STATEMENT OF ISOLATED DEFICIENCIES WHICH CAUSE NO HARM WITH ONLY A POTENTIAL FOR MINIMAL HARM FOR SNFs AND NFs

PROVIDER # MULTIPLE CONSTRUCTION DATE SURVEY
345570 A. BUILDING: ________________ 5/2/2017
B. WING ________________

STATEMENT OF DEFICIENCIES NO HARM WITH ONLY A POTENTIAL FOR MINIMAL HARM FOR SNFs AND NFs

NAME OF PROVIDER OR SUPPLIER
HUNTERSVILLE HEALTH & REHAB CENTER

STREET ADDRESS, CITY, STATE, ZIP CODE
13835 BOREN STREET HUNTERSVILLE, NC

ID PREFIX TAG

SUMMARY STATEMENT OF DEFICIENCIES

F 203 483.15(c)(3)-(6)(8) NOTICE REQUIREMENTS BEFORE TRANSFER/DISCHARGE

(c) (3) Notice before transfer. Before a facility transfers or discharges a resident, the facility must-

(i) Notify the resident and the resident’s representative(s) of the transfer or discharge and the reasons for the move in writing and in a language and manner they understand. The facility must send a copy of the notice to a representative of the Office of the State Long-Term Care Ombudsman.

(ii) Record the reasons for the transfer or discharge in the resident’s medical record in accordance with paragraph (c)(2) of this section; and

(iii) Include in the notice the items described in paragraph (b)(5) of this section.

(c) (4) Timing of the notice.

(i) Except as specified in paragraphs (b)(4)(ii) and (b)(8) of this section, the notice of transfer or discharge required under this section must be made by the facility at least 30 days before the resident is transferred or discharged.

(ii) Notice must be made as soon as practicable before transfer or discharge when-

(A) The safety of individuals in the facility would be endangered under paragraph (b)(1)(ii)(C) of this section;

(B) The health of individuals in the facility would be endangered, under paragraph (b)(1)(ii)(D) of this section;

(C) The resident’s health improves sufficiently to allow a more immediate transfer or discharge, under paragraph (b)(1)(ii)(B) of this section;

(D) An immediate transfer or discharge is required by the resident’s urgent medical needs, under paragraph (b)(1)(ii)(A) of this section; or

(E) A resident has not resided in the facility for 30 days.

(c) (5) Contents of the notice. The written notice specified in paragraph (c)(3) of this section must include the following:

(i) The reason for transfer or discharge;

(ii) The effective date of transfer or discharge;

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

Event ID: 7IET11
### STATEMENT OF ISOLATED DEFICIENCIES WHICH CAUSE PROVIDER # MULTIPLE CONSTRUCTION DATE SURVEY

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#### SUMMARY STATEMENT OF DEFICIENCIES

- **F 203**
  - (iii) The location to which the resident is transferred or discharged;
  
  (iv) A statement of the resident’s appeal rights, including the name, address (mailing and email), and telephone number of the entity which receives such requests; and information on how to obtain an appeal form and completing the form and submitting the appeal hearing request;
  
  (v) The name, address (mailing and email) and telephone number of the Office of the State Long-Term Care Ombudsman;
  
  (vi) For nursing facility residents with intellectual and developmental disabilities or related disabilities, the mailing and email address and telephone number of the agency responsible for the protection and advocacy of individuals with developmental disabilities established under Part C of the Developmental Disabilities Assistance and Bill of Rights Act of 2000 (Pub. L. 106-402, codified at 42 U.S.C. 15001 et seq.); and
  
  (vii) For nursing facility residents with a mental disorder or related disabilities, the mailing and email address and telephone number of the agency responsible for the protection and advocacy of individuals with a mental disorder established under the Protection and Advocacy for Mentally Ill Individuals Act.

(c)(6) Changes to the notice. If the information in the notice changes prior to effecting the transfer or discharge, the facility must update the recipients of the notice as soon as practicable once the updated information becomes available.

(c)(8) Notice in advance of facility closure. In the case of facility closure, the individual who is the administrator of the facility must provide written notification prior to the impending closure to the State Survey Agency, the Office of the State Long-Term Care Ombudsman, residents of the facility, and the resident representatives, as well as the plan for the transfer and adequate relocation of the residents, as required at § 483.70(l).

This REQUIREMENT is not met as evidenced by:

Based on staff interview and record review, the facility failed to include the name, address and telephone number of the State long term care ombudsman in an immediate discharge notice for 1 of 1 resident who received an immediate discharge notice (Resident #1).

The findings included:

Resident #1 was admitted to the facility on 01/23/17.

Review of a Nursing Home Notice of Transfer/Discharge dated 04/21/17 revealed the administrator signed an immediate discharge notice due to a danger to self and others. The notice did not list the long-term care ombudsman's name, address and telephone number. The section was blank.

Interview with the Administrator on 05/02/17 at 2:30 PM revealed the omission of the ombudsman information was an oversight. The Administrator reported the facility orally notified the ombudsman but the
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<td>omission of the information given to Resident #1's family member was an error. The Administrator reported the information should have been listed on the discharge notice.</td>
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