

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 345293	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 01/15/2025
NAME OF PROVIDER OR SUPPLIER Richmond Pines Healthcare and Rehabilitation Cente		STREET ADDRESS, CITY, STATE, ZIP CODE Highway 177 S Box 1489 Hamlet, NC 28345	

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)
<p>F 0732</p> <p>Level of Harm - Potential for minimal harm</p> <p>Residents Affected - Many</p>	<p>Post nurse staffing information every day.</p> <p>40197</p> <p>Based on record review and staff interviews, the facility failed to post accurate staffing information as compared to the daily staff schedule for licensed nursing staff for 13 out of 57 days reviewed for sufficient staffing. The facility also failed to ensure the resident census was present on the daily nurse staffing sheets for 54 out of 57 days.</p> <p>The findings included:</p> <p>1) A review of the facility's daily posting for nursing staff for the past 57 days as compared to the daily staffing schedule included an inaccurate total number of nursing staff worked. The nursing schedules for 11/4/24, 11/8/24, 11/11/24, 11/15/24, 11/18/24, 11/22/24, 11/25/24, 11/26/24, 11/29/24, 12/1/24, 12/2/24, 12/13/24 and 12/30/24, indicated that one Registered Nurse (RN), the Unit Manager, was scheduled to work the day shift (7:00 AM to 3:00 PM). The daily posted nurse staffing sheets for 11/4/24, 11/8/24, 11/11/24, 11/15/24, 11/18/24, 11/22/24, 11/25/24, 11/26/24, 11/29/24, 12/1/24, 12/2/24, 12/13/24 and 12/30/24 documented that there was no RN coverage.</p> <p>The Staff Scheduler was interviewed on 1/15/25 at 2:50 PM. She reviewed the staffing schedule and daily postings and verified the postings did not correlate for the RN coverage. She explained that the Unit Manager, who is a RN, was working on those days and didn't realize that she should be counted as RN coverage on the daily nurse staffing sheets.</p> <p>The Administrator was interviewed on 1/15/25 at 3:40 PM, and stated he expected the daily staff posting to be an accurate reflection of the staff that worked.</p> <p>2) A review of the facility's daily posting for nursing staff for the past 57 days did not include a resident census number for 7:00 AM to 3:00 PM, 3:00 PM to 11:00 PM or 11:00 PM to 7:00 AM. This included all days from 11/4/24 to 11/30/24 as well as all days from 12/1/24 to 12/31/24 except for 12/18/24, 12/24/24 and 12/26/24.</p> <p>The Staff Scheduler was interviewed on 1/15/25 at 2:50 PM. She reviewed the daily staff postings and verified they did not include a resident census. She stated she was unaware this was required to be completed.</p> <p>The Administrator was interviewed on 1/15/25 at 3:40 PM and stated he would expect the resident census to be present on the daily staff posting as required.</p>

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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