

STATEMENT OF ISOLATED DEFICIENCIES WHICH CAUSE NO HARM WITH ONLY A POTENTIAL FOR MINIMAL HARM FOR SNFs AND NFs	PROVIDER # 345552	MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	DATE SURVEY COMPLETE: 5/18/2018
NAME OF PROVIDER OR SUPPLIER THE SHANNON GRAY REHABILITATION & RECOVERY C		STREET ADDRESS, CITY, STATE, ZIP CODE 2005 SHANNON GRAY COURT JAMESTOWN, NC	
ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES		
F 661	<p>Discharge Summary CFR(s): 483.21(c)(2)(i)-(iv)</p> <p>§483.21(c)(2) Discharge Summary When the facility anticipates discharge, a resident must have a discharge summary that includes, but is not limited to, the following:</p> <ul style="list-style-type: none"> (i) A recapitulation of the resident's stay that includes, but is not limited to, diagnoses, course of illness/treatment or therapy, and pertinent lab, radiology, and consultation results. (ii) A final summary of the resident's status to include items in paragraph (b)(1) of §483.20, at the time of the discharge that is available for release to authorized persons and agencies, with the consent of the resident or resident's representative. (iii) Reconciliation of all pre-discharge medications with the resident's post-discharge medications (both prescribed and over-the-counter). (iv) A post-discharge plan of care that is developed with the participation of the resident and, with the resident's consent, the resident representative(s), which will assist the resident to adjust to his or her new living environment. The post-discharge plan of care must indicate where the individual plans to reside, any arrangements that have been made for the resident's follow up care and any post-discharge medical and non-medical services. <p>This REQUIREMENT is not met as evidenced by: Based on staff interviews and record review, the facility failed to complete a discharge summary for 1 of 1 resident (Resident #104) reviewed for planned discharge to the community.</p> <p>Findings included: Resident #104 was admitted to the facility on 1/22/18 with diagnoses that included, in part, right hip fracture.</p> <p>A review of the comprehensive Minimum Data Set (MDS) assessment dated 1/29/18 revealed Resident #104 was cognitively intact and discharge planning was in place as Resident #104 expected to be discharged to the community.</p> <p>A review of the care plan updated 1/26/18 revealed Resident #104 desired to be discharged home after she completed therapy. Care plan interventions included a family meeting to discuss resident's post discharge needs, assisting the resident with obtaining community resources and contacting the physician for discussion of concerns.</p> <p>Resident #104 discharged home on 2/16/18.</p> <p>A review of the medical record revealed a discharge instruction sheet was provided to the resident on the day of discharge. The discharge instruction sheet included information on home health services and a list of medications.</p> <p>A review of the medical record revealed no discharge summary was completed prior to or after Resident #104</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

The above isolated deficiencies pose no actual harm to the residents

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F 661	<p>Continued From Page 1 discharged home.</p> <p>On 5/18/18 at 11:45 AM an interview was completed with the Director of Nursing (DON) and Chief Operating Officer (COO). The DON stated she was unable to locate a discharge summary completed by the physician. The COO said the facility had a different physician provider when Resident #104 was there and the physician at the time had not completed all the required paperwork.</p> <p>On 5/18/18 at 11:50 AM an interview was completed with the Administrator. He stated his expectation was that the discharge summary be completed prior to a planned discharge.</p>
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