

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

PRINTED: 08/01/2006
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 042551	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 07/19/2006
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NAME OF PROVIDER OR SUPPLIER LEWISVILLE DIALYSIS CENTER	STREET ADDRESS, CITY, STATE, ZIP CODE 122 WEST 11TH STREET LEWISVILLE, AR 71845
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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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V 256	410.2140(a) PE: CONSTRUCT/ MAINTAIN FOR SAFETY The physical structure in which the ESRD services are furnished is constructed, equipped, and maintained to ensure the safety of the patients, staff, and the public. This STANDARD is not met as evidenced by: 1. During a tour of the facility on July 19, 2006, it was determined clean supplies were not maintained to ensure the safety of patients, as evidenced by: A. The clean supply room was visited at 1130 and 11 cases of 9% normal saline, 5 cases of single use dialyzer units, 2 cases of gauze sponges and 3 cases of blood tubing sets were found on the clean supply room floor. The clean supplies were exposed to a increased risk of contamination from pest and dirt thereby increasing the potential for patient cross contamination and patient infection. B. The Charge Nurse verified the above-mentioned clean supplies were stored on the floor at 1330.	V 256	410.2140(a) PE: CONSTRUCT/ MAINTAIN FOR SAFETY (1.)A. To ensure the safety of the patients, staff and the public. All supplies are placed on shelves. The Bio-med tech has put in place shelves sufficient to keep all clean supplies off the supply room floor. Quality Assurance will monitor the supply room for compliance monthly for three months and then quarterly.	08/08/06
V 259	405.2140(a)(3) PE: FREE OF HAZARDS The areas used by patients are maintained in good repair and kept free of hazards such as those created by damaged or defective parts of the building. This STANDARD is not met as evidenced by: 2. Based on observation of the treatment area on July 19, 2006, at 1230, it was determined one (01) of two (01 and 02) employees failed to keep	V 259	405.2140(a)(3) PE: FREE OF HAZARDS (2.) All areas used by patients are maintained in good repair and kept free of hazards. Each dialysis machine is equipped with its own blood pressure module. The Bio-	08/09/06

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE *[Signature]* TITLE *Medical Director* (X6) DATE *8/9/06*

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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V 265	Continued From page 2 B. Observation of employee 02 at 1120 on July 19, 2006, revealed the employee touched the patient's access site to reapply tape at station #3 without gloves and did not wash her hands before touching the patient and dialysis machine at station #4. Employee 02 was observed touching the dialysis machines with her bare elbow to silence an alarm at station #2 at 1315 on July 19, 2006, and did not wash her bare elbow before resuming patient care. C. The Charge Nurse verified the above findings at 1315.	V 265	stressed the correct procedure on washing hands and applying gloves. A demonstration was conducted on the proper procedure of doing a task at one station and moving to another station. Quality Assurance will monitor infection control for proper procedure of washing hands, and regloving between procedures and dialysis stations of staff. This will be monitored monthly for three months then quarterly.		