

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

PRINTED: 06/17/2014
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 185583	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED C 05/03/2014
NAME OF PROVIDER OR SUPPLIER HIGHLANDSPRING OF FT THOMAS		STREET ADDRESS, CITY, STATE, ZIP CODE 960 HIGHLAND AVENUE FORT THOMAS, KY 41075		
(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

RECEIVED
MAY 8 - 2014

F 000 INITIAL COMMENTS

An Abbreviated Survey investigating KY00021735 was initiated and concluded on 06/03/14. KY00021735 was substantiated with related deficiencies cited.

F 151 483.10(a)(1)&(2) RIGHT TO EXERCISE RIGHTS - FREE OF REPRISAL

The resident has the right to exercise his or her rights as a resident of the facility and as a citizen or resident of the United States.

The resident has the right to be free of interference, coercion, discrimination, and reprisal from the facility in exercising his or her rights.

This REQUIREMENT is not met as evidenced by:
Based on interview, record review and review of the facility's policies and Residents' Rights, it was determined the facility failed to ensure residents had the right to exercise their rights as citizens of the United States for one (1) of three (3) sampled residents (Resident #1).

Resident #1 wanted to vote in the primary election held 05/20/14; however, the resident's right to participate with voting was not fulfilled by the facility as evidenced by failure to provide an absentee ballot and failure to provide transportation to the voting location.

The findings include:

Review of the facility's policy titled, "Ohio, Voting/Kentucky Voting Policy", revised March 2003, revealed each resident had the right to vote. Policy review revealed it was the

F 000

Without admitting or denying the validity or existence of the alleged deficiencies, Highlandspring provides the following plan of correction:

F 151

This plan of correction is not meant to establish any standard of care, contract, obligation or position and Highlandspring reserves all right to raise all possible contention and defenses in any civil or criminal claim action or proceeding.

THIS PLAN OF CORRECTION SERVES AS HIGHLANDSPRING OF FORT THOMAS CREDIBLE ALLEGATION OF SUBSTANTIAL COMPLIANCE AS OF JUNE 30, 2014.

F151

Highlandspring of Fort Thomas will continue to ensure residents have the right to exercise his or her rights as a resident of the facility and as a citizen or resident of the United States.

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

TITLE

(X6) DATE

[Signature] NHA for Sara Gramann, NHA Administrator 7/8/14

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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NAME OF PROVIDER OR SUPPLIER HIGHLANDSPRING OF FT THOMAS	STREET ADDRESS, CITY, STATE, ZIP CODE 980 HIGHLAND AVENUE FORT THOMAS, KY 41075
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F 151 Continued From page 1
responsibility of the Activity Director to coordinate voting opportunities with the local Board of Elections.

Review of the facility's, Nursing Home Residents Bill of Rights and Responsibilities, revised 12/09/13, revealed residents were to be permitted to participate in activities of social, religious and community groups at their discretion.

Review of Resident #1's medical record revealed the facility assessed the resident on the Annual Minimum Data Set (MDS) Assessment, dated 03/28/14, to have a Brief Interview for Mental Status (BIMS) score of thirteen (13) out of fifteen (15) indicating he/she was cognitively intact.

F 151 Resident #1 met with social worker on the day after the primary election 5/21/14 and acknowledged the oversight which resulted in the resident not getting to vote; resident was reassured measures would be implemented immediately to ensure this would not occur again.

The Assistant Activity Director identified on 5/21/14 each resident who wished to vote in the upcoming elections. Each resident actively registered to vote have been identified as well as those residents who require staff assistance with registration. An additional review of all current residents who intend to vote will be completed by 6/30/14.

Interview with Resident #1 on 06/03/14 at 2:50 PM, revealed the resident stated he/she had been an Ombudsman for several years and knew what his/her rights were. Resident #1 stated he/she was very disappointed over not getting to vote on 05/20/14 during the primary election. According to Resident #1 he/she was registered to vote and would have voted in the primary election if he/she had been given the opportunity. Continued interview revealed he/she had voted per absentee ballot last year as he/she had not been able to physically go vote at the voting location. Resident #1 stated he/she was told by the staff the day after the primary election there had been an "oversight" which resulted in residents not getting to vote. Resident #1 reported he/she called the current Ombudsman, the day after the primary election and told her what happened. He/She stated the Ombudsman came to the facility and discussed this "oversight" with the staff. Further interview revealed staff told the Ombudsman the person who was responsible

The Licensed Social Worker contacted the local board of elections on 5/21/14 and determined the upcoming dates of elections and deadlines for absentee ballots for 2014 and 2015. All voting dates and deadlines have been added to the outlook calendar, which is part of the facility management's calendar to remind of upcoming events. See Exhibit A.

