

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 015195	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 12/20/2023
NAME OF PROVIDER OR SUPPLIER Village at Cook Springs Skilled Nursing Facility		STREET ADDRESS, CITY, STATE, ZIP CODE 415 Cook Springs Pell City, AL 35125	

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 0677</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Provide care and assistance to perform activities of daily living for any resident who is unable.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on observation, interviews, resident record review, and a facility policy titled Perineal Care (Incontinent Care), the facility failed to ensure a Certified Nursing Assistant (CNA) #4 provided perineal care for Resident Identifier (RI) #6 to correctly and thoroughly clean RI #6 during incontinent care on 12/19/2023.</p> <p>This had the potential to affect one of three sampled residents with urinary incontinence.</p> <p>Findings include:</p> <p>A facility policy titled Perineal Care (Incontinent Care) with an effective date of 6/20214 documented:</p> <p>PURPOSE: Good perineal care helps prevent infections, irritation, and skin breakdown.</p> <p>STANDARD: Residents who are incontinent of urine or feces should receive perineal care as needed. Residents should receive perineal care during routine baths or showers.</p> <p>PROCESS:</p> <ol style="list-style-type: none"> 1. General . <ol style="list-style-type: none"> b) Remove any fecal matter or urine wiping with tissue from front to back. c) Pre-moistened disposable wipes or washcloth should be used. 2. <ol style="list-style-type: none"> a) Wash pubic area first, washing from front to back; use a different corner or a new wipe with each wipe. b) Turn the resident on to . (their) side and wipe from front to back wiping . to rectum extending over the buttocks, changing wipes or corners as needed. <p>RI #6 was admitted to the facility on [DATE] with diagnoses to include Overactive Bladder and a Personal History of Urinary Tract Infection (UTI).</p> <p>RI #6's quarterly Minimum Data Set (MDS) assessment dated [DATE], documented RI #6 had a Brief Interview for Mental Status (BIMS) score of 15 and was always incontinent of urine and bowel and was</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
FORM CMS-2567 (02/99) Previous Versions Obsolete	Event ID: Facility ID: 015195	If continuation sheet Page 1 of 3

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<p>F 0677</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>dependent for toileting hygiene.</p> <p>On 12/19/2023 at 4:49 PM, RI #6 was observed during incontinent care. The Assistant Director of Nursing (ADON), CNA #4, CNA #5, and CNA #6 were all present. CNA #4, was observed cleaning RI #6's perineal area with wipes and CNA #4 wiped up toward the front of the perineum. The Surveyor asked that RI #6's brief be reopened and RI #6 be re-wiped. RI #6 was rolled to the right side, RI #6's perineum was wiped multiple times and there was bowel movement/stool observed on the wipes.</p> <p>12/19/2023 at 5:01 PM, during an interview with the ADON, regarding the incontinent care provided to RI #6, she stated, it was not as good as it should have been.</p> <p>12/19/2023 at 5:40 PM, during an interview with CNA #5 regarding the incontinent care provided to RI #6, he stated, the perineal care was not complete. CNA #5 said, RI #6 was cleaned upward instead of downward and RI #6 should have been wiped until clean.</p> <p>12/19/2023 at 6:03 PM, during an interview with CNA #4 regarding the incontinent care provided to RI #6, he stated, he should have cleaned better and wiped downwards toward the back and not upwards toward the front; it was an error.</p>		

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<p>F 0880</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Provide and implement an infection prevention and control program.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on observations, interviews, resident record review, and review of the training book How to Be a Nurse Assistant a Quality Approach to Long Term Care the facility failed to ensure Certified Nursing Assistant (CNA) #3, did not create the potential for cross-contamination during incontinent care for Resident Identifier (RI) #8 on 12/19/2023 when she was observed not washing or sanitizing her hands after doffing dirty gloves before touching the clean gloves and not washing hands after perineal care was completed.</p> <p>This had the potential to affect one of three residents who were observed for incontinent care.</p> <p>Findings include:</p> <p>The training book American Health Care Association's HOW TO BE A NURSE ASSISTANT A QUALITY APPROACH TO LONG TERM CARE, eighth edition by [NAME], RN, used by the facility for training purposes, documented on page 68: . Hand Hygiene . Before and after contact with a resident or their environment . Before putting on gloves . After removing gloves .</p> <p>RI #8 was admitted to the facility on [DATE].</p> <p>An observation of CNA #3 performing perineal care on RI #8 was made on 12/19/2023 at 11:58 PM. CNA #3 was observed entering RI #8's room and she washed her hands, then donned gloves. CNA #3 pulled back the sheet and blanket off RI #8, opened the plastic bag and set the bag on the end of the bed, removed the brief and put the brief in the plastic bag at the end of the bed. CNA #3 with the same gloves on and without washing her hands cleaned the perineal area with several wipes, threw them in the plastic bag and removed her gloves. CNA #3 then got a new pair of gloves out of another staff members pocket and without washing or sanitizing her hands she donned the gloves. CNA #3 then put the clean brief on the resident. CNA #3 doffed the gloves and then again without washing or sanitizing her hands donned another pair of gloves.</p> <p>On 12/19/2023 at 12:24 PM during an interview with CNA #3, she stated, according to facility policy, she should have washed her hands before putting on gloves and after taking them off. CNA #3 stated that she did not wash or sanitize her hands after removing gloves because she was nervous. CNA #3 stated, that not washing or sanitizing hands during perineal care could be a risk of infection. CNA #3 stated, there was a risk of germs if handwashing was not performed after perineal care was completed.</p> <p>On 12/20/2023 at 1:46 PM the Infection Preventionist (IP)/Assistant Director of Nursing (ADON), said, staff should wash their hands during perineal care before, after putting on gloves, in between clean and dirty, and before they start perineal care. The IP stated that the risk of not washing or sanitizing hands before putting on gloves or after taking off gloves was spreading germs. The IP stated, staff members should wash or sanitize hands when switching dirty to clean, due to the risk for infection. IP stated, when perineal care was done, then staff were to remove gloves and wash hands. The IP stated, there was a risk of spreading germs if removing gloves and washing hands were not completed after perineal care.</p>		