

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  515146	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED  04/10/2024
NAME OF PROVIDER OR SUPPLIER  Marmet Center		STREET ADDRESS, CITY, STATE, ZIP CODE  One Sutphin Drive Marmet, WV 25315	

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 0584</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Honor the resident's right to a safe, clean, comfortable and homelike environment, including but not limited to receiving treatment and supports for daily living safely.</p> <p>49467</p> <p>Based on observation and resident and staff interview, the facility failed to provide a safe, clean, homelike environment for Resident #3, 54, 50, 46, 58, and 36. This was a random opportunity for discovery. This has the potential to affect more than a limited number of residents. Resident identifiers: 3, 54, 50, 46, 58, 36. Room identifiers: B10, B14, C26, D31. Facility census: 88.</p> <p>Findings included:</p> <p>A) Room #B10</p> <p>At approximately 10:45 AM on 04/09/24, an observation was conducted of Room B10, where Resident #3 and 54 reside. During the observation, it was noted that the trim underneath the heating and cooling unit in the room was detached from the wall and was lying flat on the floor, exposing the wall behind the trim. Resident #54 stated It's been like that for a while but no one has come in to fix it yet.</p> <p>At approximately 01:00 PM on 04/10/24, the Administrator acknowledged the trim coming off the wall.</p> <p>At approximately 10:52 AM on 04/09/24, an observation was conducted of Room #B14, where Resident #50 resided. During the observation, a glove was discovered lying on the floor beside the trash can in the room. A large piece of clear plastic was lying underneath Resident #50's bed, along with multiple pieces of paper.</p> <p>At approximately 10:55 AM on 04/09/24, the Housekeeping Manager in Training (HMIT) entered the room and acknowledged the gloves and trash in the floor.</p> <p>b) Room #C26</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 0584</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>At approximately 11:10 AM on 04/09/24, an observation was conducted of Room #C26. During the observation, a medical glove was discovered in the floor by the trash can along with plastic and other debris underneath Resident #46's bed. There was a trail of a brown substance running from Resident #46's bed, into the bathroom, ending on the toilet seat, of which the substance covered multiple places. Next to the toilet, toilet paper was found torn and scattered about the bathroom. The water in the shower was found to be running, and upon further observation, there were two plastic cups in the shower.</p> <p>At approximately 11:17 AM on 04/09/24, the Director of Nursing (DON) acknowledged the trash, trail of brown substance, toilet paper in the bathroom floor, and plastic cups in the shower.</p> <p>D) Room #D31</p> <p>At approximately 11:27 AM on 04/09/24, an observation was conducted of Room #D31. During the observation, a medical glove was found on the floor next to Resident #58's bed. Upon further observation, two medical gloves were found next to a trash can beside Resident 36's bed. A bottle of lotion was in the floor underneath Resident #36's bed, along with another bottle of lotion lying on the floor, underneath the heating and cooling unit, next to Resident #36's bed.</p> <p>The Business Office Manager (BOM) acknowledged the gloves and bottles on the floor in the room at approximately 11:32 AM on 04/09/24.</p> <p>Upon further observation of Room D31, multiple small black oval shaped grains were found on the floor of Resident #36's wardrobe.</p> <p>At approximately 12:25 PM on 04/09/24 the Director of Nursing (DON) and Maintenance Supervisor (MS) came to the room and observed the wardrobe. The DON was asked if the grains appeared to be mouse droppings, to which they stated, That looks like that's what it is. The MS acknowledged the small black grains in the wardrobe as well.</p>		

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<p>F 0692</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Provide enough food/fluids to maintain a resident's health.</p> <p>45171</p> <p>Based on record review and staff interview the facility failed to provide accurate one (1) resident was provided to the extent possible acceptable parameters of nutrition. Resident identifier: #2. Facility Census: #88</p> <p>Findings included:</p> <p>a) Resident #2</p> <p>On 04/09/24 at 10:02 AM record review shows Resident #2 has had a significant weight loss in the last three (3) months and the last six (6) months.</p> <p>Resident #2 had a medical diagnosis of: Eating disorder, feeding difficulties, and a recent diagnosis of Amyotrophic Lateral Sclerosis (ALS).</p> <p>She was on a regular diet, regular texture, finger foods preferred, large portions at all meals. She requires feed assist from staff. She was on monthly weights.</p> <p>According to documented weights, Resident #2 weighed 166.4 pounds as of 03/22/24.</p> <p>On 01/03/24 she weighed 182.2, reflecting a 8.67% weight loss in those three (3) months.</p> <p>Resident #2 weighed 190.2 pounds on 10/30/22, reflecting a 12.1% weight loss in the six (6) months from 10/30/22 until 03/22/24.</p> <p>A significant weight loss is identified as:</p> <p>5% change in weight in 1 month (30 days)</p> <p>7.5% change in weight in 3 months (90 days)</p> <p>10% change in weight in 6 months (180 days)</p> <p>During a interview with Registered Dietitian #104 on 04/10/24 at 01:55 PM she stated she documented her findings for meal intakes from the Facility Follow Up Question Report. When Registered Dietitian #104 and the surveyor went over the report together, Registered Dietitian #104 agreed there was insufficient documentation for her to accurately assess the meal intakes. When asked why this was not addressed with the Administrator, DON or other staff, she commented she did not know.</p> <p>Documentation review of Nutritional Assessments and Nutrition Progress Notes by Register Dietitian #104, stated:</p> <p>03/06/24 with good meal intakes, (approximately) 70% of most meals . Currently meal intakes are capable of meeting estimated needs .</p> <p>(continued on next page)</p>		

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<p>F 0692</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>03/12/24 . with good meal intakes, (approximately) 75% of most meals</p> <p>03/29/24 . Resident has fair PO intake of roughly 25-75% of most meals .</p> <p>04/5/24 .with good meal intakes, ~ (approximately) 70% of most meals .</p> <p>A review of the Follow Up Questions Report provided for 03/09/24 through 04/08/24 shows there were ninety one (91) opportunities to document meal intakes of which there were fifteen (15) meal intakes documented.</p> <p>Below is the details of the intake documentation provided on the Facility Follow Up Question Report.</p> <p>03/09/24 - breakfast - no documentation</p> <p>03/09/24 - lunch - no documentation</p> <p>03/09/24 - dinner- no documentation</p> <p>03/10/24- breakfast - no documentation</p> <p>03/10/24- lunch - no documentation</p> <p>03/10/24- dinner - no documentation</p> <p>03/11/24- breakfast - no documentation</p> <p>03/11/24- lunch - no documentation</p> <p>03/11/24- dinner - no documentation</p> <p>03/12/24- breakfast - no documentation</p> <p>03/12/24- lunch - no documentation</p> <p>03/12/24- dinner - no documentation</p> <p>03/13/24- breakfast - no documentation</p> <p>03/13/24- lunch - no documentation</p> <p>03/13/24- dinner - no documentation</p> <p>03/14/24- breakfast - 75% intake</p> <p>03/14/24- lunch - no documentation</p> <p>03/14/24- dinner - no documentation</p> <p>(continued on next page)</p>

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