

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

Printed: 06/08/2025
Form Approved OMB
No. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 425290	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 04/26/2024
NAME OF PROVIDER OR SUPPLIER White Oak Estates		STREET ADDRESS, CITY, STATE, ZIP CODE 400 Webber Road Spartanburg, SC 29302	
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 0602 Level of Harm - Immediate jeopardy to resident health or safety Residents Affected - Few	<p>Protect each resident from the wrongful use of the resident's belongings or money.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 47075</p> <p>Based on record review, facility policy review, and interviews, the facility failed to ensure 1 of 1 resident (Resident(R)1 was free from misappropriation of property on 01/21/24.</p> <p>On 04/26/24 at 1:00 PM, the survey team provided the Administrator with a copy of the CMS Immediate Jeopardy (IJ) Template, informing the facility IJ existed as of 01/21/24. The IJ was related to 42 CFR 483.25 - Freedom from Abuse, Neglect, and Exploitation.</p> <p>On 04/26/24 the facility provided an acceptable IJ Removal Plan. On 04/26/24 the survey team, validated the facility's corrective actions and determined the facility put forth due diligence in addressing the noncompliance. The IJ is considered at Past Non-Compliance as of 01/22/24.</p> <p>An extended survey was conducted in conjunction with the Complaint Survey for non-compliance at F602, constituting substandard quality of care.</p> <p>Findings include:</p> <p>Review of the facility's policy titled Neglect, Abuse, Mistreatment . revised on 05/2017, revealed, Misappropriation of resident property means the deliberate misplacement, exploitation, of wrongful, temporary, or permanent use of a resident's belongings or money without the resident's consent.</p> <p>Review of the facility's undated policy titled Residents Personal Property revealed under procedures, 6. Send money and valuables to business office for safekeeping.</p> <p>Review of R1's Face Sheet revealed R1 was admitted to the facility on [DATE] with diagnoses including, but not limited to: hypertensive chronic kidney disease, muscle weakness, and periprostth fracture.</p> <p>Review of R1's Minimum Data Set (MDS) with an Assessment Reference Date (ARD) of 12/13/23, indicated a Brief Interview for Mental Status (BIMS) score of 10 out of 15, which indicated R1 had moderate cognitive impairment.</p> <p>Review of R1's Check #7425 written on 12/08/23, revealed the amount of \$6,500.00 and the memo line stated car, and written out to Certified Nursing Assistant (CNA)1</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: 425290	Facility ID: 425290 If continuation sheet Page 1 of 4

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<p>F 0602</p> <p>Level of Harm - Immediate jeopardy to resident health or safety</p> <p>Residents Affected - Few</p>	<p>Review of R1's Check #7429 written on 12/28/23, revealed the amount of \$6,000.00, the memo line documented Car/Title, and written out to CNA1.</p> <p>During an interview on 04/25/24 at 1:24 PM, R1's resident representative (RR) revealed, while going over his mother's bank account statement he saw a check written to someone that he didn't know. The checkbook was in his mother's possession. The RR stated he told the facility about the check, and he wanted it reported to the police. When the RR went to the bank to follow up on the situation, he was told by the bank teller, here's another bad check. The RR further stated, They [bank teller] showed me a print of the bad check. The 1st bad check was shown to the police officer that came out to the facility and spoke with mom a little bit. Later the officer called and stated, because of the amount involved, they were going to send it to the State Attorney General Office. The RR further stated, he found out later by the facility that they began their investigation and do what they do on their end. They suspended the employee in question. Once they spoke to the police officer, the person who wrote the fraudulent checks, was seen on a video at the bank where they were trying to cash the check in a different part of the state. The RR concluded, The [NAME] Oak people said, yes that is the person in question and basically that was it, they suspended her. The police took the information, I sent them a copy of the 2nd check, and that's the last I heard of it.</p> <p>During an interview on 04/25/24 at 1:40 PM, CNA2 stated, There was a visitor in the room [R1's room] whom I've never seen before. I asked [R1] how she was doing, and R1 responded, Have you ever had anyone steal money from you? and I responded No. At this point the visitor showed me a copy of checks and I recognized they were written to [CNA1]. I then went and reported it to the nurse.</p> <p>During an interview on 04/25/24 at 1:46 PM, Registered Nurse (RN) revealed that CNA2 notified her of the alleged incident, R1's RR was showing CNA2 a check, the RN then called the Director of Nursing (DON) and the Administrator to notify them of the alleged incident.</p> <p>During an interview on 04/25/24 at 1:59 PM, the DON revealed when R1 was interviewed, R1 stated, the police was in my house, and why does everyone keep asking me about [CNA1]?</p> <p>The DON stated, [CNA1] denied knowing anything about any missing money or checks belonging to the resident. The resident had her checkbook in her possession and her son was adamant about his mother having her checkbook with her. Prior to the alleged incident the resident did not have a lock box for her items. The [local police department] made the facility aware of a surveillance video that they had from the bank in which [CNA1] deposited the check, and wanted to know if they could identify the person on the video. The facility responded if it was a clear video, they could. The police officer came and showed the video to me and the Administrator, and we identified the person as [CNA1].</p> <p>During an interview on 04/25/24 at 2:16 PM, the Administrator revealed, when she became aware of the alleged incident, she immediately began an investigation. The staff member in question was suspended immediately pending the investigation. CNA1 was contacted and immediately suspended during the facility's investigation. The Administrator stated CNA1 denied everything regarding R1's missing checks. CNA1 told the Administrator that on the date of one of the missing checks, she got an alert on her phone, to contact the bank because someone was trying to open an account in her name. The Administrator stated she requested CNA1 provide proof of this and CNA1 never provided the proof. The Administrator stated she was able to positively identify CNA1 from the surveillance video footage that the [local police department] showed her. The Administrator stated that the time stamp on the check and the video were the same date and time, which lead to the termination of CNA1.</p> <p>(continued on next page)</p>		

