

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 144053	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 3/12/2025
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NAME OF PROVIDER OR SUPPLIER THE TIMBERS OF CASS COUNTY	STREET ADDRESS, CITY, STATE, ZIP CODE 55432 COLBY ST DOWAGIAC, MI 49047
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F0000 SS=	<p>INITIAL COMMENTS</p> <p>The Timbers of Cass County was surveyed for an Abbreviated survey on 3/12/25.</p> <p>Intakes: MI00150373, MI00149672, MI00150362, MI00150546, MI00150996</p> <p>Census= 90</p>	F0000		
F0679 SS= D	<p>Activities Meet Interest/Needs Each Resident §483.24(c) Activities. §483.24(c)(1) The facility must provide, based on the comprehensive assessment and care plan and the preferences of each resident, an ongoing program to support residents in their choice of activities, both facility-sponsored group and individual activities and independent activities, designed to meet the interests of and support the physical, mental, and psychosocial well-being of each resident, encouraging both independence and interaction in the community. This REQUIREMENT is not met as evidenced by:</p> <p>This citation pertains to MI00149672, MI00150373, MI00150362, MI00150546</p> <p>Based on observation, interview, and record review, the facility failed to provide individualized activities based on resident preferences, needs, and abilities for 4 of 4 Residents (Resident #100, Resident #101, Resident #102, and Resident#103) reviewed for activities, resulting in a potential for social isolation, decreased connectedness to the resident's environment, and decreased overall well-being.</p>	F0679		

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

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.

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	<p>Findings include:</p> <p>Review of "Activity Involvement and Quality of Life of People at Different Stages of Dementia in Long Term Care Facilities" revealed: "Despite resident's cognitive status, their activity involvement was significantly related to better scores on care relationship, positive affect, restless tense behavior, social relations ...Conclusion: Activity involvement seems to a small yet important contributor to higher well-being in long-term care residents at all stages of dementia ..." Smit D, de Lange J, Willemse B, Twisk J, Pot AM. Aging Ment Health. 2016;20(1):100-9. doi: 10.1080/13607863.2015.1049116. Epub 2015 Jun 2. PMID: 26032736.</p> <p>Review of an anonymous complaint received on 2/24/25 revealed "I am a concerned son who is writing to formally report concerns regarding the lack of activities being conducted for the residents at (facility name omitted) in relation to the duties of the activity manager. It's been observed by my mother ... that the activity manager has not been implementing or overseeing planned recreational and therapeutic activities in accordance with ...facility policy. There has been a notable lack of structured activities planned or implemented by activity managers ... my mother is upset and dissatisfied with the absence of activities"</p> <p>Resident #100</p> <p>Review of an "Admission Record" revealed Resident #100 was originally admitted to the facility on 2/24/21 with pertinent diagnoses which included: hemiplegia (paralysis or loss of movement on one side of the body), legal blindness, reduced mobility and generalized anxiety disorder.</p>				

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	<p>Review of a "Minimum Data Set" (MDS) assessment for Resident #100 with a reference date of 12/3/24, revealed a "Brief Interview for Mental Status" (BIMS) score of 8/15 which indicated Resident #100 was moderately cognitively impaired. Section "F" of the MDS revealed Resident #100 reported it was very important for him to listen to the music he likes.</p> <p>Review of a "Care Plan" for Resident # 100 with a reference date of 2/25/21, revealed a problem/goal/approaches of: Problem: (Resident #100) is blind and prefers activities that identify with prior lifestyle ...enjoys listening to old time rock and roll music and using (device name omitted) (cloud based voice activated smart device).</p> <p>During an observation on 3/11/25 at 10:17am, Resident #100 was in bed, appeared to be asleep.</p> <p>In an observation/interview on 3/11/25, at 11:32am, Resident #100 was lying in bed upon approach and when greeted stated "Where am I?" Resident appeared anxious, rolling back and forth in bed. When informed he was in his room, resident stated "I got so mixed up being here by myself, I wasn't sure where I was." Resident #100 reported he normally liked to attend several group activities per week but had not been feeling well and was "getting really bored" in his room. Resident #100 confirmed he had a cloud based smart device that would allow him to listen to music. However, it was observed that the device did not activate when the resident attempted several times to play his music. Resident #100 reported he had been trying to listen to music but could not do so.</p> <p>In an interview on 3/12/25 at 10:59am, Resident #100 reported his cloud based smart device was still not working. Resident #100 reported he was</p>				

