

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 015202	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 05/27/2021
NAME OF PROVIDER OR SUPPLIER McGuffey Health & Rehabilitation Center		STREET ADDRESS, CITY, STATE, ZIP CODE 2301 Rainbow Drive Gadsden, AL 35999	

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 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 review of [NAME] and [NAME], Fundamentals of Nursing, the facility failed to ensure: A licensed staff washed her hands and changed gloves after removing the soiled dressing from the wound before cleaning the wound for Resident Identifier (RI) #119.</p> <p>This affected RI #119, one of three opportunities of wound care observation.</p> <p>Findings Include:</p> <p>A review of [NAME] 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>RI #119 was admitted on [DATE] and readmitted on [DATE].</p> <p>On 5/26/21 at 10:47 AM, Employee Identifier (EI) #1, Licensed Practical Nurse (LPN), Treatment Nurse was observed performing wound care. EI #1, gathered needed supplies. EI #3 assisted with wound care. EI #3 washed her hands with soap and water donned gloves, cleaned area on bedside table for supplies. EI #1 washed her hands with soap and water and donned gloves, gathered supplies, opened kerlix and 4 x 4s placed on the clean table. EI #1 sprayed wound cleanser on 4x4s, applied Medihoney to 4x4, EI #3 assisted in holding extremity up for EI #1. EI #1 used scissors to cut off the old dressing, that was dated 5/25/21. EI #1 removed the old dressing and threw it in the trash. EI #1 described the wound, she stated, yellow slough and the surrounding skin was dried with yellow skin and redness. EI #1 with the same gloves she removed the old dressing EI #1 cleaned the wound with wound cleanser-soaked gauze and then dried the wound with gauze. EI #1 applied the treatment and wrapped with kerlix. EI #1 then removed her gloves and washed her hands with soap and water. EI #1 dated the tape and applied it to the kerlix.</p> <p>On 5/26/21 at 11:35 AM, an interview with EI #1 was conducted. EI #1 was asked, when should gloves be changed during wound care. EI #1 replied, when you go in the room wash hands, put gloves on, take the dressing off, take off gloves, wash hands and/or use hand sanitize, then apply gloves, clean the wound, take off gloves, then wash hands, put on gloves, apply the dressing and cover with gauze, take off gloves then wash hands or sanitize, then put the tape on, wash hands again leave room. EI #1 was asked, when should hands be washed during dressing change. EI #1 replied, the same as the last question, when you go in the room wash hands, put gloves on, take the dressing off, take off gloves,</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
---	-------	-----------

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 015202	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 05/27/2021
NAME OF PROVIDER OR SUPPLIER McGuffey Health & Rehabilitation Center		STREET ADDRESS, CITY, STATE, ZIP CODE 2301 Rainbow Drive Gadsden, AL 35999	

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 0686</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>wash hands and/or use hand sanitize, then apply gloves, clean wound, take off gloves, then wash hands, put on gloves, apply the dressing and cover, take off gloves then wash hands or sanitize, then put the tape on wash hands again leave room. EI #1 was asked, what was the policy for washing hands during wound care. EI #1 replied, she would have to look it up, wash hands before entering the room, before any care, put on gloves, remove dressing, remove gloves wash hands don gloves apply dressing, remove gloves wash hands. EI #1 was asked, what was the harm of not changing gloves and washing hands during wound care. EI #1 replied, infection.</p> <p>On 5/27/21 at 11:59 AM, an interview was conducted with EI #2, Registered Nurse (RN), Infection Preventionist. EI #2 was asked, when was hand hygiene indicated. EI #2 replied, literally before and after everything you do, before shift, before and after bathroom, before and after resident care and in between if indicated during that care period, before and after any resident contact, coming back from break EI #2 was asked, when should you change gloves when changing a dressing on a wound. EI #2 replied, before care, when changing soiled dressing remove gloves wash hands don new gloves and then after treatment was complete. EI #2 was asked, what was the risk of not washing hands after taking off the soiled dressing. EI #2 replied, cross contamination, we do not want dirty on the clean. EI #2 was asked, when should Staff remove the old dressing and clean the wound with the same gloves. EI #2 replied, never. EI #2 was asked, when were gloves indicated. EI #2 replied, anytime handling bodily fluids, blood, mucus membranes, doing personal care, contact or droplet isolation precautions, and during any treatments or wound care.</p>

