# Statement of Deficiencies and Plan of Correction

**Provider/Supplier/CLA Identification Number:**

TN3003

**Building:**

B. WING

**Date Survey Completed:**

08/15/2013

## Summary Statement of Deficiencies

### N 001 1200-8-6 Initial Comments

This Rule is not met as evidenced by:

An annual licensure survey and complaint investigation #32026 were completed on August 15, 2013, at Laughlin Health Care Center. No deficiencies were cited related to complaint investigation #32026 under Chapter 1200-8-6, Standards for Nursing Homes.

### N 411 1200-8-6-04(6) Administration

(6) The facility shall maintain a surety bond on all resident funds held in trust. Such surety bonds shall be sufficient to cover the amount of such funds. The surety bond shall be an agreement between the company issuing the bond and the nursing home and shall remain in the possession of the nursing home.

This Rule is not met as evidenced by:

Based on observation and interview, the facility failed to maintain a surety bond sufficient to cover the full amount of the resident funds in the Resident Trust Fund account.

The findings included:

Review of bank statements for the Resident Trust Fund account, dated July 1, 2012 through July 31, 2013, revealed the average balance on the account ranged from $10,705.06 to $18,990.07 and was over $10,000.00 every month of the time period.

Review of the Surety Bond statement dated February 11, 2013, revealed the bond as a Resident Trust Fund Bond with a $10,000 Limit and a renewal date of February 1, 2013, was in

## Providers Plan of Correction

### N 001 1200-8-6 N 001 Initial Comments

Laughlin Healthcare Center acknowledges that this rule is not met as evidenced by an Annual Licensure Survey and Complaint Investigation #32026, completed on August 15, 2013, no deficiencies were cited related to complaint investigation #32026 under Chapter 1200-8-6, Standards for Nursing Homes.

### N 411 1200-8-6-04(6) N 411 Administration

REQUIREMENT: (6) The facility shall maintain a surety bond on all resident funds held in trust. Such surety bonds shall be sufficient to cover the amount of such funds. The surety bond shall be an agreement between the company issuing the bond and the nursing home and shall remain in the possession of the nursing home.

POC:

1. On August 28, 2013, a rider was issued to the surety bond by Travelers Insurance to increase the bond limit from $10,000.00 to $20,000.00 on the resident fund account.
2. All potential residents with funds in the resident fund account will be covered by the increase in the bond limit.
3. When the resident fund account balance nears or exceeds the new bond limit, the bond limit will be increased to cover the balance.
4. The resident fund account balance will be monitored by the Administrator and the Administrative Director each week.

Continue to page 2 of 3
<table>
<thead>
<tr>
<th>ID PREFIX TAG</th>
<th>SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)</th>
<th>ID PREFIX TAG</th>
<th>PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)</th>
<th>COMPLETE DATE</th>
</tr>
</thead>
<tbody>
<tr>
<td>N 411</td>
<td>Continued From page 1 effect through February 1, 2014. Interview with the Administrator on August 15, 2013, at 9:45 a.m., in the business office confirmed the Surety Bond was not sufficient to cover the full amount of the resident Trust Fund Account.</td>
<td>N 411</td>
<td>Continued from page 1 of 3 to assure the resident fund account balance does not exceed the bond limit, and if it does, the bond limit will be increased in a timely manner to cover the resident fund account balance.</td>
<td>September 6, 2013</td>
</tr>
</tbody>
</table>

This Rule is not met as evidenced by:
Based on observation and interview, the facility failed to post a concise statement of its charity care policies in a place accessible to the public.

The findings included:
Observation on August 15, 2013, at 9:15 a.m., in the entry hall of the facility revealed no posting of the facility's charity care policies.

Interview with the Administrator on August 15, 2013, at the time of the observation confirmed the facility had failed to post a concise statement of its charity care policies in a place accessible to the public.
<table>
<thead>
<tr>
<th>ID PREFIX TAG</th>
<th>SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)</th>
<th>ID PREFIX TAG</th>
<th>PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)</th>
<th>COMPLETE DATE</th>
</tr>
</thead>
<tbody>
<tr>
<td>N 433</td>
<td>Continued From page 2 the public.</td>
<td>N 433</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>