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	<p>worried about his ongoing health issues and wanted something to distract himself.</p> <p>Resident #101</p> <p>Review of an "Admission Record" revealed Resident #101 was originally admitted to the facility on 9/20/22 with pertinent diagnoses which included: vascular dementia (condition in which there is a progressive decline in cognitive abilities), muscle weakness and major depressive disorder (persistent sad mood impacting daily living).</p> <p>Review of a "Minimum Data Set" (MDS) assessment for Resident #101 with a reference date of 2/24/25, revealed a "Brief Interview for Mental Status" (BIMS) score of 5/15 which indicated Resident #101 was severely cognitively impaired. Section "F" of the MDS revealed Resident #101 reported it was very important to her to read, listen to music of her choosing and participate in religious services.</p> <p>Review of a "Care Plan" for Resident #101 with a reference date of 9/21/22, revealed a problem/goal/approaches of: "(Resident #103) prefers activities that identify with prior lifestyle. She likes to listen to music and watch TV.</p> <p>During an observation on 3/11/25 at 8:49 am, Resident #101 sat in the "Evergreen" lounge staring ahead blankly. The television was playing quietly. No staff were present, all residents in the lounge sat quietly and did not speak when spoken to.</p> <p>During an observation on 3/11/25 at 10:04 am, Resident #101 sat in the "Evergreen" lounge with her eyes closed. The television was playing quietly. No staff were present and all residents in the lounge sat quietly, did not speak when spoken</p>			

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	<p>to.</p> <p>During an observation on 3/11/25 at 10:17am, Resident #101 was in her bed. Her room was quiet and dark.</p> <p>During an observation on 3/11/25 at 3:00 pm, Resident #101 was asleep in her bed.</p> <p>During an observation on 3/12/25 at 8:43 am, Resident #101 sat in the "Evergreen" lounge with her eyes cast toward the window. The television was on but not audible, several other residents sat nearby. None spoke when spoken to.</p> <p>During an observation on 3/12/25 at 8:58 am, Activities Director (AD) "C" entered the "Evergreen" lounge, said good morning to each resident and exited the room at 9:00 am.</p> <p>In an interview on 3/11/25, at 11:11 am, Family Member (FM) "R" reported she visited Resident #101 daily. FM "R" reported most of the activities provided at the facilities were not within Resident #101's abilities due to her advanced dementia. FM "R" reported one of the remaining leisure activities that Resident #101 could still enjoy was music, but the facility did not make that available to her on a regular basis. FM "R" reported the facility offered live music occasionally but was scheduled in the afternoon, when Resident #101 preferred to lay down and rest. When queried about the types of activities the facility did provide to Resident #101, FM "R" stated "They bring her popcorn and call that an activity. That's about it."</p> <p>Resident #102</p> <p>Review of an "Admission Record" revealed Resident #102 was originally admitted to the facility on 1/26/25 with pertinent diagnoses</p>			

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	<p>which included: rhabdomyolysis (a breakdown of muscle tissues that releases damaging proteins into the blood).</p> <p>Review of a "Minimum Data Set" (MDS) assessment for Resident #102 with a reference date of 1/28/25, revealed a "Brief Interview for Mental Status" (BIMS) score of 10/15 which indicated Resident #102 was moderately cognitively impaired. Section "F" revealed Resident #102 reported listening to music and being outside were very important to her, attending group activities and religious services were somewhat important to her as was having pet visits.</p> <p>Review of a "Care Plan" for Resident #102 with a reference date of 1/28/25, revealed a problem/goal/approaches of: "Problem: Resident prefers activities that identify with prior lifestyle such as watching tv and movies she does enjoy social visits. Goal: Resident will express satisfaction with daily routine and leisure activities. Approaches: Encourage resident to become involved with activities such as going for walks as well as bring thing (sic) to her room to do socializing, provide materials of interest such as a movie list as well as a radio to listen to music, provide setting in which activities preferred in her room".</p> <p>During an observation and interview on 3/11/25, at 9:11 am, Resident #102 sat in her bed in her room. No music or her television was playing in her room. Resident #102 was very talkative when approached. Resident #102 described herself as "a gabby little girl who would talk to anybody". Resident #102 reported she had not been doing anything lately but looking out the window.</p> <p>During an observation on 3/11/25 at 12:09 pm, Resident #102 was in bed on her right side,</p>				

