

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 1-057-2186	(X2) MULTIPLE CONSTRUCTION A. BUILDING B. WING	(X3) DATE SURVEY COMPLETED 06/18/2025
NAME OF PROVIDER OR SUPPLIER HARBORVIEW ROME		STREET ADDRESS, CITY, STATE, ZIP CODE 1345 REDMOND ROAD ROME, GA 30165	
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)		
{L 000}	Initial Comments.		
{L 0702}	<p>A COVID-19 Focused Infection Control Survey was conducted at Harborview Rome from June 5, 2025, through June 18, 2025. The survey revealed the following State Health deficiencies were cited.</p> <p>111-8-50-.07(b)1. Resident Care and Treatment.</p> <p>Care, treatment and services must be provided with respect for the resident's personal dignity and privacy subject to the following:</p> <p>1. All aspects of a resident's medical, personal and bodily care program shall be conducted in private and kept confidential. Any persons not directly involved in the particular aspect of care being provided to a resident must have the resident's permission to be present at the time that component of the resident's care is being provided; ...</p> <p>This REQUIREMENT is not met as evidenced by:</p> <p>The facility failed to promote care in a manner that maintained or enhanced each resident's dignity, respect, and individuality for two of eight sampled residents (R) (R8 and R "S"). Specifically, staff were standing while feeding a resident. In addition, staff members did not knock or identify themselves before entering residents' rooms.</p> <p>Findings include:</p> <p>Review of the facility policy titled "Promoting Maintaining Resident Dignity" revised date 4/1/2024 revealed under Policy: It is the practice of this facility to protect and promote resident rights and treat each resident with respect and dignity as well as care for each resident in a manner and in an environment, that maintains or enhances resident's quality of life by recognizing each resident's individuality. Under Compliance Guidelines: ...10. Respect the residents' living space. Maintain resident privacy.</p> <p>Review of the "Admission Record" for R8 revealed he was admitted to the facility with a diagnosis</p>		

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	<p>of but not limited to dyskinesia (uncontrollable and involuntary movements) of esophagus.</p> <p>1. Review of R8's admission Minimum Data Set (MDS) dated 5/19/2025 revealed a Brief Interview for Mental Status (BIMS) score was assessed as eight which indicated cognition was moderately impaired. Section K (Swallowing and Nutritional Status) revealed R8 was assessed as having no swallowing disorder and no signs and symptoms of swallowing problems. Nutritional status triggered as an area of concern on the Care Area Assessment Summary.</p> <p>Review of the care plan initiated 5/16/2025 revealed that R8 is at risk for nutritional need related to a mechanical soft diet. Intervention to be implemented included setting up each meal tray and assisting R8 as needed.</p> <p>Observation on 6/11/2025 at 12:43 pm revealed Certified Nursing Assistant (CNA) GG feeding R8 lunch. The resident was leaning to the left side slouched down in the bed. CNA GG was standing feeding R8.</p> <p>Observation on 6/11/2025 at 12:52 pm revealed Licensed Practical Nurse (LPN) HH walking into room 5 without knocking or identifying herself before entering the resident room.</p> <p>Observation on 6/11/2025 at 12:54 pm revealed LPN HH walking into room 7 without knocking or identifying herself before entering the resident room.</p> <p>Observation on 6/18/2025 at 9:02 am revealed Staffing Coordinator II walking into room 30 without knocking or identifying herself before entering the resident room.</p> <p>Observation on 6/11/2025 at 12:50 pm of the Treatment Nurse (TN) JJ and CNA GG repositioning R8. TN JJ or CNA GG did not pull the curtain or shut the door to provide R8 with privacy from the visitor in the room or the surveyor in the hall.</p> <p>Interview on 6/11/2025 with CNA GG, she stated R8 was not her assigned resident for the day, and she was helping with feeding the residents. CNA GG was asked if she always stood up to feed the residents and CNA GG answered "Yes."</p> <p>Interview on 6/11/2025 at 12:54 pm with LPN HH revealed she did not knock when the residents' door was open. She stated, "I just walk in."</p> <p>Interview on 6/18/2025 at 9:32 am with the Staffing Coordinator II revealed she was aware that</p>		

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	<p>she should knock before entering a resident's room. She stated that this was the resident's home and she should knock and announce herself before entering.</p> <p>Interview on 6/18/2025 at 12:28 pm with R "S" revealed the staff would enter the room without knocking or announcing themselves.</p> <p>An interview on 6/18/2025 at 5:53 pm with the Director of Nursing (DON) revealed the staff were educated on a regular basis on resident rights that included knocking on the residents' doors, announcing themselves before entering the room.</p>		