

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

PRINTED: 01/23/2018  
FORM APPROVED  
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>345211</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____  B. WING _____		(X3) DATE SURVEY COMPLETED  <b>C</b> <b>12/20/2017</b>
NAME OF PROVIDER OR SUPPLIER  <b>RIVERPOINT CREST NURSING AND REHABILITATION CENTER</b>			STREET ADDRESS, CITY, STATE, ZIP CODE <b>2600 OLD CHERRY POINT ROAD</b> <b>NEW BERN, NC 28563</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 000	INITIAL COMMENTS  No deficiencies were cited as a result of the complaint investigation survey conducted on 12/20/2017. Event #D56011.	F 000			
F 584 SS=D	Safe/Clean/Comfortable/Homelike Environment CFR(s): 483.10(i)(1)-(7)  §483.10(i) Safe Environment. The resident has a right to a safe, clean, comfortable and homelike environment, including but not limited to receiving treatment and supports for daily living safely.  The facility must provide- §483.10(i)(1) A safe, clean, comfortable, and homelike environment, allowing the resident to use his or her personal belongings to the extent possible. (i) This includes ensuring that the resident can receive care and services safely and that the physical layout of the facility maximizes resident independence and does not pose a safety risk. (ii) The facility shall exercise reasonable care for the protection of the resident's property from loss or theft.  §483.10(i)(2) Housekeeping and maintenance services necessary to maintain a sanitary, orderly, and comfortable interior;  §483.10(i)(3) Clean bed and bath linens that are in good condition;  §483.10(i)(4) Private closet space in each resident room, as specified in §483.90 (e)(2)(iv);  §483.10(i)(5) Adequate and comfortable lighting levels in all areas;	F 584		1/17/18	

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

TITLE

(X6) DATE

Electronically Signed

01/11/2018

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.

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F 584	Continued From page 1  §483.10(i)(6) Comfortable and safe temperature levels. Facilities initially certified after October 1, 1990 must maintain a temperature range of 71 to 81°F; and  §483.10(i)(7) For the maintenance of comfortable sound levels. This REQUIREMENT is not met as evidenced by: Based on observations and interviews, the facility failed to maintain housekeeping and maintenance services necessary to maintain a sanitary and comfortable interior on 1 of 5 halls observed (400 hall).  Findings included:  1. On 12/17/17 at 4:06 p.m., an observation of Room 404 revealed the following: a.Cove base was pulling away from the wall near the sink in the room. b.Cove base was pulling away the wall near the toilet in the bathroom.  2. On 12/17/17 at 4:57 p.m., an observation of Room 406 revealed the following: a.A large surface of wall behind the B bed had white spackling. b.An approximate 12 inch horizontal scratch into the wall with the light switch in the bathroom. c.Multiple colors of paint on the walls around the room with no cohesion noted. d.The paint on the door frame to the bathroom scratched to the metal in several areas.  3. On 12/17/17 at 5:03 p.m., an observation of Room 406 revealed the following:	F 584	F584 Safe/Clean/Comfortable/Homelike Environment The process the lead to the deficiency is based on observations and interviews. The facility failed to maintain housekeeping and maintenance services necessary to maintain a sanitary and comfortable interior on 1 of 5 halls. The cove base was reapplied to the wall near the sink in room 404 by maintenance staff on 12/20/17. The cove base was reattached to the wall near the toilet in the bathroom for room 404 by maintenance staff on 12/20/17. The spackled area of the wall behind the B bed in room 406 was prepared and painted by the maintenance staff on 12/21/17. The 12 inch scratch on the wall with the light switch in the bathroom of room 406 was repaired and repainted by maintenance staff on 12/27/17. Room 406 was repainted by maintenance staff on 1/9/18. The bathroom door frame that was scratched to the metal was repainted by maintenance staff on 1/10/17. The cove base behind the head of bed A in room 406 was replaced by maintenance staff on 12/20/17. The 4 drawer dresser between the A and B beds in room 406 with many		

