

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

PRINTED: 06/14/2017
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 345358	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____		(X3) DATE SURVEY COMPLETED 05/11/2017
NAME OF PROVIDER OR SUPPLIER LOUISBURG HEALTHCARE & REHABILITATION CENTER			STREET ADDRESS, CITY, STATE, ZIP CODE 202 SMOKETREE WAY LOUISBURG, NC 27549		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETION DATE	
F 170 SS=C	<p>483.10(g)(8)(i)(9)(i)-(iii)(h)(2) RIGHT TO PRIVACY - SEND/RECEIVE UNOPENED MAIL</p> <p>(g)(8) The resident has the right to send and receive mail, and to receive letters, packages and other materials delivered to the facility for the resident through a means other than a postal service, including the right to:</p> <p>(i) Privacy of such communications consistent with this section; and</p> <p>(g)(9) communications such as email and video communications and for internet research.</p> <p>(i) If the access is available to the facility</p> <p>(ii) At the resident's expense, if any additional expense is incurred by the facility to provide such access to the resident.</p> <p>(iii) Such use must comply with State and Federal law.</p> <p>(h)(2) The facility must respect the residents right to personal privacy, including the right to privacy in his or her oral (that is, spoken), written, and electronic communications, including the right to send and promptly receive unopened mail and other letters, packages and other materials delivered to the facility for the resident, including those delivered through a means other than a postal service. This REQUIREMENT is not met as evidenced by: Based on staff and resident interviews, the facility failed to deliver mail to residents in the facility on Saturday.</p> <p>The findings included:</p>	F 170	<p>F170 Standard Disclaimer: This plan of correction is provided as a necessary requirement of continued participation in the Medicare and Medicaid</p>	5/26/17	

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

TITLE

(X6) DATE

Electronically Signed

05/22/2017

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 170	Continued From page 1 During an interview on 5/8/17 at 12:30 PM, the facility Resident Council President revealed facility mail was delivered to the post office, but she did not know if anyone went to pick up the mail from the post office on Saturday. She further stated she had not known mail to be delivered to residents in the facility on Saturday. During an interview on 5/11/17 at 10:11 AM, the facility Activity Director stated she thought a named nurse delivered mail to residents on weekends. She revealed the named nurse used to deliver mail and she worked every weekend. During an interview on 5/11/17 at 10:13 AM, the facility Office Manager revealed no one delivered mail to residents on weekends. She stated the Activity Director used to deliver mail on weekends, but she no longer worked on Saturday. She stated the mailman delivered mail to a post office box. During an interview on 5/11/17 at 11:35 AM, the Administrator stated they were aware of the problem and they would have the mail delivered to the facility instead of the mail being delivered to post office. The Administrator further revealed the weekend supervisor would deliver mail to residents in the facility.	F 170	program(s) and does not, in any manner, constitute an admission to the validity of the alleged deficient practice. All resident have the probability of being affected by this citation. The Business Office Manager provided a change of address information to the Postal Service on 05/22/17 to eliminate the Post Office Box. The Environmental Services director has purchased and will install a mailbox at the facility on 05/26/2017. The restorative aides were in-serviced by the Administrator on 05/17/2017 to their responsibility to collect and distribute mail to residents on Saturdays. Compliance will be monitored utilizing a Mail Delivery QI tool completed by the Restorative Aides. The tool will be reviewed weekly x 1 month then every other week X 1 month by the Administrator. Results of the audits will be presented to the Quality Assurance Performance Improvement Committee (QAPI) monthly for review and recommendations for two months. All corrective action will be completed by May 26, 2017.		