STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	365329	A. Building B. Wing	05/14/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
Marion Nursing & Rehab	175 Community Drive Marion, OH 43302

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 0628 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	Provide the required documentation or notification related to the resident's needs, appeal rights, or bed-hold policies. **NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on record review, staff interviews, and review of facility policy, the facility failed to ensure the bed hold included pricing information and also failed to provide a reason for transfer/discharge notices to the resident/representative and the Ombudsman. This affected three Residents (#77, #78, and #79) of three reviewed for discharge planning.Findings include:1. Review of the medical record for Resident #77 revealed an admission date of 03/22/26. Diagnoses included toxic effect of metals, diabetes, acute kidney failure, and muscle weakness. Review of the Minimum Data Set (MDS) assessment dated [DATE] revealed Resident #77 was cognitively impaired and required staff assistance for activities of daily living. Review progress notes dated 03/17/26 revealed the resident was being transferred by staff and had seizure like activity. He was lowered to the ground and labs were obtained and identified a lithium toxicity level. The physician ordered intravenous (IV) fluids to be started and to recheck labs in six hours. The staff were unable to get labs drawn and after two attempts, made the decision to send the resident to the hospital for emergency care. Review of the bed hold notice dated 03/17/26 revealed the residents family gave verbal authorization for the bed to be held. The form did not include any pricing information and the price was left blank. The form did not indicate if the residents spouse was informed of the cost for holding the bed. Review of the ombudsman notification dated 03/17/26 revealed the form instructions stated to send this completed form along with a copy of the discharge notice to the Ombudsman. The ombudsman notification form also stated, this form does not replace a written discharge notice used to meet discharge notification requirements to the residents nor does it serve as evidence a discharge notice was sent to the Ombudsman. The form only stated the resident was sent to the hospital and included the name and contact information for the Administrator. There was no documented evidence that a discharge notice was provided to the resident/representative and the Ombudsman. Interview on 05/14/26 at 1:42 P.M. with Social Services Representative #44 confirmed the bed hold notice did not give pricing information. She reported she took over the task of the bed hold notices and was instructed to not fill in the pricing information. She also confirmed she had never provided the reason for the transfer/discharge notice to the resident/representative and/or Ombudsman. 2. Review of the medical record for Resident #79 revealed an admission date of 03/04/26. Diagnoses included major depressive disorder, end stage renal disease, diabetes, and pain in her joints. Review of the Minimum Data Set (MDS) assessment dated [DATE] revealed Resident #79 was (continued on next page)

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE

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F 0628 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	cognitively intact and required moderate assistance from staff members for activities of daily living. Review progress notes dated 03/16/26 reveled the resident was assessed for a change in condition (nausea and vomiting) and requested transfer to the hospital. Review of the bed hold notice dated 03/16/26 revealed the residents family gave verbal authorization for the bed to be held. The form did not include any pricing information, and the price was left blank. The form did not indicate if the resident's spouse was informed of the cost for holding the bed. Review of the ombudsman notification dated 03/18/26 revealed the form instructions stated to send this completed form along with a copy of the discharge notice to the Ombudsman. The ombudsman notification form also stated, this form does not replace a written discharge notice used to meet discharge notification requirements to the residents nor does it serve as evidence a discharge notice was sent to the Ombudsman. The form only stated the resident was sent to the hospital and included the name and contact information for the Administrator. There was no documented evidence that a discharge notice was provided to the resident/representative and the Ombudsman. Interview on 05/14/26 at 1:42 P.M. with Social Services Representative #44 confirmed the bed hold notice did not give pricing information. She reported she took over the task of the bed hold notices and was instructed to not fill in the pricing information. She also confirmed she had never provided the reason for the transfer/discharge notice to the resident/representative and/or Ombudsman. Interview on 05/14/26 at 3:00 P.M. with the Administrator confirmed the bed hold notice did not contain any information on pricing for the bed hold process and also confirmed facility did not have any additional record for the reason for transfer notification documents. 3. Review of the medical record for Former Resident #78 revealed the resident was admitted to the facility on [DATE] and had diagnosis that included dementia, psychotic disturbance, and congestive heart failure. Resident #78 was discharged on 02/24/26 due to an emergent health condition. Review of the medical record for Resident #78 found a bed hold notice dated 02/24/26 that listed hospital stay as the reason for leaving. The bed hold notice did not contain prices for the room and board rate. The bed hold notice was documented as consented by the Resident Representative of Resident #78. There was also no documented evidence that a discharge notice was provided to the resident/representative and the Ombudsman. Interview on 05/14/26 between 1:41 P.M. and 2:01 P.M with Social Services Representative (SSR) #44 confirmed there were no prices on the bed hold form. SSR #44 also stated that it was not believed a discharge notice was necessary because Resident #78 left due to an emergent health condition. Interview on 05/14/26 at 2:40 P.M. with the Administrator confirmed the facility did not have evidence of a transfer notice or bed hold notice with prices. Review of the facility policy titled Transfer or Discharge Notice (revised December 2016) states the facility shall provide a resident or resident's representative notice of a transfer or discharge as soon as practicable if an immediate transfer or discharge is required (due to) resident medical needs. The policy states a copy of this notice will be sent to the Office of the State Long-Term Care Ombudsman. Review of the facility policy titled Bed Holds and Returns (revised May 2025) states the facility will (continued on next page)

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F 0628 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	provide written information prior to transfers and therapeutic leaves to the resident and the resident's representative that explains the per diem rate required to hold a bed. This deficiency represents noncompliance investigated under Complaint Number 2804250.