

Survey Deficiency Summary

4 Facilities Surveyed

Surveys Taken 10/21/20-10/29/20

F641 Accuracy of Assessments

- D Facility failed to ensure assessments were completed accurately to reflect the patient's status for hospice and pressure ulcers.
- D Facility failed to ensure assessments were completed accurately to reflect the patient's status for antibiotic se, weight loss, activities of daily living and enteral feedings for three patients.

F684 Quality of Care

- D Facility failed to assess, identify, document and report a lesion for one patient.

F686 Treatment/Svcs to Prevent/Heal Pressure Ulcers

- E Facility failed to document weekly wound assessments for pressure injuries for three patients.
- D Facility failed to ensure wound care was performed as ordered and practices to prevent the potential spread of infection were followed when one nurse failed to perform proper hand hygiene to prevent the potential spread of infection and maintain infection control practices for two patients during wound care.

F689 Free of Accident Hazards/Supervision/Devices

- D Facility failed to ensure devices utilized to prevent falls were implemented for one patient. The patient was care planned to have a chair alarm in place when up. However, the patient slid out of the chair and there was no alarm in place.

F693 Tube Feeding Management/Restore Eating Skills

- D Facility failed to ensure tube feedings were properly labeled for one patient.

F695 Respiratory/Tracheostomy care and Suctioning

- D Facility failed to follow the physician's orders for oxygen use and failed to ensure oxygen supplies were labeled correctly for two patients with respiratory problems.

F842 Resident Records - Identifiable Information

- D Facility failed to maintain accurate clinical medication administration records for one patient.

K211 Alcohol Based Hand Rub Dispensers

- D Facility failed to maintain the means of egress. One of the egress doors had a sign on it that said "do not use" and there were chairs blocking it on the opposite side of the door.

15-Jan-21

K761 Maintenance, Inspection & Testing - Doors

- D Facility failed to maintain the fire doors. There was no documentation of an annual fire door inspection for 2019.

K920 Electrical Equipment; Power Cords and Extension Cords

- D Facility failed to maintain the electrical equipment. There was an extension cord used outside of the laundry room that ran through the wall, across the ceiling and down the opposite wall and into the laundry detergent dispenser. There was also a multiple lug extension cord in use behind the fish tank.

N835 Building Standards; Approval of New Construction

- The facility failed to submit a new generator for approval prior to installation.