

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

PRINTED: 06/26/2014
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 345205	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 05/09/2014
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NAME OF PROVIDER OR SUPPLIER WESTWOOD HILLS NURSING AND REHABILITATION CENTER	STREET ADDRESS, CITY, STATE, ZIP CODE 1016 FLETCHER STREET WILKESBORO, NC 28697
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F 159 SS=B	<p>483.10(c)(2)-(5) FACILITY MANAGEMENT OF PERSONAL FUNDS</p> <p>Upon written authorization of a resident, the facility must hold, safeguard, manage, and account for the personal funds of the resident deposited with the facility, as specified in paragraphs (c)(3)-(8) of this section.</p> <p>The facility must deposit any resident's personal funds in excess of \$50 in an interest bearing account (or accounts) that is separate from any of the facility's operating accounts, and that credits all interest earned on resident's funds to that account. (In pooled accounts, there must be a separate accounting for each resident's share.)</p> <p>The facility must maintain a resident's personal funds that do not exceed \$50 in a non-interest bearing account, interest-bearing account, or petty cash fund.</p> <p>The facility must establish and maintain a system that assures a full and complete and separate accounting, according to generally accepted accounting principles, of each resident's personal funds entrusted to the facility on the resident's behalf.</p> <p>The system must preclude any commingling of resident funds with facility funds or with the funds of any person other than another resident.</p> <p>The individual financial record must be available through quarterly statements and on request to the resident or his or her legal representative.</p> <p>The facility must notify each resident that receives Medicaid benefits when the amount in the resident's account reaches \$200 less than the</p>	F 159		6/3/14
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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE Electronically Signed	TITLE	(X6) DATE 05/30/2014
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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 correction is requisite to continued program participation.

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F 159	<p>Continued From page 1</p> <p>SSI resource limit for one person, specified in section 1611(a)(3)(B) of the Act; and that, if the amount in the account, in addition to the value of the resident's other nonexempt resources, reaches the SSI resource limit for one person, the resident may lose eligibility for Medicaid or SSI.</p> <p>This REQUIREMENT is not met as evidenced by: Based on record review, and staff and resident interviews, the facility failed to provide access to resident funds on weekdays after 5:00 PM and on weekends for 2 of 2 sampled residents, (Resident#68 and Resident #89) that both had personal funds accounts managed by the facility.</p> <p>The findings included:</p> <p>1. Resident #68 was admitted to the facility on 09/20/12. A review of the resident's quarterly Minimum Data Set (MDS) of 03/18/14 assessed her as cognitively alert with no long or short term memory deficits.</p> <p>During an interview with Resident #68 on 05/06/14 at 10:30 AM she stated she was only allowed to have access to her personal funds from her account during business hours Monday through Friday between 8:30 AM through 5:00 PM. Resident #68 stated that she gets money from her account from the Bookkeeping Staff. She stated that the bookkeeping staffs are not available to give her any of her money after 5:00 PM nor are they available on the weekends. Resident #68 stated that it would be nice to have access to her money after 5:00 PM and on the weekends for her personal use.</p>	F 159	<p>Westwood Hills Nursing and Rehabilitation acknowledges receipt of the Statement of Deficiencies and proposes this Plan of Correction to the extent that the summary of findings is factually correct and in order to maintain compliance with applicable rules and provisions of quality of care of residents. The Plan of Correction is submitted as a written allegation of compliance. Westwood Hills response to this Statement of Deficiencies does not denote agreement with the Statement of Deficiencies nor does it constitute an admission that any deficiency is accurate. Further, Westwood Hills reserves the right to refute any of the deficiencies on this Statement of Deficiencies through Informal Dispute Resolution, formal appeal procedure and/or any other administrative or legal proceeding.</p> <p>Residents #68 and #89 were informed of the availability and how to access their funds after hours and on weekends by the social workers. They voiced understanding. This was done on 5/30/2014.</p>		

