

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 366457	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 04/15/2026
NAME OF PROVIDER OR SUPPLIER The Laurels of Gahanna		STREET ADDRESS, CITY, STATE, ZIP CODE 5151 North Hamilton Road Columbus, OH 43230	
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 0551 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	Give the resident's representative the ability to exercise the resident's rights. **NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on record review, staff interview, resident and power of attorney (POA) interview, contractor interview, review of POA document, and facility contract review, the facility failed to ensure the decisions of the resident representative (POA) were given the same consideration as if the resident made the decision themselves. This affected one (Resident #95) of three residents reviewed for resident representative involvement in facility appointed contracted services. The facility census was 95. Findings include: Review of the medical record for Resident #95 revealed an admission date of 09/09/25. Diagnoses included cognitive communication deficit, history of transient ischemic attack and cerebral infarction, and end stage renal disease. Review of the quarterly Minimum Data Set (MDS) 3.0 assessment dated [DATE] Resident #95 had a Brief Interview for Mental Status (BIMS) score of 11, indicating she had moderate cognitive impairment. Review of the face sheet for Resident #95 dated 03/12/26 revealed a POA was not listed for the resident. Review of Resident #95's record revealed the resident was appointed a healthcare POA on 08/19/25 and financial POA on 09/21/25. Both documents appointed the same individual as POA. The Financial POA document revealed the POA was effective immediately. Review of the admission Agreement for Resident #95 revealed the document was signed by the residents' POA and not the resident. Interview on 04/15/26 at 12:12 P.M. with Resident #95's POA revealed the POA received a telephone call from Resident #95 on 03/19/26 reporting an individual (Contract Representative (CR) #312) was present in her room. CR #312 had Resident #95 sign paperwork and the resident was concerned stating she did not understand what she was signing. The POA stated they spoke to CR #312 and identified them as being from a contractor that assisted with Medicaid applications. The POA reported informing CR #312 of being Resident #95's POA, the resident was unable to sign paperwork for themselves, and requested that the paperwork be left in the residents' room to be reviewed by the POA and the resident. The POA reported no knowledge of the contracted company prior to this interaction and had not asked for the facility to assist with reapplying for Medicaid for Resident #95. The POA received a notification from Resident #95's insurance that an individual was requesting financial information for insurance regarding the resident signed document dated 03/19/26. The POA further revealed going to one of Resident #95's banks out of concern and was notified by them that they had also received a request asking for Resident #95's banking information. Interview on 04/15/26 at 1:06 P.M. with Float Business Office Manager (BOM) #315 confirmed Resident #95 had a POA. BOM #315 further confirmed the facility has a contract with the company CR #312 was affiliated with. BOM #315 revealed the facility made referrals to the contractor to assist the resident and/or POA with applying to or renewing Medicaid for residents residing in the facility and confirmed Resident #95 was referred to them. BOM #315 confirmed a face sheet was provided to CR #312 dated 03/12/26 and confirmed the face sheet did not have a POA identified. BOM #315 confirmed CR #312 met with Resident #95 on 03/19/26. BOM #315 confirmed the POA was not present during the time CR #312 was meeting with Resident #95. Additional interview on 04/15/26 at 3:20 P.M. with Resident #95's POA revealed the POA was not notified of the referral made to the contractor affiliated with CR #312 nor notified that CR #312 would be coming to meet with Resident #95. The POA further revealed they did not sign a (continued on next page)		

