

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 015076	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 06/17/2021
NAME OF PROVIDER OR SUPPLIER Fair Haven		STREET ADDRESS, CITY, STATE, ZIP CODE 1424 Montclair Road Birmingham, AL 35210	
For information on the nursing home's plan to correct this deficiency, please contact the nursing home or the state survey agency.			
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (Each deficiency must be preceded by full regulatory or LSC identifying information)		
<p>F 0656</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Develop and implement a complete care plan that meets all the resident's needs, with timetables and actions that can be measured.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on record review, interviews and a facility policy titled Comprehensive Care Planning-Person Centered the facility failed to ensure a Person Centered Care Plan was developed for the use of anticoagulant (AC) medication for Resident Identifier (RI) # 97.</p> <p>This affected 1 of 2 residents sampled for AC medication</p> <p>Findings Include:</p> <p>Review of a policy titled Comprehensive Care Planning-Person Centered with an approved date of 1/15/2018 documented: .A comprehensive, person-centered care plan that includes measurable objectives and timetables to meet the resident's physical, psychosocial and functional needs is developed and implemented for each resident.</p> <p>RI # 97 was admitted to the facility on [DATE] with diagnoses to include arteriosclerotic heart disease.</p> <p>A review of RI # 97's physician orders documented: .Coumadin Tablet 6 mg (milligrams) (warfin sodium) Give 6 mg by mouth in the evening for ANTICOAGULANTS .Order Date 4/26/21 Start Date 4/26/21 .</p> <p>A review of RI # 97's admission minimum data set (MDS) with an Assessment Reference Date (ARD) of 5/01/2021 Section N documented the use of AC medication.</p> <p>On 6/17/21 at 3:55PM a review of RI # 97's care plans revealed no care plan for AC medication</p> <p>On 6/17/21 at 5:15PM an interview was completed with Employee Identifier (EI) # 8, Licensed Practical Nurse (LPN), (MDS). EI # 8 was asked if RI # 97 currently took AC medication. EI # 8 responded yes Warfarin sodium. EI # 8 was asked if RI # 97 was taking AC medication upon admission. RI # 97 stated yes. EI # 8 was asked if RI # 97 had a current care plan for the use of AC medication. EI # 8 stated no. EI # 8 further stated that RI # 97 should have a care plan for the use of AC medication. EI # 8 was asked who was responsible for ensuring the care plan was completed. EI # 8 stated the clinical leader on each unit. EI # 8 was asked what would be a negative outcome of not having a care plan for the use of AC medication. EI # 8 stated the staff may not know what to monitor.</p> <p>(continued on next page)</p>		

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.

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
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F 0656 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	On 6/17/21 at 5:23PM an interview was conducted with EI # 9, LPN, Clinical Leader. EI # 9 was asked if RI # 97 had a care plan for AC medication. EI # 9 stated no. EI # 9 was asked why RI # 97 did not have a care plan for the use of AC medication. EI # 9 stated it was overlooked. EI # 9 was asked if RI # 97 had been receiving AC medication. EI # 9 stated yes. EI # 9 was asked what would be a potential negative outcome of not having a care plan for the use of AC medication. EI # 9 stated staff would be unaware of life sustaining medication and not know what to watch for.		

