

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 676246	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 04/10/2024
NAME OF PROVIDER OR SUPPLIER Riverside Nursing and Rehabilitation Center		STREET ADDRESS, CITY, STATE, ZIP CODE 6801 E Riverside Dr Austin, TX 78741	

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 0576</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Ensure residents have reasonable access to and privacy in their use of communication methods.</p> <p>42949</p> <p>Based on observation, interview, and record review, the facility failed to ensure all residents had a private place for telephone communications without being overheard for three (CR #1, CR #2, and CR #3) Confidential Residents out of five residents reviewed for private communications, in that:</p> <p>The facility failed to ensure there was an area or phone available for CR #1, CR #2, and CR #3 to have private telephone communications.</p> <p>This failure could place residents at risk to lose their ability to communicate privately on the telephone and could result in a decline in their psychosocial well-being and quality of life.</p> <p>Findings included:</p> <p>During a telephone interview on 04/10/24 at 8:57, the FO stated when she visited the facility the previous Friday, 04/05/24, CR #1 expressed her frustration that she could not have a phone conversation in private. She stated residents had to use the phone at the nurses' stations where everyone could hear them. She stated CR #1 was very distressed over the issue. She stated she then interviewed staff who told her the only phone for the residents to use was the one at the nurses' station (not cordless). She stated it was against resident rights to not have a way for the residents to be able to have a confidential phone call. She stated she brought the concern to the ADM's attention who seemed to not see it as a big deal. She stated after the visit she emailed the ADM the regulations where it reflected resident's right regarding private phone conversations but had not gotten a response from him.</p> <p>During an observation and interview on 04/10/24 at 10:45 AM, revealed LVN A showing the Surveyor the phone at the nurses' station indicating that was the only phone for residents to utilize for phone calls. She stated if a resident asked for privacy, she assumed they could use a staff members office. She stated a lot of the residents had their own cell phones, but she knew of a handful of residents that utilized the phone at the nurses' station.</p> <p>During an interview on 04/10/24 at 11:02 AM, CR #2 stated she often needed to utilize the phone at the nurses' station. She stated she had to talk quietly because there were always people around who could hear what she was saying.</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 0576</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>During an interview on 04/10/24 at 11:09 AM, the MDSC they recently lost their SW and were without one. She stated there were a few residents she knew of that utilized the phone at the nurses' station a lot. She stated she was familiar with resident rights and stated it was a resident's right to be able to have a confidential phone call. She stated the phone at the nurses' station would not be considered a confidential space for the residents. She stated a negative outcome of not having the right could make the residents feel bad, feel like they could not have full personal conversations, and like someone could be listening.</p> <p>During an interview on 04/10/24 at 11:42 AM, CR #3 stated when he wanted to make a phone call, he had to use the phone at the nurses' station. He stated it always made him uncomfortable because he knew everyone around him could hear him.</p> <p>During an interview on 04/10/24 at 12:31 PM with the ADM and DON, they both stated they were familiar with resident rights and the residents had the right to have private conversations on the phone. The ADM stated they had cordless phones but was not aware they were not working or that it was an issue. The ADM stated it was important for the residents to have the right to privacy and it was his responsibility to ensure it happened.</p> <p>Review of the FO's email to the ADM, dated 04/05/24 at 5:09, reflected the following HHSC regulations:</p> <p>The resident has the right to have reasonable access to the use of a telephone, including TTY and TDD services, and a place in the facility where calls can be made without being overheard.</p> <p>.</p> <p>Resident access to telephones in staff offices or nurses' station alone does not meet the provisions of this requirement.</p> <p>Review of the facility's Resident Rights Policy, revised 12/2023, reflected it did not address specific resident rights but focused on ensuring residents were informed of their rights at the facility.</p>		