CENTERS FO	OR MEDICARE & MEDICAID SERVICES			"A" FORM
STATEMENT OF ISOLATED DEFICIENCIES WHICH CAUSE		PROVIDER #	MULTIPLE CONSTRUCTION	DATE SURVEY
NO HARM WITH ONLY A POTENTIAL FOR MINIMAL HARM			A. BUILDING:	COMPLETE:
FOR SNFs AND	NFs	345465	B. WING	11/19/2015
NAME OF PROVIDER OR SUPPLIER BAYVIEW NURSING & REHAB CENTER		STREET ADDRESS, CIT		·
		3003 KENSINGTON PARK DRIVE NEW BERN, NC		
ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES			
F 356	483.30(e) POSTED NURSE STAFFING INFORMATION			
	The facility must post the following information on a daily basis: o Facility name. o The current date. o The total number and the actual hours worked by the following categories of licensed and unlicensed nursing staff directly responsible for resident care per shift: - Registered nurses. - Licensed practical nurses or licensed vocational nurses (as defined under State law). - Certified nurse aides. o Resident census. The facility must post the nurse staffing data specified above on a daily basis at the beginning of each shift. Data must be posted as follows: o Clear and readable format. o In a prominent place readily accessible to residents and visitors.			
	The facility must, upon oral or written request, make nurse staffing data available to the public for review at a cost not to exceed the community standard.			
	The facility must maintain the posted daily nurse staffing data for a minimum of 18 months, or as required by State law, whichever is greater.			
	This REQUIREMENT is not met as evidenced by: Based on observations and staff interviews, the facility failed to post staffing information for 1 of 5 days of the survey. The findings included: On 11/15/15 at 4:40 PM during the initial tour of the facility, the staff posting information could not be			
	located. On 11/15/15 at 4:45PM, Nurse #1 was questioned about the location of the staff posting information. The Nurse pointed at a box on the wall across from the nurse 's station. The box was observed to be empty. The Nurse stated the administrative person that worked over the weekend usually posted the staffing information.			
	On 11/18/15 at 9:55AM the Administrative Staff Member (Accounts Payable) that worked on 11/15/15 stated in an interview that the Clinical Care Coordinator usually put the staff posting sheets for the weekend in the assignment book on Friday and the nurse working on the weekend posted the information. The Staff Member stated she did not see the staffing sheets in the book on the morning of 11/15/15.			
	On 11/19/15 the Administrator stated in an interview the Clinical Care Coordinator was off on Friday and the staffing information did not get posted over the weekend.			

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

The above isolated deficiencies pose no actual harm to the residents

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