

STATEMENT OF ISOLATED DEFICIENCIES WHICH CAUSE NO HARM WITH ONLY A POTENTIAL FOR MINIMAL HARM FOR SNFs AND NFs	PROVIDER # 345384	MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	DATE SURVEY COMPLETE: 7/12/2023
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NAME OF PROVIDER OR SUPPLIER PRUITTHEALTH-FARMVILLE	STREET ADDRESS, CITY, STATE, ZIP CODE 4351 SOUTH MAIN STREET FARMVILLE, NC
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ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES
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F 580	<p>Notify of Changes (Injury/Decline/Room, etc.) CFR(s): 483.10(g)(14)(i)-(iv)(15)</p> <p>§483.10(g)(14) Notification of Changes. (i) A facility must immediately inform the resident; consult with the resident's physician; and notify, consistent with his or her authority, the resident representative(s) when there is-</p> <p>(A) An accident involving the resident which results in injury and has the potential for requiring physician intervention;</p> <p>(B) A significant change in the resident's physical, mental, or psychosocial status (that is, a deterioration in health, mental, or psychosocial status in either life-threatening conditions or clinical complications);</p> <p>(C) A need to alter treatment significantly (that is, a need to discontinue an existing form of treatment due to adverse consequences, or to commence a new form of treatment); or</p> <p>(D) A decision to transfer or discharge the resident from the facility as specified in §483.15(c)(1)(ii).</p> <p>(ii) When making notification under paragraph (g)(14)(i) of this section, the facility must ensure that all pertinent information specified in §483.15(c)(2) is available and provided upon request to the physician.</p> <p>(iii) The facility must also promptly notify the resident and the resident representative, if any, when there is-</p> <p>(A) A change in room or roommate assignment as specified in §483.10(e)(6); or</p> <p>(B) A change in resident rights under Federal or State law or regulations as specified in paragraph (e)(10) of this section.</p> <p>(iv) The facility must record and periodically update the address (mailing and email) and phone number of the resident representative(s).</p> <p>§483.10(g)(15) Admission to a composite distinct part. A facility that is a composite distinct part (as defined in §483.5) must disclose in its admission agreement its physical configuration, including the various locations that comprise the composite distinct part, and must specify the policies that apply to room changes between its different locations under §483.15(c)(9). This REQUIREMENT is not met as evidenced by: Based on record review, staff, and Responsible Party (RP) interviews, the facility failed to notify the RP of an abuse allegation that involved the resident for 1 of 3 residents sampled (Resident #14) reviewed for notification of change.</p> <p>The Findings included:</p> <p>Resident #6 was admitted to the facility on 9/30/22 with diagnoses that included intellectual disabilities, stroke, and metabolic encephalopathy.</p> <p>The quarterly Minimum Data Set assessment dated for 4/11/23 indicated Resident #14 was severely cognitively impaired.</p> <p>Review of the Initial Investigation Report dated 6/2/23 revealed Nurse #1 was notified on 6/2/23 by Certified</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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F 580	<p>Continued From Page 1</p> <p>Nursing Assistant (CNA) #2 that she had observed CNA #3 be "rough" with Resident #14 during transfer on 6/1/23. The report did not show that the RP was notified of the incident.</p> <p>Review of the 5-day Investigation Summary dated 6/8/23 revealed the investigation included staff interviews, resident interviews, skin assessment, and record review. The result was deemed unsubstantiated. The report did not show that the RP was notified of the incident.</p> <p>Review of Resident #14's progress notes revealed there was not any documentation that the RP was notified of the abuse allegation.</p> <p>A telephone interview was conducted with Resident #14's RP on 7/12/23 at 3:55 PM. The RP stated she was not notified of the abuse allegation that took place on 6/1/23 with Resident #14 and CNA #3.</p> <p>A telephone interview was attempted with Nurse #1, but she was not available during the investigation.</p> <p>An interview was completed on 7/12/23 at 4:38 PM with the previous Director of Nursing (DON). She revealed if there was an allegation of abuse, staff must let the charge nurse know immediately. Then the charge nurse would contact the DON, and the DON would notify the Administrator. The previous DON indicated the Administrator then handled the investigation and appropriate notifications.</p> <p>The Administrator was interviewed on 7/12/23 at 4:10 PM. She revealed the Investigation Summary normally included notifications, but it was not included in the abuse allegation with Resident #15 on 6/1/23.</p> <p>During a follow-up interview with the Administrator on 7/12/23 at 5:00 PM. She revealed Resident #14's RP was not notified of the abuse allegation that took place on 6/1/23, and she should have been contacted when the facility was informed.</p>
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