

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

PRINTED: 04/22/2014
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 185192	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____		(X3) DATE SURVEY COMPLETED C 04/10/2014
NAME OF PROVIDER OR SUPPLIER GOLDEN LIVINGCENTER - ST MATTHEWS			STREET ADDRESS, CITY, STATE, ZIP CODE 227 BROWNS LANE LOUISVILLE, KY 40207		
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F 000	INITIAL COMMENTS An Abbreviated Survey was initiated on 04/08/14 and concluded on 04/10/14 to investigate KY21507. The Division of Health Care substantiated the allegation with a deficiency cited. Complaint KY21500 was investigated in conjunction with KY21507. The Division of Health Cre unsubstantiated the allegation with no deficiencies cited.	F 000			
F 203 SS=E	483.12(a)(4)-(6) NOTICE REQUIREMENTS BEFORE TRANSFER/DISCHARGE Before a facility transfers or discharges a resident, the facility must notify the resident and, if known, a family member or legal representative of the resident of the transfer or discharge and the reasons for the move in writing and in a language and manner they understand; record the reasons in the resident's clinical record; and include in the notice the items described in paragraph (a)(6) of this section. Except as specified in paragraph (a)(5)(ii) and (a) (8) of this section, the notice of transfer or discharge required under paragraph (a)(4) of this section must be made by the facility at least 30 days before the resident is transferred or discharged. Notice may be made as soon as practicable before transfer or discharge when the health of individuals in the facility would be endangered under (a)(2)(iv) of this section; the resident's health improves sufficiently to allow a more immediate transfer or discharge, under paragraph (a)(2)(i) of this section; an immediate transfer or	F 203	Notice Requirements before Transfer/Discharge 1. On 3/16/2014, Resident #6 hit another resident because he was angry with him. Resident #6 continued to make threats against the other resident. On 3/18/2014, Resident #6 was transferred and admitted to VA Hospital. The facility decided not to readmit Resident #6 due to verbal threats and physical aggression against the other resident. POA was notified verbally, however no written notification of transfer/discharge was provided. Fay Gootce, VA Contract Nursing Home Case Manager was notified by the ED, on 3/17/14 of residents behaviors, request for medical/ psych evaluations. The Case Manager was also informed by the ED that the resident would not be able to return to this facility if he continued with these inappropriate behaviors and threats of harm. 3/25/14 The Admission Director visited the resident at VA Hospital for follow up courtesy visit. The AD reports that this resident acknowledges he hit a resident at this facility and stated would do it again. 3/25/14 ED spoke with resident's POA/Sister regarding events of 3/16/14 and continued threats to harm another resident. ED informed POA that resident would not be able to return to the facility due to safety of other residents. Social Services communicated with the POA on 4/28/14 and was informed the resident is residing at Todd Dickey, a Nursing and Rehab Center in Leavenworth, Indiana. 2. All residents have the potential to be affected. Social Services conducted an audit of transfer/discharge residents on 4/9/2014, no other residents were identified to be affected.		

