account), listed a current balance of \$2,636. The combined total resident trust fund balance dated 4/11/24, was \$24,419.88.</p> <p>In an interview on 4/15/24 at 10:22 a.m., the administrator confirmed the resident trust fund savings and checking accounts totaled \$24,419.88 on 4/11/24.</p> <p>In an interview on 4/15/24 at 10:36 a.m., the chief financial officer (CFO) stated that per the tracking of resident trust funds in the EHR the total resident trust fund on 4/11/24 was \$17,822.96 with \$17,394.12 in the bank. The CFO noted the total resident trust funds held by the facility should be the exactly what the EHR stated. The CFO confirmed that the total resident trust funds in the resident trust fund savings and checking bank account transaction records reflected a total balance of \$24,419.88 on 4/11/24. The CFO stated this was a difference of \$7,025.76 over from the balance of resident trust funds in the bank on 4/11/24 recorded in the EHR. The CFO stated there was a mess in the account and she was trying to find where it was, it was not correctly reconciled. The CFO noted the resident trust fund checking account transaction record included a deposit of \$1,536 on 4/10/24 for the rent of two residents that was made in error and should have been deposited in the facility's operations account. The CFO noted the resident trust fund savings account balance of \$21,783.88 on 4/11 included \$5,248.01 in uncleared checks. The CFO stated the total of the deposit in error and two uncleared checks, \$6,784.01, still left a difference of \$241.75 in funds that she was trying to find. The CFO stated transactions had been entered in the EHR incorrectly and she was going through past transactions to try to locate the difference in funds, she did not know what had happened. The CFO stated she was not aware of the missing \$36.20 in resident trust fund petty cash at the facility.</p> <p>The \$7,025.76 discrepancy between the resident trust fund total balances in the EHR and the bank account transaction statements in addition to the \$36.20 in petty cash totaled \$7,061.96 in resident trust funds not fully and completely accounted for.</p> <p>Facility policy titled Resident Trust Fund and Authorization Policy dated 10/6/22, included Grand Avenue Rest Home shall maintain resident funds in a collective, interest-bearing bank account under an established system of generally accepted accounting principles. A written record of all financial transactions involving a resident's personal funds will be maintained.</p> <p>QUARTERLY STATEMENTS</p> <p>The facility electronic health record (EHR's) trust current account balance report dated 4/11/24, indicated 14 residents had resident trust fund accounts with the facility. Residents included R1 through R14.</p> <p>R6's Minimum Data Set (MDS) dated [DATE], indicated R6 admitted to the facility on [DATE] with a diagnosis of schizoaffective disorder and had a Brief Interview for Mental Status (BIMS) score of 14 indicating intact cognition.</p> <p>R6's facesheet dated 4/15/24, noted R6's family member (FM)-A was her billing contact.</p> <p>(continued on next page)</p>		

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<p>F 0568</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>In an interview on 4/11/24 at 11:45 a.m., R6 stated she had a resident trust fund account and did not get quarterly statements for the account. R6 stated she had never gotten statements about her account. R6 identified that FM-A was responsible for her banking.</p> <p>In an interview on 4/11/24 at 2:35 p.m., FM-A stated she was R6's family member and payee and R6 had a trust fund account with the facility. FM-A stated she received billing statements in the mail with information about amounts owed and bills, but this did not include information about R6's trust fund account. FM-A stated she had never received an account statement with information such as transactions and balances.</p> <p>R9's MDS dated [DATE], indicated R9 admitted to the facility on [DATE] with a diagnosis of bipolar affective disorder and had a BIMS score of 15 indicating intact cognition.</p> <p>R9's facesheet dated 4/15/24, noted R9 was her own billing contact and responsible party.</p> <p>In an interview on 4/11/24 at 11:53 a.m., R9 stated she kept funds with the facility and hadn't gotten a quarterly statement in a long time. R9 stated she believed the last statement she received was last fall in October.</p> <p>R10's MDS dated [DATE], indicated R10 admitted to the facility on [DATE] with a diagnosis of schizoaffective disorder and had a BIMS score of 15 indicating intact cognition.</p> <p>R10's facesheet dated 4/15/24, noted R10 was her own billing contact and responsible party.</p> <p>In an interview on 4/11/24 at 1:05 p.m., R10 stated she had a trust account with the facility, did not get statements, and did not remember ever getting an account statement.</p> <p>R1's MDS dated [DATE], indicated R1 admitted to the facility on [DATE] with a diagnosis of schizophrenia and had a BIMS score of 15 indicating intact cognition.</p> <p>R1's facesheet dated 4/15/24, noted services agency (SA)-A was her billing contact and representative payee (entity responsible for managing a person's Social Security or Supplemental Security Income payments).</p> <p>In an interview on 4/11/24 at 1:17 p.m., R1 stated she had an account with the facility and didn't ever get statements about her money. She noted if she wanted to know how much money she had in the account, she would ask the administrator.</p> <p>In an interview on 4/15/24 at 11:12 a.m., payee manager (PM)-A for SA-A confirmed SA-A was the representative payee for R1. PM-A stated the last resident trust fund account statement from the facility received by SA-A was from October of 2023. PM-A identified a document from February 2024 but noted it only regarded R1's rent payment.</p> <p>R14's MDS dated [DATE], indicated R14 admitted to the facility on [DATE] with a diagnosis of paranoid schizophrenia and had a BIMS score of 15 indicating intact cognition.</p> <p>R14's facesheet dated 4/15/24, noted R14 was her own billing contact and responsible party.</p> <p>(continued on next page)</p>		