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 015202	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 05/27/2021
NAME OF PROVIDER OR SUPPLIER McGuffey Health & Rehabilitation Center		STREET ADDRESS, CITY, STATE, ZIP CODE 2301 Rainbow Drive Gadsden, AL 35999	

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 0690</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Provide appropriate care for residents who are continent or incontinent of bowel/bladder, appropriate catheter care, and appropriate care to prevent urinary tract infections.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on observation, interviews, record review, and review of facility policy titled Perineal Care the facility failed to ensure:</p> <ol style="list-style-type: none"> 1) Certified Nursing Assistant (CNA) used soap while cleaning perineal area for Resident Identifier (RI) #97 during incontinent care 2) CNA changed gloves after removing soiled brief and cleaning resident's perineal area and before applying clean brief. <p>This affected one of one resident observed during incontinent care.</p> <p>Findings Include:</p> <p>A review of a facility policy titled Perineal Care with an effective date of 12/19/07 revealed . Purpose . The purposes of this procedure are to provide cleanliness and comfort to the resident, to prevent infections . Infection Control Protocol and Safety 1) Wash your hands thoroughly with soap and water at the following intervals as indicated: a) Before the procedure . c) Anytime they become soiled with . body fluids . e) Whenever in doubt . 3) Maintain clean technique . Steps in the Procedure . 2) Wash and dry your hands thoroughly . 6) Raise the gown or lower pajamas. 7) Put on gloves. 9) For a . resident: a) Wet washcloth and apply soap or skin cleansing agent b) Wash perineal area, wiping front to back . 12) Remove gloves and discard . Wash and dry . hands . 13) Reposition the bed covers. Make resident comfortable.</p> <p>RI #97 was admitted to the facility on [DATE] and re-admitted last on 11/04/2020 and had diagnosis that included Unspecified urinary incontinence.</p> <p>Laboratory results for RI #97 revealed Laboratory Results . Collected . 1/28/2021 . Type . Urine . Culture Urine (Final Result) . Urine Culture . > (greater than) 100,000 CFU/mL(Colony-forming units per milliliter) Escherichia coli (AA) Panic.</p> <p>A Physician's Order for RI #97 dated 1/30/2021 revealed Amikacin Sulfate 500MG/2ML (500 milligrams/two milliliter) Solution . injection intramuscular twice per day . For: Complicated Urinary Tract Infection .</p> <p>Laboratory results for RI #97 revealed Laboratory Results . Collected . 2/19/2021 . Culture Urine (Finale Result) . Urine Culture . >100,000 CFU/mL Enterococcus faecalis (A) (Abnormal).</p> <p>A Physician's Order for RI #97 dated 2/21/2021 revealed Doxycycline Hyclate 100 MG Capsule . For: Urinary Tract Infection .</p> <p>Laboratory results for RI #97 revealed Laboratory Results . Collected . 4/8/2021 . Culture Urine (Finale Result) . Urine Culture . > (greater than) 100,000 CFU/mL Proteus mirabilis (A) Abnormal .</p> <p>A Physician's Order for RI #97 dated 4/13/2021 revealed (Bactrim DS) Sulfamethoxazole-Trimethoprim 800MG-160MG Tablet . For: Urinary Tract Infection.</p> <p>(continued on next page)</p>

