

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 415063	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 08/22/2024
NAME OF PROVIDER OR SUPPLIER Bayview Rehabilitation and Healthcare Center		STREET ADDRESS, CITY, STATE, ZIP CODE 860 North Quiddnessett Road North Kingstown, RI 02852	
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 0600 Level of Harm - Actual harm Residents Affected - Few	<p>Protect each resident from all types of abuse such as physical, mental, sexual abuse, physical punishment, and neglect by anybody.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 47279</p> <p>Based on surveyor observation, record review, and staff interview, it has been determined that the facility failed to protect the residents' right to be free from abuse for 1 of 1 resident reviewed for abuse, Resident ID #46.</p> <p>Findings are as follows:</p> <p>Review of a facility policy titled, Abuse, Neglect, Exploitation and Misappropriation Prevention Program, dated October of 2022 states in part, .Residents have the right to be free from abuse .This includes but is not limited to .physical abuse .Protect residents from abuse .by anyone including .other residents .</p> <p>Review of a facility reported incident submitted to the Rhode Island Department of Health on 5/8/2024 alleges that Resident ID #42 approached Resident ID #46, began yelling at him/her and hit his/her left arm several times which resulted in a skin tear.</p> <p>Record review revealed that the victim, Resident ID #46, was admitted to the facility in November of 2023 with a diagnoses including, but not limited to, dementia.</p> <p>Review of a Quarterly Minimum Data Set (MDS) assessment dated [DATE] revealed a Brief Interview for Mental Status (BIMS) score of 4 out of 15, indicating severe cognitive impairment.</p> <p>Record review revealed that the perpetrator, Resident ID #42, was admitted to the facility in June of 2023 with diagnoses including, but not limited to, cerebral infarction (stroke), dysarthria (difficulty speaking,) and cognitive social or emotional deficits following a stroke.</p> <p>Record review of a progress note dated 5/8/2024 at 10:38 PM, revealed that Resident ID #46 hit Resident ID #42. The note further indicates that Resident ID #46 was sitting quietly in his/her wheelchair when Resident ID #42 suddenly began to yell at Resident ID #46 and proceeded to hit him/her, striking Resident ID #46 on his/her left arm. Resident ID #46 sustained 2 skin tears which measured 1.0 centimeter (cm) by 0.5 cm and 0.5 cm by 0.5 cm.</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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F 0600 Level of Harm - Actual harm Residents Affected - Few	<p>Review of the facility's 5-Day investigation report titled, Conclusion dated 5/14/2024, revealed that Resident ID #42 had a BIMS score of 15 out of 15, indicating intact cognition. Additionally, it indicated that Resident ID #42 has impulse control issues following his/her stroke and became frustrated when Resident ID #46 did not move his/her feet.</p> <p>During a surveyor interview on 8/21/2024 at 10:22 AM with Nursing Assistant, Staff L, she revealed that she witnessed the incident between Resident ID #s 42 and 46. She indicated that Resident ID #42 is alert and oriented and can be verbally aggressive towards others. She further indicated that Resident ID #46 was sitting in front of the Nurse's station when Resident ID #42 began yelling at Resident ID #46 and then struck Resident ID #46 approximately 3 times in his/her arm, resulting in skin tears. Lastly, she indicated that the incident was unprovoked.</p> <p>During a surveyor interview on 8/21/2024 at 1:36 PM with the Director of Nursing Services, she revealed that Resident ID #42 can be verbally aggressive at times due to his/her speech impairment. Additionally, she acknowledged that Resident ID #46 was not kept free from physical abuse.</p>		