

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 365426	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 03/26/2026
NAME OF PROVIDER OR SUPPLIER Arbors West		STREET ADDRESS, CITY, STATE, ZIP CODE 375 West Main Street West Jefferson, OH 43162	
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 0583</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Keep residents' personal and medical records private and confidential.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on observations , interviews and review of the policy, the facility failed to ensure the confidentiality and privacy of one resident (#10) of three (#20 and #22) residents reviewed for abuse. The census was 72. Findings include:Review of medical record for Resident #10 revealed admission date of 04/15/20 diagnoses included Huntington's disease, anxiety and protein calorie malnutrition. Review of the quarterly Minimum Data Set (MDS) dated [DATE] revealed Resident #10 was cognitively intact with a Brief Interview of Mental Status (BIMS) score of 13 out of 15. The resident was dependent on one person to assist her with activities of daily living.Review of the Self-Reported Incident #272022 revealed on 03/12/26 the Activities Director #100, Business Office Manager #105, and Human Resource Manager #135 reported to the Administrator and the Director of Nursing, Resident #10 was video recorded by Certified Nursing Assistant (CNA) #110 while participating in an activity event, without her consent. Staff Members, CNA #115 and CNA #120 witnessed CNA , #110, take the video recording and did not report it. All three CNAs were observed outside of the dining room. Resident #10's Power of Attorney (POA) was notified and confirmed she did not give anyone at the facility authorization to record or take photos of Resident #10.Review of the Incident Report #1314 dated 3/12/26 at 3:20 P.M. revealed two residents were in the dining room doing chair exercises when three staff members walked by and witnessed a resident lifting her leg up into the air above her head. One of the staff members took out her cellphone and proceeded to record resident doing the chair exercises.Review of statements on 03/12/26 from CNA #112 and #115 confirmed they stopped and watched Resident #10 doing her exercises and witness CNA #110 take a video.Review of CNA #110's statement dated 03/12/26 confirmed she was walking down the hall and saw Resident #10 with her legs over her head and pulled her cellphone out to take a picture of Resident #10.Interview with the Activities Director #100 on 3/25/26 at 12:37 P.M. confirmed he heard aides laughing in the hallway by his door and the dining room, he walked out and observed three aides together laughing at something on a cell phone, he told them to break it up and move on. Interview on 03/25/26 at 12:54 P.M. with Business Office Manager #105 confirmed she was walking down the hall saw the CNAs standing outside the dining room laughing at their phone and saw they had a picture of Resident #10 with her leg pointed straight up, she immediately broke up the group went to the office and told the Administrator who took care of it. Interview with Resident #10's Power of Attorney (POA) on 03/25/26 at 1:29 P.M. to 1:53 P.M. confirmed the facility called her and told her that a video was taken of Resident #10 without her knowledge and confirmed she has not signed an authorization for the facility employees to take pictures of Resident #10.Interviews with CNA #115 on 03/25/26 at 1:20 P.M. and CNA #120 on 03/25/26 at 2:49 P.M. confirmed they were standing in the dining room watching Resident #10 doing her exercises and witnessed CNA #110 take a video of Resident #10 .Interview on 03/25/26 at 3:10 P.M. with the Admissions coordinator #125 confirmed Resident #10 does not have a photo release authorization signed to allow photos or videos to be taken of Resident #10.Observation of a video with the Administrator and the DON on 03/26/26 at 10:49 AM confirmed a video was taken of Resident #10 by CNA #110 without prior authorization on 03/12/26.Review of facility policy titled Social Media Policy , not dated , revealed Employees are absolutely prohibited (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 0583</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>from using social media in any way that would violate Health Information Privacy and Portability Act (HIPAA) or otherwise disclose or compromise residents' Personal Health Information (PHI). Employees are not to use social media to post, upload, send or otherwise share or disclose a photo or video of any resident without prior written permission of the resident or the resident's authorized agent as required by applicable law. This includes photos and videos of residents participating in Company-sponsored activities or events. Use of personal Electronic Devices including , but not limited to , cellular phones, Personal Data Assistants (PDAs), electronic games, MP3 players, IPODS, CD/CVD players and pagers will not be allowed in the work area without written approval by the administrator.</p>		