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 015202	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 05/27/2021
NAME OF PROVIDER OR SUPPLIER McGuffey Health & Rehabilitation Center		STREET ADDRESS, CITY, STATE, ZIP CODE 2301 Rainbow Drive Gadsden, AL 35999	
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 0690</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>On 5/25/21 at 1:04 PM an interview was conducted with RI #97's sponsor. RI #97's sponsor reported the resident had several Urinary Tract Infections (UTI) recently and the most recent was within the past four months.</p> <p>On 5/25/21 at 4:52 PM an observation was made of Employee Identifier (EI) #5, CNA, performing incontinent care for RI #97. EI #5 was assisted by EI #6, CNA. EI #5 gathered supplies and donned gloves. EI #5 performed task while EI #6 assisted with positioning RI #97. EI #5 unfastened and removed the soiled brief. EI #5 did not change gloves or perform hand hygiene. EI #6 wet a cloth washcloth at the sink and passed to EI #5. No soap was added to the washcloth. EI #5 used the washcloth to clean RI #97's perineal area. EI #5 did not change gloves or perform hand hygiene. EI #5 applied a clean brief to RI #97. RI #97 was repositioned, and brief secured. EI #5 positioned the resident and removed gloves and washed her hands.</p> <p>On 5/26/21 at 10:30 AM an interview was conducted with EI #7, Registered Nurse (RN). EI #7 was asked, when did RI #97 have a UTI in 2021. EI #7 checked RI #97's medications and replied, on 1/30/21 RI #97 started antibiotics for UTI, on 2/21/21 the antibiotic was changed to Doxycycline, on 2/22/21 it was changed to Ciprofloxacin and on 4/13/21 RI #97 started Bactrim for UTI. EI #7 was asked, in general, what were possible causes for recurrent UTIs. EI #7 replied, incontinence, decreased fluid intake, poor hygiene, and inappropriate peri-care technique.</p> <p>On 5/26/21 at 3:43 PM an interview was conducted with EI #6, CNA. EI #6 was asked, during the surveyor's observation of incontinent care on 5/25/21, when did EI #5 change her gloves. EI #6 replied, she knew EI #5 put gloves on at the beginning and took them off at the end, but she did not remember if she changed gloves in between. EI #6 was asked, what did EI #5 use to clean RI #97's perineal area. EI #6 replied, a washcloth and water. EI #6 was asked, during incontinent care, when should gloves be changed. EI #6 replied, after the dirty brief was removed and before the clean brief was placed. EI #6 was asked, during incontinent care, what should be used to clean resident's perineal area. EI #6 replied, soap and water and dry; the soap and water then dry was repeated for each area.</p> <p>On 5/26/21 at 3:49 PM an interview was conducted with EI #5, CNA. EI #5 was asked, during surveyor's observation of incontinent care of RI #97, how did she clean RI #97's perineal area. EI #5 replied, with a wet washcloth that did not have soap on it. EI #5 was asked, when did she change her gloves. EI #5 replied, she was supposed to change her gloves after she finished cleaning him/her up and before she applied the clean brief. EI #5 was asked, did she change her gloves at that time. EI #5 replied, no, she knew she should have, but did not.</p> <p>On 5/26/21 at 4:23 PM a follow-up interview was conducted with EI #7. EI #7 was asked, what should be used to clean RI #97's perineal area. EI #7 replied, they used a mild soap with water and a cloth rag. EI #7 was asked, when should staff only use water and a cloth rag to clean while providing incontinent care. EI #7 replied, she thought that was the general practice if only providing incontinent care and soap should be used daily during bathing.</p> <p>On 5/26/21 at 4:56 PM an interview was conducted with EI #4, RN, Director of Nursing. EI #4 was asked, who was responsible for ensuring staff provide incontinent care per policy and standards of practice. EI #4 replied, the CNA was the direct patient care provider and they worked under a charge nurse. EI #4 was asked, when should staff change gloves during incontinent care. EI #4 replied, the staff should don gloves, clean front perineal area, roll resident to side, clean the resident's back side, roll soiled brief under the resident, change gloves, and apply clean brief. EI #4 was asked, what was used to clean a resident's perineal area during incontinent care. EI #4 replied, soap and</p> <p>(continued on next page)</p>		

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 015202	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 05/27/2021
NAME OF PROVIDER OR SUPPLIER McGuffey Health & Rehabilitation Center		STREET ADDRESS, CITY, STATE, ZIP CODE 2301 Rainbow Drive Gadsden, AL 35999	

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 0690</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>water. EI #4 was asked, when should soap and water not be used to clean a resident during incontinent care. EI #4 replied, she could not think of a reason staff would not use soap and water. EI #4 was asked, what would the harm be when staff provide incontinent care without using soap and water or peri-wash. EI #4 replied, the possibility of infection.</p>