## DEPARTMENT OF HEALTH AND HUMAN SERVICES

CENTERS FC	R MEDICARE & MEDICAID SERVICES			"A" FOR			
STATEMENT OF	F ISOLATED DEFICIENCIES WHICH CAUSE	PROVIDER #	MULTIPLE CONSTRUCTION	DATE SURVEY			
NO HARM WITH ONLY A POTENTIAL FOR MINIMAL HARM			A. BUILDING:	COMPLETE:			
FOR SNFs AND	NFs	345547	B. WING	11/16/2018			
NAME OF PROV	/IDER OR SUPPLIER	STREET ADDRESS, C	TTY, STATE, ZIP CODE				
CAMDEN HEALTH AND REHABILITATION		1 MARITHE CO	URT				
		GREENSBORO,	GREENSBORO, NC				
ID PREFIX							
TAG	SUMMARY STATEMENT OF DEFICIEN	CIES					
F 623	Notice Requirements Before Transfer/Discharge CFR(s): 483.15(c)(3)-(6)(8)						
	\$483.15(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 Stat						
	(ii) Record the reasons for the transfer o	r discharge in the reside	nt's medical record in accordance with				
	paragraph (c)(2) of this section; and						
	(iii) Include in the notice the items described in paragraph (c)(5) of this section.						
	§483.15(c)(4) Timing of the notice.						
	(i) Except as specified in paragraphs (c)(4)(ii) and (c)(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 $(c)(1)(i)(C)$ of this section; (D) The health of individuals in the facility would be an denormal under paragraph $(c)(1)(i)(D)$ of this						
	(B) The health of individuals in the facility would be endangered, under paragraph $(c)(1)(i)(D)$ of this						
	section; (C) The resident's health improves sufficiently to allow a more immediate transfer or discharge, under						
	paragraph (c)(1)(i)(B) of this section; (D) An immediate transfer or discharge is required by the resident's urgent medical needs, under paragraph						
	(D) An immediate transfer or discharge is required by the resident's urgent medical needs, under paragraph (c)(1)(i)(A) of this section; or						
	(E) A resident has not resided in the facility for 30 days.						
	\$483.15(c)(5) Contents of the notice. The written notice specified in paragraph (c)(3) of this section must						
	include the following:	le written notice specifié	a in paragraph (c)(3) of this section must				
	(i) The reason for transfer or discharge;						
	(ii) The effective date of transfer or discharge;						
	(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 assistance in 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 pursing facility residents with intellectual and developmental disabilities or related disabilities, the						
	(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						

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

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## DEPARTMENT OF HEALTH AND HUMAN SERVICES

