<table>
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<tr>
<th>ID</th>
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<th>SUMMARY STATEMENT OF DEFICIENCIES</th>
<th>ID</th>
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<th>PROVIDER'S PLAN OF CORRECTION</th>
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<tbody>
<tr>
<td>F 249</td>
<td>SS=B</td>
<td>483.24(c)(2)(i)(ii) QUALIFICATIONS OF ACTIVITY PROFESSIONAL</td>
<td>F 249</td>
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<td>(c)(2)</td>
<td>The activities program must be directed by a qualified professional who is a qualified therapeutic recreation specialist or an activities professional who-</td>
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<td>(i)</td>
<td>Is licensed or registered, if applicable, by the State in which practicing; and</td>
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<td>(ii)</td>
<td>Is: (A) Eligible for certification as a therapeutic recreation specialist or as an activities professional by a recognized accrediting body on or after October 1, 1990; or (B) Has 2 years of experience in a social or recreational program within the last 5 years, one of which was full-time in a therapeutic activities program; or (C) Is a qualified occupational therapist or occupational therapy assistant; or (D) Has completed a training course approved by the State.</td>
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<td>This REQUIREMENT is not met as evidenced by:</td>
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<td>Based on observations, record review, and staff and resident interviews, the facility failed to provide a full-time Activities Director responsible for developing and implementing an activities program that met the needs and interest of each resident.</td>
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<td>The findings included:</td>
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<td>A review of a list of facility department managers revealed no name was provided for the activities</td>
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The statements included are not an admission and do not constitute agreement with the alleged deficiencies herein. The plan of correction is completed in the compliance of state and federal regulations as outlined. To remain in compliance with all federal and state regulations the center has taken or will take the actions set forth in the following plan of correction. The following plan of correction constitutes the center’s
department. Observations during tour of the facility beginning at 8:09 AM on 09/25/17 revealed no activity calendar schedules for the month of September were present in resident rooms or posted in hallways accessible to residents. On 09/25/17 at 1:00 PM a group of residents were observed in the activity room bowling with a video game which was conducted by a resident's family member. On 09/25/17 at 2:00 PM a group of residents were observed playing bingo in the main dining room. This activity was followed by piano music being provided by an outside participant on the facility piano in the main dining room. A review of scheduled activities listed on calendars for June, July, August, and September were conducted. The facility was providing limited group activities weekdays, weekends and some evenings. At least 2 or more activities were provided each day. An interview was conducted with Resident #7 on 09/25/17 at 9:19 AM. A Minimum Data Set (MDS) quarterly assessment dated 08/08/17 indicated the resident's cognition was intact. Resident #7 confirmed the facility had been without an Activity Director (AD) since March 2017. The resident stated a nursing assistant (NA) had been filling in when she could. An interview was conducted with NA #1 on 09/25/17 at 9:41 AM. The NA stated she had been helping with activities for the residents when she had time. She stated she was also helping with staffing on resident halls as a nursing assistant. NA #1 stated she had found a local community college that provided classes she could take to become a certified AD and was willing to take those classes. After the last AD left in June, the facility approached her about taking the position. She added due to staffing issues,
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the facility had not let her do activities full time.
NA #1 stated it was difficult to carry a resident
load on a unit in the nursing home and be
responsible for activities at the same time. The
NA stated she helped with activities on her off
days. She always had the monthly birthday party
for residents since half of the residents in the
facility participated in this and she had provided
other activities as well. NA #1 stated residents
were helping with Bingo and she made sure
prizes were available for the winners.

An interview was conducted with Resident #8 on
09/25/17 at 10:30 AM. A MDS quarterly
assessment dated 06/03/17 indicated the
resident's cognition was intact. Resident #8
confirmed there had been no AD for several
months. The resident stated bingo was always
provided on Mondays, Wednesdays, and
Saturdays at 2:00 PM. She added a singing
group provided entertainment 3 times a month
and church services were always held on
Sundays. Resident #8 stated other activities such
as games were not being provided weekly.

During an interview on 09/25/17 at 4:19 PM the
Administrator confirmed the facility's AD left in
March 2017. The AD position was filled in June.
This person started June 1st and resigned June
19th.

An interview was conducted with Resident #9 on
09/26/17 at 8:30 AM. A quarterly MDS
assessment dated 07/10/17 indicated the
resident's cognition was intact. Resident #9
stated she called bingo was always
provided on Mondays, Wednesdays, and
Saturdays at 2:00 PM. She added a singing
group provided entertainment 3 times a month
and church services were always held on
Sundays. Resident #9 stated other activities such
as games were not being provided weekly.

During an interview on September 29, 2017.
2) Education was also provided to the
Administrator on September 26, 2017 that
calendars needed to be posted in resident
rooms outlining upcoming activities so
that if the resident wishes to attend they
can let staff know so that arrangements
could be made to get the resident to the
activity.

3) Activity Aide and Administrator were
educated that 4-5 activities a day needed
to be posted and provided.

4) On September 28, 2017 made an offer
doing one to a Certified Activity
Director. During the period that the facility
is waiting for the Activity Director to start in
the facility the facility Certified
Occupational Therapy Assistant will
ensure that activities are provided by the
Activities Aide and approve with the
Administrator the activity calendar that is
prepared.

5) Activity Aide was re-educated on
documentation in the residents medical
record the participation of the residents in
activities.

6) During resident council on September
28, the residents presented to the
Administrator and the Activity Aide was
Activities they would be interested in.

The monitoring procedure to ensure that
the plan of correction is effective and that
specific deficiency cited remains corrected
Continued From page 3

on 09/26/17 at 11:22 AM. NA #1 stated after the AD left in June the facility approached her in regards to taking the AD position. Since June, she had been acting as a NA on the halls with resident assignments and doing the AD job. NA #1 stated she did not provide a September calendar of scheduled activities to the residents because she just did not have time to get it done. During an additional interview on 09/26/17 at 11:45 AM the Administrator stated after the last AD left in June, she approached NA #1 about taking the position. The Administrator added due to staffing issues, she had not made NA #1 a full-time AD.

An interview was conducted with Resident #10 on 09/26/17 at 11:37 AM. A MDS quarterly assessment dated 06/21/17 indicated the resident's cognition was intact. Resident #10 stated she missed having a full-time AD. She stated the facility wasn't providing as many activities as they did when there was an AD. An interview was conducted with Resident #11 on 09/26/17 at 11:40 AM. A MDS quarterly assessment dated 07/11/17 indicated the resident's cognition was intact. Resident #11 stated the facility had provided some activities but not as it was when they had a full-time AD. He stated he had no complaint and felt fortunate to be at this facility.

and/or in compliance with the regulatory requirements; 1) The Certified Occupational Therapist will complete Weekly Audits to ensure that the programs are being provided as indicated on the calendars posted for the residents.

a) Up to 10 patients that attended activities, documentation will be checked to ensure that Activity Aide documented participation.

b) 4-5 Activities were provided daily.

c) Calendars are posted in each residents room.

This audit will completed weekly for a period of 1 month and then every two weeks for a period of two months.

During Corporate Nurse visits, the Corporate Nurse will complete an audit looking for the same information as audited by facility Certified Occupational Therapist and Activity Director and will be completed for a period of weekly for 1 month and every two weeks for a period of 2 months.

The title of the person responsible for implementing the acceptable plan of correction – The Administrator will be responsible to ensure implementation of this Plan of Correction and ensure that plan is followed with verification by the Corporate Nurse Consultant during facility visits. Results of the audits will be reviewed monthly during the Quality Assurance Performance Improvement Committee Meeting to ensure compliance with plan and revisions if needed.