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F 584	<p>Continued From page 2</p> <p>a.Cove base missing behind the head of the A bed</p> <p>b.The top of the 4-drawer dresser between the A and B beds with many areas of the veneer scratched and marred.</p> <p>c.The bottom 2 drawers of the 4-drawer dresser between the A and B beds did not close properly.</p> <p>4. On 12/18/17 at 10:40 a.m., an observation of room 415 revealed the following:</p> <p>a.Cove base missing behind the head of the B bed.</p> <p>b.A strip of cove base lying on the floor under the sink in the bathroom.</p> <p>c.Numerous deep scratches into the wall to the left of the A bed.</p> <p>5. On 12/18/17 at 10:47 a.m., an observation of room 409 revealed the following:</p> <p>a.The chair rail on the wall with the window missing two approximately 4" sections revealing a different color paint than the rest of the wall.</p> <p>b.An over-toilet riser seat with a rusty metal frame in the bathroom.</p> <p>c.The chair rail to the right of the A bed noted to have many deep scratched areas.</p> <p>6. On 12/18/17 at 10:56 a.m., an observation of room 412 revealed the following:</p> <p>a.Two different colors of paint on the wall behind the head of the A bed with no cohesion noted.</p> <p>7. On 12/18/17 at 10:57 a.m., an observation of room 412 revealed the following:</p> <p>a.Two slats on the window's blinds were broken.</p> <p>b.The corner of the wooden window sill was</p>	F 584	<p>areas of the veneer scratched and marred and the bottom 2 drawers did not close properly was replaced by maintenance staff on 1/10/18. The cove base missing behind the head of the B bed in room 415 was replaced by maintenance staff on 12/20/17. The cove base that was lying on the floor under the sink was reattached to the wall in the bathroom of room 415 by the maintenance staff on 12/20/17. The deep scratches on the wall to the left of the A bed in room 415 were repaired and repainted by the maintenance staff on 1/11/18. The missing chair rail molding was replaced in room 409 by maintenance staff on 1/11/18. The over-toilet riser seat with rusty frame in the bathroom of room 409 was removed and was replaced by maintenance staff on 12/19/17. The chair rail to the right of the A bed in room 409 was replaced by maintenance staff on 1/11/17. The wall behind the A bed in room 412 was repainted by maintenance staff on 1/11/18. The window blinds in room 412 were replaced by maintenance staff on 1/9/18. The window sill in room 412 was replaced by maintenance staff on 12/19/17. The wall on the left side window with spackling in room 412 was prepared and painted by maintenance staff on 1/11/18. The wall behind the dresser with white spackling in room 412 was repaired and repainted by maintenance staff on 1/11/18. The wall behind the head board of bed B in room 412 was repainted by maintenance staff on 1/11/18. The missing cove base in the bathroom under the sink, behind the toilet</p>		

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F 584	<p>Continued From page 3</p> <p>broken off.</p> <p>c.The wall on the left side of the window with white spackling.</p> <p>d.The wall behind the dresser with white spackling.</p> <p>e.The wall behind the head of the B bed had two different colors of paint with no cohesion noted.</p> <p>f.Cove base missing in the bathroom under the sink, behind the toilet and on the wall with the light switch.</p> <p>g.The wall behind the toilet in the bathroom partially painted.</p> <p>During an interview with the Maintenance Director on 12/18/17 at 2:00 p.m., the Maintenance Director stated he had been aware of the maintenance needs on the 400 Hall. He stated he had been told to just patch areas as an outside company was coming to remodel the entire building. When asked to present any proposals of the upcoming remodel, he stated the Administrator would have to provide the information.</p> <p>During an interview with the resident who resides in room 404B on 12/20/17 at 2:45 p.m., the resident stated he felt the loose cove base in his room should be repaired because bugs tend to get behind it which is a problem in the summertime.</p> <p>During an interview with the Housekeeping Supervisor (HKS) on 12/20/17 2:53 p.m., the HKS stated the housekeeping staff were responsible for cleaning the over-toilet riser seats once they had been placed in a resident's bathroom. The HKS stated any over-toilet riser seats with rust or in disrepair would be replaced when needed.</p>	F 584	<p>and on the wall with the light switch was replaced in room 412 by maintenance staff on 12/20/17. The wall behind the toilet in room 412 was repainted by the maintenance staff on 1/12/18.</p> <p>100% observation of the 400 hall resident rooms to include rooms 404, 406, 409, 412 and 415 was completed on 1/10/18 by Administrator to ensure all areas and rooms are in good repair. Work orders were completed on 1/10/18 by the Administrator for notification to the Maintenance staff for any identified areas of concern. The Maintenance staff will correct all identified areas of concerns from the audit by 1/17/18.</p> <p>The Maintenance staff were in-service by the Administrator on 1/11/18 regarding ensuring rooms are in good repair. All license nurses, nursing assistants, dietary staff, housekeeping staff, and therapy staff will be in-service by the Administrator by 1/17/18 to notify Maintenance of any areas in the facility in need of repair or painting to include resident rooms by completing a work order slip. All newly hired licensed nurses, nursing assistants, dietary staff, housekeeping staff, therapy staff and maintenance staff will be in-serviced by the staff facilitator regarding to notify the Maintenance department of any areas in the facility in need of repair or painting to include resident's rooms by completing a work order slip during orientation.</p> <p>The administrative staff to include Accounts Payable Bookkeeper,</p>		

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F 584	Continued From page 4  During an interview with the resident who resides in room 406A, the resident stated the state of disrepair in her room was a sight and should be repaired.  During an interview with the Administrator on 12/20/17 at 3:17 p.m., the Administrator was unable to provide an acceptable plan of correction for the planned remodeling of the facility. The Administrator stated it was his expectation the facility be kept in a well maintained condition with a homelike environment.	F 584	Admissions Coordinator, Receptionist, Social Worker or the Director of Nursing will monitor 100% of all resident rooms, to include rooms 404, 406, 409, 412, and 415 to ensure rooms are in good repair weekly x 8 weeks then monthly x 1 month utilizing a Homelike Environment QI Audit tool and will complete a work order slips for all identified areas of concerns. The Maintenance staff will immediately address any identified areas of concern during the audit. The Administrator will review and initial the Home like Environment QI Audit Tool weekly x 8 weeks then monthly x 1 month for completion and to ensure all areas of concern were addressed.  The Administrator is responsible for forwarding the results of the Homelike Environment QI Audit Tool to the Executive QI Committee monthly x 3 month. The Executive QI committee will meet monthly and review the Homelike Environment QI Audit Tool and address any issues, concerns and/or trends and to make changes as needed, to include continued frequency of monitoring x 3 months.	