	NT OF HEALTH AND HUMAN SERVICES OR MEDICARE & MEDICAID SERVICES			A "A" FOR		
STATEMENT C	OF ISOLATED DEFICIENCIES WHICH CAUSE	PROVIDER #	MULTIPLE CONSTRUCTION	DATE SURVEY		
NO HARM WITH ONLY A POTENTIAL FOR MINIMAL HARM FOR SNFs AND NFs			A. BUILDING:	COMPLETE:		
		345547	B. WING	11/16/2018		
NAME OF PRO	WIDER OR SUPPLIER	STREET ADDRESS,	CITY, STATE, ZIP CODE	I		
CAMDEN HEALTH AND REHABILITATION			1 MARITHE COURT			
		GREENSBORO, NC				
ID PREFIX						
TAG	SUMMARY STATEMENT OF DEFICIEN	ICIES				
F 623	Continued From Page 1					
	disorder established under the Protection and Advocacy for Mentally Ill Individuals Act.					
	§483.15(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.					
	8483.15(c)(8) Notice in advance of facil	ity closure				
	\$483.15(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(1). This REQUIREMENT is not met as evidenced by:					
	Based on resident and staff interviews and record review, the facility failed to provide the resident and					
	resident representative a written notification for the reason for transfer to the hospital and failed to provide a					
	copy of the notice to the Ombudsman for 1 of 2 residents (Resident #104) reviewed for hospitalization.					
	Findings included:					
	Resident #104 was admitted to the facility on 10/16/18 with diagnoses that included, in part, cerebrovascular accident and diabetes.					
	A review of the most recent comprehensive minimum data set (MDS) assessment dated 10/23/18 revealed Resident #104 was cognitively intact.					
	A review of the medical record revealed Resident #104's representative was a family member.					
	A review of the medical record revealed Resident #104 was transferred to the hospital on 11/8/18 for a stroke					
	evaluation. The resident returned to the facility on $11/12/18$ . No written notice of transfer was documented to					
	have been provided to the resident, resident representative or Ombudsman.					
	On 11/13/18 at 3:38 PM an interview was completed with Resident #104. She stated she went to the hospital					
	on 11/8/18 after she suffered a stroke. She reported she had not received a transfer/discharge notice when she					
	was sent to the hospital.					
	On 11/15/18 at 11:38 AM an interview was completed with Nurse #1. She stated Resident #104 had a history					
	of stroke. She said when she came to work the morning the resident transferred to the hospital, Resident #104					
	reported to her she had difficulty "getting her words out." Nurse #1 performed neuro-checks and after the nurse aide attempted to have Recident #104 stand and she was unable. Nurse #1 called the physician and					
	nurse aide attempted to have Resident #104 stand and she was unable, Nurse #1 called the physician and obtained an order to have Resident #104 sent to the emergency room. Nurse #1 said that typically a medical					
	form that included diagnoses, medications, vital signs and other pertinent medical information was sent with a					
	resident when transferred to the hospital. She reported she had not sent a transfer/discharge notice with the					
	resident to the hospital and was unaware she was required to send the notice whenever a resident transferred					

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## DEPARTMENT OF HEALTH AND HUMAN SERVICES

CENTERS FOR	MEDICARE & MEDICAID SERVICES			"A" FORM										
STATEMENT OF ISOLATED DEFICIENCIES WHICH CAUSE		PROVIDER #	MULTIPLE CONSTRUCTION	DATE SURVEY										
NO HARM WITH ONLY A POTENTIAL FOR MINIMAL HARM			A. BUILDING:	COMPLETE:										
FOR SNFs AND NFs		245547		11/17/2019										
		345547	B. WING	11/16/2018										
NAME OF PROVID	DER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE												
CAMDEN HEALTH AND REHABILITATION		1 MARITHE CO												
		GREENSBORO, NC												
ID														
PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES													
IAG		J												
F 623	Continued From Page 2													
	to the hospital.													
	On 11/15/18 at 11:48 AM an interview was completed with the Business Office Manager. She stated she													
	thought the nurses contacted the resident representative when a resident transferred to the hospital. She said she typically sent a transfer/discharge notice when a resident was issued a 30 day notice of discharge or when													
	a resident transferred to another facility but h													
	She further stated she had not sent notification													
	and said she was unaware notices were supp		-											
	Ombudsman.													
	On 11/15/18 at 2:39 PM an interview was co													
	when Resident #104 transferred to the hospital but had not received a transfer/discharge notice in the mail. He further stated if a notice was mailed it might have been sent to Resident #104's home address but he hadn't													
	ladn't													
	checked her mail in recent days.													
	On 11/16/18 at 8:32 AM an interview was completed with the Ombudsman. She said the facility had not sent													
		otices of residents who transferred to the hospital and stated the facility typically only sent notices to												
	her office when they transferred a resident to another skilled nursing facility.													
	On 11/16/18 at 4:02 PM an interview was completed with the Administrator. She stated there was a blank													
	transfer/discharge notice on every chart that													
resident was sent to the hospital. She said the nurse who sent Resident #104 to the hospital was new and likely unaware of the process for transfer/discharge notices. She stated she expected the nurse to send the transfer/discharge notice when a resident was sent to the hospital. The Administrator further stated she expected the Ombudsman be notified when residents were transferred to the hospital and said the Medical														
								Records Director was supposed to have sent this information.						
On 11/16/18 at 4:20 PM an interview was co	mpleted with the N	ledical Records Director. She reported sl	he											
	was told that day of her responsibility to send notifications to the Ombudsman when a resident													
	transferred/discharged to the hospital.													

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