

Department of Health & Human Services
Centers for Medicare & Medicaid Services

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Form Approved OMB
No. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 185272	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 01/22/2026
NAME OF PROVIDER OR SUPPLIER River Haven Nursing and Rehabilitation Center		STREET ADDRESS, CITY, STATE, ZIP CODE 867 McGuire Avenue Paducah, KY 42001	
For information on the nursing home's plan to correct this deficiency, please contact the nursing home or the state survey agency.			
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (Each deficiency must be preceded by full regulatory or LSC identifying information)		
F 0908 Level of Harm - Potential for minimal harm Residents Affected - Some	Keep all essential equipment working safely. **NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on observation and interview, it was determined that the facility failed to ensure the mechanical lift slings were retired in accordance with the manufacturer's recommendations. Per the sewn-on manufacturer's label, the working life is six months. One sling out of six slings inspected in the 100 Hall had a legible date handwritten in black, which had expired, and there were no legible handwritten dates on all seven slings located in the 200 Hall. The findings include: Inspection of the sling wash and inspection log on [DATE] at 10:15 AM revealed that the last time it had been signed was on [DATE]. Laundry #13 could not reveal why the log had not been completed since that date and could not identify the purpose of the log. An interview with Maintenance #9 on [DATE] at 3:42 PM revealed that he maintained the hoist but does not do anything related to the slings and is not aware of sling recommendations. An interview with Central Supply #12 on [DATE] at 3:46 PM, revealed she did not track sling age, cleaning, and inspection, and was unsure of who was responsible for inspections. She was unable to answer how long the service life was for slings used to lift residents. Upon opening a new sling from Emerald Supply and reading the sewn-on manufacturer's label, she reported that the lifespan of the new sling is 6 months. An inspection of the 200 Hall with Central Supply #12 on [DATE] at 3:54 PM revealed the slings with legible labels were from Medline with a recommended service life of six months per the sewn-on manufacturer's label. Three slings out of seven had manufacturer tags where the print was not legible. One sling had 1/22 written on it, and Central Supply #12 could not identify a date related to the numbers handwritten on the label. An inspection of six slings in the 100 Hall on [DATE] at 4:03 PM, one sling with what appeared to be cigarette holes in the fabric, and another sling that was dated with a black marker [DATE], and two slings with a safety label that is not legible. An interview with the Administrator on [DATE] at 10:00 AM revealed they did not have a policy and or facility written guidance related to sling use, maintenance, or cleaning, and were unaware of the service life of the slings used in lifting residents.		

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.

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