

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  045218	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED  07/11/2024
NAME OF PROVIDER OR SUPPLIER  Gassville Therapy and Living		STREET ADDRESS, CITY, STATE, ZIP CODE  203 Cotter Road Gassville, AR 72635	

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 0585</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Honor the resident's right to voice grievances without discrimination or reprisal and the facility must establish a grievance policy and make prompt efforts to resolve grievances.</p> <p>38200</p> <p>Based on record review and interview, the facility failed to ensure residents with concerns and complaints regarding call light answering times in the facility were able to have their grievances thoroughly investigated as part of the process of resident rights for 1 (Resident #15) of 01 sampled residents.</p> <p>The findings are:</p> <p>1. Review of the Order Summary Report indicated Resident #15 had diagnoses of muscular dystrophy and benign prostatic hyperplasia.</p> <p>a. The Quarterly Minimum Data Set (MDS) with an Assessment Reference Date (ARD) of 07/01/2024 indicated a score of 15 (indicates cognitively intact) on the Brief Interview for Mental Status (BIMS).</p> <p>b. On 07/08/2024 at 2:08 PM, the Surveyor interviewed Resident #15 and asked, Do staff answer your call light timely? Resident #15 stated, This girl, her boyfriend is the nurse, an LPN, he lets her get away with things. She wants someone else to come take care of the residents, and she even says no, and he allows her to get away with that. The day of the incident he came in and I told him my bed is wet and I'm wet and need changed. He told me he would let one of the girls know. It was time to pass trays, so I had to wait 45 minutes. I hit my call light again and he came, and I told him this was becoming abuse now. He went and got linens and after they passed trays they showed up. They started to do the bed; the girl that is his girlfriend got a little cranky. They asked me what pillow goes under my legs and I said the one that says My Pillow and they said none of them say My Pillow. I talked to another CNA, and she looked and said look it says My Pillow all over it. The girlfriend bailed and left out and let the other girl do the job. They let me stay in (urine) for over 45 minutes. It happened on June 25th. The nurse consultant took notes and said she would let the guy who is running the place know, but he nor the DON came to talk to me. I talked to the guy today and he told me the problem was resolved. I asked how it is resolved when no one came to talk to me to see what happened. I asked her to help me up the other day and she didn't, she went over to where her boyfriend was, and another girl helped me out.</p> <p>c. Review of Resident Council Minutes with a meeting date of 05/28/2024 revealed a new business of call lights not being answered and being ignored with 5 of 6 resident council members in agreement.</p> <p>d. Review of Location Event Report dated 06/25/2024 revealed Resident #15 call light times as:</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 0585</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>4:46 PM through 5:05 PM Response Time 18 minutes</p> <p>6:09 PM through 6:19 PM Response Time 09 minutes</p> <p>6:22 PM through 6:23 PM Response Time 01 minute</p> <p>6:23 PM through 6:28 PM Response Time 15 minutes</p> <p>6:56 PM through 7:07 PM Response Time 11 minutes</p> <p>d. Review of a Grievance Log dated July 2024 revealed Resident #15 filed a grievance on 07/02/2024 regarding the call light with a resolution date noted as 07/03/2024. Nature/description of resolution was noted as performing a call light audit and counseling staff.</p> <p>e. Review of a Grievance Form with a date of 07/02/2024 revealed Resident #15 expressed the grievance and form was completed by a third party. The issue was involving patient care/treatment and documented, Resident #15 stated I put on my call light because I needed to use the urinal. Resident #15 stated the call light was on for 45 minutes. Also stated when [Named CNA] answered the call light she said she can't put up with this and walked off. Also stated that CNA staff placed [Resident #15 ' s] pillow that goes under [Resident ' s] legs was placed under [Resident ' s] arms instead.</p> <p>f. Review of three OLTC (Office of Long Term Care) Witness Statement Forms showed they were filled out by the same CNA and were not dated. OLTC witness form #1 documented, Time: 6:00 PM Job Title CNA. (Named room number) had stated to the nurse [resident] urinated the bed and needed to be changed and I went in to resident room and told him me and the other CNAs working on the hall was in the middle of passing supper trays and assisting other residents with feeding that I will go get a CNA to come back with me to get [resident] cleaned up and bed changed. The resident yelled at me that I had to do it right away and continuously pushed [resident] call light yelling out. I went to get another CNA and we cleaned and changed [resident ' s] bed.</p> <p>i. OLTC witness form #2 documented, Explained to [resident] one CNA was in the middle of assisting another resident and the other CNA was assisting a nurse with a resident, that when one of them was done, we would help get [resident] to bed. [Resident] started yelling and going back to [resident ' s] room that I refused to help [resident] and [resident] was going to call and turn me in and I better watch it. The other two CNAs came back on the hall and assisted the resident to bed.</p> <p>ii. OLTC witness form #3 documented, Time 7:30 PM Job title CNA. After assisting (named room) to bed and gave [resident] urinal the only thing left was to cover resident up and I was feeling sick and felt over-heated and asked the other CNA if she was okay if I stepped out of the room and she said yes, and I said I had gotten too hot and stepped out. The resident said I refused to continue to help and left CNA and that [he/she] was going to talk with someone about me in the morning.</p> <p>g. Review of (Named Facility) Daily Census for 200 hallway dated 07/09/2024 provided by the Nurse Consultant revealed 6 residents with a BIMS of 12 or higher that were interviewable and 15 residents that were non-interviewable.</p> <p>(continued on next page)</p>		

