

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  150048	X2) MULTIPLE CONSTRUCTION A. BUILDING 00 B. WING _____	X3) DATE SURVEY COMPLETED  12/11/2013
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NAME OF PROVIDER OR SUPPLIER  REID HOSPITAL & HEALTH CARE SERVICES	STREET ADDRESS, CITY, STATE, ZIP CODE 1100 REID PKWY RICHMOND, IN 47374
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(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
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S000000	<p>This visit was for a State complaint survey.</p> <p>Intake Number IN00139729 Unsubstantiated, lack of sufficient evidence; unrelated deficiency cited</p> <p>Survey Date: 12-11-13</p> <p>Facility Number: 005044</p> <p>Surveyor: Jack I. Cohen, MHA Medical Surveyor</p> <p>QA: cloughlin 12/20/13</p>	S000000		
S001166	<p>410 IAC 15-1.5-8 PHYSICAL PLANT 410 IAC 15-1.5-8(d)(2)(C)</p> <p>(d) The equipment requirements are as follows: (2) There shall be sufficient equipment and space to assure the safe, effective, and timely provision of the available services to patients, as follows:</p> <p>(C) Appropriate records shall be kept pertaining to equipment maintenance, repairs, and current leakage checks.</p>			

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

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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	<p>Based on observation, interview and document review, the hospital failed to follow hospital policy by not keeping an appropriate detailed record of preventive maintenance (PM) for 1 of 15 pieces of equipment.</p> <p>Findings:</p> <ol style="list-style-type: none"> <li>On 12-11-13 at 11:05 am, in the presence of Employees #A1 and #A2, it was observed in patient room 555 there was a patient bed with an asset tag of E05416. There was also a tag on the bed that indicated Test Date 1-13 and Due 1-14.</li> <li>In interview on 12-11-13 at 11:05 am, Employee #A2 indicated the Test Date was when the PM was done and the Due was when the next PM would be done.</li> <li>Review of Policy Number: 124, entitled Medical Equipment Management Plan, REVISION DATE: 01/01/13, indicated all preventive maintenance and repair work orders (regardless if equipment is maintained by Biomed, department or by vendor) will be entered into the TMS database and shall be used to manage each maintenance event.</li> <li>In interview on 12-11-13 at 12:45 pm, Employee #A2 indicated the following:</li> </ol>	S001166	<ol style="list-style-type: none"> <li>The deficiency was corrected on 12/11/13 by performing a PM and uploading it into RMS and confirming this PM did in fact upload to the asset record.</li> <li>A full inventory of all patient beds is being conducted to ensure all beds are active in the TMS database so PM's performed will upload to their assets. The Manager of Biomed is responsible for both of these items; the deficiency has already been corrected.</li> </ol>	12/11/2013			

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	<p>There was no documentation of PM for the patient bed since 2009 in the TMS system. When the hospital conducted the PM, the data was loaded into a hand-hand device and a sticker, as described above, placed on the bed. The information in the hand-held device was then downloaded into the TMS database PM system. In 2009, the hospital had switched firms that were doing the bed PM. The information for that particular bed apparently had not been uploaded to the TMS system since 2009. Given this, the TMS system was supposed to indicate there was no record for this piece of equipment and the employee reading this data was supposed to follow through to correct the computer issue.</p> <p>5. No further documentation was provided by exit.</p>			