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	<p>turned toward her window. The television was on in her room but not in her line of sight.</p> <p>During an observation on 3/12/25 at 9:38 am, Resident #102 was laying in her bed. Her room was quiet.</p> <p>During an observation on 3/12/25 at 1:43 pm, Resident #102 was awake, sitting partially upright in bed, looking into the hallway.</p> <p>In an interview on 3/12/25 at 10:04 am, FM "N" reported the facility had not contacted her about Resident #102's previous leisure interests and she doubted the resident could accurately identify them herself. FM "N" reported she visited the resident daily and had not seen her involved in any activities. FM "N" reported she wanted the facility to provide additional mental stimulation to Resident #102 because she appeared to be becoming disconnected with her surroundings. FM "N" reported she noticed Resident #102 gazing out the window more and more and sitting unengaged. FM "N" reported Resident #102 never had pets, never attended organized religious services, was meticulous about cleaning her home, enjoyed watching birds at her birdfeeder prior to coming to the facility. FM "N" reported something as simple as a bird feeder would give Resident #102 additional stimulation and joy.</p> <p>Resident #103</p> <p>Review of an "Admission Record" revealed Resident #103 was originally admitted to the facility on 2/7/28 with pertinent diagnoses which included: cerebral infarction (stroke), major depressive disorder (persistent sad mood impacting daily living), and hemiplegia (paralysis or loss of movement one side of the body).</p> <p>Review of a "Minimum Data Set" (MDS)</p>			

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	<p>assessment for Resident #103 with a reference date of 1/28/25, revealed a "Brief Interview for Mental Status" (BIMS) score of 15/15 which indicated Resident #103 was cognitively intact. Section "F" of the MDS revealed Resident #103 reported it was very important to her to pursue her favorite activities.</p> <p>Review of a "Care Plan" for Resident #103 with a reference date of 2/21/18, revealed a problem/goal/approaches of: "Problem: (Resident #103) prefers activities that identify with prior lifestyle. Goal: Resident will not exhibit boredom/isolation as evidenced by doing her own independent activities and groups as interested. Approaches: Allow resident to do therapeutic chores. She is a resident volunteer for the activity store and likes to keep an eye on the merchandise and make sure people pay ...encourage resident to become involved with ...musical entertainment, special events, arts and crafts...bingo ...socials, trivia, resident council ...".</p> <p>In an interview on 3/11/25, at 3:14 pm, Resident #103 reported the number of activities available had significantly declined in the last 9 months, fewer activities were offered on the weekends, and no evening activities were provided. Resident #103 reported on the weekends she spent time self-propelling her wheelchair around the facility because she was bored.</p> <p>Resident #103 reported she no longer volunteered with the bingo store because the store was nearly empty, and she missed the sense of purpose she felt when she had volunteered. Resident #103 voiced frustration with the current activities program provided and described it as "nearly wrecked".</p> <p>Review of an email received on 2/21/25 from "Ombudsman" "S" revealed "I attended a resident</p>			

