STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	185383	A. BUILDING _____ B. WING _____	11/06/2020

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
HIGHLANDSPRING OF FT THOMAS	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
F 000	INITIAL COMMENTS A COVID-19 Focused Infection Control Survey was initiated on 11/06/2020 and concluded on 11/06/2020. The facility was found to be in compliance with 42 CFR 483.80 infection control regulations and has implemented the Centers for Medicare & Medicaid Services (CMS) and Centers for Disease Control and Prevention (CDC) recommended practices to prepare for COVID-19, however two (2) unrelated deficiencies were cited at the highest scope and severity of a "D." Total census 123.	F 000		
F 583 SS=D	Personal Privacy/Confidentiality of Records CFR(s): 483.10(h)(1)-(3)(i)(ii) §483.10(h) Privacy and Confidentiality. The resident has a right to personal privacy and confidentiality of his or her personal and medical records. §483.10(h)(l) Personal privacy includes accommodations, medical treatment, written and telephone communications, personal care, visits, and meetings of family and resident groups, but this does not require the facility to provide a private room for each resident. §483.10(h)(2) The facility must respect the residents right to personal privacy, including the right to privacy in his or her oral (that is, spoken), written, and electronic communications, including the right to send and promptly receive unopened mail and other letters, packages and other materials delivered to the facility for the resident, including those delivered through a means other than a postal service. §483.10(h)(3) The resident has a right to secure	F 583		

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE | TITLE | (X6) DATE

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 583	Continued From page 1	F 583		

and confidential personal and medical records.
(i) The resident has the right to refuse the release of personal and medical records except as provided at §483.70(i)(2) or other applicable federal or state laws.
(ii) The facility must allow representatives of the Office of the State Long-Term Care Ombudsman to examine a resident's medical, social, and administrative records in accordance with State law.

This REQUIREMENT is not met as evidenced by:
Based on observation, interview, and record review, it was determined the facility failed to ensure the security and confidentiality of medical records for one (1) of four (4) sampled residents, Resident #1. Personal Health Information (PHI), including documentation from Resident #1's Electronic Medical Record and Medication Administration Record, were observed on an opened computer screen and opened Medication Administration Record.

The findings include:

Review of the facility's policy, "Resident Rights," not dated, section (7), "State Resident Rights," revealed all residents would have confidential treatment of their medical and personal records. Further review of the policy, section (5), "Kentucky Administrative Regulations," and section (e), "Federal Resident Rights," revealed the resident would have the right to personal privacy and confidentiality of his/her personal and clinical records.

Review of Resident #1's medical record revealed

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F 583	Continued From page 2	F 583		

the facility admitted the resident, on 12/23/15, with diagnoses including Chronic Systolic Heart Failure; Chronic Kidney Failure, Stage 3; Chronic Atrial Fibrillation; and Diabetes Mellitus, Type 2. Review of Physician orders revealed Resident #1's eighteen (18) current medications included pain medications and two (2) antidepressant medications (Sertraline Hydrochloride and Mirtazapine). The pain medications included Acetaminophen, Gabapentin, and Morphine. There were also several heart medications listed.

Observation, on 11/06/2020 at 9:53 AM, revealed a computer, on a medication cart in the 1200 Hall, was left unlocked and unsecured with Resident #1's PHI exposed, including the resident's name, room number, date of birth, and current list of medications. The computer was left unlocked and unattended for seven (7) minutes, from 9:53 AM until 10:00 AM, while Licensed Practical Nurse (LPN) #1 was assisting a resident in room 1201, several doors down from where the medication cart was positioned, and it was out of LPN #1's sight. In addition, this observation revealed Resident #1's MAR was opened and unsecured with his/her record exposed, including the resident's name and current list of medications. LPN #1 left the MAR opened and unattended for the same seven (7) minute timeframe.

Continued observation, on 11/06/2020 at 9:53 AM, revealed several staff members passed by the unlocked and unsecured computer. The observation showed two (2) staff members approached the cart; one (1) aide removed a pair of gloves located in a box on the medication cart; and another aide disposed of trash in the trash bin located on the side of the cart. Further

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F 583	Continued From page 3	F 583		

observation revealed a resident was seated in near proximity of the cart in his/her wheelchair, self-ambulating. Additionally, per interview, there were five (5) residents located on the first floor (the same vicinity) who were known wanderers.

Interview with LPN #1, on 11/06/2020 at 10:01 AM, revealed she was called to assist another staff member. LPN #1 stated she was aware she had left the computer unlocked, opened, and unsecured when she went down the hall to Room 1201. LPN #1 also stated she was aware she left the MAR opened and unsecured when she went down the hall to Room 1201. LPN#1 stated she did not realize that she had been away from the medication cart for seven (7) minutes. Further interview with LPN #1 revealed leaving the computer opened and unattended was not an acceptable practice. LPN #1 stated she should have ensured the computer containing PHI was closed and locked, and the MAR was closed, prior to leaving the medication cart unattended.