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F 159	<p>Continued From page 2</p> <p>During an interview on 05/08/14 at 9:10 AM, with the Accounts Receivable Bookkeeper and the Administrator they reported that Resident #68 had a trust account maintained by the facility. Additionally, during this interview, 05/08/14 at 9:15 AM, the Accounts Receivable Bookkeeper stated there was \$100.00 petty cash available for residents to access Monday through Friday from 9:00 AM to 5:00 PM. She stated that she and the other Bookkeeper are the two staff with keys to access the resident's \$100.00 petty cash. She stated that neither of them works on the weekends or after 5:00 PM on weekdays. During this interview, the Administrator also stated that there is no staff at the facility after 5:00 PM or on the weekends with keys to access the cash for the residents. The Administrator further stated that if a resident did ask for funds on the weekend, she would just ask her supervisor on shift if she could cover the amount the resident wanted, but that there was no current system in place at the facility for resident access to their personal funds account on the weekends.</p> <p>During an interview with the Admissions Coordinator on 05/09/14 at 10:15 AM she reported that she reviewed the Consent/Release form with residents and families at admission, which included personal funds authorization, which read in part, "I authorize the facility to hold, safeguard, manage, pay facility charges, and account for my personal funds deposited with the facility." She also indicated that, "I tell them during the admission process they have access to their personal funds Monday through Friday 8:30 AM to 5:00 PM". She further stated that money was not available for residents on the weekends or after 5:00 PM on weekdays.</p>	F 159	<p>All current in-house interviewable residents will be made aware of the business office hours and to see the supervisor for after hours and weekends to obtain money from their accounts. This will be completed by 6/3/2014 by the social work staff or designees.</p> <p>Business office hours were posted on 5/28/2014 on the administrative hall, along with directions to see the supervisor for accessing personal fund money after hours and/or on weekends. This information will be included in the admission paperwork starting 5/28/2014.</p> <p>All staff will be retrained by the Staff Facilitator or designee of the procedure to assist residents with obtaining money from their accounts after hours and on weekends. The supervisors and department heads will be trained by the staff facilitator or designee how to access the patient accounts petty fund cash after hours and on weekends. This training will be completed by 6/3/2014. This will be included in new employee orientation starting 6/3/2014.</p> <p>Utilizing an audit tool, 5 random residents, with personal fund accounts, will be interviewed weekly x 4 to ensure that residents are aware of access to their accounts. Then, 5 residents will be interviewed monthly x 3 to ensure that residents are aware of access to their accounts. The Social Worker and/or</p>		

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F 159	<p>Continued From page 3</p> <p>2. Resident #89 was admitted to the facility on 04/27/07. Review of the MDS of 03/19/14 assessed resident as cognitive intact with no long or short term memory deficits. During the interview with Resident #89 on 05/06/14 at 11:00 AM, he stated he was only allowed access to his money during business hours Monday through Friday between 8:30 AM through 5:00 PM. Resident #89 stated he did not have access to money on weekends and after 5:00 PM on weekdays and would like to. He further stated he would like to have some money available on weekends if he needed for a snack or chewing gum.</p> <p>During an interview on 05/08/14 at 9:10 AM, with the Accounts Receivable Bookkeeper and the Administrator they reported that Resident #89 had a trust account maintained by the facility. Additionally, during this interview, 05/08/14 at 9:15 AM, the Accounts Receivable Bookkeeper stated there was \$100.00 petty cash available for residents to access Monday through Friday from 9:00 AM to 5:00 PM. She stated that she and the other Bookkeeper are the two staff with keys to access the resident's \$100.00 petty cash. She stated that neither of them works on the weekends or after 5:00 PM on weekdays. During this interview, the Administrator also stated that there is no staff at the facility after 5:00 PM or on the weekends with keys to access the cash for the residents. The Administrator further stated that if a resident did ask for funds on the weekend, she would just ask her supervisor on shift if she could cover the amount the resident wanted, but that there was no current system in place at the facility for resident access to their personal funds account on the weekends.</p>	F 159	<p>designee will conduct these interviews .</p> <p>Any issues will be identified and corrected immediately if needed. The information about their funds will be reviewed again with any resident during the audit who is not aware or do not remember . The audits will be reviewed by the Administrator with the social workers.</p> <p>The Executive QI Committee will review the results of the audits. Any needed changes or further information will be discussed at this time.</p>		

