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

PRINTED: 05/08/2013
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	345155	A. BUILDING ______ B. WING ______	C 04/25/2013

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
RANDOLPH HEALTH AND REHABILITATION CENTER	230 EAST PRESNELL STREET ASHEBORO, NC 27203

(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 253 SS=D	483.15(h)(2) HOUSEKEEPING & MAINTENANCE SERVICES The facility must provide housekeeping and maintenance services necessary to maintain a sanitary, orderly, and comfortable interior. This REQUIREMENT is not met as evidenced by: Based on observation and staff interviews the facility failed to identify and repair a broken electrical outlet and bathroom light in 1 of 5 rooms (room # 722-B). Findings included: During an observation on 4/24/13 at 10:20 A.M. in room 722-B an electrical outlet cover located above the sink in the room was broken at the bottom left corner exposing metal at the bottom of the outlet cover and the bathroom light had a faulty light switch causing the light to flicker or not come on at all. During an interview 4/25/14 at 9:20 AM, (nursing assistant) NA #1 assigned to room 722-B indicated that she was not aware that the electrical outlet was broken or that the bathroom light was not working properly, she indicated that if there were items out of order or insects noted she would fill out a form for maintenance. The form is located in the nourishment room available for staff to fill out. NA #1 indicated that the form is clipped to the wall file until maintenance picks it up. During an interview with the Maintenance Director on 4/25/13 at 9:47 AM, indicated that he was not	F 253	The bathroom light switch and electrical cover has been repaired on 4/26/13 for room 722. An audit was conducted by the Maintenance Director and Maintenance Assistants on 4/26/13 to determine if any other light switches or outlet covers were broken. All identified malfunctioning switches and broken electrical covers were repaired on 4/26/13. All facility staff will be inserviced on the utilization of the Maintenance Repair Request Form and identification of needed repairs by 5/20/13. The Maintenance Director and Maintenance Assistants will conduct an audit utilizing the audit tool for light switches and electrical outlet covers. This audit will be conducted weekly X 4 weeks, then monthly there after. This will begin 5/13/13.	5-20-13

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
Chip [signature]	LNHA	5-16-13

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 253	Continued From page 1 aware of a broken electrical outlet or faulty light switch in room 722-B. He reported that when there is a problem in a room such as a light not working or a broken outlet, they have a work order system at each station and maintenance checks the work orders every 2 hours. He further indicated that if maintenance is not there, they have a guy on call. He reported that a broken outlet would be considered severe and maintenance would be paged to get there as soon as possible. He reported that he had not been notified of repairs needed in room 722 regarding problems with a light or a broken outlet, " nothing on record " . The Maintenance Director shared a form that was developed in February titled " Room Ready Inspection " , it is used on rounds, pre and post checks for new admissions and after discharges. The form listed items to be inspected, #4 being electrical (covers, switches, receptacles, bulbs).	F 253	All results from the audits will be reviewed by our monthly Quality Assurance Committee to determine the duration, frequency, and effectiveness of the audits.	5-26-13