

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

PRINTED: 03/18/2014
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 185144	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____		(X3) DATE SURVEY COMPLETED C 03/04/2014
NAME OF PROVIDER OR SUPPLIER HOMESTEAD NURSING CENTER			STREET ADDRESS, CITY, STATE, ZIP CODE 1608 VERSAILLES ROAD LEXINGTON, KY 40504		
(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 000	INITIAL COMMENTS An Abbreviated Survey investigating KY#00021348 was initiated and concluded on 03/04/14. KY#00021348 was substantiated with deficient practice cited at the highest Scope and Severity of a "D."	F 000			
F 159 SS=D	483.10(c)(2)-(5) FACILITY MANAGEMENT OF PERSONAL FUNDS Upon written authorization of a resident, the facility must hold, safeguard, manage, and account for the personal funds of the resident deposited with the facility, as specified in paragraphs (c)(3)-(8) of this section. The facility must deposit any resident's personal funds in excess of \$50 in an interest bearing account (or accounts) that is separate from any of the facility's operating accounts, and that credits all interest earned on resident's funds to that account. (In pooled accounts, there must be a separate accounting for each resident's share.) The facility must maintain a resident's personal funds that do not exceed \$50 in a non-interest bearing account, interest-bearing account, or petty cash fund. The facility must establish and maintain a system that assures a full and complete and separate accounting, according to generally accepted accounting principles, of each resident's personal funds entrusted to the facility on the resident's behalf. The system must preclude any commingling of resident funds with facility funds or with the funds of any person other than another resident.	F 159	<i>See plan of correction attached.</i>		

RECEIVED
APR 10 2014
BY: _____

Date of completion: 3/5/14

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

TITLE

(X6) DATE

Craig Morgan by Jui Bossen RD

4/3/14

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 159	Continued From page 1 The individual financial record must be available through quarterly statements and on request to the resident or his or her legal representative. The facility must notify each resident that receives Medicaid benefits when the amount in the resident's account reaches \$200 less than the SSI resource limit for one person, specified in section 1611(a)(3)(B) of the Act; and that, if the amount in the account, in addition to the value of the resident's other nonexempt resources, reaches the SSI resource limit for one person, the resident may lose eligibility for Medicaid or SSI. This REQUIREMENT is not met as evidenced by: Based on interview, record review and review of the facility's Self-Reported Incident Forms", it was determined the facility failed to maintain a system of accounting for each resident's personal funds entrusted to the facility for one (1) of three (3) sampled residents (Resident #1). Resident #1's Direct Express Debit card was entrusted to the Activity Director, who failed to ensure an accounting of all transactions completed for the resident. The findings include: Review of the facility's, "Self-Reported Incident Form Initial Report" dated 02/13/14 revealed Resident #1 had alleged the Activities Director (AD) had misappropriated some of his/her money. Review of the facility's, "Self-Reported Incident Form 5 Day Followup/Final Report" dated 02/18/14, revealed on 02/07/14 the Activities Director (AD) had taken Patient #1 out	F 159		
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F 159	<p>Continued From page 2</p> <p>of the facility to the his/her bank to obtain funds to pay back overpayments made to Resident #1 by the Social Security Administration (SSA). Resident #1 alleged during this outing, the AD had taken some of his/her money. Further review revealed Resident #1 reported to facility staff he/she had given his/her Direct Express Debit card in June 2013 and had not used it or seen it since then. In addition, review revealed Resident #1 stated when he/she asked the AD how much money was on his/her debit card, the AD said "they only put \$30 (thirty dollars) in your account each month".</p> <p>Record review revealed the facility admitted Resident #1 on 06/06/13, with diagnoses which included Chronic Airway Obstruction, Generalized Pain, Generalized Anxiety Disorder and Depressive Disorder.</p> <p>Interview with Resident #1 on 03/04/14 at 2:15 PM, revealed the AD had always managed his/her shopping for him/her. Resident #1 stated the AD spoke with him/her one afternoon, and indicated he/she needed to speak with the Social Security (SS) office regarding an overpayment of three hundred dollars (\$300.00). According to Resident #1, when he/she spoke with the SS office, he/she had been told the overpayment was actually two thousand and one hundred dollars (\$2,100.00), and he/she was required to pay this amount back. Continued interview with Resident #1 revealed, the following day he/she and the AD went out of the facility to pay the overpayment amount. Resident #1 indicated while at the bank, the AD told him/her the overpayment amount was two thousand and five hundred dollars (\$2,500.00). Resident #1 stated the AD told him/her the bank would not make a money order</p>	F 159		

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Continued From page 3
or write a check; so they would withdraw two thousand five hundred dollars (\$2,500.00) from his/her account. The resident stated the AD also went to the ATM (automated teller machine) to see if he/she "had any more money" and withdrew more money at that time. Resident #1 stated the AD had given him/her seventy dollars (\$70.00) telling him/her forty dollars (\$40.00) of that was to be used for the cable bill. Additionally, Resident #1 indicated the AD kept the rest of the money and his/her debit card. Resident #1 indicated he/she was "not happy" about not having his/her debit card and felt the AD was taking money from him/her.

