

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 445140	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 12/01/2021
NAME OF PROVIDER OR SUPPLIER Signature Healthcare of Primacy		STREET ADDRESS, CITY, STATE, ZIP CODE 6025 Primacy Parkway Memphis, TN 38119	

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 0638</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Assure that each resident's assessment is updated at least once every 3 months.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on review of the Minimum Data Set (MDS) 3.0 Resident Assessment Instrument (RAI) Manual, medical record review, and interview, the facility failed to complete quarterly assessments, using the Centers for Medicare & Medicaid Services-specific RAI process within the regulatory time frames for 5 of 42 sampled residents (Resident #3, #22, #23, #28, and #76) reviewed for completion of the MDS.</p> <p>The findings include:</p> <p>Review of the MDS 3.0 RAI Manual v (version) 1.17.1 October 2019, page 2-33 revealed, .The Quarterly assessment must be completed at least every 92 days following the previous OBRA [Omnibus Budget Reconciliation Act] assessment of any type .The ARD [Assessment Reference Date] (A2300) must be not more than 92 days after the ARD of the most recent OBRA assessment of any type .The MDS completion date (Item Z0500B) must be no later than 14 days after the ARD (ARD + 14 calendar days) .</p> <p>Review of the medical record, revealed Resident #3 was admitted to the facility on [DATE] with diagnoses of Hypertension, Diabetes Mellitus, Acute Respiratory Failure, and Dysphagia.</p> <p>Review of Resident #3's quarterly MDS with an ARD dated 9/4/2021 revealed Item Z0500B was completed 11/29/2021. The quarterly MDS should have been completed by 9/18/2021 but was not completed until 11/29/2021.</p> <p>Review of the medical record, revealed Resident #22 was admitted to the facility on [DATE] with diagnoses of Cerebral Infarction, Hemiplegia, Hemiparesis, Acute Kidney Failure, Depression, and Heart Failure.</p> <p>Review of Resident #22's quarterly MDS with an ARD date of 10/18/2021 revealed Item Z0500B was not completed. The quarterly MDS should have been completed by 11/1/2021 but had never been completed.</p> <p>Review of the medical record, revealed Resident #23 was admitted to the facility on [DATE] with diagnoses of Cerebral Infarction, Schizophrenia, Dysphagia, Dementia.</p> <p>Review of Resident #23's quarterly MDS with an ARD date of 10/26/2021 revealed Item Z0500B was not completed. The quarterly MDS should have been completed by 11/9/2021 but had never been completed.</p> <p>Review of the medical record, revealed Resident #28 was admitted to the facility on [DATE] with diagnoses of Dementia, Depression, Anxiety, Falls, and Pain.</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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<p>F 0638</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Review of Resident #28's quarterly MDS with an ARD date of 9/21/2021 revealed Item Z0500B was not completed. The quarterly MDS should have been completed by 10/5/2021 but had never been completed.</p> <p>Review of the medical record, revealed Resident #76 was admitted to the facility on [DATE] with diagnoses of Displaced Intertrochanteric fracture of Right Femur, Dysphagia, and Falls.</p> <p>Review of Resident #76's quarterly MDS with an ARD date of 9/10/2021 revealed Item Z0500B was not completed. The quarterly MDS should have been completed by 9/24/2021 but had never been completed.</p> <p>During an interview on 12/1/2021 at 8:15 PM, MDS Coordinators #1, #2, and #3 confirmed the quarterly assessments for Residents #3, #22, #23, #28, and #76 were not completed timely.</p>