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	<p>council meeting on 1/28/25 and residents voiced complaints about the resident store. It used to be fully stocked with food items residents could purchase and it was nearly empty".</p> <p>In an interview on 3/12/25 at 2:51 pm, Certified Nursing Assistant (CNA) "M" reported Resident #103 used to really enjoy volunteering for the facility store but had lost the motivation to do so when the inventory was significantly reduced.</p> <p>In an interview on 3/12/25 at 9:03 am, CNA "J" reported residents complained about being bored, didn't like some of the activities because they seemed childish and that weekend activities were canceled frequently. CNA "J" reported she had not seen any activities being provided for resident's who had severe cognitive impairments and had not seen room visits happening regularly.</p> <p>In an interview on 3/12/25 at 9:40 am, Activity Assistant (AA) "F" reported there she relied on her interactions with the residents to learn what the resident's liked and were capable of participating in. AA "F" reported she felt there was a need to provide more activities for residents with severe cognitive impairments and she would sometimes just go sit with them on her breaks to provide some socialization. AA "F" when she provided room visits, she just checked in with anyone she hadn't seen in recent days and asked if they needed any leisure supplies. AA "F" said there was no formal structure for her to follow with provide 1:1 visits.</p> <p>In an interview on 3/12/25 at 11:49 am, AA "Q" reported the facility offered fewer activities and residents were complaining. AA "Q" reported she felt the facility needed to provide more activities for the residents who had cognitive impairments, but she was unsure how to provide therapeutic activities for them. AA "Q" she struggled to</p>			

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	<p>provide activities to other residents as well because she had to learn their preferences on her own. AA "Q" reported AD "C" did not provide her with any information about each resident's preferences or needs. AA "Q" stated, "I can't provide individualized activities without knowing their information".</p> <p>In an interview on 3/12/25 at 2:13 pm, CNA "K" reported the facility primarily offered bingo, and a few other activities in the afternoon. CNA "K" reported no activities were offered to residents after the evening meal and she noticed residents who were not able to provide activities for themselves became more restless in the evenings. CNA "K" reported several residents had complained to her about the reduced inventory in the bingo store.</p> <p>In an interview on 3/12/25 at 11:03 am, Activities Director (AD) "C" reported she assumed the responsibility for the role of Activity Director approximately 9 months ago. When asked about the types of activities her program provided for residents who were dependent for leisure involvement, AD "C" stated "I go around and talk to them". AD "C" did not report any other therapeutic activities the facility provided for those that could not or chose not to participate in traditional activities. AD "C" confirmed some residents were dependent on the provision of structured leisure activities to meet their needs. When queried about the potential for negative outcomes due to a lack of support for activity involvement, AD "C" stated "isolation could happen" if activities weren't provided based on each resident's needs and preferences. AD "C" reported the last structured activity of the day began no later than 3:15 pm each day. AD "C" reported she knew some residents preferred to pursue leisure interests in the evenings, but she did not have a record of each resident's preferences that referred to when planning</p>				

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F0680 SS= E	<p>programs.</p> <p>In an interview on 3/12/25 at 3:17 pm, Nursing Home Administrator (NHA) "A" reported the facility strived to provide an individualized activities program for each resident to support them remaining engaged in life. NHA "A" stated "things are not the way they should be" referring to the current activity program at the facility. NHA "A" reported he became aware activity assessments were not completed as they should be and confirmed the assessments should be used as a foundation for the care each resident receives. NHA "A" also confirmed the evening activity programming was not being provided as outlined in the facility policy and that the facility did not currently offer individualized 1:1 activity visits.</p> <p>Review of a "Activity Programming" facility policy with a reference date of 6/2017 revealed "Policy: Activity programs designed to meet the needs of each resident are available on a daily basis. Our activity programs are designed to encourage maximum individual participation and are person-appropriate to the individual resident. Our activity program consists of individual and small and limited large group activities that are designed to meet the needs and interests of each resident and include, as a minimum ...at least one evening activity is offered per week ...7. Individualized and group activities provided will: reflect the schedules, choices and rights of the residents, are offered at hours convenient to the residents, including evenings ...weekends ...".</p> <p>Qualifications of Activity Professional §483.24(c)(2) The activities program must be directed by a qualified professional who is a qualified therapeutic recreation specialist or an activities professional who- (i) Is licensed or registered, if applicable, by the State in which practicing; and (ii) Is: (A) Eligible for</p>	F0680			

