STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	495232	A. BUILDING _____ B. WING _____	C 03/13/2018

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
KEMPSVILLE HEALTH & REHAB CENTER	5520 INDIAN RIVER ROAD VIRGINIA BEACH, VA 23464

(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 An unannounced Medicare/Medicaid abbreviated standard survey (complaint investigation) was conducted 3/12/18 through 3/13/18. One complaint was investigated. Corrections are required for the 42 CFR Part 483 Federal Long Term Care requirements. The census in this 90 certified bed facility was 86 at the time of the survey. The survey sample consisted of 2 residents; one closed resident review (Resident #1) and one current record review (Residents #2).	F 000		
F 695 SS=D	Respiratory/Tracheostomy Care and Suctioning CFR(s): 483.25(i) § 483.25(i) Respiratory care, including tracheostomy care and tracheal suctioning. The facility must ensure that a resident who needs respiratory care, including tracheostomy care and tracheal suctioning, is provided such care, consistent with professional standards of practice, the comprehensive person-centered care plan, the residents' goals and preferences, and 483.65 of this subpart. This REQUIREMENT is not met as evidenced by: Based on a complaint investigation, observations, clinical record review, staff interviews and review of facility documentation, the facility staff failed to ensure oxygen cylinders were fully operational on 1 of 2 code carts (East Wing). The facility staff failed to ensure the oxygen (O2) cylinder on the crash cart was checked to include a functioning O2 regulator.	F 695	1.The East Wing crash cart has been reorganized with labeled bins to include 2 Oxygen regulators and an additional portable Oxygen tank was added to this cart. This cart was moved to the nurses station. Additional full tanks of Oxyen in a rack has been added to the EW storage room. Oxygen signage was added to the door.	3/12/2018
			2. The crash cart on the West Wing has been modified to the same standard as the East Wing cart.	3/16/2018
			3. The daily crash cart checklist has been modified on both wings to include 2 regulators and that they are in working order. The nursing staff will be educated on the new checklist and ensuring Oxygen is functioning by the DON/Desingee.	4/15/2018
			4. The RN Unit Managers will monitor compliance of the crash carts weekly. Random mock codes will be scheduled quarterly. Results of audits will be taken to QAPI committee monthly X3 for review and revision as needed.	4/15/2018

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE | TITLE | (X6) DATE

Barbara Fowler | Administrator

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 695	Continued From page 1	F 695		

The findings included:

On 3/12/18 at 1:52 p.m., with the assistance of the Director of Nursing (DON), the facility's two crash carts were inspected to include the O2 cylinders. The Administrator was also present during the inspection. The DON attempted to demonstrate the following operational check of the East unit's crash cart O2 tank:
-Turned key on top of tank in counter clockwise direction to open the flow of oxygen.
-Attempted to read low flow regulator knob; turned in the direction the arrow indicated to increase or open. It was at this step the O2 regulator was observed in the red zone on the dial, which indicated the cylinder should be refilled.

The DON stated she could not believe the tank on the crash cart was empty or near empty because it had not recently been used and the cylinders were checked every day on the 11/7 shift. Upon closer examination, it was determined the O2 regulator was defective.

To simulate a check of the cylinder, an East unit Licensed Practical Nurse (LPN) #1 was asked to perform a check of the O2 cylinder. This nurse followed the same aforementioned procedural steps and came to the same conclusion; the tank was empty and she would have to go the West unit to obtain a full O2 tank in case of an emergency need for O2. The DON retrieved another O2 regulator, replaced it and the tank read with a psi (parts per square inch) greater than 500 (sufficient O2), which indicated a partially full tank. The DON stated the crash cart did not store a second O2 regulator and the nurses only checked to ensure the tank had

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F 695	Continued From page 2	F 695		

sufficient O2. She stated in case of an emergency the nursing staff would not think the O2 regulator was defective and would waste time going to another unit to retrieve another cylinder in emergency situations. The DON also stated she would add a check of the O2 regulator on the crash cart check list and would place another one the crash cart. Additionally, she said, "I expected the nursing staff to have identified a problem with the O2 cylinder and oxygen amount that would take this tank out of commission during the crash cart check. The O2 regulator will be a part of the crash cart checks from now on, but this is an opportunity for training and reorganization of the crash cart."

The facility's policy and procedures titled Emergency Equipment Check dated 1/2014 indicated, "The oxygen tank would be checked by the midnight shift everyday" and the procedure included the following: "Crank open tank with wrench, assure oxygen flow with regulator, crank oxygen tank shut and check the amount of O2 in tank."

COMPLAINT DEFICIENCY