

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>345516</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>C</b> <b>09/20/2019</b>
NAME OF PROVIDER OR SUPPLIER  <b>CONOVER NURSING AND REHAB CTR</b>			STREET ADDRESS, CITY, STATE, ZIP CODE <b>920 4TH STREET SOUTHWEST</b> <b>CONOVER, NC 28613</b>	
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E 000	Initial Comments	E 000		
F 000	INITIAL COMMENTS	F 000		
F 641 SS=B	<p>Accuracy of Assessments CFR(s): 483.20(g)</p> <p>§483.20(g) Accuracy of Assessments. The assessment must accurately reflect the resident's status. This REQUIREMENT is not met as evidenced by: Based on staff interviews and record review, the facility failed to accurately code the Minimum Data Set (MDS) related to prognosis of life for 6 of 8 residents who received hospice care (Residents #3, #8, #12, #15, #58 and #59). Additionally, the facility failed to code 1 of 3 sampled residents (Resident #7) with a Level II Preadmission Screen Resident Review and having an intellectual disability.</p> <p>The findings included:</p> <p>1. Resident #3 was admitted to the facility on 10/17/17. Resident #3 was admitted to hospice services on 12/22/17.</p> <p>Review of Resident #3's hospice recertification</p>	F 641	<p>1. The MDS assessments related to prognosis of life for Residents #3, 8, 12, 15, 58, &amp; 59 were immediately corrected on 9/19/19 to accurately reflect prognosis of life. The MDS assessment for Resident #7 was also immediately corrected on 9/19/19 to reflect a Level II PASRR.</p> <p>2. An audit was completed by the MDS Coordinator on 9/19/19 on all residents receiving hospice services and/or having a level II PASRR. No other errors were identified in MDS coding.</p> <p>3.</p>	10/4/19

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

TITLE

(X6) DATE

Electronically Signed

10/07/2019

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 641	<p>Continued From page 1</p> <p>signed and dated by a physician on 03/19/19, 05/06/19 and on 07/14/19 revealed the physician certified: "Based on the patient's diagnosis and current condition, I expect this patient has a limited life expectancy of 6 months or less, if the terminal illness runs its normal course, and hereby certify this patient for hospice care."</p> <p>Review of Resident #3's annual Minimum Data Set (MDS) dated 12/27/18 revealed the MDS indicated Resident #3 received hospice care. The MDS indicated Resident #3 did not have a prognosis of life expectancy of less than 6 months.</p> <p>Review of Resident #3's quarterly MDS dated 03/28/19 revealed Resident #3 received hospice care. The MDS indicated Resident #3 did not have a prognosis of life expectancy of less than 6 months.</p> <p>Review of Resident #3's quarterly MDS dated 06/27/19 revealed Resident #3 received hospice care. The MDS indicated Resident #3 did not have a prognosis of life expectancy of less than 6 months.</p> <p>Interview with the MDS Coordinator on 09/19/19 at 10:35 AM revealed Resident #3's prognosis should be marked less than 6 months. The MDS Coordinator explained the section for prognosis was coded in error.</p> <p>Interview with the Director of Nursing (DON) on 09/19/19 at 10:41 AM revealed the MDS should be accurate and reflect Resident #3's prognosis of life.</p> <p>2. Resident #8 was admitted to the facility on</p>	F 641	<p>Education was provided on 9/20/2019 to the MDS Coordinator on completing the MDS to accurately reflect the resident's status.</p> <p>4. The MDS Coordinator and/or designee will monitor all MDS assessments once monthly to ensure accuracy of coding related to hospice and level II PASRR for three consecutive months. Results will be reviewed and discussed in the monthly Quality Assurance Performance Improvement Committee meetings. The Quality Assurance Committee will assess and modify the action plan as needed to ensure continued compliance.</p>	

