

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  366158	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED  08/19/2024
NAME OF PROVIDER OR SUPPLIER  The Pavilion Rehabilitation and Nursing Center		STREET ADDRESS, CITY, STATE, ZIP CODE 13900 Bennett Road North Royalton, OH 44133	

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 0689</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Ensure that a nursing home area is free from accident hazards and provides adequate supervision to prevent accidents.</p> <p><b>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY**</b> 36650</p> <p>Based on medical record review, observation, resident and staff interview and policy review, the facility failed to ensure residents were adequately supervised while smoking and failed to ensure smoking materials were maintained in a safe manner. This affected one of one resident (Resident #34) reviewed for smoking. The facility census was 40.</p> <p>Findings include:</p> <p>Review of the medical record for Resident #34 revealed an admitted [DATE]. Diagnoses included traumatic brain injury and hemiplegia. Resident #34 was identified as a smoker.</p> <p>Review of the quarterly Minimum Data Set (MDS) assessment dated [DATE] revealed Resident #34 had intact cognition, had no behaviors, and required set up assistance from staff with personal hygiene.</p> <p>Review of the behavior note dated 08/11/24 revealed the smell of cigarette smoke was present outside of the resident's room in the hallway. The nurse knocked on the resident's door and resident permitted entry, and cloud of cigarette smoke observed. The nurse inquired if the resident was smoking and the resident replied with expletive, I can do what I want to. Resident non-receptive to re-education/smoking policy. Resident #34 proceed to slam the door closed.</p> <p>Review of the progress note dated 08/15/24 revealed a small plate with half a cigarette on it and a lighter by his window that was partly open. Resident #34 stated he was smoking in his room. The nurse educated that cigarettes were supposed to be locked up in the box along with lighter. Resident #34 stated he was not going to turn in cigarettes.</p> <p>Review of the care plan created on 08/15/24 revealed Resident #34 has behavior problems related to hides cigarettes on self and smokes in room at times. There were no interventions to address these two behaviors.</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 0689</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Observation and interview on 08/15/24 at 11:55 A.M. of Resident #34's room with Licensed Practical Nurse (LPN) #301 revealed a small plate being used as an ash tray seating on the windowsill, with the window open four inches and the screen torn. There were two smoked cigarette butts on the plate and a lighter sitting on the windowsill beside the small plate. Resident #34 stated he did not have any other smoking paraphernalia in his room. Resident #34 stated he does smoke in his room sometimes, and he knows he was not allowed to smoke in his room. LPN #301 removed the plate with the cigarette butts on it and lighter from Resident #34's room.</p> <p>Interview on 08/15/24 at 12:04 P.M. with LPN #301 stated Resident #34 has been caught smoking in his before and has been educated on not smoking in his room.</p> <p>Review of the facility policy titled Smoking Policy, dated 07/2017 revealed smoking is only permitted in designated resident smoking areas, which are located outside of the building.</p> <p>This was an incidental finding discovered during the course of the complaint investigation.</p>		