

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 345432	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____		(X3) DATE SURVEY COMPLETED C 05/21/2024
NAME OF PROVIDER OR SUPPLIER RIVER BEND HEALTH AND REHABILITATION			STREET ADDRESS, CITY, STATE, ZIP CODE 213 RICHMOND HILL DRIVE ASHEVILLE, NC 28806		
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F 000	INITIAL COMMENTS The survey team entered the facility on 05/13/24 to conduct a complaint investigation survey and exited on 05/14/24. Additional information was obtained offsite from 05/15/24 through 05/21/24. Therefore, the exit date was changed to 05/21/24. The following intake was investigated NC00216759. Three (3) of the 3 complaint allegations did not result in deficiency. Event ID# Q0YT11.	F 000			
F 692 SS=E	Nutrition/Hydration Status Maintenance CFR(s): 483.25(g)(1)-(3) §483.25(g) Assisted nutrition and hydration. (Includes naso-gastric and gastrostomy tubes, both percutaneous endoscopic gastrostomy and percutaneous endoscopic jejunostomy, and enteral fluids). Based on a resident's comprehensive assessment, the facility must ensure that a resident- §483.25(g)(1) Maintains acceptable parameters of nutritional status, such as usual body weight or desirable body weight range and electrolyte balance, unless the resident's clinical condition demonstrates that this is not possible or resident preferences indicate otherwise; §483.25(g)(2) Is offered sufficient fluid intake to maintain proper hydration and health; §483.25(g)(3) Is offered a therapeutic diet when there is a nutritional problem and the health care provider orders a therapeutic diet. This REQUIREMENT is not met as evidenced by: Based on record review, interviews with the Registered Dietitian, Nurse Practitioner, Medical	F 692	1. Resident number 1 was seen by nurse practitioner on 5/22/2024 related to	6/18/24	

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

TITLE

(X6) DATE

Electronically Signed

06/04/2024

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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F 692	<p>Continued From page 1</p> <p>Doctor, and staff, the facility failed to obtain weekly weights as ordered by the physician and failed to implement the recommendation for a nutritional supplement to promote weight stability and failed to implement interventions when weight loss was identified for a resident with significant weight loss for 1 of 2 residents reviewed for nutrition (Resident #1).</p> <p>Findings included:</p> <p>Resident #1 was admitted to the facility on 3/13/23 with diagnoses including dementia, chronic obstructive pulmonary disease, and cerebral vascular accident (blocked or reduced blood flow to the brain) with hemiplegia (severe or complete loss of strength or movement) affecting the left nondominated side.</p> <p>Review of the current physician's orders for medication and nutritional supplements included mirtazapine 7.5 milligrams give 1 tablet at bedtime related to symptoms and signs concerning food and fluid intake; 2.0 fortified nutrition shake give 120 milliliters four times a day; frozen nutritional supplement two times a day; give one multivitamin tablet one time a day related to abnormal weight loss; add pudding or ice cream two times a day at lunch and dinner.</p> <p>Review of the current physician's order instructed weekly weights be obtained for Resident #1 every day shift every Sunday.</p> <p>Review of Resident #1's documented weight on 3/3/24 revealed the resident weighed 124 pounds.</p> <p>The quarterly Minimum Data Set (MDS) dated</p>	F 692	<p>weight loss and by the registered dietician on 5/31/2024. New order for health shake on 6/4/2024, new order for increase Mirtazapine Oral Tablet 7.5 MG (Mirtazapine) 2 tablets at bedtime on 5/22/2024.</p> <p>2. All residents have the potential to be affected by the alleged deficient practice. All residents will have a baseline weight taken and recorded by 6/10/2024. All orders for weights will be reviewed by the DON or designee by 6/12/2024 to ensure proper frequency of weights for each resident is being followed. All residents who have significant weight changes or are less than 100LBS will be reviewed by the RD at RD's next scheduled visit. Weight variance report will be given by the DON or designee to medical director or other assigned provider and the RD for review monthly. All recommendations from the RD will be reviewed by the DON or Designee and will be acted on within 3 days after receiving recommendations. New orders for supplements or other nutritional interventions will be entered by the DON or designee.</p> <p>3. All nursing staff will be educated on the importance of obtaining and recording accurate weights and meal and supplement consumption and documentation. All nurses will be educated in reporting weight loss of 5 lbs. or greater in a week and/ or month to the DON or designee for follow-up. All inservice education will be completed by 6/18/2024.</p> <p>4. DON or designee will review monthly, weekly, and daily weights 3 times a week</p>		

