

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  425171	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED  06/06/2025
NAME OF PROVIDER OR SUPPLIER  McCormick Post Acute		STREET ADDRESS, CITY, STATE, ZIP CODE 204 Holiday Road McCormick, SC 29835	

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 - Immediate jeopardy to resident health or safety</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> Based on review of the facility policy, record review, and interviews, the facility failed to ensure Resident (R)1 was free from of accident/hazards, over which the facility had control of on 04/26/25. The facility staff loaded R1, who is a bilateral amputee to his lower extremities, with a Hoyer lift to a boat, allowing him to ride on a highway without being properly secured.</p> <p>On 06/05/25 at 5:39 PM, the survey team provided the Director of Nursing (DON) and the Regional Director of Clinical Services (RDCS) with a copy of the CMS Immediate Jeopardy (IJ) Template, informing the facility IJ existed as of 04/26/25. The IJ was related to 42 CFR 483.25 - Quality of Care at F689- Free of Accident Hazards/Supervision/Devices.</p> <p>On 06/06/25 at 1:14 PM, the facility provided an acceptable IJ Removal Plan. On 06/06/25 at 2:15 PM, the survey team validated the facility's corrective actions had been implemented. The IJ was removed and lowered to a Scope/Severity level of D.</p> <p>An extended survey was conducted in conjunction with the Complaint Survey for non-compliance at F689, constituting substandard quality of care.</p> <p>Findings include:</p> <p>A review of the facility's policy titled Safe Lifting and Movement of Residents (n.d.) stated, In order to protect the safety and well-being of staff and residents, and promote quality care, this facility uses appropriate techniques and devices to lift and move residents. 1. Resident safety, dignity, comfort, and medical condition will be incorporated into goals and decisions regarding the safe lifting and moving of residents.</p> <p>R1 was admitted to the facility on [DATE] with diagnoses including, but not limited to, multiple sclerosis, bipolar disorder, acute kidney failure, history of falling, acquired absence of left leg above knee, and acquired absence of right leg above knee.</p> <p>Review of R1's Annual Minimum Data Set (MDS) with an Assessment Reference Date (ARD) of 02/21/25 revealed R1 scored a Brief Interview for Mental Status (BIMS) score of 13, indicating he was cognitively intact. Review of Section GG0015 of the MDS indicated impairment on both sides to lower extremity.</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 - Immediate jeopardy to resident health or safety</p> <p>Residents Affected - Few</p>	<p>Review of R1's Nursing-Fall Risk Observation/Assessment dated 05/23/25 indicated the following: 3. Balance: Evaluate resident's balance while standing, sitting and during transitions. This was coded as 2. Non-ambulatory/ wheelchair for locomotion. 6. Mobility was coded as non-ambulatory/wheelchair for locomotion. Confined to chair/geri-chair, coded as yes.</p> <p>During an interview with R1 on 06/05/2025 at 11:34 AM, R1 stated, The whole going boating thing was his and his friend's idea. This has never been done before. He stated, I did express to the staff my idea, Licensed Practical Nurse (LPN)1. LPN1 stated that we could not go on the boat without authorization and she contacted the Operation Manager (OM)1, who was the administrator at that time. This happened on Saturday, before Mother's Day, I am unsure of the date. LPN1 said that OM1 called back and said it will be alright to go fishing. The staff and I thought the best way was to unload and load me was with the crane. It was mostly LPN's idea. When I sat on the seat, we noticed that there was no seat belt. LPN1 secured me with a sheet under my arms and tied it behind me, behind the seat, so I would not move at all. I was able to move very little with the sheet there, mostly my arms. I could not move my lower chest to lower body with the sheet. I was loaded in the boat by Certified Nursing Assistants (CNA) and LPN1. I am unsure of the CNA Names, there were maybe 3, or 4. I was driven to the dock, while I was tied up on the boat. It is roughly about five miles. We got on the water and started to go to the lake to go fishing. The boat started filling with water. R1 then stated his friend stated, I think we are sinking. R1 said, I was not too concerned because I had on a life vest. Everything seemed so surreal. A passerby boat was waved down, and they pulled us back toward the dock. EMS came out and had to pull us out the water because the lake authority was called because the boat was sinking. 911 was called. One of the buses came and got me, it was a wheelchair bus. When I got back to the facility, they assessed me, I had no injury at all. I am trying to block out this memory. It was the worst experience I had since living here. Social Services did talk to me briefly. It could have been much worse. I will never go fishing or get on a boat again.</p> <p>During an interview with CNA1 on 06/05/25 at 12:10 PM, CNA1 revealed, We debated about doing it and we called OM1. He [OM1] said to give him a minute, and he would call back. OM1 called back and said it was okay. OM1 spoke with LPN1. LPN1 said it was okay to put him in the boat. CNA1 stated, We got the Hoyer lift and put him in the boat with the lift. All four CNAs was standing on the ground at first. I climbed on top of the boat then to ensure he did not fall. It was not part of the plan; we thought he would have a seat belt. R1 insisted on going, even without the seatbelt. The sheet was his friend's idea. I just got down off the boat. I don't know what happened with the sheet, I came back in the inside.</p> <p>During an interview on 06/05/25 at 12:28 PM, R1's Friend stated that he and the resident had the idea of going on a boat to fish on the lake. He stated, The nursing home thought of the sheet because R1 fell over. R1 kept sliding down, so they tied him up. They tied him down to ensure he stayed in one spot. The nursing home tied up the sheet, I did not tie up the sheet. It worked; he did not slide down anymore.</p> <p>(continued on next page)</p>		

