Statement of Deficiencies	**(X1) Provider/Supplier/CLIA Identification Number**	**(X3) Date Survey Completed**
	034526	02/12/2020
Name of Provider or Supplier	**Street Address, City, State**	
Paragon Physical Therapy And Rehab, Llc	2585 Miracle Mile, Suite 107, Bullhead City, AZ	

For information on the provider's plan to correct this deficiency, please contact the provider or the state survey agency.

(X4) ID Prefix Tag	**Summary Statement of Deficiencies** (Each deficiency should be preceded by full regulatory or LSC identifying information)
E0024	Policies/Procedures-Volunteers and Staffing CFR(s): 485.68(b)(4) 403.748(b)(6), 416.54(b)(5), 418.113(b)(4), 441.184(b)(6), 460.84(b)(7), 482.15(b)(6), 483.73(b)(6), 483.475(b)(6), 484.102(b)(5), 485.68(b)(4), 485.542(b)(6), 485.625(b)(6), 485.727(b)(4), 485.920(b)(5), 491.12(b)(4), 494.62(b)(5). [(b) Policies and procedures. The [facilities] must develop and implement emergency preparedness policies and procedures, based on the emergency plan set forth in paragraph (a) of this section, risk assessment at paragraph (a)(1) of this section, and the communication plan at paragraph (c) of this section. The policies and procedures must be reviewed and updated at least every 2 years [annually for LTC facilities]. At a minimum, the policies and procedures must address the following:] (6) [or (4), (5), or (7) as noted above] The use of volunteers in an emergency or other emergency staffing strategies, including the process and role for integration of State and Federally designated health care professionals to address surge needs during an emergency. *[For RNHCIs at 403.748(b):] Policies and procedures. (6) The use of volunteers in an emergency and other emergency staffing strategies to address surge needs during an emergency. *[For Hospice at 418.113(b):] Policies and procedures. (4) The use of hospice employees in an emergency and other emergency staffing strategies, including the process and role for integration of State and Federally designated health care professionals to address surge needs during an emergency. This STANDARD is not met as evidenced by: Based on record review and staff interview, it was determined the facility failed to develop and implement a policy and procedure for the use of volunteers in an emergency. Failure to address the use of volunteers in an emergency could adversely impact patient care during an emergency. Findings include:

	On 2/12/2020, the facility's policies and procedures to address the use of volunteers in an emergency were requested. No policy was provided related to an established EP plan. The administrator acknowledged during an interview on 2/12/2020, the facility did not have policies and procedures to address the use of volunteers in an emergency.