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F 151 Continued From page 2
for making sure residents got to vote was out on medical leave, and had failed to note the primary election on her calendar to remind the Assistant Activity Director and Social Worker to take the residents to vote. Resident #1 stated he/she spoke with the Social Worker who assured him/her this would never happen again.

Interview with the Social Services Director (SSD) on 06/03/14 at 1:50 PM, revealed per the facility's policy, it was the responsibility of the Activity Director to ensure residents were able to vote in the primary and general elections. However, the SSD stated the Activity Director was on leave and had failed to make sure residents were able to exercise their right to vote.

F 151 Additional in-service education was completed by Licensed Social Worker on 5/21/14 to the Activity Staff to review Ohio/Kentucky voting and 2014 and 2015 Voting dates and the rights of residents to exercise their right to vote without interference, coercion, discrimination or reprisal. In-service of activity staff will be completed by 6/30/14 to review survey related findings related to voting and resident rights.

Interview with the Administrator on 06/03/04, at 4:25 PM revealed her role was to ensure the facility's policy was followed, and make sure a system was in place to avoid a situation where a resident did not get to vote if he/she wanted to. The Administrator stated a system was now in place to prevent this situation involving residents not getting to vote in the primary election from ever happening again. According to the Administrator, all voting dates and deadlines have been added to the "outlook" calendar, which was a part of all facility management's calendar, to remind multiple managers there were elections coming up. Continued interview revealed the "outlook" calendar addition would also remind managers of deadlines to make sure all residents had registered to vote and all absentee ballots were filled out and returned to the proper authorities. The Administrator stated the Activity Director, who was responsible in ensuring all residents had the opportunity to vote absentee or at the polls, was on leave, and had failed to mark

A Performance Improvement worksheet on Residents Rights to exercise rights is being completed by the Activity Director weekly for 4 weeks, twice a month for two months, then monthly thereafter. See Exhibit B. Results of the PI worksheet will be reported to the PI committee for determination of the need for further ongoing formal monitoring.

Licensed Nursing Home Administrator will monitor compliance by reviewing PI data and reports. The LNHA is the chair of the PI committee which meets at least quarterly. Additionally, the

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F 151	Continued From page 3 the primary election date on her calendar. The Administrator indicated in the future, multiple managers would have this information, as well as the Activity Director to assure the failure to honor the residents' right to vote did not happen again.	F 151	LNHA monitors compliance via weekly department head meetings that include attendance and reports by the Licensed Social Worker and Activity Director.	6/30/14
F 250 SS=D	483.15(g)(1) PROVISION OF MEDICALLY RELATED SOCIAL SERVICE The facility must provide medically-related social services to attain or maintain the highest practicable physical, mental, and psychosocial well-being of each resident.	F 250	P250 Highlandspring of Fort Thomas will continue to ensure residents have the right to exercise his or her rights as a resident of the facility and as a citizen or resident of the United States	

	<p>This REQUIREMENT is not met as evidenced by:</p> <p>Based on interview, record review and review of the facility's policies and Residents Rights, it was determined the facility failed to provide medically-related social services to attain or maintain the highest practicable physical, mental, and psychosocial well-being of each resident for one (1) of three (3) sampled residents (Resident #1).</p> <p>The facility's Social Services (SS) failed to ensure Resident #1 was provided the opportunity to vote in the primary election held on 05/20/14, by failing to furnish an absentee ballot or transportation to the voting center.</p> <p>The findings include:</p> <p>Review of the facility's policy titled, "Ohio Voting/Kentucky Voting Policy", revised March 2004, revealed each resident had the right to vote, and it was the responsibility of the Activity</p>		<p>Resident #1 met with social worker on the day after the primary election 5/21/14 and acknowledged the oversight which resulted in the resident not getting to vote; resident was reassured measures would be implemented immediately to ensure this would not occur again.</p> <p>The Assistant Activity Director identified on 5/21/14 each resident who wished to vote in the upcoming elections. Each resident actively registered to vote have been identified as well as those residents who require staff assistance with</p>	
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F 250 Continued From page 4
Director to coordinate the opportunity to vote with the local "Board of Elections".