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	<p>certification as a therapeutic recreation specialist or as an activities professional by a recognized accrediting body on or after October 1, 1990; or (B) Has 2 years of experience in a social or recreational program within the last 5 years, one of which was full-time in a therapeutic activities program; or (C) Is a qualified occupational therapist or occupational therapy assistant; or (D) Has completed a training course approved by the State. This REQUIREMENT is not met as evidenced by:</p> <p>This citation pertains to MI00149672, MI00150373, MI00150362, MI00150996</p> <p>Based on interview and record review, the facility failed to employ an Activity Director who possessed the required qualifications resulting in the potential for unmet met psychosocial needs, feelings of boredom, isolation, and a lack of person-centered activities. This citation has the potential to impact any resident who relies on the activities program to support their leisure involvement.</p> <p>Findings include:</p> <p>Review of certification standards of the National Certification Council for Activity Professionals revealed "ADC (Activity Director Certified) Certification ensures an individual has the knowledge and skills to lead and direct an activities and life enrichment department. ADC Certification validates the competencies necessary to be an Activity Director including leadership, management, advocacy, care planning and documentation."</p> <p>Review of "Participating in Activities You Enjoy</p>			

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	<p>as You Age", published by the National Institute on Aging, 3/28/22, revealed: "Research has shown that older adults with an active lifestyle: Are less likely to develop certain diseases. Participating in hobbies and other social activities may lower risk for developing some health problems, including dementia, heart disease, stroke, and some types of cancer ... Studies looking at people's outlooks and how long they live show that happiness, life satisfaction, and a sense of purpose are all linked to living longer. Studies suggest that older adults who participate in activities they find meaningful, ...say they feel happier and healthier ... When people feel happier and healthier, they are more likely to be resilient ...Positive emotions, optimism, physical and mental health, and a sense of purpose are all associated with resilience ...research suggests that participating in certain activities, such as those that are mentally stimulating or involve physical activity, may have a positive effect on memory - and the more variety the better."</p> <p>Review of a "General Orientation Activity Department" facility policy with a reference date of 9/2016 revealed "Policy: The facility will be staffed with qualified activities personnel ...Procedure: The Activities Director will be qualified according to federal and state regulation (certification as an Activity Director or consultant by the National Certification Council for Activity Professionals, NCCAP, or certification as a Therapeutic Recreation Specialist by the National Council for Therapeutic Recreation Certification, NCTRC, or has two years full time experience in a Geriatric activity program within the last five years, or has completed a state approved basic activity director's course or the 90-hour MEPAP course and the 90 hour internship).</p> <p>Review of an anonymous complaint received on 2/24/25 revealed "I am a concerned son who is writing to formally report concerns regarding the</p>			

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	<p>lack of activities being conducted for the residents at (facility name omitted) in relation to the duties of the activity manager. It's been observed by my mother ... that the activity manager has not been implementing or overseeing planned recreational and therapeutic activities in accordance with ...facility policy. There has been a notable lack of structured activities planned or implemented by activity managers ... my mother is upset and dissatisfied with the absence of activities".</p> <p>Resident #103</p> <p>Review of an "Admission Record" revealed Resident #103 was originally admitted to the facility on 2/7/28 with pertinent diagnoses which included: cerebral infarction (stroke), major depressive disorder (persistent sad mood impacting daily living), and hemiplegia (paralysis or loss of movement one side of the body).</p> <p>Review of a "Minimum Data Set" (MDS) assessment for Resident #103 with a reference date of 1/28/25, revealed a "Brief Interview for Mental Status" (BIMS) score of 15/15 which indicated Resident #103 was cognitively intact. Section "F" of the MDS revealed Resident #103 reported it was very important to her to pursue her favorite activities.</p> <p>Review of a "Care Plan" for Resident #103 with a reference date of 2/21/18, revealed a problem/goal/approaches of: "Problem: (Resident #103) prefers activities that identify with prior lifestyle. Goal: Resident will not exhibit boredom/isolation as evidenced by doing her own independent activities and groups as interested. Approaches: Allow resident to do therapeutic chores. She is a resident volunteer for the activity store and likes to keep an eye on the merchandise and make sure people pay ...encourage resident to</p>				