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F 159	Continued From page 4 During an interview with the Admissions Coordinator on 05/09/14 at 10:15 AM she reported that she reviewed the Consent/Release form with residents and families at admission, which included personal funds authorization, which read in part, "I authorize the facility to hold, safeguard, manage, pay facility charges, and account for my personal funds deposited with the facility." She also indicated that, "I tell them during the admission process they have access to their personal funds Monday through Friday 8:30 AM to 5:00 PM". She further stated, money was not available for residents on the weekends or after 5:00 PM on weekdays.	F 159			
F 242 SS=D	483.15(b) SELF-DETERMINATION - RIGHT TO MAKE CHOICES The resident has the right to choose activities, schedules, and health care consistent with his or her interests, assessments, and plans of care; interact with members of the community both inside and outside the facility; and make choices about aspects of his or her life in the facility that are significant to the resident. This REQUIREMENT is not met as evidenced by: Based on observations, resident and staff interviews the facility failed to honor a resident choice and provide a pull cord for a light over the resident's bed for 1 of 1 resident observed for choices. (Resident #157). The findings included: Resident #157 was re-admitted to the facility on 10/10/13 with diagnoses which included chronic	F 242	On May 9, 2014, an extension pull was added to resident #157's over bed light. He was assessed for the ability to use it at that time. A 100% audit per the census was performed for all in-house residents for the need/choice for an extension pull for their over bed lights on May 27, 2014. Extensions were added to these residents'	6/3/14	

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F 242	<p>Continued From page 5</p> <p>kidney disease, high blood pressure, liver disease, depression, diabetes and a history of falls. A review of the most recent quarterly Minimum Data Set (MDS) dated 03/12/14 indicated Resident #157 had no short term or long term memory problems and was cognitively intact for daily decision making. The MDS further indicated Resident #157 required extensive assistance by 1 staff for bed mobility and toileting.</p> <p>A review of a care plan dated 03/18/14 indicated Resident #157 required assistance with the potential to restore or maintain maximum function of self-sufficiency related to unsteady gait and lack of strength. Interventions were listed in part to have commonly used articles within reach.</p> <p>During an observation on 05/06/14 at 10:28 AM Resident #157 was lying in bed. A light fixture was attached to the wall over the head of the bed and there were 2 small short chains hanging from the right side of the fixture. 1 chain was approximately 3 inches long and the other chain was approximately 8 inches long. There was no pull cord attached to either chain for Resident #157 to turn the light off or on and the light was turned on and bright.</p> <p>During an interview on 05/06/14 at 10:29 AM Resident #157 stated he did not have a pull cord for the light fixture over his bed and he could not turn the light off or on by himself. He further stated he couldn't go to sleep at night as early as he wanted because the light was shining in his eyes and he had to wait for nursing staff to turn the light off for him. He explained it was his choice to go to sleep after supper because that was his normal routine before he came to the</p>	F 242	<p>lights on 5/27/2014. The maintenance department ordered extension pulls for all over bed lights to complete the entire facility on May 27, 2014.</p> <p>All staff will be retrained by the Staff Facilitator or designee, about honoring and reporting resident requests. This includes the use of work orders and reporting to supervisors. This will be completed by 6/3/2014. Beginning 6/3/2014, this will be added to the orientation program to all new employees.</p> <p>The maintenance department will randomly audit 10 overbed lights monthly x 3 to ensure that the pull cords are still in place utilizing an audit tool.</p> <p>Staff will be randomly audited, utilizing an audit tool, by the QI nurse or designee about honoring resident choices and requests. This will include 5 staff members per month x 3, then 5 staff members quarterly x3 to ensure continued compliance.</p> <p>The Executive QI Committee will review the audits quarterly. Any further suggestions or changes will be made during this time.</p>		

