

STATEMENT OF ISOLATED DEFICIENCIES WHICH CAUSE NO HARM WITH ONLY A POTENTIAL FOR MINIMAL HARM FOR SNFs AND NFs	PROVIDER #  <b>345105</b>	MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	DATE SURVEY COMPLETE:  <b>2/6/2015</b>
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NAME OF PROVIDER OR SUPPLIER  <b>UNIHEALTH POST-ACUTE CARE-HIGH POINT</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>3830 N MAIN STREET HIGH POINT, NC</b>
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ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES
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<b>F 278</b>	<p><b>483.20(g) - (j) ASSESSMENT ACCURACY/COORDINATION/CERTIFIED</b></p> <p>The assessment must accurately reflect the resident's status.</p> <p>A registered nurse must conduct or coordinate each assessment with the appropriate participation of health professionals.</p> <p>A registered nurse must sign and certify that the assessment is completed.</p> <p>Each individual who completes a portion of the assessment must sign and certify the accuracy of that portion of the assessment.</p> <p>Under Medicare and Medicaid, an individual who willfully and knowingly certifies a material and false statement in a resident assessment is subject to a civil money penalty of not more than \$1,000 for each assessment; or an individual who willfully and knowingly causes another individual to certify a material and false statement in a resident assessment is subject to a civil money penalty of not more than \$5,000 for each assessment.</p> <p>Clinical disagreement does not constitute a material and false statement.</p> <p>This REQUIREMENT is not met as evidenced by: Based on record review and staff interview, the facility failed to accurately code the Minimum Data Set (MDS) assessment for 1 of 23 sampled residents reviewed (Residents #82 ).</p> <p>Findings included:</p> <p>1. Resident #82 was originally admitted to the facility on 10/23/13 with multiple diagnoses including hypertension.</p> <p>The quarterly Minimum Data Set (MDS) assessment dated 1/8/15 indicated that Resident #82 did not receive a diuretic drug in the last 7 days.</p> <p>Review of the physician's orders revealed that Resident #82 was on Oretic (a diuretic drug) 25 milligrams (mgs) by mouth daily for hypertension.</p> <p>Review of the January, 2015 Medication Administration Record (MAR) revealed that Resident #82 had received Oretic daily.</p> <p>On 2/5/15 at 3:37 PM, Nurse # 8 was interviewed. Nurse #8 stated that she was the MDS coordinator and</p>
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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

The above isolated deficiencies pose no actual harm to the residents

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<b>F 278</b>	Continued From Page 1 that it was an error on her part for not coding the diuretic drug.
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