

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

PRINTED: 08/28/2023
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 155424	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____		(X3) DATE SURVEY COMPLETED C 09/27/2022
NAME OF PROVIDER OR SUPPLIER HICKORY CREEK AT COLUMBUS			STREET ADDRESS, CITY, STATE, ZIP CODE 5480 E 25TH STREET COLUMBUS, IN 47203		
(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	<p>INITIAL COMMENTS</p> <p>This visit was for the Investigation of Complaint IN00383618.</p> <p>Complaint IN00383618 - Substantiated. Federal/State deficiency related to the allegation is cited at F583.</p> <p>Survey dates: September 26 and 27, 2022</p> <p>Facility number: 000284 Provider number: 155424 AIM number: 100290690</p> <p>Census Bed Type: SNF/NF: 30 Total: 30</p> <p>Census Payor Type: Medicare: 3 Medicaid: 25 Other: 2 Total: 30</p> <p>This deficiency reflects State Finding cited in accordance with 410 IAC 16.2-3.1.</p>	F 000			
F 583 SS=D	<p>Quality review completed on October 3, 2022.</p> <p>Personal Privacy/Confidentiality of Records CFR(s): 483.10(h)(1)-(3)(i)(ii)</p> <p>§483.10(h) Privacy and Confidentiality. The resident has a right to personal privacy and confidentiality of his or her personal and medical records.</p> <p>§483.10(h)(l) Personal privacy includes accommodations, medical treatment, written and</p>	F 583			10/15/22

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

TITLE

(X6) DATE

10/12/2022

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	<p>Continued From page 1</p> <p>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.</p> <p>§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.</p> <p>§483.10(h)(3) The resident has a right to secure 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 interview and record review, the facility failed to ensure residents rights to privacy and confidentiality were not violated, related to an unauthorized video recording for 1 of 3 residents reviewed. (Resident B)</p> <p>Findings include:</p> <p>During a record review on 9/26/22 at 10:25 a.m., the Administrator provided an incident report dated 6/22/22. The report indicated CNA 2 had</p>	F 583			

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F 583	<p>Continued From page 2</p> <p>posted a snap chat of herself in a residents room online and for a brief moment Resident B was observed in the background.</p> <p>The clinical record for Resident B was reviewed on 9/26/22 at 10:35 a.m. Her diagnoses included, but were not limited to, dementia, morbid obesity, depression, and anxiety. A Quarterly Minimum Data Set (MDS) assessment, dated 8/15/22, indicated the resident was moderately cognitive impaired. She had minimal difficulty hearing, had clear speech, she was understood, understands others, and had adequate vision with corrective lenses. She required extensive assistance of two staff for mobility; and one staff extensive assistance for transfer and Activities of Daily Living (ADLs). She was always incontinent of bladder and frequently incontinent of bowel.</p> <p>During an interview on 9/27/22 at 1:42 p.m., the Director of Nursing (DON) indicated CNA 2 had taken a snap chat video of herself sitting on a resident's bed, the resident was in the bed, and you could not tell which resident it was. The DON indicated it was Resident B. After being shown the snap chat, she took it to the Administrator. Then they took it to the Senior Vice President of Operations. They reviewed the video and decided to treat it as a violation of policy for the use of cell phones.</p> <p>During an interview on 9/27/22 at 2:07 p.m., the Social Services Director indicated she was told that a staff member had laid down in the bed with Resident B, took a picture of herself and the resident, then she had posted it to snap chat.</p> <p>During an interview on 9/27/22 at 2:12 p.m., CNA 3 indicated she saw a video of CNA 2 on snap</p>	F 583			

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F 583	<p>Continued From page 3</p> <p>chat. When she saw it, she notified and showed it to the DON. She was able to identify Resident B from the video.</p> <p>The current facility policy titled "Media Relations," and not dated, was provided by the Administrator on 9/27/22 at 1:50 p.m. The policy indicated, "...Social Media ...Under no circumstance are photos, videos, or any image of a resident or their information to be posted on any social media sites ..."</p> <p>This Federal tag relates to Complaint IN00383618.</p> <p>3.1-3(o)</p>	F 583			