

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  345150	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED  03/28/2024
NAME OF PROVIDER OR SUPPLIER  Kenansville Rehabilitation and Healthcare Center		STREET ADDRESS, CITY, STATE, ZIP CODE 209 Beasley Street Kenansville, NC 28349	

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 0641</p> <p>Level of Harm - Potential for minimal harm</p> <p>Residents Affected - Some</p>	<p>Ensure each resident receives an accurate assessment.</p> <p><b>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 21483</b></p> <p>Based on record review and staff interviews, the facility failed to accurately code the Minimum Data Set (MDS) assessment for 2 of 18 resident assessments reviewed (Resident #72 and Resident # 5).</p> <p>The findings included:</p> <p>1. Resident # 72 was admitted to the facility on [DATE] with diagnosis that included diabetes and hypertension.</p> <p>Review of the nurse note dated 12/29/2023 indicated Resident # 72 was discharged home.</p> <p>Review of the discharge MDS dated [DATE] inaccurately coded Resident # 72 was discharged to acute hospital.</p> <p>During the interview on 03/27/2024 at 10:29 AM, Minimum Data set (MDS) nurse reviewed the discharge MDS and confirmed it was inaccurate. The MDS nurse explained it was coded in error as Resident # 72 was discharged home not to the acute hospital.</p> <p>During an interview on 03/27/2024 at 11:30 AM, Director of Nursing (DON) indicated that MDS should have been coded accurately reflecting that the resident was discharged to the community not to the acute hospital.</p> <p>The Administrator was interviewed on 03/27/2024 at 11:42 AM and she stated it was her expectation for MDS assessment to be coded accurately.</p> <p>43798</p> <p>2. Resident #5 was admitted to the facility on [DATE] with diagnoses of chronic diastolic heart failure, chronic respiratory failure, and chronic obstructive pulmonary disease (COPD).</p> <p>Resident #5's care plan created 1/27/24 indicated Resident #5 had oxygen therapy related to COPD. Interventions included administering oxygen per physician orders.</p> <p>Resident #5's physician's order dated 1/26/2024 indicated administer oxygen at 3 liters/minute via nasal cannula continuously.</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 0641</p> <p>Level of Harm - Potential for minimal harm</p> <p>Residents Affected - Some</p>	<p>Resident #5's admission MDS dated [DATE] did not indicate Resident #5 used oxygen.</p> <p>During an interview with the MDS Nurse on 3/27/24 at 3:04 PM, she stated that Resident #5 had an order for oxygen use, and it should have been coded on the admission MDS. She further stated that it was an oversight.</p> <p>An interview was conducted on 3/27/24 at 3:17 PM with the Director of Nursing (DON). The DON stated anything going on with the Resident should be included in the Resident ' s MDS and that oxygen should have been coded in Resident #5 ' s admission MDS because there was an order for oxygen administration.</p> <p>During an interview on 3/27/24 at 3:22 PM, the facility Administrator verbalized oxygen should have been coded on Resident #5 ' s admission MDS since she was receiving oxygen.</p>