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<p>F 0686</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Provide appropriate pressure ulcer care and prevent new ulcers from developing.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on observation, interviews, record review, and a review of Potter and [NAME], Fundamentals of Nursing, the facility failed to ensure: A licensed staff washed her hands and changed gloves after cleaning the wound and before applying the new dressing to the wound for Resident Identifier (RI) #132.</p> <p>This affected RI #132, one of one opportunities of wound care observation.</p> <p>RI #132 was admitted to the facility on [DATE] with a Diagnosis of Unspecified Dementia with Behavioral Disturbance.</p> <p>RI #132 Physicians Orders dated 5/4/21 revealed: . Clean and dry, apply skin prep to peri-wound per facility protocol. Apply Medihoney calcium alginate sheet to wound bed. Cover with bordered adhesive foam dressing and change QOD and PRN on sacrum wound .</p> <p>Findings Include:</p> <p>A review of Potter and [NAME] Fundamentals of Nursing, ninth edition, chapter 48, page 1225 revealed . Implementation 1. Perform hand hygiene. Open sterile packages and topical solution containers as necessary. 2. Remove bed linen and patient's gown as necessary to expose ulcer and surrounding skin. Keep remaining parts covered and apply clean gloves. 3. Clean ulcer thoroughly with normal saline or cleaning agent. 4. Remove gloves, perform hand hygiene and apply clean or sterile gloves. 5. Apply topical agents as prescribed: .</p> <p>On 6/16/21 at 2:17 PM, Employee Identifier (EI) #4 Licensed Practical Nurse (LPN), was observed performing wound care. EI #4 introduced herself to the RI #132 and then washed her hands with soap and water at the sink. EI #4 donned gloves and put supplies on bedside table. There was no bandage on RI #132. EI #4 stated the appearance of the wound, small area to coccyx, area about 1 cm long x 0.5 cm width, no drainage noted and pale in color. EI #4 cleaned the wound and surrounding area with wound cleanser soaked gauze, then threw away the gauze. EI #4 then soaked another 4x4 gauze with wound cleanser and cleaned the area and then threw away the gauze in the trash. EI #4 then dried the wound with 4x4 gauze and threw it in the trash. EI #4 with the same gloves she cleaned the wound with, opened skin prep and applied skin prep around wound and threw the skin prep in the trash can. EI #4 opened the medihoney and applied medihoney to the wound. EI #4 applied dated and initialed mepilex bandage over the wound.</p> <p>On 6/16/21 at 2:30 PM an interview with EI #4 was conducted. EI #4 was asked, when were you supposed to change gloves during a wound dressing. EI #4 replied, wash your hands before you start to apply gloves, change your gloves if sterile dressing and apply sterile field. EI #4 was asked, when were you supposed to wash your hands during dressing change. EI #4 replied, she hoped she did not have to wash her hands because she had gloves on. EI #4 was asked, when did you wash your hands during the wound dressing. EI #4 replied, she washed her hands after entering the room and before she put her gloves on. EI #4 was asked, what was the policy on washing your hands when changing a wound dressing. EI #4 replied, if your gloves get soiled then you would change them, but since there was no drainage, no blood she proceeded to clean the area and dress the area. EI #4 was asked, what could happen if you do not change your gloves during wound care. EI #4 replied, she could re-introduce bacteria or infection.</p> <p>(continued on next page)</p>		

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<p>F 0686</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>On 6/17/21 at 3:49 PM an interview was conducted with EI #3, Infection Control Nurse. EI #3 was asked, when were you supposed to wash your hands during dressing change. EI #3 replied, before gathering supplies, after gathering the supplies, after positioning the resident, after cleaning the wound, and after the wound care. EI #3 was asked, when should you change your gloves during a dressing change. EI #3 replied, before gathering equipment and after entering the room, after gathering the supplies, after positioning the resident, after cleaning the wound, and after the wound care. EI #3 was asked, what was the policy on hand hygiene during dressing change. EI #3 replied, after positioning resident, after removing soiled dressing, after labeling the new dressing, after you clean and apply the new dressing. EI #3 was asked, what was the risk of not washing your hands during a dressing change. EI #3 replied, cross contamination and possible infection. EI #3 was asked, what was the risk of not changing your gloves during a dressing change. EI #3 replied, cross contamination and possible infection. EI #3 was asked, when were gloves indicated during dressing change. EI #3 replied, all the time during the dressing change.</p> <p>On 6/16/21 at 3:55 PM a follow up interview was conducted with EI #4. EI #4 was asked when did she change her gloves during the dressing change on the RI #132. EI #4 replied, at the beginning, I should have changed them after I cleaned the wound. EI #4 was asked, did you change your gloves before getting the new dressing to place on the wound on RI #132. EI #4 replied, no she did not. EI #4 was asked, what was the harm of not washing your hands during wound care. EI #4 replied, reintroducing contaminants to the wound.</p>		

