STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION

(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:

345090

(X2) MULTIPLE CONSTRUCTION
A. BUILDING _____________________________
B. WING _____________________________

(X3) DATE SURVEY COMPLETED
C
08/28/2014

NAME OF PROVIDER OR SUPPLIER
WESTCHESTER MANOR AT PROVIDENCE PLACE

STREET ADDRESS, CITY, STATE, ZIP CODE
1795 WESTCHESTER DRIVE
HIGH POINT, NC 27262

SUMMARY STATEMENT OF DEFICIENCIES
(EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)

F 254
SS=E

483.15(h)(3) CLEAN BED/BATH LINENS IN GOOD CONDITION

The facility must provide clean bed and bath linens that are in good condition.

This REQUIREMENT is not met as evidenced by:
Based on observation, record review, staff, and family interviews the facility failed to provide enough linen in acceptable condition for use by residents on 6 of 6 halls. Findings include:

On 8/25/14 at 11:00 am, the facility indicated there were 124 residents currently in the facility. Review of the Monthly Linen Inventory Form dated 8/25/14, revealed
Flat sheets: 286
Fitted sheets: 178
Pillowcases: 131
Towels: 417
Wash cloths: 1344
Gowns: 128
Pads: 63
Bibs (clothing protectors): 79

A confirmation sales order dated 8/28/14, revealed 8 dozen bath towels and 8 packs of wash cloths (480) ordered.

During an interview on 8/26/14 at 9:56 am, Aide #1 indicated linen wasn’t available for use on the first shift until 8:00am. During observation of the 200 hall linen closet Aide #1 pulled linen off the shelf, a total of 3 fitted sheets, 1 of 3 sheets was in good repair, 2 sheets had holes and were thin. There were no towels, wash cloths or pillow cases.

F 254

9/12/14

PROVIDER’S PLAN OF CORRECTION
(EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)

Preparation and/or execution of this Plan of Correction does not constitute an admission or agreement by the provider of the truth of the facts alleged or conclusions set forth on the Statement of Deficiencies. This Plan of Correction is prepared and/or executed solely because required by the provisions of Health and Safety Code Section 1280 and 42 C.F.R. 405.1907______

1. Corrective action will be accomplished for those residents found to have been affected by the deficient practice:
No individual resident was found to have been affected by the deficient practice.

2. Corrective action will be accomplished for those residents having potential to be affected by the same deficient practice:
No individual resident was found to have been affected by the deficient practice.
Linens were purchased on August 28, 2014 and received in the facility on September 5, 2014. Additional linens were purchased on September 5, 2014 and received in the facility on September 9, 2014. Once received these additional linens were provided to staff for use.

LABORATORY DIRECTOR’S OR PROVIDER/SUPPLIER REPRESENTATIVE’S SIGNATURE
Electronically Signed
09/09/2014

FORM CMS-2567(02-99) Previous Versions Obsolete
Event ID: 1L1Q11
Facility ID: 923544
If continuation sheet Page 1 of 5
During an interview on 8/26/14 at 10:15 am, Nurse #1 indicated fitted sheets were of poor quality thin and with holes. There were not enough towels and wash cloths to provide incontinent care at 7:00 am in the morning.

During an interview on 8/26/14 at 10:19 am, laundry aide was at the 200 hall linen closet delivering linen. She indicated she rounded at 7:00 am, 10:00 am, and 12:20 pm. When asked to check the condition of the sheets on the shelf she observed 2 thin and holey sheets and indicated the sheets should not have been taken to the floor. She returned them to the shelf. Laundry aid indicated she folded and counted linen then documented the amount on a paper. She asked for more linen from the laundry manager when she felt didn’t have enough.

During an interview on 8/27/14 at 10:30 am, family member indicated the fitted sheets were thin and had holes. She brought in towels and wash cloths for her mother because there wasn’t always enough available.

During an observation on 8/27/14 at 11:45 am, revealed the shelves in the linen room were empty. An aide knocked on the laundry room door asking for clothing protectors as they were coming out of the dryer. Laundry Aide revealed there was no surplus linen. All linen was in use, or in the washer or dryer.

During interview on 8/27/14 at 11:53 am, Nurse #2 indicated the lack of linen, towels and wash cloths every morning, until there was a delivery of linen.

An audit of the physical condition of all linens was conducted by the Housekeeping/Laundry manager beginning on September 3, 2014 and completed September 5, 2014. Any linens found to be in poor condition were discarded. An inventory of all linens of good quality was completed on September 8, 2014. A PAR level of linens was established by the Housekeeping/Laundry manager of 3 per resident to ensure that sufficient linens of good quality are available at all times. Weekly linen inventory will be maintained by Housekeeping/Laundry manager. Anytime the linen supply is below the established PAR level it will be reported to the Housekeeping/Laundry District Manager.