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	<p>become involved with ...musical entertainment, special events, arts and crafts...bingo ...socials, trivia, resident council ...".</p> <p>In an interview on 3/11/25, at 3:14pm, Resident #103 reported the number of activities available had significantly declined in the last 9 months, fewer activities were offered on the weekends, and no evening activities were provided. Resident #103 reported on the weekends she spent time self-propelling her wheelchair around the facility because she was bored. Resident #103 reported seeing more residents sitting in their rooms unengaged. Resident #103 reported several residents expressed feeling bored due to the lack of activities. Resident #103 reported she no longer volunteered with the activity store because the store was nearly empty, and she missed the sense of purpose she felt when she had volunteered for it. Resident #103 voiced frustration with the current activities program provided and described it as "nearly wrecked".</p> <p>In an interview on 3/12/25 at 11:03am, Activities Director (AD) "C" reported she assumed the responsibility for the role of Activity Director approximately 9 months ago. When asked about the types of activities her program provided for residents who were dependent for leisure involvement, AD "C" stated "I go around and talk to them". AD "C" did not report any other therapeutic activities the facility provided for those that could not or chose not to participate in traditional activities. AD "C" confirmed some residents were dependent on the provision of structured leisure activities to meet their needs. When queried about the potential for negative outcomes due to a lack of support for activity involvement, AD "C" stated "isolation could happen" if activities weren't provided based on each resident's needs and preferences. AD "C" reported the last structured activity of the day began no later than 3:15pm each day. AD "C"</p>				

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F0842	<p>reported she knew some residents preferred to pursue leisure interests in the evenings, but she did not have a record of each resident's preferences that referred to when planning programs. AD "C" reported she relied on use of section "F" of the MDS to gather all information about a resident's leisure preferences and needs. When asked if she used the facility's initial activity assessment or annual activity assessment form, AD "C" indicated she was not aware of those forms.</p> <p>In an interview on 3/12/25 at 11:49am, Activity Assistant (AA) "Q" reported AD "C" did not provide her with any information about each resident's preferences or needs. AA "Q" stated, "I can't provide individualized activities without knowing their information".</p> <p>In an interview on 3/12/25 at 3:17pm, Nursing Home Administrator (NHA) "A" reported the facility strived to provide an individualized activities program for each resident and to do so, the Activities Director was expected to have or obtain a certification. NHA "A" reported AD "C" did not have a certification as an Activities Director but was hired with the understanding that she would obtain the certification. NHA "A" reported upon her hire, AD "C" was expected to obtain a certification as an activity professional but had not been held accountable to ensure she achieved this requirement. NHA "A" confirmed AD "C" had not conducted activity assessments as they should have been done and that assessments served as the foundation for individualized care. When further queried, NHA "A" reported the facility could not provide official verification that AD "C" had worked full time in a therapeutic activities program for 2 years.</p>	F0842			
	Resident Records - Identifiable Information				

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SS= D	<p>§483.20(f)(5) Resident-identifiable information. (i) A facility may not release information that is resident-identifiable to the public. (ii) The facility may release information that is resident-identifiable to an agent only in accordance with a contract under which the agent agrees not to use or disclose the information except to the extent the facility itself is permitted to do so.</p> <p>§483.70(h) Medical records. §483.70(h)(1) In accordance with accepted professional standards and practices, the facility must maintain medical records on each resident that are- (i) Complete; (ii) Accurately documented; (iii) Readily accessible; and (iv) Systematically organized §483.70(h)(2) The facility must keep confidential all information contained in the resident's records, regardless of the form or storage method of the records, except when release is- (i) To the individual, or their resident representative where permitted by applicable law; (ii) Required by Law; (iii) For treatment, payment, or health care operations, as permitted by and in compliance with 45 CFR 164.506; (iv) For public health activities, reporting of abuse, neglect, or domestic violence, health oversight activities, judicial and administrative proceedings, law enforcement purposes, organ donation purposes, research purposes, or to coroners, medical examiners, funeral directors, and to avert a serious threat to health or safety as permitted by and in compliance with 45 CFR 164.512. §483.70(h)(3) The facility must safeguard medical record information against loss, destruction, or unauthorized use. §483.70(h)(4) Medical records must be retained for- (i) The period of time required by State law; or (ii) Five years from the date of discharge when there is no requirement in State law; or (iii) For a minor, 3 years after a</p>			