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<p>F 0568</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>In an interview on 4/11/24 at 1:23 p.m., R14 stated she had a trust fund account with the facility. R14 stated she did not get account statements from the facility, she did not remember ever getting an account statement from the facility, and that she would be the person to get a statement as she managed her own finances.</p> <p>In an interview on 4/11/24 at 4:07 p.m., the administrator noted facility policy is statements for resident trust funds should be sent out quarterly. The administrator stated quarterly statements were sent to representative payees or guardians if the resident was not responsible for their own funds or were hand delivered to the resident if they were responsible; statements were printed and mailed or handed to the appropriate person. The administrator noted statements were last provided for the facility's residents a few days ago and he or the DON were responsible for their dissemination and identified himself as the person ultimately responsible for the quarterly statements.</p> <p>In an interview on 4/15/24 at 10:00 a.m., the administrator noted the most recent quarterly resident trust fund account statements were sent to residents last week, were sent by accounting specialist (AS)-A, and were handed to residents or mailed to representative payees. The administrator did not know if there was documentation of this and identified himself as responsible for tracking and confirming it was done. The administrator noted the EHR showed when the statement reports were last run but identified that was not necessarily proof that the statements were sent; he relied on when the EHR showed the statements were run and word from AS-A that statements were given out. The administrator stated he had something in his email indicating the day the statements were sent out but did not provide this information.</p> <p>In an interview with the CFO and administrator on 4/15/24 at 10:36 a.m., the CFO stated she or AS-A generated the quarterly resident trust fund statements and she did not do anything else with them. The CFO noted she was aware there was an issue with handing them out due to staffing changes and didn't know if the most recent statements were ever distributed. The CFO noted the statements were last generated on 3/31/24 as reflected in the EHR but could not guarantee that the statements were sent out. The CFO stated she notified AS-A after the reports were generated. The administrator stated AS-A sent the statements to the DON to hand out, statements were mailed to guardians or responsible parties if a resident had one and the DON delivered the statements to residents who were their own person.</p> <p>In an interview on 4/15/24 at 11:01 a.m., the DON stated she did not hand out the quarterly statements, she was given certificates of rent paid to distribute. She did not recall handing out anything other than certificates of rent paid and handing out resident trust fund quarterly statements was not part of her routine duties.</p> <p>In an interview on 4/15/24 at 11:05 a.m., the administrator stated he communicated with AS-A who said the most recent statements were mailed out to responsible parties or mailed to the facility for distribution to residents.</p> <p>In an email communication from AS-A to the administrator dated 4/15/24 at 11:59 a.m., AS-A indicated, Yes, all in house [statements] were mailed to resident. Reminder, I do not control when the USPS delivers to the facility or once they are received I have no idea who handles out the mail . If the resident has a guardian or rep payee then the statement is mailed to the guardian/rep payee.</p> <p>(continued on next page)</p>		

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<p>F 0568</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Facility policy titled Resident Trust Fund and Authorization Policy dated 10/6/22, included A written record of all financial transactions involving a resident's personal funds will be maintained. The resident and/or resident's representative will receive a written quarterly statement, which will include all deposits and withdrawals.</p>		

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<p>F 0570</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Assure the security of all personal funds of residents deposited with the facility.</p> <p>49338</p> <p>Based on interview and document review, the facility failed to ensure the surety bond contained sufficient funds to insure and protect the total balance of the resident trust fund, which had the potential to affect 14 of 14 residents (R1 to R14) who had a personal trust account managed by the facility.</p> <p>Findings include:</p> <p>The transaction history for the facility's resident trust fund savings account from 4/1/24 to 4/11/24, identified the account balance on 4/11/24 was \$21,783.88.</p> <p>The transaction history for the facility's resident trust fund checking account from 4/1/24 to 4/11/24, identified the account balance on 4/11/24 was \$2,636.</p> <p>The combined total balance on 4/11/24 of the two resident trust fund accounts was \$24,419.88.</p> <p>The facility's surety bond (legally binding contract protecting the resident trust funds) with effective date of 9/9/23, was for a sum of \$20,000. The sum was inadequate to cover the balance of the resident trust fund on 4/11/24.</p> <p>During an interview on 4/15/24 at 10:36 a.m., the chief financial officer (CFO) stated the surety bond did not cover the balance of \$24,419.88 in the resident trust fund accounts on 4/11/24 and she realized the surety bond was not sufficient.</p> <p>Facility policy titled Resident Trust Fund and Authorization Policy dated 10/6/22, included Grand Avenue Rest Home maintains a surety bond to ensure the security of all personal funds deposited with the facility.</p>		