Interview with the AD on 03/04/14 at 3:47 PM revealed Resident #1 was supposed to receive thirty (30) dollars a month from SS which was deposited directly into his/her Direct Express account. The AD revealed, prior to last year, Direct Express cards had not existed and resident funds were managed through the business office. According to the AD, with the introduction of Direct Express debit cards last year, she got the debit cards from the business office, and used them when she shopped for residents. The AD stated she had facilitated a telephone conversation between Resident #1 and the SS office on 02/06/14, regarding the resident owing three hundred (\$300.00) dollars to the SSA. Continued interview with the AD revealed when Resident #1 spoke with the SS office he/she was told the amount owed was two thousand and one hundred dollars (\$2,100.00). She stated, later that same day, the SS office told her Resident #1 had been overpaid five thousand dollars (\$5,000.00) altogether; and approximately two thousand and five hundred dollars (\$2,500.00) of that amount had been overpaid

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F 159	Continued From page 4 since the resident's admission to the facility. The AD stated she took Resident #1 to the bank the following day to write a check for the SSA. The AD stated the bank refused to write a check; and she had initially withdrawn two thousand and five hundred dollars (\$2,50.00). The AD stated she had then also withdrawn three hundred and three dollars (\$303.00) from the ATM. The AD revealed she had wanted to ensure Resident #1 had some money available, in case he/she stopped receiving his/her thirty dollars (\$30.00) from the SS office, to cover his/her expenses. The AD stated after the money orders for two thousand six hundred and fifty dollars (\$2,650.00) were obtained and the processing fees of three dollars (\$3.00) were paid for, she had one hundred and fifty dollars (\$150.00) of the resident's money remaining. She indicated she gave Resident #1 seventy dollars (\$70.00) of the one hundred and fifty dollars (\$150.00); which left eighty dollars (\$80.00). The AD stated she kept the eighty dollars (\$80.00) to cover shopping for Resident #1's clothing, as he/she had gained weight and needed new clothes; and to pay for the resident's cable bill for two (2) months. Further interview with the AD revealed, she kept some resident receipts; however did not keep all of them as she gave some to residents after she had shopped for them. According to the AD she could not account for all monies spent in Resident #1's account. The AD indicated she had returned the money she had been keeping for Resident #1 when the investigation was initiated. Review of Resident #1's Debit Card Transaction history, as transcribed by the former Administrator, revealed a total of seven (7) ATM withdrawals had been made prior to the 02/07/14 withdrawal. Continued review of the Transaction	F 159		
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F 159	Continued From page 5 history revealed the ATM withdrawals had initially began 07/09/13. Further review revealed the total amount of the ATM withdrawals had been two hundred dollars and fifty cents (\$200.50). Interview with the acting Administrator on 03/04/14 at 1:00 PM Resident #1 had "voiced a complaint" to the Social Worker (SW) and the previous Administrator regarding he/she thought someone was "stealing" his/her money. She stated the AD had returned one hundred and one dollars(\$101.00) to Resident #1 after the resident made the complaint. According to the acting Administrator, the incident involving the AD's withdrawals of Resident #1's money from his/her debit card to pay back the SSA had been a "case of bad record keeping" on the AD's part. The acting Administrator stated after voicing the complaint, Resident #1's debit card had been returned to him/her; and a "resident trust account" had been set up for him/her. She stated the AD had brought receipts and statements to the former Administrator and these had been reviewed. The acting Administrator stated Resident #1 had been paid back everything the facility could not account for with receipts. Additional interview with the acting Administrator on 03/04/14 at 4:46 PM, revealed the facility had been unable to account for one hundred and seventy-five dollars (\$175.00) of Resident #1's money which had been spent through review of receipts. She stated a check had been written in that amount for Resident #1. According to the acting Administrator, the business office managed resident funds; however the facility had not had a formal system for the management of residents' Direct Express debit cards. She indicated this had resulted in poor record keeping regarding Resident #1's monies spent.	F 159			

F159 483.10(c)(2)-(5) FACILITY MANAGEMENT OF PERSONAL FUNDS

Plan of Correction: 3/5/14

1. Resident #1 was reimbursed everything the facility could not account for with receipts. Resident # 1 also had her debit card returned to her and a resident trust account was set up for her at the facility.
2. Social Services conducted an audit of resident's shopping lists and the items the resident's actually received on 2/15/14. All residents confirmed that they had in fact received what they had asked for on their shopping lists. Therefore, no other residents were affected.
3. A new system for handling Express Debit cards was initiated on 2/16/14. All residents will be asked upon admission if they have an Express debit card. If the resident has a card, the resident will keep the card, send the card home with family or put the card in the facility safe. The administrative assistant was in serviced 2/16/14 and a new form was developed for tracking the Express cards if removed from the safe. The person taking the Express card will sign, date and time a form stating the employee has the Express card. The employee will sign the form again when the card is returned to the safe. Effective 2/18/14, the Activity director was removed from resident shopping. Furthermore, the activity staff were in serviced 2/15/14 by the Administrator on the new policy of having all residents sign receipts for merchandise bought for the resident, thus validating the resident received the merchandise they paid for.
4. Quality Assurance will monitor the resident's satisfaction with staff shopping monthly for three (3) months. If resident satisfaction is at 100%, the Quality Assurance committee will be asked to discontinue the audit. The administrator will be responsible for ensuring compliance.
5. Date of completion 3/5/14