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<p>F 0689</p> <p>Level of Harm - Immediate jeopardy to resident health or safety</p> <p>Residents Affected - Few</p>	<p>During an interview on 06/05/25 at 12:34 PM, the Director of Nursing (DON) stated, OM1 called him after the fact, and he looked up the South Carolina law. He stated, It was not a law against driving a patient on a boat on the roadway, please review this section. At this time, the Surveyor was shown Section 56-5-3900 of South Carolina State house which pertains to transportation of minors in open vehicles. Review of the document titled, Code of Laws-Title 56-Chapter 5- Uniform Act Regulating Traffic on Highways; Section 56-5-3900. Transportation of minors in open vehicles stated, (A) It is unlawful to transport a person under fifteen years of age in the open bed or open cargo area of a pickup truck or trailer. An open bed or open cargo area is a bed or cargo area without permanent overhead restraining construction.</p> <p>Review of photographic evidence revealed R1 sitting in the back of the boat, without a covering above him.</p> <p>During on 06/05/25 at 12:42 PM, CNA3 stated, I was not out there really, but I helped for a while. I don't know who tied him up.</p> <p>During an interview on 06/05/25 at 12:55 PM, CNA2 revealed that she was not in charge of his care, but she and other staff members assisted him onto the boat by Hoyer Lift. She stated that she doesn't remember how he was secured on the seat. She left and went on the inside. LPN1, CNA1, and CNA3 was out there when she left. She stated, We got the okay from the Administrator via the phone that is why we did it.</p> <p>On 06/05/2025 at 11:59 AM, LPN1 was called but mailbox is full. Attempted to call again at 12:20 PM. At 2:34 PM, another unsuccessful attempt was made to contact LPN1.</p> <p>On 06/05/2025 at 2:19 PM, attempts were made to contact OM1 via telephone, with no success.</p> <p>The following information constitutes [NAME] Post Acute removal plan for the immediate jeopardy.</p> <p>Summary of Incident:</p> <p>Resident 1 left the facility on his own accord on 4-26-25 after signing out for LOA to go with a friend on his boat to fish. Staff assisted him into the boat per his request and per his request he used a sheet to hold him up on the seat. He was unable to remove the sheet himself. After he was on the boat off of the premises they incurred issues and facility was called by EMS to come and get him from the lake. He had no injuries.</p> <p>Timeline of Events:</p> <p>Resident 1 was admitted to the facility on [DATE] for LTC. He is alert with BIMS 15/15 and has decisional capacity.</p> <p>4-26-25 Resident left the facility in a boat with a friend per his request to go fishing. He was placed on the boat by staff using a Hoyer lift and he used a sheet to secure him to the seat of the boat per his request.</p> <p>(continued on next page)</p>		

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<p>F 0689</p> <p>Level of Harm - Immediate jeopardy to resident health or safety</p> <p>Residents Affected - Few</p>	<p>Staff received a call from EMS that the boat incurred issues and R1 was at the lake and facility needed to pick him up. Facility went to pick him up and returned him to the facility. He had no injuries.</p> <p>4-28-25 Education was initiated for staff to instruct to not assist any residents into a recreational vehicle for LOA. Residents may only leave for LOA in a motor vehicle.</p> <p>4-28-25 Audit was complete for month April LOA forms to ensure no other residents had left the facility in a boat.</p> <p>Immediate Actions Taken:</p> <p>1) Resident 1 has not been out of the facility since 04-26-25 for LOA.</p> <p>2) 100% Audit of all LOAs from 04-26-25 present to confirm that no other residents left the facility in a boat or unsafe vehicle for a resident to be transported in. Audit complete on 06-05-25 at 7:30 pm and no other residents have left via a vehicle that could be unsafe for their condition/situation.</p> <p>3) LOA sign out sheet amended to include a column to indicate how they are leaving the facility. Type of vehicle used to leave. (see attached)</p> <p>4) All staff will be re-educated to ensure understanding that a resident on LOA may not leave the facility in a vehicle that is unsafe for the condition or situation such as a boat or motorcycle and never assist with transfer to any vehicle that is not safe. Also, when a resident signs out LOA to include on the sign out sheet the type of vehicle in which they left. Medical equipment/lift shall not be used to transfer a resident for a nonmedical purpose.</p> <p>5) Letter will be prepared for mailing to RR's, families and residents to inform them that to protect their safety on LOA they will only be permitted to leave the facility in a motor vehicle that is safe for the residents condition/situation. (see attached)</p> <p>Letters will be mailed 06-06-25.</p> <p>6) Audits will be complete weekly by DON of LOA sign out sheets to ensure that no resident are leaving the facility by a vehicle that is not safe for their condition or situation. Audits will be weekly x 4 weeks then monthly x 2 months then random thereafter.</p> <p>Report will be submitted to QA committee to determine need for continued monitoring after 3 months.</p> <p>ADHOC QA Meeting Held 06-05-25</p> <p>*Members Present were: RN RDCS, Dr. via phone, LSW, Director of Nursing, and RN, Operations Manager</p> <p>*Root Cause of issue is identified: Staff failed to ensure that a resident left the facility for LOA by a safe means of transportation.</p> <p>(continued on next page)</p>		

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