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	<p>resident reaches legal age under State law. §483.70(h)(5) The medical record must contain- (i) Sufficient information to identify the resident; (ii) A record of the resident's assessments; (iii) The comprehensive plan of care and services provided; (iv) The results of any preadmission screening and resident review evaluations and determinations conducted by the State; (v) Physician's, nurse's, and other licensed professional's progress notes; and (vi) Laboratory, radiology and other diagnostic services reports as required under §483.50. This REQUIREMENT is not met as evidenced by:</p> <p>This citation pertains to intakes MI00150362 & MI00149672.</p> <p>Based on interview, and record review, the facility failed to maintain complete and accurate medical records for 1 resident (Resident #103) of 3 residents reviewed for complete and accurate medical records, resulting in the lack of proper documentation of involvement in activities programs.</p> <p>Findings include:</p> <p>According to Potter, Patricia A.; Perry, Anne Griffin; Stockert, Patricia; Hall, Amy. Fundamentals of Nursing. "...High-quality documentation is necessary to enhance efficient, individualized patient care. Quality documentation has five important characteristics: it is factual, accurate, complete, current, and organized..." Accessed from: Kindle Locations 24106-24108). Elsevier Health Sciences. Kindle Edition.</p> <p>Resident #103</p>			

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	<p>Review of a "Minimum Data Set" (MDS) assessment for Resident #103 with a reference date of 1/28/25, revealed a "Brief Interview for Mental Status" (BIMS) score of 15/15 which indicated Resident #103 was cognitively intact. Section "F" of the MDS revealed Resident #103 reported it was very important to her to pursue her favorite activities.</p> <p>Review of an "Activity Participation Record" for Resident #103 revealed the following activity participation was recorded: 3/7/25 Movie, 3/10/25 Social Hour, and 3/11/25 Resident Council.</p> <p>In an interview on 3/12/25 at 2:43pm, Resident #103 reported she was certain she did not watch the facility movie that was provided on 3/7/25. Resident #103 added that she did not attend a social hour or any other social gathering on 3/10/25 because she was showering at that time. Resident #103 reported she specifically recalled not attending the Resident Council meeting documented on 3/11/25.</p> <p>In an interview on 3/12/25 at 2:51pm, Certified Nursing Assistant (CNA) "M" reported she regularly cared for Resident #103 and was confident the resident consistently recalled information accurately from day to day. CNA "M" described Resident #103 as "cognitively intact".</p> <p>In an interview on 3/12/25 at 11:03am, Activities Director (AD) "C" reported the facility maintained documentation of each resident's activity participation on a daily basis. AD "C" reported she reviewed the records and summarized the resident's attendance at care conference meetings.</p> <p>In an interview on 3/12/25 at 11:49am, Activity</p>			

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F0880 SS= D	<p>Assistant (AA) "Q" reported she noted discrepancies in resident activity participation records at times.</p> <p>In an interview on 3/12/25 at 11:56am, AA "F" reported she often waits until the end of the day to document resident activity attendance and sometimes it's difficult to remember who came to each activity.</p> <p>Infection Prevention & Control §483.80 Infection Control The facility must establish and maintain an infection prevention and control program designed to provide a safe, sanitary and comfortable environment and to help prevent the development and transmission of communicable diseases and infections. §483.80(a) Infection prevention and control program. The facility must establish an infection prevention and control program (IPCP) that must include, at a minimum, the following elements: §483.80(a) (1) A system for preventing, identifying, reporting, investigating, and controlling infections and communicable diseases for all residents, staff, volunteers, visitors, and other individuals providing services under a contractual arrangement based upon the facility assessment conducted according to §483.71 and following accepted national standards; §483.80(a)(2) Written standards, policies, and procedures for the program, which must include, but are not limited to: (i) A system of surveillance designed to identify possible communicable diseases or infections before they can spread to other persons in the facility; (ii) When and to whom possible incidents of communicable disease or infections should be reported; (iii) Standard and transmission-based precautions to be followed to prevent spread of infections; (iv)When and how isolation</p>	F0880			

