

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 345457	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 05/09/2024
NAME OF PROVIDER OR SUPPLIER Belaire Health Care Center		STREET ADDRESS, CITY, STATE, ZIP CODE 2065 Lyon Street Gastonia, NC 28052	

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 0644</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Coordinate assessments with the pre-admission screening and resident review program; and referring for services as needed.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 48006</p> <p>Based on record reviews and staff interviews the facility failed to ensure a Preadmission Screening and Resident Review (PASRR) application was completed for a resident admitted with mental health diagnoses for 2 of 2 residents (Resident #12 and #55) reviewed for PASRR.</p> <p>The findings included:</p> <p>1. Resident #12 was admitted to the facility on [DATE] with a diagnosis that included, in part, schizoaffective disorder.</p> <p>Review of Resident #12's medical record revealed the resident had a PASRR level I completed prior to her admission to the facility. The resident had a history of schizoaffective disorder and major depressive disorder as part of her admission. No PASRR level II had been completed per review of Resident #12's medical record.</p> <p>Review of the Minimum Data Set (MDS) dated [DATE] revealed Resident #12 was severely cognitively impaired, and she had no mood or behaviors. The MDS was not coded for a level II PASRR.</p> <p>Resident #12's care plan dated 10/05/2023 revealed she was care planned for psychotropic medications, behavior related to schizoaffective disorder, anxiety disorders, and psychiatric services. Interventions included to administer medications as ordered, assure the resident that they were safe if they became distressed, continue psychiatric services as ordered, redirect resident to subjects that matter to her if behaviors occurred, and to take the resident to a quiet place if she became overstimulated.</p> <p>Review of Resident #12 medical record revealed she was followed by psychiatric services for medication management.</p> <p>During an interview on 05/08/2024 at 6:30 PM with the Admission Director, she revealed she received the resident's hospital information which included the PASRR number. She stated that the PASRR number was entered into the resident's chart and the Social Worker handled the PASRR process after that.</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 0644</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>An interview was conducted on 05/09/2024 at 10:38 AM with the Regional Discharge Planning Specialist. The Regional Discharge Planning Specialist stated that the facility had recently hired a Social Worker, but the position had been vacant for about one month. The Regional Discharge Planning Specialist further stated that a PASRR application should be completed upon a resident's admission with a serious mental health diagnosis, when there was a change in condition or behavior, and when a resident had received a new mental health diagnosis. She also revealed that based on Resident #12's admission diagnoses of schizoaffective disorder and major depression, paperwork for a PASRR level II referral should have been completed.</p> <p>Unsuccessful attempts were made to contact the previous Social Worker.</p> <p>An interview was conducted on 05/09/24 at 11:00 AM with the Administrator. The Administrator revealed a PASRR application should be completed for any resident with a serious mental health diagnosis or anytime a resident has had a change of condition or a newly added mental health diagnosis. He stated that based on Resident #12's diagnoses of schizoaffective disorder and major depressive disorder, a PASRR level II referral should have been completed.</p> <p>2. Resident #55 was admitted on [DATE] with diagnoses that included, in part, post-traumatic stress disorder (PTSD), major depressive disorder (MDD), anxiety disorder, and suicidal ideations.</p> <p>Review of Resident #55's medical record revealed the resident had a PASRR level I completed prior to his admission to the facility. The resident had a history of post-traumatic stress disorder (PTSD), major depressive disorder, anxiety disorder, and suicidal ideations upon admission to the facility. No PASRR level II had been completed per review of Resident #55's medical record.</p> <p>Review of the quarterly Minimum Data Set (MDS) dated [DATE] reveal Resident #55 had intact cognition. The MDS also revealed Resident #55 had no mood or behaviors for the 7-day look back period. The MDS was not coded for a level II PASRR.</p> <p>Review of Resident 55's care plan dated 01/26/2024 revealed he had a risk for behaviors related to depressive disorder, anxiety, and use of psychotropic medications. Interventions included to administer medications as ordered, assure the resident that they were safe if they became distressed, continue psychiatric services as ordered, redirect resident to subjects that matter to him if behaviors occurred, and to take the resident to a quiet place if he became overstimulated.</p> <p>Resident #55 received psychiatric services for medication management beginning 01/29/2024 and continued on psychiatric service case load during his stay at the facility.</p> <p>An interview was conducted with Resident #55 on 05/06/2024 at 2:34 PM. Resident #55 stated that he had mental health issues for quite a long while. He also revealed that he served in the military and most of his mental health issue resulted from his military service. He stated that he had been doing much better since being admitted to the facility and seeing the psychiatrist.</p> <p>During an interview on 05/08/2024 at 6:30 PM with the Admission Director, she revealed she received the resident's hospital information which included the PASRR number. She stated that the PASRR number was entered into the resident's chart and the Social Worker handled the PASRR process after that.</p> <p>(continued on next page)</p>		

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