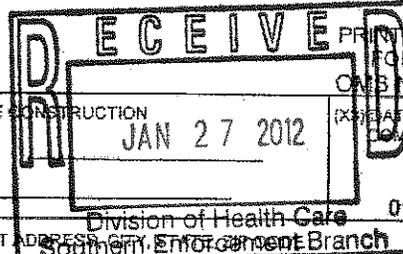


DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES



PRINTED: 01/20/2012
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 185127	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED C 01/05/2012
NAME OF PROVIDER OR SUPPLIER DANVILLE CENTRE FOR HEALTH AND REHABILITATION		STREET ADDRESS 642 NORTH THIRD STREET DANVILLE, KY 40422	

(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	F 000	<i>This Plan of Correction is the center's credible allegation of compliance.</i>	
F 388 SS=D	<p>483.40(c)(3)-(4) PERSONAL VISITS BY PHYSICIAN, ALTERNATE PA/NP</p> <p>Except as provided in paragraphs (c)(4) and (f) of this section, all required physician visits must be made by the physician personally.</p> <p>At the option of the physician, required visits in SNFs, after the initial visit, may alternate between personal visits by the physician and visits by a physician assistant, nurse practitioner or clinical nurse specialist in accordance with paragraph (e) of this section.</p> <p>This REQUIREMENT is not met as evidenced by: Based on medical record review, interview, and review of facility policy, the facility failed to ensure that each resident's physician made the initial visit within the first thirty days after the resident's admission for two of three sampled residents (Residents #1 and #3). Resident #1 had been a resident at the facility for over three months and Resident #3 had been a resident for over two months, but the residents' physician had never visited either resident.</p> <p>The findings include: A review of the facility policy entitled "Physician Services" (dated 04/28/10) revealed in a</p>	F 388	<p>Preparation and/or execution of this plan of correction does not constitute admission or agreement by the provider of the truth of the facts alleged or conclusions set forth in the statement of deficiencies. The plan of correction is prepared and/or executed solely because it is required by the provisions of federal and state law.</p> <p>F388 483.40 (c)(3)-(4) PERSONAL VISITS BY PHYSICIAN, ALTERNATE PA/NP</p> <ol style="list-style-type: none"> The MD made a personal visit to resident #1 and resident #2 on 1/15/2012. A house wide medical records audit was completed to ensure all residents had been seen by a physician according to regulation. Any record identified as not having MD visit documentation was corrected. A letter from the facility's Executive Director (ED) will be sent to all physicians outlining the guidelines regarding visits to the facility within 30 days of a new admission. A copy of the facility's policy will accompany the letter. <p>The Medical Records clerk will monitor physician visits by keeping an ongoing log of when physician visits are made.</p>	1/31/12

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE: William L. Gibson TITLE: Executive Director (X6) DATE: 1/27/12

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 388	<p>Continued From page 1</p> <p>Medicare-certified center, where states allow their use, a midlevel practitioner may make every other required visit after the initial physician visit.</p> <p>A review of Resident #1's medical record on 01/03/12, revealed the facility admitted the resident on 09/27/11. The resident had diagnoses that included Hypertension, Generalized Pain, Volume Depletion, and Encephalopathy. Further review of Resident #1's medical record revealed the resident's physician had not been to visit the resident since the resident's admission to the facility, a timeframe of over three months.</p> <p>A review of Resident #3's medical record on 01/04/12, revealed the facility admitted the resident on 10/28/11. The resident had diagnoses that included Volume Depletion, Non Healing Surgical Wound, Kidney Failure, and Colon Cancer. Further review of the medical record revealed the physician for Resident #3 had not made a visit to the resident since the resident's admission to the facility, a timeframe of over two months.</p> <p>Interview with Physician #1 on 01/05/12, at 3:30 PM, revealed the physician was the primary physician for Residents #1 and #3. Physician #1 stated he was not aware he was required to make the initial visit for each resident after their admission and stated he did not recall making a visit to Resident #1 or Resident #3 since their admission to the facility. According to Physician #1, an Advanced Registered Nurse Practitioner (ARNP) usually saw the residents at the facility and stated that even though he came by the facility approximately every two months to sign</p>	F 388	<p><i>This Plan of Correction is the center's credible allegation of compliance.</i></p> <p><i>Preparation and/or execution of this plan of correction does not constitute admission or agreement by the provider of the truth of the facts alleged or conclusions set forth in the statement of deficiencies. The plan of correction is prepared and/or executed solely because it is required by the provisions of federal and state law.</i></p> <p>This log will be faxed to each MD with current patients listed. MD will be notified of any new admissions on the date of admission. The log will be updated with all new admissions on Monday of each week by the Medical Records clerk.</p> <p>4. The facility will ensure this systemic change by the Director of Nursing Services (DNS) performing an audit of this process monthly. The DNS will validate that all new admissions are documented on the MD log weekly and that all new admissions have an onsite visit by the attending MD within 30 days of admit. The facility will monitor this process through the facility's PI Committee monthly for three months, and as needed thereafter.</p>	1/31/12	

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F 388	Continued From page 2 orders he could not remember the last time he was at the facility. Interview further revealed the physician thought if the resident was sent to the facility from the physician's office or the hospital that the physician was not required to perform the initial visit. Interview with the Director of Nursing on 01/05/12, at 4:23 PM, revealed she was not aware the physician for Residents #1 and #3 had not been to see either resident since their admission to the facility. She further stated that the facility did keep a record of each physician visit; however, the DON was not able to provide a list of those visits.	F 388	<i>This Plan of Correction is the center's credible allegation of compliance.</i> <i>Preparation and/or execution of this plan of correction does not constitute admission or agreement by the provider of the truth of the facts alleged or conclusions set forth in the statement of deficiencies. The plan of correction is prepared and/or executed solely because it is required by the provisions of federal and state law.</i>		