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F 242	<p>Continued From page 6</p> <p>facility and if he stayed up late he felt very tired the next day. He further explained he had to wait until staff had time to turn the light off for him and they usually turned the light off between 8:30 and 9:00 PM when they got his roommate ready for bed. He stated he had told nursing staff several times he needed a pull cord on the light because the chains on the light were so short he couldn't reach them but they had not fixed it.</p> <p>During an observation on 05/07/14 at 9:45 AM there was no pull cord attached to the chains on the light fixture over Resident #157's bed and the light was turned on and was bright.</p> <p>During an interview on 05/08/14 at 6:58 AM with Nurse Aide (NA) #1 she stated she worked the 11:00 PM - 7:00 AM shift and was usually assigned to Resident #157's care. She explained there was supposed to be a pull cord attached to the chains on the light fixture over the head of the resident's bed if the resident wanted to turn their light off and on by themselves. She stated she did not realize Resident #157 did not have a pull cord attached to the chains on his light fixture.</p> <p>During an interview on 05/08/14 at 7:18 AM Nurse #1 who was also the night shift nursing supervisor explained there was supposed to be a pull cord attached to the chains on the light fixture over the resident's bed and the other end of the pull cord was tied to the bed rail so the resident could reach it to turn their light off and on by themselves. She stated if a resident did not have a pull cord but wanted one, nursing staff should notify a supervisor or maintenance to get one for the resident.</p> <p>During an observation on 05/08/14 at 3:35 PM</p>	F 242			

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F 242	<p>Continued From page 7</p> <p>there was no pull cord attached to the chains on the light over Resident #157's bed and the light was turned on and bright.</p> <p>During an interview on 05/08/14 at 4:30 PM with NA #2 she stated she worked the 3:00 PM to 11:00 PM shift and routinely provided care for Resident #157. She explained Resident #157 had asked her to turn his light off at night so that he could go to sleep. She stated she had not requested a pull cord for the light over his bed because she didn't realize he wanted the cord so he could turn the light off and on by himself.</p> <p>During an observation on 05/09/14 at 9:02 AM Resident #157 was lying in bed and his left arm covered his eyes. The light over his bed was turned on and bright and there was no pull cord attached to the chains on the light over Resident #157's bed.</p> <p>During an interview on 05/09/14 at 9:37 AM Nurse #2 who was also the day shift charge nurse verified Resident #157 was a fall risk and preferred to stay in bed with his privacy curtains closed around his bed. She stated she was not sure if there was a pull cord attached to the chains on Resident #157's light fixture over his bed but if Resident #157 wanted a pull cord on his light nursing staff should have requested one from maintenance.</p> <p>During an interview on 05/09/14 at 9:50 AM Nurse #3 explained it was her understanding that a resident or family had to request for a pull cord to be attached to the light fixture over the resident's bed because some residents wanted them but other residents did not want them. She stated there was no audit process to check to see</p>	F 242			

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F 242	<p>Continued From page 8</p> <p>if residents who wanted a pull cord received them. She also stated she had not been told Resident #157 did not have a pull cord on his light over his bed or that he had requested one.</p> <p>During an interview 05/09/14 at 10:09 AM the Maintenance Assistant, who was in charge of maintenance due to the absence of the Maintenance Director explained they used work orders for staff to notify maintenance when they needed repairs or needed pull cords for light fixtures. He further explained they ordered pull cords from a plumbing company and kept them in stock in the maintenance shop for residents who requested them. He stated when they initially installed the light fixtures they cut the chains to prevent them from contacting electrical outlets and creating a shock hazard and then they attached a pull cord to the shortened chains on the light fixture so residents could turn the light off and on by themselves. He further stated he relied on nursing staff to fill out a work order or tell him when residents needed a pull cord on the light over their bed but he had not received a work order to put a pull cord on Resident #157's light.</p> <p>During an interview on 05/09/14 at 11:38 AM the Director of Nursing stated it was her expectation for nursing staff to honor resident choices. She explained there was no system in place to check for pull cords on the light fixtures over resident's beds but she expected for nursing staff to notify maintenance when a resident requested a pull cord so they could turn the light off and on by themselves.</p> <p>During an observation on 05/09/14 at 12:08 PM in Resident #157's room the DON asked Resident</p>	F 242			

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F 242	Continued From page 9 #157 if he wanted a pull cord to be attached to the chains on the light fixture over his bed and Resident #157 confirmed he wanted a pull cord on the light so he could turn it off and on by himself. The DON verified Resident #157 could not reach the chains located on the light fixture over his bed and needed a pull cord to turn the light off and on by himself.	F 242		