

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>345291</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____  B. WING _____		(X3) DATE SURVEY COMPLETED  <b>C</b> <b>04/24/2015</b>
NAME OF PROVIDER OR SUPPLIER  <b>UNIVERSAL HEALTH CARE / OXFORD</b>			STREET ADDRESS, CITY, STATE, ZIP CODE <b>500 PROSPECT AVENUE</b> <b>OXFORD, NC 27565</b>		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETION DATE	
F 246 SS=D	<p><b>483.15(e)(1) REASONABLE ACCOMMODATION OF NEEDS/PREFERENCES</b></p> <p>A resident has the right to reside and receive services in the facility with reasonable accommodations of individual needs and preferences, except when the health or safety of the individual or other residents would be endangered.</p> <p>This REQUIREMENT is not met as evidenced by: Based on observations, resident and staff interviews, the facility failed to provide a full length mattress for the bed of 1 of 40 sampled residents. Resident#121.</p> <p>Findings included:</p> <p>Resident #121 was admitted to the facility on 5/1/13 with diagnoses which included: Alzheimer's disease, hypertension, peripheral vascular disease, abnormality of gait, and, muscle weakness.</p> <p>The most recent quarterly MDS (Minimum Data Set) dated 2/9/15 indicated the resident was severely, cognitively impaired; was independent with his bed mobility and transfers; required limited assistance with walking. The assessment also revealed Resident #121 was 73 inches in height and weighed 222 pounds. The review of the Care Plan indicated the resident required assistance with his ADLs (activities of daily living) related to weakness and an unstable heart condition.</p>	F 246	<ol style="list-style-type: none"> <li>Although resident # 121 was 73 inches long and the mattress was 76 inches long and he had no skin problems or complaints concerning the mattress length, we replaced the mattress with an 80 inch long mattress during the survey on 4/24/15. The maintenance director replaced the mattress.</li> <li>Any resident that is on a standard size (76 inch) mattress that is on an 80 inch long bed has the potential to be affected. An audit has been completed that checks each resident bed for being longer than the mattress. Anyone found on a bed that is too long will have a longer mattress placed on the bed, or have the bed changed to fit the mattress.</li> <li>New residents will have their height checked on admission, by the admitting nurse and the appropriate length bed will be utilized for the resident</li> <li>Weekly audits will be performed by the nursing department each week for 1 month and then every month thereafter for one year. The DON, ADON, RN</li> </ol>	5/13/15	

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

Electronically Signed

05/12/2015

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.

DEPARTMENT OF HEALTH AND HUMAN SERVICES  
CENTERS FOR MEDICARE & MEDICAID SERVICES

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FORM APPROVED  
OMB NO. 0938-0391

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F 246	<p>Continued From page 1</p> <p>During three observations of Resident #12's room on 4/22/15 at 11:00am, 4/22/15 at 2:40pm, and 4/24/15 at 10:30am, Resident #121 was sitting on the right side of his bed. The bed linen were clean and neatly covered the mattress. However; the mattress was notably shorter (approximately 6 inches) than the length of the bed. Also, a long, narrow bumper guard was lying across the visible bedsprings at foot of the bed.</p> <p>During an interview on 4/24/15 at 10:31am, NA#1 (nursing assistant) revealed that she had assisted with Resident #121's daily care for approximately four years. NA#1 indicated that she did not know and never asked anyone the purpose of the bumper guard positioned at the foot of the resident ' s bed on the exposed bedsprings. She revealed that the bumper guard had always been at the foot of the resident ' s bed, but the resident never used it.</p> <p>During an interview on 4/24/15 at 10:57am, the ADON (Assistant Director of Nursing) revealed that the Administrator informed her that Resident #121 had an extended bed due to his height, but a regular sized mattress should not have been placed on the bed. The mattress on the resident's bed was 76 inches; but, the extended bed required an 80 inch mattress. The ADON acknowledged a longer mattress should have been placed on the bed. She also revealed that the bumper guard placed across the exposed bedsprings of the resident's bed served no purpose.</p>	F 246	<p>Supervisor or designee will be responsible for completion of the audits. Results of the audits will be brought to the Quality Assurance Meetings for a period of 1 year.</p> <p>5. Correction date 5/13/15</p>		