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| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION                            | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:<br><br>425287 | (X2) MULTIPLE CONSTRUCTION<br>A. Building<br>B. Wing                              | (X3) DATE SURVEY COMPLETED<br><br>04/08/2024 |
| NAME OF PROVIDER OR SUPPLIER<br><br>Midlands Health & Rehabilitation Center |  | STREET ADDRESS, CITY, STATE, ZIP CODE<br><br>1007 N King St<br>Columbia, SC 29223 |  |

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<br>(Each deficiency must be preceded by full regulatory or LSC identifying information)  |
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| <p>F 0908</p> <p>Level of Harm - Immediate jeopardy to resident health or safety</p> <p>Residents Affected - Few</p> <p>Note: The nursing home is disputing this citation.</p> | <p>Keep all essential equipment working safely.</p> <p><b>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY**</b> 46991</p> <p>Based on review of facility policy, interviews, and record review, the facility failed to ensure Resident (R)1 and R2 was free from electrical hazards.</p> <p>On 04/08/24 at 4:00 PM, the Administrator and Director of Nursing were notified that the failure to maintain all mechanical, electrical, and patient care equipment in safe operation constituted Immediate Jeopardy (IJ) at F908.</p> <p>On 04/08/24 at 4:00 PM, the survey team provided the Administrator with a copy of the CMS Immediate Jeopardy (IJ) Template and informed the facility IJ existed as of 12/15/23. The IJ was related to 42 CFR 483.90 - Physical Environment.</p> <p>On 04/08/24 at 6:18 PM, the facility presented an acceptable plan of removal of the IJ. On 04/08/24 at 6:18 PM, the survey team, validated the facility's corrective actions and removed the IJ. The facility remained out of compliance at F908 at a lower scope and severity of D following removal of the IJ.</p> <p>Findings include:</p> <p>Review of the facility's policy titled, Maintenance/Housekeeping Policies and Procedures dated email revision August 2019, indicated, 2). Observe bed operation 6). Check underside bed frame and mattress support platform 8). Check wiring for proper connections and damage (fraying, kinking, or deterioration). Bedframes, mattresses, bed rails (if applicable), inspect bed power cord, cord plug and wall plug for damage.</p> <p>Review of R1's Face Sheet revealed R1 was admitted to the facility on [DATE] with diagnoses including but not limited to: depression, heart failure, and cognitive communication deficit.</p> <p>Review of R1's Quarterly Minimum Data Set (MDS) with an Assessment Reference Date (ARD) date of 10/31/23 revealed a Brief Interview for Mental Status (BIMS) score of 12 out of 15, indicating R1 was moderately cognitively impaired.</p> <p>Review of R1's Physician Orders revealed R1 was ordered, Albuterol sulfate, HFA aerosol inhaler; 90 mcg/actuation; amt 2 puffs; inhalation and O2 supplies weekly on Sundays.</p> <p>(continued on next page)</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.

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| LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE | TITLE | (X6) DATE |
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| <p>F 0908</p> <p>Level of Harm - Immediate jeopardy to resident health or safety</p> <p>Residents Affected - Few</p> <p>Note: The nursing home is disputing this citation.</p> | <p>Review of R1's Care Plan with a start date of 08/10/22, revealed, [R1] is at risk for respiratory complications . with an approach indicating, Keep room cool and free of irritants such as smoke, dust, cleaning agents.</p> <p>Review of R1's Progress Notes dated 12/15/23, revealed, Resident is received back to the facility at MHR with room change at change of shift (7pm). Resident vital signs taken and recorded- and are abnormal as follows T- 103.6, p 115, r- 24, bp- 100/68. Report and after visit summary (hospital paperwork) were provided to oncoming nurse. This nurse writer called the on call provider and received telephone orders which are being entered by department and these are for Tylenol 650mg every 6 hours as needed for fever and or pain, flu and covid swabs, chest x ray, vitals times two this shift, oxygen as needed- titrate oxygen to maintain o2 saturations greater than 92%, and provider notification- notify provider if o2 saturations fall less than 92%. These orders are conveyed in nurse report hand off.</p> <p>Review of R2's Face Sheet revealed R2 was admitted to the facility on [DATE] with diagnoses including but not limited to: anxiety disorder, absence of right leg below knee, and morbid obesity.</p> <p>Review of R2's Quarterly MDS with an ARD date of 11/03/24 revealed a BIMS score of 14 out of 15, indicating R2 was cognitively intact.</p> <p>Review of R2's Physician Orders revealed R2 was ordered, O2 4 liters per minute via nasal cannula.</p> <p>Review of a Five-Day Report dated 02/15/24 revealed, Certified Nursing Assistant (CNA) was sitting at the nursing station, when she overheard R2 calling out for assistance. When entering the room, R2 stated the bed was smoking. Staff reports sparks were observed.</p> <p>Review of a Work History Report revealed the following: Task Type Preventive Maintenance, Due Date 10/31/23, 11/30/23, and 12/31/23, Category Beds - Electric, Task Description Beds &amp; Mattresses: Inspect Bed Rails. Review of the Work History Order revealed the tasks during the indicated days were completed. However further review of the Work History Report did not indicate that the electric system, (check wiring for proper connections and damage fraying, kinking, or deterioration) of the beds were inspected, only that the bed rails were inspected.</p> <p>Review of a Fire Report from the local fire department dated 12/15/23 revealed, Engine 32 investigated and found a damaged cord from a bed. There was no fire. Reports from staff members confirmed this cord was arcing [when electricity jumps from one connection to another. The discharge of electricity is produced during an electrical breakdown . This often causes a flash, sparks, and a sizzling or cracking sound]. Engine 32-1 unplugged the cord from the wall socket. There was no fire extension. Ladder 4 then ventilated the wing. Command was terminated and Engine 32 went back in service.</p> <p>The Maintenance Director was unavailable for interview.</p> <p>During an interview on 04/08/24 at 11:09 AM, R2 stated he looked over, heard zapping and heard R1 making non-coherent noises. R2 further stated he saw flames and the bed itself was on fire, so he pushed the call button and called for help.</p> <p>(continued on next page)</p> |   |  |

