

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER / SUPPLIER / CLIA IDENTIFICATION NUMBER 676020	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 07/21/2020
NAME OF PROVIDER OF SUPPLIER MENARD MANOR		STREET ADDRESS, CITY, STATE, ZIP 100 GAY ST MENARD, TX 76859	
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)		
F 0644 Level of harm - Potential for minimal harm Residents Affected - Some	<p>Coordinate assessments with the pre-admission screening and resident review program; and referring for services as needed.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY**</p> <p>Based on observation, interview, and record review, the facility failed to ensure the coordination, follow-up and provision of services agreed upon during the IDT meeting for 1 of 1 resident (Resident #4) reviewed for Pre-Admission Screening and Resident Review (PASRR) specialized services. The IDT meeting for Resident #4 was held on 1/8/20 and recommended specialized therapy and a specialized wheelchair which were not submitted through NFSS (Nursing Facility Specialized Services) request in a timely manner (20 days from completion of IDT meeting). This failure could affect residents identified as having positive PASRR conditions, placing them at risk for decreased quality of life and for not receiving specialized services and/or support services. The findings included: Closed record review of Resident #4's Face Sheet, dated 7/21/20, indicated a [AGE] year-old female with [DIAGNOSES REDACTED]. Closed review of the record for Resident #1, revealed an IDT meeting was held on 1/8/20, and the facility did not initiate Specialized Services within the required 20 business days after the IDT meeting. The specialized services included specialized therapy and a specialized wheelchair. The NFSS (Nursing Facility Specialized Services) form was not submitted correctly on 2/14/20 (27 business days after the IDT meeting was conducted) in the portal. -On 2/20/20 the NFSS request was pending denial with the following reason: The corresponding therapy signature page is absent. Please complete the following steps: 1. Upload a valid completed signature page, ensure signatures are legible, signature dates match the dates, and resubmit, 2. Set all appropriate tabs that is in pending denial status to pending state review before 2/26/20 to avoid a system-generated denial. -On 2/27/20 request was denied related to 7 days having elapsed since the request was pending denial. -On 3/2/20 MDS A added signature sheets as an attachment -On 5/27/20 90 days have elapsed since the request was denied. Closed record review of Resident #4's health status note dated 3/6/20 written by the Administrator indicated the following: Today I had a conversation in person with Resident #4 and her father who was sitting at her bedside and included QIDP B who was on the phone. I explained to Resident #4 and her father that although our therapy department had provided Resident #4 with habilitative occupation and physical therapy for a number of weeks the requirements for this service to be paid for by PASRR were complex and what had been submitted toward this end had been insufficient and had not met those requirements and so had been denied. I talked to them about the difference between habilitative therapy (maintaining current function) and rehabilitative therapy (regaining function, therapy that causes progression in a person's function, such as helping her be able to do more for herself, walk, regain strength, etc.) and how Resident #4 needed rehabilitative therapy because she had a stroke. I talked to them about when Resident #4 first came to the facility she did not have nursing home Medicaid which meant she did not have a payer source and so could not yet receive rehabilitative therapy through Medicaid and didn't have Medicare, so she couldn't get therapy through Medicare. So, she was started on therapy while they waited for Medicaid to get approved. PASRR denied the habilitative therapy due to insufficient or incorrect paperwork or data submission but received the habilitative therapy none the less. The PASRR denial doesn't mean she didn't get the therapy it meant the facility would not be paid for services that were provided to Resident #4. I talked to them about when Resident #4 received a payer source they would be submitting information to get approved for rehabilitative services. So, in the PASRR portal the QIDP would be taking physical and occupational off and documenting that Resident #4 didn't need habilitative right now but instead needed rehabilitative services due to having a stroke. I also notified Resident #4 and her father that QIDP and the medical equipment company planned to be at the facility to sit down and assist in completing the required data to submit to PASRR to request customized wheelchair for Resident #4. Closed record review of Resident #4's