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<p>F 0640</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Encode each resident's assessment data and transmit these data to the State within 7 days of assessment.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on review of the Minimum Data Set (MDS) 3.0 Resident Assessment Instrument (RAI) Manual, medical record review, and interview, the facility failed to complete discharge assessments, using the Centers for Medicare & Medicaid Services-specific RAI process within the regulatory time frames for 16 of 42 sampled residents (Resident #4, #5, #8, #9, #11, #14, #16, #17, #18, #19, #20, #24, #25, #27, #32, and #73) reviewed for completion of the MDS.</p> <p>The findings include:</p> <p>Review of the MDS 3.0 RAI Manual v (version) 1.17.1 October 2019, page 2-37 revealed .Discharge Assessment .Must be completed when a resident is discharged .Must be completed (item Z0500B) within 14 days after the discharge date .</p> <p>Review of the medical record, revealed Resident #4 was admitted to the facility on [DATE] with diagnoses of Atrial Fibrillation, Depression, Hypertension, and Diabetes Mellitus.</p> <p>Review of Resident #4's discharge MDS with an Assessment Reference Date (ARD) date of 7/24/2021 revealed Item Z0500B was not completed. The discharge MDS should have been completed by 8/7/2021 but had never been completed.</p> <p>Review of the medical record, revealed Resident #5 was admitted to the facility on [DATE] with diagnoses of Pyogenic Arthritis, Anxiety, Depression, and Spinal Stenosis.</p> <p>Review of Resident #5's discharge MDS with an ARD date of 7/23/2021 revealed Item Z0500B was not completed. The discharge MDS should have been completed by 8/6/2021 but had never been completed.</p> <p>Review of the medical record, revealed Resident #8 was admitted to the facility on [DATE] with diagnoses of Infection of Amputation Stump Left Lower Extremity, Diabetes Mellitus, Peripheral Vascular Disease, and Hypertension.</p> <p>Review of Resident #8's discharge MDS with an ARD date 7/24/2021 revealed Item Z0500B was not completed. The discharge MDS should have been completed by 8/7/2021 but had never been completed.</p> <p>Review of the medical record, revealed Resident #9 was admitted to the facility on [DATE] with diagnoses of Open Left, Lower Leg Wound, and Hypertension.</p> <p>Review of Resident #9's discharge MDS with an ARD date of 8/28/2021 revealed Item Z0500B was not completed. The discharge MDS should have been completed by 9/11/2021 but never had been completed.</p> <p>Review of the medical record, revealed Resident #11 was admitted to the facility on [DATE] with diagnoses of Lymphoblastic Lymphoma, Diabetes Mellitus, Depression, and Hypertension.</p> <p>Review of Resident #11's discharge MDS with an ARD date of 8/5/2021 revealed Item Z0500B was not completed. The discharge MDS should have been completed by 8/19/2021 but never had been completed.</p> <p>(continued on next page)</p>		

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<p>F 0640</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Review of the medical record, revealed Resident #14 was admitted to the facility on [DATE] with diagnoses of Displaced Bicondylar Fracture of Left Tibia, and Hypertension.</p> <p>Review of Resident #14's discharge MDS with an ARD date of 7/23/2021 revealed Item Z0500B was not completed. The discharge MDS should have been completed by 8/6/2021 but never had been completed.</p> <p>Review of the medical record, revealed Resident #16 was admitted to the facility on [DATE] with diagnoses of Spinal Stenosis, Stage 3 Sacral Pressure Ulcer, Hypertension, and Diabetes Mellitus.</p> <p>Review of Resident #16's discharge MDS with an ARD date of 7/22/2021 revealed Item Z0500B was not completed. The discharge MDS should have been completed by 8/5/2021 but never had been completed.</p> <p>Review of the medical record, revealed Resident #17 was admitted to the facility on [DATE] with diagnoses of End Stage Renal Disease, Cerebral Infarction, and Hypertension.</p> <p>Review of Resident #17's discharge MDS with an ARD date of 8/5/2021 revealed Item Z0500B was not completed. The discharge MDS should have been completed by 8/19/2021 but never had been completed.</p> <p>Review of the medical record, revealed Resident #18 was admitted to the facility on [DATE] with diagnoses of Cirrhosis of Liver, Diabetes Mellitus, Atherosclerotic Heart Disease, Hypertension, and Heart Failure.</p> <p>Review of Resident #18's discharge MDS with an ARD date of 7/24/2021 revealed Item Z0500B was not completed. The discharge MDS should have been completed by 8/7/2021 but never had been completed.</p> <p>Review of the medical record, revealed Resident #19 was admitted to the facility on [DATE] with diagnoses of Encephalopathy, Hyperglycemia, Hypertension, and Diabetes Mellitus.</p> <p>Review of Resident #19's discharge MDS with an ARD date of 8/8/2021 revealed Item Z0500B was not completed. The discharge MDS should have been completed by 8/22/2021 but never had been completed.</p> <p>Review of the medical record, revealed Resident #20 was admitted to the facility on [DATE] with diagnoses of Muscle Wasting and Atrophy, Cachexia, Acute Kidney Failure, and Paranoid Schizophrenia.</p> <p>Review of Resident #20's discharge MDS with an ARD date of 11/11/2021 revealed Item Z0500B was not completed. The discharge MDS should have been completed by 11/25/2021 but had never been completed.</p> <p>Review of the medical record, revealed Resident #24 was admitted to the facility on [DATE] with diagnoses of Lack of Coordination, Diabetes, Dementia, Heart Disease, Heart Failure, and Muscle Weakness.</p> <p>Review of Resident #24's discharge MDS with an ARD date of 8/7/2021 revealed Item Z0500B was not completed. The discharge MDS should have been completed by 8/21/2021 but had never been completed.</p> <p>Review of the medical record, revealed Resident #25 was admitted to the facility on [DATE] with diagnoses of Acute Cholecystitis, Kidney Failure, Diabetes, Dysphagia, and Depression.</p> <p>(continued on next page)</p>		