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

TITLE

(X6) DATE

X *Allyson Shaoy, ED*

X *Executive Director* X *4/30/14*

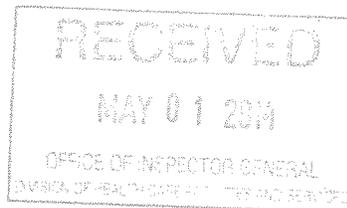
any deficiency statement ending with an asterisk (*) denotes a deficiency which the institution may be excused from correcting providing it is determined that their safeguards provide sufficient protection to the patients. (See instructions.) Except for nursing homes, the findings stated above are disclosable 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 203	<p>Continued From page 1</p> <p>discharge is required by the resident's urgent medical needs, under paragraph (a)(2)(ii) of this section; or a resident has not resided in the facility for 30 days.</p> <p>The written notice specified in paragraph (a)(4) of this section must include the reason for transfer or discharge; the effective date of transfer or discharge; the location to which the resident is transferred or discharged; a statement that the resident has the right to appeal the action to the State; the name, address and telephone number of the State long term care ombudsman; for nursing facility residents with developmental disabilities, the mailing address and telephone number of the agency responsible for the protection and advocacy of developmentally disabled individuals established under Part C of the Developmental Disabilities Assistance and Bill of Rights Act; and for nursing facility residents who are mentally ill, the mailing address and telephone number of the agency responsible for the protection and advocacy of mentally ill individuals established under the Protection and Advocacy for Mentally Ill Individuals Act. This REQUIREMENT is not met as evidenced by:</p> <p>Based on interviews and record review, it was determined the facility failed to ensure a written notice was issued to the resident and the resident's family or legal representative when the resident was transferred or discharged from the facility for one (1) of seven (7) residents. The facility transferred Resident #6 to the local Veterans Hospital on 03/16/14, and 03/17/14, and was seen in the emergency room and transferred back to the facility the same day. The facility transferred Resident #6 back to the hospital and was admitted on 03/18/14. As a result was then</p>	F 203	<p>3. On 4/10/2014, the ED and interim DNS educated the DCE regarding transfer/discharge. The Director of Clinical Education (DCE) began education with all licensed staff, Business Office staff and Social Services regarding written requirements before transfer/discharge of residents. The Social Services department reviewed the transfer/discharge process and bed hold policy with all nurses with a completion date of 4/30/14. Effective 4/11/14 Transfers/discharges are reviewed and verified that resident/ POA/family was notified of transfer and bed hold policy daily in stand up meeting by the ED with the IDT, Monday thru Friday. In the event that Social Services is not present, the BOM will be responsible for ensuring transfer notices and bed hold policies are given. The Executive Director and/or Director of Nursing will review the findings weekly and revise the plan as needed according to the variance.</p> <p>4. Beginning on 4/30/2014, the interdisciplinary team will review 5 times a week all residents who are transferred or discharged from the facility for compliance on written requirements before transfer/discharge of residents occurs. Review of the audits will occur five times a week for 4 weeks, then three times a week for four weeks, then one time a week for four weeks, then monthly times three months. Results of the audit will be reported in the monthly QA Committee Meeting per Social Services monthly times three months then quarterly. The committee will evaluate and make recommendations. The Executive Director and/or Director of Nursing will review the findings weekly. Variances of policy or process will be addressed through one on one education and discipline as appropriate. A QAPI meeting was held on 4/17/14. Results of this survey was discussed with the QA team and a plan was formulated.</p>	F203 5/01/2014



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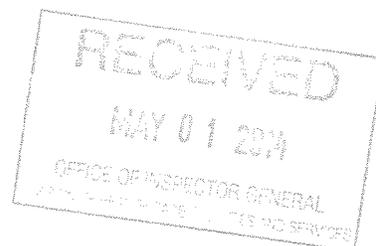
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F 203	<p>Continued From page 2</p> <p>discharged from the facility on the same day; however, the facility failed to send a written notice of the transfer/discharge with Resident #6 nor was one provided to the resident's Power of Attorney.</p> <p>The findings include:</p> <p>Review of the facility's policy titled Transfer and Discharge Policy, not dated, and provided by the Administrator revealed the facility would give written notification to the resident and the family or legal representative.</p> <p>Review of a second facility policy titled Discharge/Transfer of the Resident, with a Briggs Corporation date of 2006, provide by the Interim Director of Nursing (IDON) revealed the procedure for transfer/discharges were to include an explanation for the discharge to the resident and or representative and included a written copy of the signed transfer or discharge notice. Bullet point statements listed on the form revealed the 9th bullet point stated completion of transfer/discharge notice per facility procedure, and bullet point 11 revealed the facility staff were to keep a copy of all forms completed and placed in the resident's medical record.</p> <p>Review of Resident #6's medical record revealed the facility transferred the resident to the local Veteran's Hospital on 03/16/13 after getting angry with another facility resident and hitting that resident. Resident #6 was seen in the emergency room, treated for a Urinary Tract Infection and was transported back to the facility the same day. Resident #6 voiced on-going verbal threats toward the same resident he/she had hit the day before and was sent back to the</p>	F 203		