health status note dated 3/25/20 written by the Administrator indicated the following: Today received via fax pre-certification from health plan for occupation therapy for resident with authorized days of 3/20/20-4/16/20 Closed record review of Resident #4's health status note dated 3/26/20 written by the Administrator indicated the following: Today received via fax pre-certification from health plan for physical therapy for resident with authorized days of 3/20/20-4/16/20 Closed record review of Resident #4's Admission MDS dated [DATE] indicated the resident was currently considered by the state level II PASRR process to have serious mental illness and/or intellectual disability or a related condition. Closed record review of PASRR Evaluation dated 12/30/19 indicated Resident #4 recommended services provided/coordinated by nursing facility were specialized occupational therapy, physical therapy, speech therapy and durable medical equipment. During an interview with MDS A on 7/17/20 at 1:33 pm, she said that she had submitted the NFSS request and it had been denied. She said that after the NFSS was denied she worked with QIDP B and with Medicaid to get Resident #4 rehabilitative services. She said they also got Resident #4 a specialized wheelchair through Medicaid. She said QIDP B should have taken her off the system for PASRR services. During an interview with the Administrator on 7/17/20 at 1:56pm, she said that they had submitted what she believed was the NFSS (Nursing Facility Specialized Services) form but her MDS coordinator would know the specifics. She said the request was denied and Resident #4 was later placed on rehabilitative services instead of habilitative services through Medicaid. She said she was not aware if PASRR services were followed up with after the request was denied. During an interview on 7/20/20 at 1:09 pm, MDS A said that she had spoken with the QIDP B and that she said she was going to change the habilitative needs for Resident #4 to rehabilitative services. She said she sent in the signature page as requested for the NFSS and would double check the website to see if it had been time stamped related to her upload. She said that Resident #4 received her specialized wheelchair through Medicaid some time in April or May of 2020. She said since the habilitative services were changed to rehab services and the resident received her specialized wheelchair she was not aware she had to follow up with the PASRR unit after the denial of the NFSS request. During an interview on 7/21/20 at 9:37 am, MDS A said she did not complete the NFSS within 20 days of 1/8/20. She said the QIDP told her to go in the portal and document the request which she completed on 2/14/20. She said she also did not receive the therapy assessment until that date because therapy was not aware she needed the assessment to provide to PASRR services. During an interview and record review on 7/21/20 at 10:44 am, Therapy Director D said she was unsure of the exact date the MDS A received the assessment from therapy. She said Resident #4 received her specialized wheelchair and was receiving rehab services during her stay at the facility and provided treatment encounter notes for Resident #4 that indicated Physical Therapy and Occupational therapy was provided in February and January 2020 on the following dates: 1/13/20, 1/14/20, 1/15/20, 1/16/20, 1/20/20, 1/21/20, 1/22/20, 1/23/20, 1/24/20, 1/27/20, 1/28/20, 1/29/20, 1/30/20, 1/31/20, 2/3/20, 2/4/20, 2/5/20, and 2/6/20. Record review of Resident #4's Quarterly MDS dated [DATE] indicated Resident #4 received 144 minutes of physical therapy, 144 minutes of occupational therapy, and 0 minutes of speech therapy. Reviewed Authorization Request for Nursing Facility Specialized Services (NFSS) for Customized Manual Wheelchair (CMWC) with an email sent date of March 12, 2020. The evaluation had an assessment date of 1/24/20 with a single line through it and on the right of the assessment date was written 3/12/20. During an interview on 7/20/20 at 2:07 pm with RP C, she said her daughter saw a PASRR representative once</p>		

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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<p>F 0644</p> <p>Level of harm - Potential for minimal harm</p> <p>Residents Affected - Some</p>	<p>(continued... from page 1)</p> <p>while her daughter was at Menard Manor but did not believe she was receiving PASRR services. She said her daughter received therapy and did receive a specialized wheelchair from the facility. Multiple attempt to contact QIDP B during visit were made but were unsuccessful. Record review of the Facility's Resident Policy and Procedure with a written date of 3/10/16 indicated the following: PASRR: The facility will coordinate assessments with the PASRR process to the maximum extent practicable to avoid duplicative testing and effort.</p>		