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| <p>F 0908</p> <p>Level of Harm - Immediate jeopardy to resident health or safety</p> <p>Residents Affected - Few</p> <p>Note: The nursing home is disputing this citation.</p> | <p>During an interview on 04/08/24 at 11:29 AM, RN1 stated she heard R2 calling for help. RN1 stated upon entering the room she saw sparks coming from under R1's bed. RN1 pulled the alarm, and everyone came in to assist with getting the residents out of the room. RN1 further stated R1 was in his bed at the time, and she could see the sparks and smoke coming from behind the bed. There was a moderate amount of smoke and you could see the smoke in the room. RN1 stated she utilized the fire extinguisher, aiming behind and on the bed, shortly thereafter the fire department was on the scene. RN1 concluded R1 is total care, g-tube and incontinent.</p> <p>During an interview on 04/08/24 at 11:38 AM, Certified Nursing Assistant (CNA)1 stated she heard R2 yelling out Fire. CNA1 stated upon entering the room she saw smoke and they moved R1 out of his bed first and then proceeded to move R2 out of his bed to safety. CNA1 further stated the fire department was called. CNA1 concluded that R1 and R2 are total care.</p> <p>During an interview on 04/08/24 at 1:09 PM, R1 stated he didn't see any fire, but he heard R2 calling for help. R1 concluded he was okay, but he needs a new bed.</p> <p>During an interview on 04/08/24 at approximately 2:40 PM, the Administrator stated the Work History Report does not indicate what maintenance checked. The Administrator further stated the facility does not have any written documentation of the routine preventive maintenance of electric beds.</p> <p>On 04/08/24 at 6:18 PM, the facility presented an acceptable plan of removal, which included the following:</p> <p>Resident #2 resides in the facility. On 12-15-2023, Resident #2 notified staff that that [sic] resident #1 bed was smoking. Staff members responded to the incident, Resident #1 and Resident #2 were relocated. The Fire Department responded and found a damaged cord from the bed- there was no actual fire. A complete audit of mechanical, electrical and patient care equipment was performed on 4-8-24 with no concerns at this time.</p> <p>The Medical Director was notified of the incident on 12-15-2023.</p> <p>Residents who reside in the facility have the potential to be affected by this alleged deficient practice.</p> <p>Administrator re-educated the Maintenance Supervisor via telephone on preventative maintenance for mechanical, electrical and patient care equipment on 4-8-2024. Additional education to be completed with Regional Maintenance.</p> <p>Director of Nursing/Designee will re-educate licensed nurses and unlicensed staff 4-8-24 to include the following:</p> <ul style="list-style-type: none"> <li>- Process of documenting maintenance concerns in the maintenance log.</li> <li>- RACE (Rescue, Alarm, Contain, Extinguish) is to be initiated. Staff members are required to be a part of an emergency.</li> <li>- Staff is required to remain in place until cleared.</li> </ul> <p>(continued on next page)</p> |   |  |

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| <p>F 0908</p> <p>Level of Harm - Immediate jeopardy to resident health or safety</p> <p>Residents Affected - Few</p> <p>Note: The nursing home is disputing this citation.</p> | <p>- Staff re-educated on power cord safety and non-battery operated equipment. Education focused on observation for function and deterioration of parts the equipment.</p> <p>Staff not receiving this re-education on 4-8-24 will receive prior to working the next scheduled shift. This will be presented in new hire orientation and for agency staff.</p> <p>The Maintenance Director will perform audits of ten resident's mechanical, electrical and patient care equipment Monday - Friday for four weeks and then ten weekly for additional months.</p> <p>Any concerns will be addressed at the time of discovery.</p> <p>The Medical Director was notified on 4-8-24 of the Immediate Jeopardy.</p> <p>An Ad-Hoc Quality Assurance Performance Improvement meeting was held on 4-8-2024 regarding the contents of this plan.</p> <p>The Facility Administrator will oversee compliance of this plan for three months.</p> |