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F 641	<p>Continued From page 2</p> <p>05/10/19 and began hospice care on 08/09/19.</p> <p>Review of Resident #8's significant change Minimum Data Set (MDS) dated 08/16/19 revealed the MDS indicated Resident #8 received hospice care. The MDS indicated Resident #8 did not have a prognosis of life expectancy of less than 6 months.</p> <p>Interview with the MDS Coordinator on 09/19/19 at 10:35 AM revealed Resident #8's prognosis should be marked less than 6 months. The MDS Coordinator explained the section for prognosis was coded in error.</p> <p>Interview with the Director of Nursing (DON) on 09/19/19 at 10:41 AM revealed the MDS should be accurate and reflect Resident #8's prognosis of life.</p> <p>3. Resident #12 was admitted to the facility on 10/30/18 and began hospice care on 08/16/19.</p> <p>Review of Resident #12's significant change Minimum Data Set (MDS) dated 08/23/19 revealed the MDS indicated Resident #12 received hospice care. The MDS indicated Resident #12 did not have a prognosis of life expectancy of less than 6 months.</p> <p>Interview with the MDS Coordinator on 09/19/19 at 10:35 AM revealed Resident #12's prognosis should be marked less than 6 months. The MDS Coordinator explained the section for prognosis was coded in error.</p> <p>Interview with the Director of Nursing (DON) on 09/19/19 at 10:41 AM revealed the MDS should be accurate and reflect Resident #12's prognosis</p>	F 641			

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F 641	<p>Continued From page 3 of life.</p> <p>4. Resident #15 was admitted to the facility on 03/02/15 and began hospice care on 02/14/19.</p> <p>Review of Resident #15's hospice recertification signed and dated by a physician on hospice admission, 03/06/19 and on 05/28/19 revealed the physician certified: "Based on the patient's diagnosis and current condition, I expect this patient has a limited life expectancy of 6 months or less, if the terminal illness runs its normal course, and hereby certify this patient for hospice care."</p> <p>Review of Resident #15's significant change Minimum Data Set (MDS) dated 02/28/19 revealed the MDS indicated Resident #15 received hospice care. The MDS indicated Resident #15 did not have a prognosis of life expectancy of less than 6 months.</p> <p>Review of Resident #15's quarterly MDS dated 05/30/19 revealed Resident #3 received hospice care. The MDS indicated Resident #15 did not have a prognosis of life expectancy of less than 6 months.</p> <p>Review of Resident #15's quarterly MDS dated 08/25/19 revealed Resident #15 received hospice care. The MDS indicated Resident #15 did not have a prognosis of life expectancy of less than 6 months.</p> <p>Interview with the MDS Coordinator on 09/19/19 at 10:35 AM revealed Resident #15's prognosis should be marked less than 6 months. The MDS Coordinator explained the section for prognosis was coded in error.</p>	F 641			

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F 641	Continued From page 4  Interview with the Director of Nursing (DON) on 09/19/19 at 10:41 AM revealed the MDS should be accurate and reflect Resident #15's prognosis of life.  5. Resident #58 was admitted to the facility on 08/17/16 and began hospice care on 06/29/17.  Review of Resident #58's hospice recertification signed and dated by a physician on 03/19/19 and on 07/14/19 revealed the physician certified: "Based on the patient's diagnosis and current condition, I expect this patient has a limited life expectancy of 6 months or less, if the terminal illness runs its normal course, and hereby certify this patient for hospice care."  Review of Resident #58's annual Minimum Data Set (MDS) dated 05/14/19 revealed the MDS indicated Resident #58 received hospice care. The MDS indicated Resident #58 did not have a prognosis of life expectancy of less than 6 months.  Review of Resident #58's quarterly MDS dated 08/13/19 revealed Resident #58 received hospice care. The MDS indicated Resident #58 did not have a prognosis of life expectancy of less than 6 months.  Interview with the MDS Coordinator on 09/19/19 at 10:35 AM revealed Resident #58's prognosis should be marked less than 6 months. The MDS Coordinator explained the section for prognosis was coded in error.  Interview with the Director of Nursing (DON) on 09/19/19 at 10:41 AM revealed the MDS should	F 641			

