

Department of Health & Human Services
Centers for Medicare & Medicaid Services

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Form Approved OMB
No. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 366435	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 07/11/2024
NAME OF PROVIDER OR SUPPLIER Grand The		STREET ADDRESS, CITY, STATE, ZIP CODE 4500 John Shield Pkwy Dublin, OH 43017	
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 0584 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Some	<p>Honor the resident's right to a safe, clean, comfortable and homelike environment, including but not limited to receiving treatment and supports for daily living safely.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 44070</p> <p>Based on observation, record review and staff interviews, facility failed to ensure flooring was maintained in good condition affecting all 25 residents residing on the 200 hall (#5, #7, #8, #9, #11, #13, #15, #16, #19, #21, #23, #30, #39, #43, #45, #48, #49, #50, #51, #52, #57, #64, #66, #78, and #82). The facility also failed to ensure a homelike environment for one Resident (#13) of 32 residents reviewed. Facility census was 92.</p> <p>Findings include</p> <p>1.</p> <p>Observation on 07/08/24 from 9:30 A.M. to 4:00 P.M. revealed several torn and frayed sections of carpet, as well as loose and wavy carpet in the 200 hall.</p> <p>Observation and interview on 07/11/24 at 9:00 A.M. with Unit Manager #33 confirmed the 200 hall was getting all new flooring but she was unsure of the details or timeline. Unit Manager confirmed carpet was torn and frayed with loose wavy spots. She stated they try to trim the frayed pieces to prevent an increased tripping hazard.</p> <p>Review of Safety Committee Meeting Minutes dated 03/06/24 revealed carpet in memory care and various other areas including unit B (200 Hall). with recommendation/action of contacted flooring company and waiting on a quote.</p> <p>Review of the flooring quote dated 05/12/23 revealed a quote was obtained for carpet repair/replacement on Hall B (200 hall) between room [ROOM NUMBER] to 218.</p> <p>Interview on 07/11/24 at 9:20 A.M. with Maintenance Director #60 revealed facility had identified an issue with the flooring and was going to be replacing it. Provided meeting communication from 03/06/24 he was going to look for updated communication.</p> <p>Review of email communication dated 07/11/24 at 9:27 A.M. between Maintenance Director #60 and Carpet repair company revealed they would come to facility and measure the halls.</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

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F 0584 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Some	<p>Interview on 07/11/24 at 9:20 A.M. with Maintenance Director (MD) #60 confirmed the initial problem was identified 03/2024 and a quote was received 05/2024. He revealed they have not yet done any replacement or repairs on the 200 (B) hall and they were working in a staged approach by completing memory care, and front entrance first. MD #60 was unable to provide any documentation that the entirety of the 200 (B) hall or the large sections of the 200 hall were going to be repaired/replaced as the only quoted areas was from room [ROOM NUMBER] to 218. He confirmed facility did not have a previous plan for full replacement/repair of 200 (B) hall and revealed the flooring company would be coming out for a quote possibly today.</p> <p>2.</p> <p>Review of the medical record for Resident #13 revealed an admitted [DATE]. Diagnoses included hemiplegia and hemiparesis, kidney disease cerebral infarct, and vascular dementia.</p> <p>Review of the Minimum Data Set (MDS) assessment dated [DATE] revealed Resident #13 was cognitively impaired with a BIMS of 7 and required moderate assistance for upper body dressing and dependence with lower body dressing.</p> <p>Review of the medical record found no evidence for why clothing would be hung up in the shower and not the closet.</p> <p>Observation on 07/08/24 at 10:04 A.M. revealed residents closet was less than 10% occupied and majority of residents clothing was hanging in the residents shower.</p> <p>Observation on 07/09/24 at 11:40 A.M. and 07/10/24 at 3:20 P.M. revealed residents clothes remained hanging up on the shower bar.</p> <p>Observation and interview on 07/11/24 at 8:47 A.M. with Licensed Practical Nurse #124 confirmed resident's closet had very little in clothing and had plenty of room to hang additional items. LPN #124 confirmed she was unsure why Resident's clothing was being hung in the shower.</p> <p>Observation and interview on 07/11/24 at 9:00 A.M. with Unit Manager #33 confirmed resident's closet had very little in clothing and had plenty of room to hang additional items. Unit Manager #33 confirmed she was unsure why Resident's clothing was being hung in the shower and confirmed it was not homelike environment.</p> <p>Review of facility policy titled, Homelike Environment, dated 09/21/23 revealed residents shall be provided with a safe and clean homelike environment. Any unresolved environmental concerns shall be reported to the administrator.</p> <p>This deficiency represents non-compliance investigated under Complaint Number OH00154630.</p>		

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F 0725 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Many	<p>Provide enough nursing staff every day to meet the needs of every resident; and have a licensed nurse in charge on each shift.</p> <p>47059</p> <p>Based on staff interviews and review of daily staffing postings the facility failed to identify a licensed charge nurse in the facility for all tours of duty.</p> <p>Findings include:</p> <p>Review of the daily staffing postings for June 2024 and July 2024 revealed there is no designated charge nurse for the 7:00 A.M. - 7:00 P. M. shift on weekends (Saturday and Sunday) or any observed holidays (i.e. Memorial Day and the 4th of July). The sheets simply say see on call list at front desk.</p> <p>Interview on 07/11/24 at 7:20 A.M. with the Director of Nursing (DON) confirmed the nightshift supervisor is the charge nurse from 7:00 P.M. to 7:00 A.M. The DON confirmed the day shift charge nurse Monday through Friday is the unit manager. The DON stated on weekends and holidays the on-call manager is the day shift charge nurse and is available by phone. There is always a manager on duty scheduled and always a nurse on-call. The posting at the nurse's stations and front desk always lets them know who to call.</p> <p>Interview on 07/11/24 at 10:05 A.M. with state tested nursing assistant (STNA) #133 revealed if there was a concern that the nurse on the unit was not addressing resident concerns raised by STNA #133 she would simply call or text the unit manager. When asked if she knew who the charge nurse was or how to reach the charge nurse with concerns, STNA #133 indicated there is a list of who is on-call at the desk, but she would still simply text or call the unit manager with concerns.</p> <p>Interview on 07/11/24 at 10:30 A.M. with the DON revealed there is no job description for a charge nurse. The DON indicated all nurses are in charge of their units so any nurse can be considered a charge nurse.</p>		