

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 415044	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 08/22/2024
NAME OF PROVIDER OR SUPPLIER Friendly Home Inc The		STREET ADDRESS, CITY, STATE, ZIP CODE 303 Rhodes Avenue Woonsocket, RI 02895	
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 0684</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Provide appropriate treatment and care according to orders, resident's preferences and goals.</p> <p>46338</p> <p>Based on record review and staff interview, it has been determined that the facility failed to ensure that a resident received treatment and care in accordance with professional standards of practice for 1 of 1 resident reviewed relative to skin assessment, Resident ID #1.</p> <p>Finding are as follows:</p> <p>Record review of the facility policy titled Skin Protocol, states in part .4. The weekly skin observation will be done for every resident .7. Monitoring weekly observation will be done and maintained in the residents' medical record .</p> <p>Record review of a community reported complaint sent to the Rhode Island Department of Health on 8/16/2024 alleges that Resident ID #1 was hospitalized for wounds and a change in mental status. Additionally, the report alleges that the resident was neglected while at a nursing home due to the wounds that were not appropriately cared for.</p> <p>Record review revealed Resident ID #1 was readmitted to the facility in August of 2024 with diagnoses including, but not limited to, tinea cruris (a contagious fungal infection that affects the skin) and type 2 diabetes.</p> <p>Record review revealed a physician's order dated 5/10/2023 for a weekly body audit every Friday on the 3:00 PM to 11:00 PM shift.</p> <p>During a surveyor interview on 8/21/2024 at approximately 1:20 PM with the Director of Nursing Services (DNS), he revealed that the facility's weekly skin checks are documented in the progress notes and titled Weekly Body Audit.</p> <p>Review of a nursing progress note dated 5/10/2024 revealed a, Weekly Body Audit with the following indications: Red areas on the thighs with protective ointment for treatment due to the excoriation (impairment) on the buttocks.</p> <p>Additional review of the nursing progress note failed to reveal the weekly body audit documented as ordered on the following dates:</p> <p>5/17/2024</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 0684</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>5/24/2024</p> <p>5/31/2024</p> <p>6/5/2024</p> <p>6/12/2024</p> <p>6/19/2024</p> <p>6/26/2024</p> <p>which is a total of 7 weeks of missed skin audits.</p> <p>Record review of the Treatment Administration Record (TAR) for the months of May and June of 2024 revealed the weekly body audits were signed off as completed by the nurses on the above-mentioned dates.</p> <p>Although there is no evidence of the weekly body audits on the above-mentioned dates, review of a progress note dated 6/21/2024 indicated that the resident was seen by the wound physician for worsening wounds with a new order for Silver and Zinc to the buttocks.</p> <p>Review of the weekly body audit dated 6/28/2024 revealed in part, .Open areas buttocks with treatment in place .Treatment to buttocks ongoing, seen by wound [physician] today</p> <p>Record review of the wound physician's document titled wound evaluation and management summary dated 7/5/2024 revealed the following:</p> <ul style="list-style-type: none"> - a non-pressure wound of the left buttock measuring 9 x 2.2 x 0.1 cm (centimeter) - a non-pressure wound of the right buttock measuring 1.4 x 1.2 x 0.1 cm - a stage 2 pressure wound on the coccyx (triangular bone area at the base of the spinal column) which measured 5.4 x 0.4 x 0.1 cm. <p>During a surveyor interview on 8/22/2024 at approximately 11:52 AM with the DNS, he acknowledged that the weekly skin audits tasks were not completed, as ordered.</p>		