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F 692	<p>Continued From page 2</p> <p>3/4/24 assessed Resident #1's cognition was moderately impaired and setup assistance was needed with eating. The MDS indicated Resident #1 weighed 124 pounds with no known loss or gain of weight.</p> <p>Review of Registered Dietitian (RD) #1's nutrition/dietary progress note dated 3/15/24 indicated Resident #1's current body weight of 124 pounds was within normal limits. RD #1's recommendations included adding a health shake with breakfast to promote weight stability and to continue monitoring weight.</p> <p>Review of Resident #1 physician's orders from 3/15/24 through 5/14/24 revealed no order to receive a health shake with breakfast.</p> <p>The care plan dated 3/20/24 indicated Resident #1's nutritional status was altered related to diagnoses including cerebral vascular accident and chronic obstructive pulmonary disease with the goal to not have significant loss through the next review. Interventions included monitor, record, and report to the Medical Doctor signs or symptoms of weight loss of 3 pounds in one week and for the Registered Dietitian to evaluate and make diet recommendations as needed.</p> <p>Review of Resident #1's diet order dated 3/24/24 was for a regular diet with minced and moist texture and regular thin liquids.</p> <p>Review of Resident #1's documented weights from 3/24/24 through 5/14/24 revealed the following: 3/24/24 = 122.5 pounds. 4/9/24 = 105.2 pounds: The weight was crossed out with a line through it and included a note</p>	F 692	for 4 weeks the 1x per week for 4 weeks, then 1x per month for 3 months, any discrepancies will be reported to the QAPI committee.		

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F 692	<p>Continued From page 3</p> <p>made by RD #2 on 5/2/24 that read "incorrect documentation." There was no documented weight to indicate Resident #1 was weighed on 4/9/24.</p> <p>4/14/24 = 113.5 pounds: The weight was crossed out with a line through it and included a note made by RD #2 on 5/2/24 that read "incorrect documentation." There was no documented weight to indicate Resident #1 was weighed on 4/14/24.</p> <p>4/28/24 = 125.5 pounds 5/8/24 = 97.4 pounds. 5/14/24 = 97.</p> <p>The weights on 4/14/24 and 4/28/24 were documented by Nurse #1.</p> <p>Attempts to interview Nurse #1 on 5/15/24 at 11:46 PM and 5/20/24 at 10:43 AM were unsuccessful.</p> <p>During an interview on 5/20/24 at 3:35 PM Register Dietitian (RD) #2 revealed she was filling in for RD #1 (the usual Dietitian) as emergency coverage during April 2024 and confirmed she crossed out Resident #1's documented weights based on what she was told. She called the facility to inquire about Resident #1 and was told by a staff member she could not recall by name the weight on 4/28/24 was correct and she entered the notation, "incorrect documentation" and crossed out the weights for 4/9/24 and 4/14/24. RD #2 revealed her nutritional review was based on the medical records and she determined there were no changes in Resident #1's meal intake over the past 30 days and nutritional interventions were already in place and since nothing else changed she made no other recommendations. RD#2 was unsure if Resident #1 was reweighed when she asked about the</p>	F 692			

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F 692	<p>Continued From page 4</p> <p>weights and stated it was unlikely Resident #1 lost approximately 28 pounds within 10 days based on the most recent weights obtained on 5/8/24 (97.4 pounds) and 5/14/24 (97 pounds).</p> <p>The weights on 5/8/24 and 5/14/28 were documented by Nurse #2.</p> <p>An interview was conducted on 5/21/24 at 10:26 AM with Nurse #2. Nurse #2 confirmed she documented Resident #1 weights on 5/8/24 and 5/14/24. Nurse #2 revealed she considered the weights obtained on 5/8/24 and 5/14/24 were accurate and described Resident #1 needed cueing and encouragement from staff during meals and had a poor appetite and ate small amounts. Nurse #2 revealed weights were obtained by the NA staff the first of every month unless there was a physician's order to be done weekly and she was unsure who was following up on weights.</p> <p>The Nurse Practitioner (NP) note dated 5/13/24 revealed Resident #1 had significant weight loss and her dentures no longer fit. There was no other information included in the progress note to address Resident #1's nutritional status or significant weight loss.</p> <p>During an interview on 5/13/24 at 3:02 PM the NP revealed she had been coming to the facility since 10/2023. She revealed Resident #1 had Covid-19 during the early part of the year and was treated with an antibiotic for post Covid-19 pneumonia. She revealed being told the dentures were not fitting or comfortable for Resident #1 but saw the resident eating in dining room afterwards and maybe assumed the issues with dentures was resolved. She stated she was aware</p>	F 692			