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<p>F 0602</p> <p>Level of Harm - Immediate jeopardy to resident health or safety</p> <p>Residents Affected - Few</p>	<p>During an interview on 04/25/24 at 2:59 PM, CNA1 revealed she has never been assigned to R1, but has assisted R1 to the bathroom [ROOM NUMBER] or 3 times, when she responded to the resident's call light. CNA1 stated she has no knowledge of any missing checks or any other missing property belonging to R1. CNA1 further stated the Administrator called and left her a voicemail that she was being terminated based on the outcome of the facility's investigation.</p> <p>On 04/26/24 the facility provided an acceptable IJ Removal Plan, which included the following:</p> <p>Identification:</p> <p>Resident was admitted to facility on 9/12/23 with diagnoses that include, but not limited too .</p> <p>Resident's Resident Representative (RR) notified the facility on 1/21/2024 regarding a check from the Resident's checkbook was made out to a facility staff member for \$6500.00 and it was processed. The RR removed the checkbook from where the check was used from but her reported the Resident had 2 other checkbooks in her possession. At first the Resident would not give the other checkbooks to her son and declined the use of a lockbox. On 1/24/24, Resident accepted a lockbox and placed the other 2 checkbooks in it which included a Trust account and another checkbook that had no more blank check in it.</p> <p>The staff member was identified as a NA. The Resident denied making the check out to the NA and the Resident's signature appeared to not be the Resident's legal signature. The NA was contacted by the Administrator who at first could not be reached but returned the Administrator's call, and reported that she is a victim of identity theft and an account was opened under her name that is different from her current banking institution. The NA was informed that she was immediately suspended pending the investigation and to be available by phone for questions.</p> <p>A 2-hour reportable was faxed to the State Agency and the police was notified. The Police Officer reported the named NA was accused of stealing funds at another facility but returned the funds to the resident and no charges were pursued.</p> <p>The named NA was hired on 4/10/23. When the facility followed their abuse protocol for background checks and reference checks. Resident was a Resident Assistant (RA) at first, and then her NA's certification was checked when she completed her NA class and has a current/active certification from 6/13/23 to 6/13/25.</p> <p>Action:</p> <p>An audit was completed by the Nursing Supervisor on 1/21/2024 of current residents to determine which residents had personal funds in their possession including money, checkbooks and credit cards. The immediate action was to offer to lock up the the identified residents' monetary possessions in the business office and a lockbox will be purchased by the facility and provided to the identified residents on 1/23/2024. Current residents were also interviewed to ensure no other personal properties or funds were misappropriated. The other current residents and RRs will be notified of the availability to secure their monetary possessions, if ever needed, by facility's newsletter.</p> <p>Newly admitted residents will be informed of the availability of lockboxes if needed to secure monetary possessions during the Admissions Conference.</p> <p>(continued on next page)</p>		

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F 0602 Level of Harm - Immediate jeopardy to resident health or safety Residents Affected - Few	<p>The facility staff were re-educated on the abuse protocol with the emphasis of misappropriation of resident's funds and property. the re-education also included to never take, use or ask for resident's property nor accept monetary gifts from the residents and RRs, and abuse including misappropriation of resident's funds is not tolerated by the facility and legal actions will be taken. This re-education was completed on 1/22/2024 by Administration.</p> <p>Newly hired staff will receive this education during job specific orientation by the Staff Development Coordinator (SDC).</p> <p>The facility Nursing Administration or Social Services Department will monitor current and newly admitted residents by conducting an interview with 5 residents or RRs weekly for 12 weeks to ensure monetary possessions are secured and lockboxes are provided as indicated.</p> <p>The facility Nursing Administration or Social Services Department will also monitor by interviewing 5 staff members weekly for 12 weeks regarding the knowledge of misappropriation of resident's funds, and adhering to the rules of not taking, using or asking for residents' property/funds and not accepting monetary gifts from residents and families.</p> <p>Identified trends or issues from the monitoring tools will be discussed during the morning Quality Improvement (QI) meetings, weekly for 12 weeks, and then discussions with the Quality Assurance (QA) Committee meetings for further recommendations as needed.</p> <p>The Administrator, Director of Nursing (DON) and Social Services Director (SSD) are responsible for the ongoing compliance of F602.</p> <p>Compliance date is 1/22/2024.</p>		