

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER / SUPPLIER / CLIA IDENTIFICATION NUMBER <b>235225</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED <b>09/02/2020</b>
NAME OF PROVIDER OF SUPPLIER <b>FOUNTAIN VIEW OF MONROE</b>		STREET ADDRESS, CITY, STATE, ZIP <b>1971 N MONROE STREET MONROE, MI 48162</b>	
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 0600  <b>Level of harm</b> - Minimal harm or potential for actual harm  <b>Residents Affected</b> - Few	<p><b>Protect each resident from all types of abuse such as physical, mental, sexual abuse, physical punishment, and neglect by anybody.</b></p> <p><b>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY**</b></p> <p>This citation pertains to Facility Reported Intake (FRI) MI 346. Based on interviews and record reviews the facility failed to prevent misappropriation of resident's property for one of three residents (R#3) reviewed for abuse resulting in R#3's driver's license, social security card, and two of her credit cards being found at a facility staff member's house by the local Narcotics Team and Investigative Services (NTIS) department during the execution of search warrant. Findings include: According to the FRI ( facility reported incident) dated 8/13/20, the local NTIS department notified the Administrator that during the execution of search warrant at CNA Bs place of residence, Resident #3's driver's license, social security card, and two credit cards were found. CNA B' reported that she had picked them up off the floor after they fell out of R#3's person during assisting her to the bathroom and she forgot to return them. The local police department had confirmed that no activity had occurred on R#'s credit cards. During an interview with the Administrator on 9/3/20 at 9:00 AM she said the facility immediately conducted an internal investigation regarding the misappropriation of R#3's belongings upon receiving the information from NTIS. The facility concluded that CNA B had assisted R#3 to the bathroom on her last day of work. The Administrator said that CNA Bs employment had been terminated because she did not follow the facility's abuse policy regarding resident's personal belongings. The Administrator reported that a facility wide sweep had been conducted and no additional residents had reported missing belongings. According to R#3's medical record, she admitted to the facility on [DATE] with multiple [DIAGNOSES REDACTED]. The minimum (MDS) data set [DATE] indicated the resident has no cognition deficits, and requires one person assistance for ambulating and toileting. During an interview with R#3 on 9/3/20 at 10:15 AM she said she clearly remembers the day the CNA B had assisted her to the bathroom because she (CNA B) was not her 'usual CNA'. R#3 recalled that CNA B was taking an especially long time hanging around in her room after she had assisted her (R#3) on the toilet, and she heard her rummaging around over near her dresser. R#3 said she thought that CNA B was looking at her family pictures, which were arranged on that dresser along with some birthday gifts she had just received. R#3 said she keeps her purse in the bottom drawer of that dresser, and her wallet is kept in that purse. R#3 said that she did not have any of her identification cards on her person, she has always kept them in her purse. R#3 said she has never taken her purse to the bathroom, nor had she removed her driver's license, social security card, or credit cards from her wallet. Furthermore, her driver's license, social security card, and credit cards are kept in tight plastic sleeves in her wallet and would have never just fallen out. The Resident said that the theft of her belongings came to light on her birthday, and she feels the CNA targeted her because she knew her family had just given her birthday presents earlier in that week. R#3 said that her daughter gave her a \$100.00 gift card to Walmart and another daughter had given her a \$50.00 gift card to Red Lobster that are also missing and she knows that the CNA took those also. The Resident said she feels safe in this facility and feels justice has been served since the CNA will not be employed there any longer. R#3 also said, I hope she got a good meal at Red Lobster, and some things at Walmart, she must have needed it more than me.</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.