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<p>F 0640</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Review of Resident #25's discharge MDS with an ARD date of 7/23/2021 revealed Item Z0500B was not completed. The discharge MDS should have been completed by 8/6/2021 but had never been completed.</p> <p>Review of the medical record, revealed Resident #27 was admitted to the facility on [DATE] with diagnoses of Cerebral Infarction, Osteomyelitis, Hypertension, Muscle Weakness, and Dysphagia.</p> <p>Review of Resident #27's discharge MDS with an ARD date of 7/23/2021 revealed Item Z0500B was not completed. The discharge MDS should have been completed by 8/6/2021 but had never been completed</p> <p>Review of the medical record, revealed Resident #32 was admitted to the facility on [DATE] with diagnoses of Metabolic Encephalopathy, Hypertension, Dementia, and Chronic Atrial Fibrillation.</p> <p>Review of Resident #32's discharge MDS with an ARD date of 9/22/2021 revealed Item Z0500B was not completed. The discharge MDS should have been completed by 10/6/2021 but had never been completed.</p> <p>Review of the medical record, revealed Resident #73 was admitted to the facility on [DATE] with diagnoses of Osteoarthritis, Convulsions, and Hypertension.</p> <p>Review of Resident #73's discharge MDS with an ARD date of 7/22/2021 revealed Item Z0500B was not completed. The discharge MDS should have been completed by 8/5/2021 but had never been completed.</p> <p>During an interview on 12/1/2021 at 8:15 PM, MDS Coordinators #1, #2, and #3 confirmed the discharge assessments for Resident #4, #5, #8, #9, #11, #14, #16, #17, #18, #19, #20, #24, #25, #27, #32, and #73 were not completed timely.</p>

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<p>F 0641</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Ensure each resident receives an accurate assessment.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on medical record review and interview, the facility failed to accurately assess residents for the use of urinary catheters and antipsychotic medications for 2 of 21 sampled residents (Resident #280 and #382) reviewed for accuracy of assessments.</p> <p>The findings include:</p> <p>Review of the medical record, revealed Resident #280 was admitted on [DATE] with diagnoses of Fracture Right Femur, Parkinson's Disease, Acute Renal Failure, Urinary Tract Infection, Acute Cystitis, Hypertension, and Retention of Urine.</p> <p>Review of the admission Minimum Data Set (MDS) dated [DATE] revealed that Resident #280 was not coded for indwelling catheter.</p> <p>Review of the Care Plan dated 1/2/2021, revealed .Resident has a urinary catheter .</p> <p>Observation in the resident's room on 11/29/2021 at 10:10 AM and 4:00 PM, and on 11/30/2021 at 8:23 AM and 4:27 PM, revealed Resident #280 had an indwelling urinary catheter.</p> <p>During an interview on 12/1/2021 at 4:12 PM, MDS Coordinator #1 confirmed the Resident #280 should have been coded for an indwelling catheter.</p> <p>Review of the medical record, revealed Resident #382 was admitted to the facility on [DATE] with diagnoses of Neurogenic Bladder, Hypotension, Chronic kidney Disease, Atrial Fibrillation, Anxiety, Metabolic Encephalopathy, and Depression.</p> <p>Review of the quarterly MDS dated [DATE], revealed Resident #382 was coded as receiving antipsychotic medications on a routine basis.</p> <p>Review of annual MDS dated [DATE], revealed Resident #382 was coded as receiving antipsychotic medications on a routine basis.</p> <p>Review of the Physician Order Reports and Medication Administration Records for 4/1/2021 through 11/30/2021, revealed Resident #382 did not receive antipsychotic medications.</p> <p>During an interview on 12/1/2021 at 6:20 PM, MDS Coordinator #2 confirmed Resident #382 was coded incorrectly for receiving antipsychotic medications on the MDS dated [DATE] and 10/23/2021.</p>		