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	<p>should be used for a resident; including but not limited to: (A) The type and duration of the isolation, depending upon the infectious agent or organism involved, and (B) A requirement that the isolation should be the least restrictive possible for the resident under the circumstances. (v) The circumstances under which the facility must prohibit employees with a communicable disease or infected skin lesions from direct contact with residents or their food, if direct contact will transmit the disease; and (vi)The hand hygiene procedures to be followed by staff involved in direct resident contact.</p> <p>§483.80(a)(4) A system for recording incidents identified under the facility's IPCP and the corrective actions taken by the facility. §483.80(e) Linens. Personnel must handle, store, process, and transport linens so as to prevent the spread of infection. §483.80(f) Annual review. The facility will conduct an annual review of its IPCP and update their program, as necessary. This REQUIREMENT is not met as evidenced by:</p> <p>Based on observation, interview, and record review the facility failed to implement transmission-based precautions for 1 (Resident #104) of 3 residents reviewed for isolation precautions, resulting in the potential for the spread of infection, cross-contamination, and disease transmission for residents residing in the facility.</p> <p>Findings include:</p> <p>Review of "CDC's Core Infection Prevention and Control Practices for Safe Healthcare Delivery in All Settings", published 4/12/24 by the Centers for Disease Control and Prevention revealed:</p>				

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	<p>"Adherence to infection prevention and control practices is essential to providing safe and high-quality patient care across all settings where healthcare is delivered ...core practices include: clean and disinfect ...frequently touched surfaces ...ensure proper use of personal protective equipment ...implement additional precautions (i.e., Transmission-Based Precautions) ...".</p> <p>Resident #104</p> <p>Review of an "Admission Record" revealed Resident #104 was admitted to the facility on 3/22/24 with pertinent diagnosis that included: unspecified dementia (progressive condition of decline in cognitive skills).</p> <p>Review of a "Nursing Progress Note" for Resident #104 with a reference date of 3/12/25 at 10:46am, revealed " Resident A/Ox3-4 (alert and oriented to person, place, time, situation) ...Resident c/o (complained of) severe sore throat, moist nonproductive cough noted as well ...wheezing heard on auscultation (act of listening to heart and lungs) ...PA (Physician Assistant) notified of change of condition ...check for Influenza A and B ...Resident notified of new orders ...".</p> <p>During an observation on 3/12/25 at 1:50pm, no signage for isolation precautions was present on or near Resident #104's room door. Two housekeeping staff were present in her room, steam cleaning the carpet of the room. The housekeeping staff wore KN95 masks but no other personal protective equipment (PPE). The staff did not perform hand hygiene upon leaving the room. The staff did not remove their face protection, continued down the hall wearing the same mask.</p> <p>During an observation on 3/12/25 at 1:51pm,</p>			

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	<p>Activities Director (AD) "C" entered Resident #104's room while wearing an KN95 mask but no other PPE and invited the resident to attend a large group activity in the dining room. AD "C" did not perform hand hygiene upon leaving the room. AD "C" did not remove face protection, continued down the hall wearing the same mask.</p> <p>During an interview on 3/12/25 at 1:53pm, Resident #104 reported she hadn't felt well all day and was told she should stay in her room at this time.</p> <p>During an interview on 3/12/25 at 2:07pm, Registered Nurse (RN) "I" reported Resident #104 tested positive for the flu and RN "I" had requested isolation signage and a PPE cart from housekeeping.</p> <p>During an interview on 3/12/25 at 2:10pm, Director of Nursing/Infection Preventionist (DON) "B" reported when a resident becomes symptomatic of a suspected contagious illness, isolation precautions should be implemented at the onset of the symptoms.</p> <p>Review of an "Isolation-Categories of Transmission-Based Precautions" facility policy with no reference date revealed "In addition to Standard Precautions, implement Droplet Precautions for individual documented or suspected to be infected with microorganisms transmitted by droplets ...examples of infections requiring Droplet Precautions include ...Influenza".</p> <p>Review of a Center for Disease Control droplet precautions signage revealed "Everyone must clean their hands before entering and when leaving the room...Make sure their eyes, nose and mouth are fully covered before room entry. Remove face protection before room exit."</p>			

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