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 0551</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>consent or additional paperwork to work with the contractor affiliated with CR #312. Interview on 4/15/26 at 4:00 P.M. with Resident #95 revealed the has significant memory issues, inconsistent recall, and missing details, and reported she communicated these limitations to the contractor multiple times on 03/19/26. Resident #95 informed the contractor she was unable to sign the paperwork herself and her POA needed to review and sign it. She reported that, despite this, she ended up signing the documents without understanding what she was signing. The resident recalled the contractor asking questions about her past work history and whether she had life insurance and kept probing for additional information while typing on a computer. Resident #95 was unsure of the accuracy of information she provided and repeatedly told him she could only provide limited details. Resident #95 reported she was very unwell during the interaction with the contractor and was not herself. She stated her POA hadn't asked for assistance with the application, and she wanted her POA to review all paperwork and contract to ensure she was not making any poor decisions. Resident #95 reported it was later learned that the contractor contacted her bank and previous employers, reportedly seeking information regarding length of employment, pay, and position. Resident #95 was unaware that the contractor had her face sheet prior to meeting her and stated she felt unhappy and uneasy knowing they had her personal information without her knowledge. Interview on 04/15/26 at 4:04 P.M. with CR #312 confirmed the contractor they were affiliated with was contracted with the facility and they assist the facility's residents, when referred, with Medicaid applications. CR #312 reported the facility submits a referral for a resident, provides the resident's face sheet, and what month Medicaid was needed to begin. CR #312 reported if a resident has a POA or a Legal Guardian, this was usually notated on the residents' face sheet. CR #312 confirmed meeting with Resident #95 independently on 03/19/26 and was unable to confirm whether a POA was identified on the resident's face sheet. CR #312 revealed prior to appointments they will attempt to reach out to family or designated people but stated they did not speak to Resident #95's POA prior to the appointment. CR #312 reported Resident #95 was able to answer identification questions and seemed knowledgeable about their healthcare and financial information and therefore believed the resident was able to sign their own paperwork. CR #312 confirmed the POA was called by the resident during the time they were together on 03/19/26 and confirmed the POA identified themselves as the POA and stated the resident should not be signing their own paperwork. The facility was unable to provide documentation of signed consent by the POA for Resident #95 to work with the contractor. Review of the contract, not dated, between the facility and CR #312's affiliated contractor confirmed there was an active contract between both parties. The contractor offers Medicaid processing and filing services. This deficiency represents non-compliance investigated under Master Complaint Number 2974805.</p>		

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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>Keep residents' personal and medical records private and confidential.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on record review, resident and Power of Attorney (POA) interview, staff interview, contractor interview, admission documentation review, contractor documents, and facility policy review, the facility failed to ensure a resident had the right to personal privacy and confidentiality of his or her personal and medical records. This affected one (Resident #95) of three residents reviewed for HIPAA. The facility census was 95. Findings include: Review of the medical record for Resident #95 revealed an admission date of 09/09/25. Diagnoses included cognitive communication deficit, history of transient ischemic attack and cerebral infarction, and end stage renal disease. Review of the quarterly Minimum Data Set (MDS) 3.0 assessment dated [DATE] Resident #95 had a Brief Interview for Mental Status (BIMS) score of 11, indicating she had moderate cognitive impairment. Review of Resident #95's record revealed the resident was appointed a healthcare POA on 08/19/25 and financial POA on 09/21/25. Both documents appointed the same individual as POA. The Financial POA document revealed the POA was effective immediately. The facility was unable to provide documentation of consent by the POA for Resident #95's information to be shared with Contract Company #500. Interview on 04/15/26 at 3:20 P.M., Resident #95's POA confirmed she did not provide consent for Resident #95's face sheet to be shared with Contract Company #500. The POA stated Contract Company reached out to the resident's bank and insurance company without her consent. Interview on 04/15/26 at 1:06 P.M. with Float Business Office Manager (BOM) #315 confirmed Resident #95 had a POA. BOM #315 confirmed a face sheet was provided to Contract Company #500 on 03/12/26 without the consent of the POA to provide HIPAA related information to outside provider. Interview on 4/15/26 at 4:00 P.M. with Resident #95 revealed she has significant memory issues, inconsistent recall, and missing details, and reported she communicated these limitations to the contractor (CR #312) multiple times. Resident #95 was unaware that the contractor (CR #312) had her face sheet prior to the meeting (03/19/26) and stated she felt unhappy and uneasy knowing they had her personal information without her knowledge. Interview on 04/15/26 at 4:04 P.M. with CR #312 confirmed his company received Resident #95's face sheet from the facility. Review of the facility policy titled HIPAA (Health Insurance Portability and Accountability Act) Policy Regarding Use and Disclosure of PHI for Treatment, effective 10/11/2021, revealed the facility may not disclose an individual's PHI (protected health information) without written authorization. This deficiency represents non-compliance investigated under Master Complaint Number 2974805.</p>		