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<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 policy review, medical record review, observation, and interview, the facility failed to provide care and services to maintain an indwelling urinary catheter for 2 of 2 sampled residents (Resident #52 and #280) reviewed for indwelling urinary catheters.</p> <p>The findings include:</p> <p>Review of the facility's policy titled, Physician Orders, dated 11/6/2019, revealed .Review of new orders in daily clinical meeting .Review Verify Orders page and verify orders, as needed .</p> <p>Review of the facility's policy titled, Catheter Care Procedure, dated 5/23/2018, revealed .Grasp catheter with two fingers to stabilize it .Provide perineal hygiene .Using a clean washcloth, clean catheter. Starting close to the urinary meatus, clean catheter .along its length for about 10 cm [centimeters], moving away from the body .reapply catheter securement device .</p> <p>Review of the medical record, revealed Resident #52 was admitted on [DATE] with a diagnoses of Diabetes, Hypertension, Dysphagia, Urinary Tract Infection, Gastroesophageal Reflux Disease, and Retention of Urine.</p> <p>Review of Physician's Orders dated 10/18/2021, revealed .FOLEY CATHETER 16 FRENCH WITH 10 CC [cubic centimeters] .URINARY RETENTION .</p> <p>Observation in the resident's room on 12/1/2021 at 1:28 PM, revealed Certified Nursing Assistant (CNA) #2 washed her hands, donned her gloves, gathered her supplies, removed Resident #52's brief, and cleaned down each side of the labia. CNA #2 removed her gloves, did not perform hand hygiene, donned new gloves, and rinsed and dried the catheter. CNA #2 removed her gloves, did not perform hand hygiene and donned new gloves. CNA #2 positioned the resident on her right side, removed her gloves, did not perform hand hygiene, donned new gloves, and cleaned from front to back. CNA #2 rinsed and dried the resident, removed her gloves, did not perform hand hygiene, donned new gloves, and positioned the resident back in the bed. The resident did not have a catheter securement device.</p> <p>Review of the medical record, revealed Resident #280 was admitted on [DATE] with a diagnoses of Fracture Right Femur, Parkinson's Disease, Acute Renal Failure, Urinary Tract Infection, Acute Cystitis, and Hypertension, Retention of Urine.</p> <p>Review of Care Plan dated 11/3/2021, revealed that the resident had a urinary catheter.</p> <p>Observation in the resident's room on 11/29/2021 at 10:10 AM and 4:00 PM, on 11/30/2021 at 8:23 AM and 4:27 PM, and on 12/1/2021 at 7:13 AM and 10:14 AM, revealed Resident #280 had an indwelling urinary catheter.</p> <p>Review of the medical record revealed there was no Physician's Order for Resident #280's indwelling catheter.</p> <p>(continued on next page)</p>		

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<p>F 0690</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>During an interview on 12/1/2021 at 8:51 AM, the Director of Nursing and the Assistant Director of Nursing confirmed that there were no orders for the indwelling urinary catheter for Resident #280.</p> <p>Observation in the resident's room on 12/1/2021 at 10:18 AM, revealed Licensed Practical Nurse (LPN) #1 gathered supplies, donned her gloves, removed Resident #280's brief, cleaned the right perineal area with a soapy wash cloth using a back and forth motion, and the cloth was noted to have a moderate amount of a brown substance. LPN #1 dried the resident with a towel in the same back and forth motion, removed her gloves, and washed her hands. LPN #1 then donned new gloves, and cleaned the left perineal area with a soapy wash cloth, using a back and forth motion, and the cloth was noted to have a moderate amount of a brown substance. LPN #1 dried the left perineal area with a towel using the same back and forth motion. LPN #1 then retrieved a package of wipes from a drawer, and wiped the catheter tubing from the port upward towards the resident. LPN #1 did not clean the catheter from the meatus down and contaminated the area with the brown substance. Resident #280 did not have a catheter securement device.</p> <p>During an interview on 12/1/2021 at 1:56 PM, CNA #2 confirmed that she should wash her hands between glove changes and that the indwelling catheter should be secured.</p> <p>During an interview on 12/1/2021 at 1:58 PM, LPN #1 confirmed that she should not have wiped back and forth during catheter care and that she should have cleaned the catheter from the meatus down. LPN #1 confirmed that the brown substance on the washcloth was feces. LPN #1 stated, .should have cleaned .got all the soap off .rinsed the soap off .pat dry .</p> <p>During an interview on 12/1/2021 at 2:23 PM, the Unit Manager confirmed staff should wash hands between glove changes. The Unit Manager confirmed that Resident #280 should have orders for her indwelling urinary catheter and catheters should be secured. The Unit Manager confirmed staff should discard contaminated wash cloths during perineal care, and should clean the catheter tubing starting at the meatus moving towards the bed side drainage bag.</p>		