

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  425139	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED  02/10/2026
NAME OF PROVIDER OR SUPPLIER  Seneca Health & Rehabilitation Center		STREET ADDRESS, CITY, STATE, ZIP CODE  140 Tokeena Rd Seneca, SC 29678	
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 0602</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Protect each resident from the wrongful use of the resident's belongings or money.</p> <p><b>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY**</b> Based on interview, record review, and review of facility policy, the facility failed to ensure that Resident (R)2 had the right to be free from misappropriation of property. Specifically, R2 had his bank account/credit card compromised by Certified Nursing Assistant (CNA)1. This incident had the potential to affect all residents in the care of CNA1. For 1 of 4 residents reviewed for abuse/neglect/misappropriation of property. Findings include:Review of the facility policy titled Abuse, Neglect, and Exploitation last revised in 2025 revealed, It is policy of this facility to provide for the health, welfare, and rights of each resident by developing and implementing written policies and procedures that prohibit and prevent abuse, neglect, exploitation and misappropriation of resident property. Exploitation is defined as means taking advantage of a resident for personal gain through manipulation, intimidation, threats, or coercion. Misappropriation of resident property is defined as misplacement, exploitation, or wrongful, temporary or permanent, use of a resident's belongings or money without the resident's consent.Review of R2's Face Sheet revealed he was admitted to the facility on [DATE], with diagnoses including but not limited to displaced fracture of right tibia, muscle weakness, dysphagia, and cognitive communication deficit. Further review of R2's Face Sheet revealed the resident was discharged from the facility on 11/03/25.Review of R2's admission Minimum Data Set (MDS) with an Assessment Reference Date (ARD) of 10/19/25, revealed that R2 had a Brief Interview for Mental Status (BIMS) score of 13 out of 15, which indicated that R2 was cognitively intact.Review of R2's Account/Payment Summary from 10/27/25 - 11/26/25, revealed a total balance of \$593.60. Further review of the summary revealed three purchases during this time period. On 11/04/25 - [NAME] Sports for \$66.76; on 11/04/25 - [NAME] Sports for \$58.18; and on 11/06/25 - Nike.com for \$211.66. Review of a screenshot of a text message that CNA1 sent to the Assistant Director of Nursing (ADON) at the facility on 02/06/26 at 4:52 PM, revealed Hey [ADON] it's [CNA1]. I see that my suspension was extended and that's fine, I'll go ahead and make the decision for you. You don't have to call me back because I QUIT!!! I've given hard work, dedication, compassion and care to that job as well as the residents while being tired and pregnant, to be suspended again for something I know I didn't do is crazy to me and it's even crazier to suspend me and do an investigation without even getting my statement . Review of CNA1's Employee Termination Form with a termination date of 02/10/26, revealed, Hire date 10/14/25, last day worked 02/03/26 employee suspended on 02/03/26 pending outcome of abuse allegation. Employee then texted Assistant Director of Nursing (ADON) on 02/06/26 and resigned effective immediately.Review of the local County Sheriff Office Police Report dated 12/02/25, with an incident date of 10/13/25 - 11/06/25, revealed, Reporting Officer took a report from the Administrator as a walk-in to the lobby of the law enforcement center concerning fraud. The facility Administrator which is in jurisdiction of [local] County SC stated that he got a call from a former patient [R2] in regard to fraudulent transactions on his Discover card and Bank of America card. The Administrator stated that [R2] was a resident at the</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
FORM CMS-2567 (02/99) Previous Versions Obsolete	Event ID:  425139	Facility ID:  If continuation sheet Page 1 of 4

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F 0602  Level of Harm - Minimal harm or potential for actual harm  Residents Affected - Few	reportable incident from 12/01/25. The Administrator finally stated that they have not substantiated the allegation of misappropriation with their investigation because CNA1 has not yet been charged criminally by law enforcement. During a Survey Team meeting on 02/10/26 at 3:30 PM, the survey team revealed it was in the best interest to protect R2 from not interviewing CNA1 at this time. CNA1 at this time has not been charged criminally related to this matter, out of respect to law enforcement that are still investigating this matter, the team did not want to impede their investigation. The Survey Team is unsure how much personal information CNA1 may have of R2 and wants to protect him even though he is outside of the facility/living in the community. Facility and local Sheriff Office provided redacted version of police report due to this matter being turned over to the South Carolina Attorney General's Office. During a phone interview after the survey exit date on 02/18/26 at 2:56 PM, a Chief Investigator for the South Carolina Attorney General Vulnerable Adult & Medicaid Provider Fraud Unit revealed that this investigation is still currently being reviewed in triage and CNA1 has not been charged with a crime related to this incident at this time. The Chief Investigator was able to provide the State Agency with an un-redacted version of the local Sheriff Office Police Report.		