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F 641	<p>Continued From page 5</p> <p>be accurate and reflect Resident #58's prognosis of life.</p> <p>6. Resident #59 was admitted to the facility on 02/18/16 and admitted to hospice services on 08/02/18.</p> <p>Review of Resident #59's annual Minimum Data Set (MDS) dated 08/13/19 revealed the MDS indicated Resident #59 received hospice care. The MDS indicated Resident #59 did not have a prognosis of life expectancy of less than 6 months.</p> <p>Interview with the MDS Coordinator on 09/19/19 at 10:35 AM revealed Resident #59's prognosis should be marked less than 6 months. The MDS Coordinator explained the section for prognosis was coded in error.</p> <p>Interview with the Director of Nursing (DON) on 09/19/19 at 10:41 AM revealed the MDS should be accurate and reflect Resident #59's prognosis of life.</p> <p>7. Resident #7 was readmitted to the facility on 11/7/2018. His diagnoses included Down syndrome.</p> <p>Resident #7's annual Minimum Data Set (MDS) dated 6/25/2019 revealed he had severe cognitive impairments. Review of Section A1500 (Preadmission Screening and Resident Review-PASRR) was coded "0" which indicated Resident #7 was considered by the state level II PASRR process to not have a serious mental illness and/or intellectual disability or related condition. Continued review of Section A1510 (Level II Preadmission Screening and Resident Review</p>	F 641			

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F 641	<p>Continued From page 6</p> <p>(PASRR) Conditions) did not code Resident #7 as having an intellectual disability. Further review of Section A1550 (Conditions Related to ID/ DD Status) did not code Resident #7 as having Down Syndrome.</p> <p>An interview was completed with the Social Worker on 9/19/2019 at 10:11 AM. The Social Worker revealed she was aware Resident #7 was a level II PASRR and had a diagnosis of down syndrome. The Social Worker explained she did not code sections A1500, A1510, and A1550 on the MDS assessment.</p> <p>An interview was completed with MDS Coordinator on 9/19/2019 at 10:15 AM. The MDS Coordinator stated she was aware of Resident #7 and his diagnoses inclusive of Down syndrome. The MDS Coordinator expressed the coding for section A1500, A1510, and A1550 was an oversight and she would correct the assessment.</p> <p>An interview was completed with the Director of Nursing (DON) on 9/19/2019 at 10:22 AM. The DON expressed her expectation was for the MDS to be coded accurately.</p>	F 641			

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F 000	INITIAL COMMENTS  A recertification survey and an on-site revisit was conducted on 09/17/19 through 09/20/19. Tag F 757 was corrected as of 09/20/19. However, new tags were cited as a result of the recertification survey that was conducted at the same time as the revisit. The facility remains out of compliance.	F 000			
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE			TITLE		(X6) DATE

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F 641	<p>Continued From page 3 of life.</p> <p>4. Resident #15 was admitted to the facility on 03/02/15 and began hospice care on 02/14/19.</p> <p>Review of Resident #15's hospice recertification signed and dated by a physician on hospice admission, 03/06/19 and on 05/28/19 revealed the physician certified: "Based on the patient's diagnosis and current condition, I expect this patient has a limited life expectancy of 6 months or less, if the terminal illness runs its normal course, and hereby certify this patient for hospice care."</p> <p>Review of Resident #15's significant change Minimum Data Set (MDS) dated 02/28/19 revealed the MDS indicated Resident #15 received hospice care. The MDS indicated Resident #15 did not have a prognosis of life expectancy of less than 6 months.</p> <p>Review of Resident #15's quarterly MDS dated 05/30/19 revealed Resident #3 received hospice care. The MDS indicated Resident #15 did not have a prognosis of life expectancy of less than 6 months.</p> <p>Review of Resident #15's quarterly MDS dated 08/25/19 revealed Resident #15 received hospice care. The MDS indicated Resident #15 did not have a prognosis of life expectancy of less than 6 months.</p> <p>Interview with the MDS Coordinator on 09/19/19 at 10:35 AM revealed Resident #15's prognosis should be marked less than 6 months. The MDS Coordinator explained the section for prognosis was coded in error.</p>	F 641			

