

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 185331	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 07/03/2025
NAME OF PROVIDER OR SUPPLIER Franklin-Simpson Nursing and Rehabilitation Center		STREET ADDRESS, CITY, STATE, ZIP CODE 414 Robey Street Franklin, KY 42135	
For information on the nursing home's plan to correct this deficiency, please contact the nursing home or the state survey agency.			
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (Each deficiency must be preceded by full regulatory or LSC identifying information)		
<p>F 0550</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Honor the resident's right to a dignified existence, self-determination, communication, and to exercise his or her rights.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on observation, interview, record review and facility policy review, the facility failed to treat each resident with respect and dignity and care for each resident in a manner and in an environment that promotes maintenance or enhancement of his or her quality of life, recognizing each resident's individuality, for four (4) of 20 sampled Residents (R) (R11, R28, R32, R67) who were unable to freely go outside and one Resident (R32) who had a wander guard in place with no attempts to elope from facility. The findings include: Review of the facility's policy titled, Resident Rights Standard of Practice, dated April of 2024, revealed residents had the right to interact with members of the community and participate in activities both inside and outside of the facility. 1. Review of R11's admission Record revealed the facility admitted the resident on 12/11/2023 with diagnoses which included anxiety disorder and coronary artery disease. Review of R11's Quarterly Minimum Data Set (MDS) assessment dated [DATE], revealed a Brief Interview for Mental Status (BIMS) score of 15 out of 15, indicating the resident was cognitively intact. During an interview on 06/30/25 at 1:52 PM, R11 he stated the staff only let him hang out either in his room or a common room up near the front of the building. He stated he couldn't be in the hallway or by the nurse's station without them running him back into his room. R11 further stated he had never been told that he could go outside if he signed himself out. He further stated that a couple of years ago, residents used to be able to go outside without supervision, but that he hadn't been outside by himself in about 2 years. R11 stated the place was worse than a prison because if he sat with even his toes outside of his room, staff would come by and tell him to get back in his room. 2. Review of R28's admission Record revealed the facility admitted the resident on 03/11/2025 with diagnoses which included anxiety disorder, cerebral infarction, and major depressive disorder. Review of the R28's MDS assessment dated [DATE], revealed a BIMS score of 12 out of 15, indicating the resident was interviewable. During an interview on 07/03/25 at 1:56 PM, R28 stated she was unaware that she was allowed to sign herself out to sit outside. She stated she had never been outside on the porch without supervision. 3. Review of R32's admission Record revealed the facility admitted the resident on 01/21/2025 with diagnoses which included anxiety disorder, cerebral infarction, and diffuse traumatic brain injury. Review of the MDS assessment dated [DATE], revealed a BIMS score of 15 out of 15 indicating the resident was cognitively intact. During an interview on 07/02/25 at 4:34 PM R32 she stated she had a wander guard on because a long time ago she stepped off the porch to smell the flowers and wasn't supposed to step off the porch, so they put it on her. She stated staff told her that she could not go outside without supervision. R32 stated she really enjoyed going outside and not being able to bothered her. She stated that staff hadn't offered to reevaluate her for elopement. R32 further stated that staff rarely let her out because they stated they were too busy to go outside with her. 4. Review of R67's admission Record revealed the facility admitted the resident on 11/02/2023 with diagnoses which included cerebral</p> <p>(continued on next page)</p>		

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.

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
FORM CMS-2567 (02/99) Previous Versions Obsolete	Event ID: 185331	Facility ID: 185331 If continuation sheet Page 1 of 2

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F 0550 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Some	infarction, depression, and generalized muscle weakness. Review of the MDS assessment dated [DATE], revealed a BIMS score of 12 out of 15 indicating the resident was interviewable. In an interview on 07/03/25 at 1:00 PM, R67 she stated didn't know residents were allowed to go outside by themselves. She stated every once in a while, the right Certified Nursing Assistant (CAN) would ask her if she wanted to go outside and sit with her. Other than that, staff have told her they are too busy or short staffed to take her outside. In an interview on 07/03/25 at 11:00 AM, the Director of Nursing (DON) stated that residents could sign themselves out to go outside if they have a high enough BIMS score. He stated R32 had a history of pushing doors which sounded the alarm without letting anyone know. The DON stated he wasn't sure when the last date R32 had been reassessed for elopement, but nursing staff or administration did it at least once a year. In an interview on 07/03/25 at 12:43 PM, Certified Nursing Assistant 8 (CNA8) stated if a resident with a high enough BIMS wanted to go outside, staff would take them out if they could. She further stated it didn't happen that often and residents may not know they need to ask if they want to go outside. In an interview on 07/03/25 at 12:55 PM, Licensed Practical Nurse 5 (LPN 5) stated staff kept a list of when residents who ask to go outside in a binder. If someone with a high enough BIMS, the resident could ask staff and put their name on the list so they can go outside. LPN5 stated if a resident with a high BIMS who was immobile wanted to go outside, they would have to hit their call light to let staff know they wanted to go out. She stated that didn't happen often. Review of the Sign In/Out Binder revealed no documented evidence R11, R28, R32, and R67 had been signing out to go outside and sit on the porch. In an interview with the Administrator on 07/03/2025 at 1:46 PM, she stated residents would ask to go out and can go outside when they want. She stated she had not attended resident counsel, but staff communicated with residents through the meetings and the activities coordinator. She stated staff would take residents with low BIMS outside. She stated R32 walked a lot and has a history of approaching doors, so a wander guard was in place for safety. The Administrator further stated most residents with a wander guard have them in place for safety and are assessed to be elopement risks. She stated those elopement assessments were completed quarterly.		