3. Measures will be put into place or systemic changes made to ensure that the deficient practice will not occur:

Housekeeping/Laundry staff were educated by the Housekeeping/Laundry manager on September 4, 2014 □ September 5, 2014 in regards to procedures for auditing the physical condition of all linens along with when to discard damaged linens. Housekeeping/Laundry staff were also educated on the procedure for ensuring that there is a sufficient quantity of linens available at all times and the process for securing additional linens.

4. Indicate how the facility will monitor its
During observation on 8/27/14 at 12:00 pm, Aide #3 indicated there were no fitted sheets, no pillow cases, and 7 of 15 wash cloths were stained. She indicated residents had more than one pillow and there were never enough pillow cases and she usually had to go downstairs to the laundry room and get them.

On 8/27/14 at 12:24 pm, laundry manager (LM) inspected linen closet on hall 600. 1 of 7 wash cloths were stained and discarded. No clothing protectors.

On 8/27/14 at 12:26 pm, (LM) inspected linen closet on hall 500. 15 of 16 wash cloths and 3 of 8 towels were stained and removed from the closet. No clothing protectors.

On 8/27/14 at 12:30 pm, (LM) inspected linen closet on hall 400. 1 of 8 wash cloths was stained and removed, there were no pillow cases or fitted sheets. No clothing protectors.

On 8/27/14 at 12:35 pm, (LM) inspected linen closet on hall 300. 1 of 12 wash cloths were stained and removed. No pillow cases and no clothing protectors.

On 8/27/14 at 12:35 pm, (LM) inspected linen closet on hall 200. 10 of 14 wash cloths were stained and removed, 2 of 3 fitted sheets had holes and were removed, one of the fitted sheets was thin and left on the shelf. There were no pillow cases and no clothing protectors.

On 8/27/14 at 12:40 pm, (LM) inspected linen closet on hall 100. 2 of 8 towels and 5 of 15 wash cloths were stained and removed. No clothing protectors.

performance:

Housekeeping/Laundry manager will review linen inventory weekly for 6 months to ensure there is sufficient linens of good condition available for all shifts. Linen count tracking sheets will be maintained by the Housekeeping/Laundry manager. Periodic audits will be conducted by the Housekeeping/Laundry District Manager on a monthly basis.

Results will be presented to the Quality Assurance team for recommendations and follow up for 12 months.
During an interview on 8/27/14 at 12:55pm, LM indicated he was aware there wasn’t enough linen in June and July. He indicated the laundry aide counted linen daily and recorded the amount. He replaced the discarded linen with new linen, which was locked in the closet. All linen was out on the floor or being washed or dried. No linen was stored in the laundry room. He was not aware of a PAR level (the amount of linen per person).

During an observation in the laundry room on 8/27/14 at 1:16 pm, the LM asked the laundry aide for the daily count sheet. She indicated she was too busy washing and drying to meet the demand of linen on the floor, to count. The LM shuffled through a pile of papers on a shelf, and indicated there were no count sheets.

During an interview on 8/28/14 at 7:30 am, Nurse #3 indicated there were shortages of linen on 3rd shift.

During an interview on 8/28/14 at 4:00pm, the LM indicated last night 76 wash cloths and 57 towels were left for the third shift. The staff used the supply in the linen closet until the next day. He was aware there had not been enough linen on the 3rd shift.

During an interview on 8/28/14 at 4:15pm, Administrator indicated the housekeeping / laundry corporate office managed the amount of linen ordered.

During a telephone interview 8/28/14 at 4:30 pm, District Manager for the housekeeping/laundry department indicated all residents were to have a "PAR" of 3 per person. This meant that each resident had 3 of
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(X4) ID PREFIX TAG
SUMMARY STATEMENT OF DEFICIENCIES
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ID PREFIX TAG

PROVIDER'S PLAN OF CORRECTION
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(X5) COMPLETION DATE

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each item, pillow cases, and flat and fitted sheets, clothing protectors, wash cloths, towels and bed pads. The laundry manager sent an inventory count monthly to the corporate office, based on that inventory count the corporate office sent linens.

The expectation was linen should be available to staff in the linen closet, and the laundry room using the PAR level and a surplus available for all shifts.

There was no laundry done on third shift, at the end of the second shift the laundry aide was leave a cart of towels, wash cloths, sheets flat and fitted and pillow cases, for each hall. Linen was to be tagged out (taken out of use) if it was stained, had holes, thin or unraveling. This linen was no longer counted in the PAR and was replaced by new linen.

During a telephoned interview on 8/28/14 at 5:10 PM, family member indicated there was not enough serviceable linen.