Review of the facility's, Nursing Home Residents' Bill of Rights and Responsibilities, revised 12/09/13, revealed residents had the right to exercise the rights as a citizen of the United States.

Review of Resident #1's medical record revealed the facility assessed the resident, on 03/28/14, to be cognitively intact.

Interview with Resident #1 on 06/03/14 at 2:50 PM, revealed the resident was "very

disappointed" over not having the opportunity to vote during the primary election held on 05/20/14, as was her right. Resident #1 stated she was a registered voter, and had voted by absentee ballot last year since he/she could not physically leave to vote outside the facility. According to Resident #1, he/she had been informed there was an "oversight" which resulted in residents not getting to vote in the primary election. Continued interview revealed Resident #1 called the Ombudsman and informed her of not getting to vote. Resident #1 stated the Ombudsman came to the facility and talked to staff regarding his/her not getting to vote. He/She stated staff told the Ombudsman the person responsible for ensuring residents got to vote was on medical leave. Further interview revealed the person responsible had not placed the primary election information on her calendar, therefore the Assistant Activity Director and Social Worker had no reminder to ensure residents had the opportunity to vote. Resident #1 stated the Social Worker "guaranteed" him/her this would never happen again. The resident stated he/she "hoped this

F 250 registration. An additional review of all current residents who intend to vote will be completed by 6/30/14.

The Licensed Social Worker contacted the local board of elections on 5/21/14 and determined the upcoming dates of elections and deadlines for absentee ballots for 2014 and 2015. All voting dates and deadlines have been added to the outlook calendar, which is part of the facility management's calendar to remind of upcoming events. See Exhibit A.

Additional in-service education was completed by Licensed Social Worker on 5/21/14 to the Activity Staff to review Ohio/Kentucky voting and 2014 and 2015 Voting dates and the rights of residents to exercise their right to vote without interference, coercion, discrimination or reprisal. In-service of activity staff will be completed by 6/30/14 to review survey related findings related to voting and resident rights.

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F 250	Continued From page 5 would never happen again". Interview with the Social Services Director (SSD) on 06/03/14 at 1:50 PM, revealed it was the Activity Director's responsibility to ensure residents were provided the opportunity to vote. The SSD stated per facility policy, it was the responsibility of the Social Worker to interview each resident to make ensure their rights are not being violated. Continued interview revealed the Activity Director was on medical leave during the primary election. The SSD indicated it was her responsibility to make sure residents were afforded the right to vote in the absence of the Activity Director; however, had failed to do so. The SSD stated the voting had been "totally overlooked".	F 250	A Performance Improvement worksheet on Residents Rights to exercise rights is being completed by the Activity Director weekly for 4 weeks, twice monthly for two months, then monthly thereafter. See Exhibit B. Results of the PI worksheet will be reported to the PI committee for determination of the need for further ongoing formal monitoring.		
	Interview with Administrator on 06/03/04, at 4:25 PM, revealed the facility had a new system in place since the primary election to ensure this did not occur again. The Administrator stated multiple managers, including the SSD would now be notified per the computer calendar of upcoming elections. Continued interview revealed the Activity Director who had been responsible for coordinating the voting for residents was out on medical leave during the primary election and had not placed the election on her calendar. Therefore, the Administrator indicated the Assistant Activity Director and SSD, who would have been in charge of ensuring residents were provided the opportunity to vote, had not been reminded of the election. The Administrator indicated she was responsible to ensure all services needed were in place to allow residents to exercise their right to vote.		Licensed Nursing Home Administrator will monitor compliance by reviewing PI data and reports. The LNHA is the chair of the PI committee which meets at least quarterly. Additionally, the LNHA monitors compliance via weekly department head meetings that include attendance and reports by the Licensed Social Worker and Activity Director.		6/30/14