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

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STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>345516</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____  B. WING _____		(X3) DATE SURVEY COMPLETED  <b>C</b>  <b>09/20/2019</b>
NAME OF PROVIDER OR SUPPLIER  <b>CONOVER NURSING AND REHAB CTR</b>			STREET ADDRESS, CITY, STATE, ZIP CODE <b>920 4TH STREET SOUTHWEST</b> <b>CONOVER, NC 28613</b>		
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F 641	<p>Continued From page 4</p> <p>Interview with the Director of Nursing (DON) on 09/19/19 at 10:41 AM revealed the MDS should be accurate and reflect Resident #15's prognosis of life.</p> <p>5. Resident #58 was admitted to the facility on 08/17/16 and began hospice care on 06/29/17.</p> <p>Review of Resident #58's hospice recertification signed and dated by a physician on 03/19/19 and on 07/14/19 revealed the physician certified: "Based on the patient's diagnosis and current condition, I expect this patient has a limited life expectancy of 6 months or less, if the terminal illness runs its normal course, and hereby certify this patient for hospice care."</p> <p>Review of Resident #58's annual Minimum Data Set (MDS) dated 05/14/19 revealed the MDS indicated Resident #58 received hospice care. The MDS indicated Resident #58 did not have a prognosis of life expectancy of less than 6 months.</p> <p>Review of Resident #58's quarterly MDS dated 08/13/19 revealed Resident #58 received hospice care. The MDS indicated Resident #58 did not have a prognosis of life expectancy of less than 6 months.</p> <p>Interview with the MDS Coordinator on 09/19/19 at 10:35 AM revealed Resident #58's prognosis should be marked less than 6 months. The MDS Coordinator explained the section for prognosis was coded in error.</p> <p>Interview with the Director of Nursing (DON) on 09/19/19 at 10:41 AM revealed the MDS should</p>	F 641			

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F 641	<p>Continued From page 5</p> <p>be accurate and reflect Resident #58's prognosis of life.</p> <p>6. Resident #59 was admitted to the facility on 02/18/16 and admitted to hospice services on 08/02/18.</p> <p>Review of Resident #59's annual Minimum Data Set (MDS) dated 08/13/19 revealed the MDS indicated Resident #59 received hospice care. The MDS indicated Resident #59 did not have a prognosis of life expectancy of less than 6 months.</p> <p>Interview with the MDS Coordinator on 09/19/19 at 10:35 AM revealed Resident #59's prognosis should be marked less than 6 months. The MDS Coordinator explained the section for prognosis was coded in error.</p> <p>Interview with the Director of Nursing (DON) on 09/19/19 at 10:41 AM revealed the MDS should be accurate and reflect Resident #59's prognosis of life.</p> <p>7. Resident #7 was readmitted to the facility on 11/7/2018. His diagnoses included Down syndrome.</p> <p>Resident #7's annual Minimum Data Set (MDS) dated 6/25/2019 revealed he had severe cognitive impairments. Review of Section A1500 (Preadmission Screening and Resident Review-PASRR) was coded "0" which indicated Resident #7 was considered by the state level II PASRR process to not have a serious mental illness and/or intellectual disability or related condition. Continued review of Section A1510 (Level II Preadmission Screening and Resident Review</p>	F 641			

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NAME OF PROVIDER OR SUPPLIER  <b>CONOVER NURSING AND REHAB CTR</b>			STREET ADDRESS, CITY, STATE, ZIP CODE <b>920 4TH STREET SOUTHWEST</b> <b>CONOVER, NC 28613</b>		
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F 641	<p>Continued From page 6</p> <p>(PASRR) Conditions) did not code Resident #7 as having an intellectual disability. Further review of Section A1550 (Conditions Related to ID/ DD Status) did not code Resident #7 as having Down Syndrome.</p> <p>An interview was completed with the Social Worker on 9/19/2019 at 10:11 AM. The Social Worker revealed she was aware Resident #7 was a level II PASRR and had a diagnosis of down syndrome. The Social Worker explained she did not code sections A1500, A1510, and A1550 on the MDS assessment.</p> <p>An interview was completed with MDS Coordinator on 9/19/2019 at 10:15 AM. The MDS Coordinator stated she was aware of Resident #7 and his diagnoses inclusive of Down syndrome. The MDS Coordinator expressed the coding for section A1500, A1510, and A1550 was an oversight and she would correct the assessment.</p> <p>An interview was completed with the Director of Nursing (DON) on 9/19/2019 at 10:22 AM. The DON expressed her expectation was for the MDS to be coded accurately.</p>	F 641			