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<p>F 0814</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Dispose of garbage and refuse properly.</p> <p>Based on observation, interviews and facility policies titled Garbage & Refuse and Insect and Rodent Control the facility failed to ensure the dumpster/area outside the kitchen was free of debris and pests.</p> <p>This had the potential to effect residents in the main Long Term Care building one of three buildings.</p> <p>Findings Include:</p> <p>A review of a policy titled Garbage & Refuse with a revised date of 12/28/2012 documented the following: .To prevent the spread of bacteria .Garbage and refuse containers should be free from cracks or leaks and covered when not in use.Procedure: 1) Garbage should be disposed of in refuse containers which have . lids. 2) When the refuse container is full, plastic liners should be tied securely before transferring the garbage to the dumpster. 3) Refuse containers should be emptied throughout the day to avoid over filling the container 4) Refuse containers should be emptied at the end of the last shift.7) The Dietary Department is responsible for the daily monitoring of these areas .</p> <p>A review of a policy titled Insect and Rodent Control with an effective date of 2/1/2002 documented the following: .To prevent the spread of bacteria that may cause food borne illnesses.e. Garbage should be disposed of according to policy .</p> <p>On 6/16/21 at 10:33AM the surveyor and Employee Identifier (EI) # 5, Registered Dietician (RD) toured outside area to include facility dumpster and courtyard by loading dock near kitchen.</p> <p>Observed the following items in the courtyard by loading dock near kitchen:</p> <p>Two bins of trash with no cover with flies around the open trash,</p> <p>discarded boxes,</p> <p>numerous pieces of paper,</p> <p>banana peels on the ground near the bins of uncovered trash,</p> <p>one open green bin near kitchen door with bagged laundry and trash in the bin to include cans and paper products,</p> <p>flies around the open green bin,</p> <p>four broken chairs near the door of the building,</p> <p>one old broken wheelchair,</p> <p>old mops and brooms near building,</p> <p>two old mattresses near building and</p> <p>(continued on next page)</p>		

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<p>F 0814</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>numerous flies near the discarded items in the courtyard area.</p> <p>On 6/16/21 at 10:48AM surveyor walked back toward kitchen with EI #5. Observed Trash bin/compacter doors open. Observed numerous flies flying near compacter. Observed loose trash in the trash/bin/dumpster/compacter.</p> <p>On 6/16/21 at 3:00PM completed an interview with EI # 6, Environmental Director. EI # 6 was asked what was the process of disposing trash. EI # 6 stated two employees picked the trash up throughout the building and takes it to the dumpster near the kitchen. EI # 6 was asked about the discarded furniture in the courtyard area. EI # 6 stated they were going to be donated but were forgotten about. EI # 6 was asked what was the harm of having trash and discarded furniture next to the building and near the kitchen. EI # 6 stated a potential for bugs. EI # 6 was asked what was the potential harm of flies being around uncovered garbage. EI # 6 stated health concerns. EI # 6 was asked if a bin with bagged dirty laundry and trash should be outside the kitchen door. EI # 6 stated no, it should not be near the door due to a potential for bugs. EI # 6 was asked if the area observed on 6/16/21 was clean and free of debris. EI # 6 stated no. EI # 6 further stated it should be clean and free of debris. EI # 6 was asked why it should be clean and free of debris. EI # 6 stated residents and family could see it and health concerns.</p> <p>An interview was completed with EI # 5 on 6/16/21 at 4:18PM. EI # 5 was asked if the area outside the kitchen was clean and free of debris this morning. EI # 5 stated no not this morning. EI # 5 was asked what was the potential harm of trash and discarded furniture near the building. EI # 5 stated potential for pests coming in the building. EI # 5 was asked what was the potential harm of multiple files near the kitchen door and around the facility dumpster. EI # 5 stated they could come in the building. EI # 5 was asked if there was loose trash in the compacter/dumpster during the morning tour. EI # 5 stated yes. EI # 5 was asked if she observed the flies near the dumpster/compacter. EI # 5 stated yes. EI # 5 was asked if the doors to the dumpster/compacter were closed this morning during the tour. EI # 5 stated no, not when we went back in the kitchen. EI # 5 was asked if there was loose trash in the dumpster/compacter during the tour on 6/16/21. EI # 5 stated yes. EI # 5 was asked what can be done to control flies. EI # 5 stated trash needed to be bagged, covered, and disposed of as quickly as possible. EI # 5 was asked why there was trash in the bin with bagged dirty linen. EI # 5 stated no it should not be in there. EI # 5 was asked what was the negative outcome of trash being in the bin with the bagged dirty linen. EI # 5 stated pests and rodents could come in the kitchen.</p>		