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F 692	<p>Continued From page 5</p> <p>Resident #1 had been having weight loss since she had Covid-19.</p> <p>An interview was conducted on 5/14/24 at 4:24 PM with the Medical Doctor (MD). The MD revealed he was unsure about the accuracy of the weights documented for Resident #1 due to the significant amount of loss documented on 5/8 /24 that indicated a weight loss of over 25% in 10 days that was questionable.</p> <p>Resident #1's diet order was changed from regular minced and moist to regular pureed with thin liquids started 5/15/24.</p> <p>An interview was conducted on 5/14/24 at 9:05 AM with a Family Member of Resident #1. The Family Member revealed he came to the facility on average twice a day and had been since 03/2023. He revealed over the last couple of months he had to encourage Resident #1 to eat and fed her because she did not initiate or stay engaged with eating during meals. He attributed her lack of appetite was due to decreased physical and mental capacity and since 05/08/24 she had rapidly lost weight and her dentures no longer fit which he attributed to her significant weight loss.</p> <p>During an interview on 5/14/24 at 12:44 Nurse Aide (NA) #1 revealed she was assigned to obtain weights and given a list of residents to be weighed. She revealed at times she was unable to obtain weights for the residents she was assigned prior to the end of her shift. NA #1 had been the assigned NA for Resident #1 and revealed the resident needed cueing to stay engaged with eating during meals but was able to feed herself. She revealed sometimes she would</p>	F 692			

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F 692	<p>Continued From page 6</p> <p>have to physically feed Resident #1 when she was not interested in eating and would put food up to the resident's mouth and encourage her to take a bite.</p> <p>During an interview on 5/14/24 at 3:57 PM the Director of Nursing (DON) revealed she acquired her position on 4/1/24 and she was aware of Resident #1's weight loss after reading the Nurse Practitioner note dated 5/13/24 and had requested a dental consult due to loose fitting dentures and an RD consult. The DON revealed weights were followed by her and the RD and Resident #1 needed to be reweighed to ensure the weight on 5/8/24 was accurate. She stated nursing staff were to report weight loss to her and the process for obtaining weights was the NA staff were given a list of residents that require them to obtain weights. The list included the resident's previous weight, and she expected the NA to inform her when there was significant weight loss or if the NA reported to the nurse, she would expect the nurse to report it.</p> <p>During an interview on 5/20/24 at 11:15 AM RD #1 confirmed she completed the nutrition review on 3/15/24 that included review of supplement intake, meal intakes over the past 14 days. She stated Resident #1 was well supplemented and typically accepting of the supplements based on the documentation on the Medication Administration Records. She was unsure why her recommendation was not implemented and stated the health shake had approximately 200 calories or less and was not recommended to prevent weight loss but to help maintain weight. The RD stated in her professional opinion it was virtually impossible for Resident #1 to have a 28-pound weight loss in 10 days and she was</p>	F 692			

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F 692	<p>Continued From page 7</p> <p>unsure how accurate the documented weights were. RD #1 revealed she was notified of current weight loss and requested to consult the nutritional status of Resident #1.</p> <p>A follow-up interview was conducted on 5/21/24 at 11:33 AM with the DON. The DON stated she would expect weekly weights were obtained as instructed by the physician's order. She confirmed the weight of 97 pounds documented on 5/14/24 was correct and Resident #1 had been reweighed to ensure it was accurate. The DON revealed she was not aware of the recommendation made on 3/15/24 by RD#1 or why it was not implemented. She revealed a physician's order should have been written and she would be reviewing the RD recommendations to ensure an order was in place.</p>	F 692			