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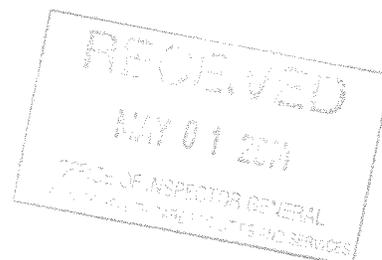
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F 203	Continued From page 3 hospital for a psychiatric evaluation, and was sent back again. Resident #6 was seen by the Nurse Practitioner and verbalized the same non-remorseful comments and threats to other facility residents. Resident #6 was transferred and admitted to the hospital on 03/18/14 and discharged from the facility the same day; however, no evidence was found in the clinical record of a written transfer/discharge notice for the three days. The facility medical records department, dated, printed, and retained a copy of a transfer/discharge report, dated 03/24/14, which was a computer generated report with Resident #6's general information for discharge. Interview with Resident #6's Family Member #2 by phone, on 04/09/14 at 9:00 AM, revealed she was not provided with a written notice of transfer or discharge. She stated she was only contacted by phone. Interview with Resident #6's Family Member #1, POA, by phone, on 04/09/14 at 3:00 PM, revealed she was not provided with a written notice of transfer or discharge in person or in the mail, as she was not living in the local Louisville area. She stated she was only contacted by phone. Interview with Social Services (SS) #1 and #2, on 04/09/14 at 3:52 PM to 4:30 PM, revealed they did not complete the written transfer/discharge forms for facility residents. Interview with the Unit Manager, Registered Nurse (RN #2), on 04/09/14 at 5:38 PM, revealed she did not complete a transfer form on the day Resident #6 was discharged from the facility nor did she complete transfer forms for the two previous transfers. RN #2 further stated she was	F 203			



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F 203	<p>Continued From page 4</p> <p>not aware the transfer forms needed to be completed for transfer and copied for the resident's medical record and to her knowledge was not being done for the long term care unit. RN #2 provided a copy of the documents that were sent with residents when transferred out for care and stated a transfer/discharge form was not listed to complete. Continued interview, on 04/10/14 at 3:10 PM, revealed she did not complete or provide discharge forms for Resident #6 because she was not sure if the resident was coming back to the facility.</p> <p>Interview with the Unit Manager, Registered Nurse RN #1, on 04/09/14 at 5:20 PM, revealed a transfer form must be printed out and the transferring information had to be hand written into the fields when sending a resident out to the hospital and a copy was made for the resident's clinical record. She further stated it was important information the hospital would need to know about Resident #6 which included the reason for the transfer and his/her functional status.</p> <p>Interview by phone with License Practical Nurse (LPN) #1, on 04/09/14 at 5:20 PM, revealed she had completed a written transfer form on 03/18/14 for Resident #6 when transferred out to the hospital, but she did not retain a copy for the resident's clinical record.</p> <p>Interview with Medical Records Staff, on 04/10/14 at 4:13 PM, revealed she printed out the transfer/discharge report on March 24, 2014 for the clinical records, but she did not mail a printed copy to Resident #6 or his POA. She further stated no copies were found in the medical records department after charts had been</p>	F 203			



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F 203

Continued From page 5
thinned.

Interview with the Interim Director of Nurses (IDON), on 04/10/14 at 6:30 PM, revealed the clinical records for Resident #6 did not contain a written copy of a transfer/discharge form.

Interview with the Administrator, on 04/09/14 at 6:12 PM, revealed she was not able to provide written copies of transfer/discharge forms for Resident #6 from the clinical records nor was she aware if a mailed copy was sent to Resident #6 or his POA.

F 203

