

STATEMENT OF ISOLATED DEFICIENCIES WHICH CAUSE NO HARM WITH ONLY A POTENTIAL FOR MINIMAL HARM FOR SNFs AND NFs	PROVIDER #  <b>345185</b>	MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	DATE SURVEY COMPLETE:  <b>7/2/2015</b>
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NAME OF PROVIDER OR SUPPLIER  <b>PREMIER LIVING AND REHAB CENTER</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>106 CAMERON STREET LAKE WACCAMAW, NC</b>
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<b>F 157</b>	<p><b>483.10(b)(11) NOTIFY OF CHANGES (INJURY/DECLINE/ROOM, ETC)</b></p> <p>A facility must immediately inform the resident; consult with the resident's physician; and if known, notify the resident's legal representative or an interested family member when there is an accident involving the resident which results in injury and has the potential for requiring physician intervention; a significant change in the resident's physical, mental, or psychosocial status (i.e., a deterioration in health, mental, or psychosocial status in either life threatening conditions or clinical complications); a need to alter treatment significantly (i.e., a need to discontinue an existing form of treatment due to adverse consequences, or to commence a new form of treatment); or a decision to transfer or discharge the resident from the facility as specified in §483.12(a).</p> <p>The facility must also promptly notify the resident and, if known, the resident's legal representative or interested family member when there is a change in room or roommate assignment as specified in §483.15(e) (2); or a change in resident rights under Federal or State law or regulations as specified in paragraph (b)(1) of this section.</p> <p>The facility must record and periodically update the address and phone number of the resident's legal representative or interested family member.</p> <p>This REQUIREMENT is not met as evidenced by: Based on record review and staff interviews, the facility failed to notify the responsible party of a positive urine culture that required contact precautions and a follow-up urologist appointment for 1 of 3 sampled residents (Resident #1).</p> <p>The findings included:</p> <p>Resident #1 was admitted to the facility on 3/31/15 with diagnoses of Chronic Kidney Disease and Urinary Tract Infection (UTI).</p> <p>Review of the medical record revealed a nursing progress note dated 6/26/15 at 7:32 PM that the results of a urine culture was received and a new antibiotic was started for a UTI. The urine culture report received by the facility on 6/16/15, showed that contact precautions were recommended. A nursing progress note dated 6/17/15 at 2:33 AM revealed contact precautions were in place due to a UTI. There was no documentation on 6/16/15 or 6/17/15 that the responsible party was notified of the Resident ' s change in treatment.</p> <p>During an interview on 7/2/15 at 10:19 AM, Nurse #2 stated that on 6/16/15 she received the results of the positive urine culture and notified the physician. The Nurse stated the physician ordered a new antibiotic, contact precautions and requested a follow-up appointment be scheduled with an urologist. The Nurse stated that she had made several attempts to notify the responsible party but was not successful and reported to the oncoming nurse that she had been unable to reach the family. The nurse stated she did not leave a message on</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 157</b>	<p>Continued From Page 1</p> <p>the responsible party ' s voice mail or document her attempts to notify the family.</p> <p>On 7/2/15 at 7:30 AM, Nurse #4 stated in an interview the Resident ' s responsible party came in to visit the Resident on 6/18/15 at 7 PM. The Nurse stated the responsible party saw the contact isolation sign and cart outside the door and asked why she had not been notified that the Resident had a UTI and was on contact precautions. The Nurse stated at that time Nurse #3 discussed the changes with the RP. Nurse #4 also stated that on that same day she informed the responsible party that the facility was going to make an appointment with an urologist because of Resident #1 ' s frequent UTIs. The Nurse stated the responsible party stated that she preferred a different urologist and would make an appointment for the Resident.</p> <p>The Administrator stated in an interview on 7/2/15 at 11:45 AM that it was the facility ' s policy to contact the responsible party within 24 hours of a change in their condition. The Administrator stated the nurses should have notified the resident ' s responsible party within that time period.</p>		