Interview with the DON, on 11/06/2020 at 3:51 PM, revealed nursing staff should always follow facility policies related to Resident Rights and confidentiality of personal and clinical information. Per interview, it was not acceptable for the nurse to leave the MAR or the computer opened, under any circumstance, or to leave PHI unlocked and unsupervised. The DON stated the computer should have been minimized, locked, and never should have been left unlocked and unattended. The DON stated LPN #1 should have locked the computer so that unauthorized individuals did not have access to the residents' PHI. Further interview with the DON revealed it was important to keep computers locked and secured to maintain the security, confidentiality, and integrity

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F 583	Continued From page 4 of all residents' personal and clinical information. Interview with the Administrator, on 11/06/2020 at 3:45 PM, revealed she expected all staff to follow facility policies related to Residents Rights and confidentiality of personal and clinical information. Per interview with the Administrator, it was not acceptable, under any circumstance, for the nurse to leave the MAR opened, the computer opened, or to leave PHI unlocked and unsupervised. The Administrator stated it was important to secure PHI to maintain the confidentiality of all residents' personal and clinical information.	F 583		
F 761 SS=D	Label/Store Drugs and Biologicals CFR(s): 483.45(g)(h)(1)(2) §483.45(g) Labeling of Drugs and Biologicals Drugs and biologicals used in the facility must be labeled in accordance with currently accepted professional principles, and include the appropriate accessory and cautionary instructions, and the expiration date when applicable. §483.45(h) Storage of Drugs and Biologicals §483.45(h)(1) In accordance with State and Federal laws, the facility must store all drugs and biologicals in locked compartments under proper temperature controls, and permit only authorized personnel to have access to the keys. §483.45(h)(2) The facility must provide separately locked, permanently affixed compartments for storage of controlled drugs listed in Schedule II of the Comprehensive Drug Abuse Prevention and Control Act of 1976 and other drugs subject to	F 761		

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F 761	Continued From page 5	F 761		

abuse, except when the facility uses single unit package drug distribution systems in which the quantity stored is minimal and a missing dose can be readily detected.

This REQUIREMENT is not met as evidenced by:
Based on observation, interview, and review of the facility's policy, it was determined the facility failed to ensure all drugs and biologicals were in locked compartments to permit only authorized personnel to have access. An observation, on 11/06/2020, revealed a medication cart on the 1200 Hall was unlocked and unsecured for seven (7) minutes with multiple empty medication capsules left on top of the cart.

The findings include:

Review of the facility's policy, "Medication Storage," revised August 2018, revealed the purpose of the policy was to ensure only authorized facility staff had possession of the keys, which opened the medication cart or medication storage. Further review of the section titled, "Procedures," revealed medications and biologicals, including treatment items, were to be securely stored in a locked cabinet/cart or medication room so unauthorized individuals (such as residents, visitors and staff) did not have access to them.

Observation, on 11/06/2020 at 9:53 AM, revealed a medication cart on the 1200 Hall was unlocked and unsecured with multiple empty medication

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F 761	Continued From page 6	F 761		

capsules left on top of the cart. The cart was left unlocked and unattended for seven (7) minutes, from 9:53 AM until 10:00 AM, while Licensed Practical Nurse (LPN) #1 was assisting a resident in room 1201. This unlocked medication cart contained individual drawers of medications for residents on the unit and other supplies in the larger bottom drawers.

Continued observation, on 11/06/2020 at 9:53 AM, revealed several staff members passed by the unlocked and unsecured computer. The observation showed two (2) staff members approached the cart; one (1) aide removed a pair of gloves located in a box on the medication cart; and another aide disposed of trash in the trash bin located on the side of the cart. Further observation revealed a resident was seated in near proximity of the cart in his/her wheelchair, self-ambulating. Additionally, per interview, there were five (5) residents located on the first floor (the same vicinity) who were known wanderers.

Interview with LPN #1, on 11/06/2020 at 10:01 AM, revealed she was called to assist another staff member and was aware she had left the medication cart unlocked when she went down the hall to Room 1201. Further interview revealed this was not acceptable practice, and she should have ensured the medication cart was locked and secured prior to leaving the cart unattended. LPN #1 stated it was important to keep the medication cart locked to maintain safety and security for residents and to ensure no one had access to medication from the cart.

Interview with the Director of Nursing (DON), on 11/06/2020 at 3:51 PM, revealed nursing staff should always follow facility policies related to

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F 761	Continued From page 7 storage of medications and use of the medication carts. Per interview, the DON stated it was not acceptable, under any circumstance, for LPN #1 to leave a medication cart opened or leave the cart unlocked and unsupervised. The DON stated the medication cart should not have been left opened and unattended, and LPN #1 should have locked the medication cart so unauthorized individuals did not have access to medications. Per interview, the DON stated it was important to keep the medication cart locked, when unattended, to maintain safety and security for residents and to ensure no one had access to medications from the cart.	F 761		

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E 000	Initial Comments A COVID-19 Focused Emergency Preparedness Survey was initiated on 11/06/2020 and concluded on 11/06/2020. The facility was found to be in compliance with 42 CFR 483.73 related to E-0024 (b)(6).	E 000		

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Office of Inspector General

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	100664	A. BUILDING: _____ B. WING _____	11/06/2020

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N 000	Initial Comments A COVID-19 Focused Infection Control Survey was initiated 11/06/2020 and concluded on 11/06/2020. The facility was found to be in compliance pursuant to 42 CFR 483.80, however (2) two unrelated deficiencies were cited at the highest scope and severity of a "D".	N 000		

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