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<p>F 0585</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>h. On 07/10/2024 at 10:08 AM, the Surveyor interviewed the Social Activity Director and asked, Did you conduct the grievance investigation for Resident #15 about the call light not being answered? She stated, Yes. When asked, Which cognitive residents on the 200 hallway were interviewed over Resident #15's complaint about the call light not being answered? She stated, None. When asked, Should residents who are cognitively intact been interviewed about call light response time? She stated, Yes, ma'am. When asked, Why should other cognitively intact residents on the hall be interviewed? She stated, To see if others had issues. When asked, How many staff members were interviewed about Resident #15's complaint about the call light not being answered? She stated, The witness statement was only through [Certified Nurse Aide (CNA) name] the CNA, and she was counseled verbally. There was a nurse involved but no statement was taken from him. When asked, Did you interview the other CNA involved? She stated, No. When asked, Should the other staff members involved be interviewed? She stated, Yes. When asked, Why should they have been interviewed? She stated, To get all sides of what happened. When asked, How many non-cognitively intact residents family members were interviewed about their call lights being answered timely? She stated, None. When asked, Was this a thorough investigation? She stated No.</p> <p>i. On 07/10/24 at 10:10 AM, the Surveyor interviewed the Director of Nursing (DON) and asked, Which cognitive residents on the 200 hallway were interviewed over Resident #15's complaint about the call light not being answered? She stated, I didn't interview any of them, I don't know if the Social Director did. When asked, Should residents who are cognitively intact been interviewed about call light response time? She stated, Yes. When asked, Why should cognitively intact residents be interviewed? She stated, Because they could have the same problem. When asked, How many staff members were interviewed about Resident #15's complaint about the call light not being answered? She stated, The witness statements are from one staff member. When asked, Was a nurse also involved in the situation that led to the grievance to be filed? She stated, Yes. When asked, Was that nurse interviewed? She stated, No. When asked, Was the other CNA involved in the situation interviewed? She stated, No. When asked, Should the other CNA have been interviewed also? She stated, Yes. When asked, Why should the other two staff members be interviewed? She stated, So you don't get just one version of what went on. When asked, How many non-cognitively intact residents family members were interviewed about their call lights being answered timely? She stated, None that I see. When asked, Was this a thorough investigation? She stated, No. When asked, Did you follow up with resident #15? She stated, I think the Social Director spoke to him, I didn't.</p> <p>j. On 07/10/2024 at 3:57 PM, the Surveyor interviewed the Administrator and asked, Which cognitive residents on the 200 hallway were interviewed over Resident #15's complaint about the call light not being answered? He stated, I'm not sure. None are listed. When asked, Should residents who are cognitively intact been interviewed about call light response time? He stated, Yes. When asked, How many staff members were interviewed about Resident #15's complaint about the call light not being answered? He stated, Looks like just one that the Resident #15 identified. When asked, Was a nurse also involved in the situation that led to the grievance to be filed? He stated, I'm not sure. When asked, Was there a nurse interviewed? He stated, Not that I'm aware. When asked, How many non-cognitively intact residents family members were interviewed about their call lights being answered timely? He stated, None that I'm aware of. When asked, Was this a thorough investigation? He stated, This was investigated. When asked, Did you follow up with Resident #15? He stated, I talked to Resident #15. (Resident) had no complaints when I talked to (Resident) on 6/25. Social Director would've followed up. I just talked to (Resident) in the hallway.</p> <p>(continued on next page)</p>		

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<p>F 0585</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>k. Facility provided a policy titled, Grievances/ Complaints, Recording and Investigating with a revision date of April 2017 documented, Policy Statement: All grievances and complaints filed with the facility will be investigated and corrective actions will be taken to resolve the grievance(s). Policy Interpretation and Implementation: 2. Upon receiving a grievance and complaint report, the Grievance Officer will begin an investigation into the allegations. 4. The investigation and report will include, as applicable: g. Accounts of any other individuals involved.</p>		

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<p>F 0656</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</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>49689</p> <p>Based on observation, interview, and record review the facility failed to revise the care plan to have a securement device intervention in place for a catheter for 2 (Resident #9, #25) out of 2 sampled residents and failed to ensure interventions were in place for a contracture for 1 (Resident #42) out of 1 sampled resident.</p> <p>The findings are:</p> <p>1. A review of the Order Summary revealed Resident #9 had diagnoses of hemiplegia and hemiparesis from a stroke, acute kidney disease, and benign prostatic hyperplasia with urinary tract infection symptoms. Further review of indwelling catheter orders revealed no order for a securement device.</p> <p>A review of the Order Summary revealed an active order from 06/07/2024 that states Cleanse open tear to base of right side of penis with wound cleanser or [normal saline] and pat dry. Leave open to air. every shift for wound care.</p> <p>A review of the Quarterly Minimum Data Set (MDS) with an Assessment Reference Date (ARD) of 05/03/2024 revealed that Resident #9 scored a 2 (severe cognitive impairment) on the Brief Interview for Mental Status (BIMS).</p> <p>A review of the Care Plan revealed that indwelling catheter interventions are in place but none for a securement device, it stated Goal: will be free/remain from catheter-related trauma through review date.</p> <p>On 07/08/2024 at 1:40 PM, the surveyor observed Resident #9 up in chair with no securement device in place for catheter.</p> <p>On 07/09/2024 at 9:00 AM, the surveyor observed Resident #9 up in chair with no securement device in place for catheter.</p> <p>On 07/09/2024 at 9:36 AM, during an interview Certified Nursing Assistant (CNA) #3 confirmed no securement device was in place after giving Resident #9 a complete bed bath, then stated without it the catheter could pull and rip.</p> <p>On 07/09/2024 at 9:45 AM, during an interview Registered Nurse (RN) #4 stated the resident had a current perineal wound and was not sure what caused it, and that they have not put on a securement device as it could of caused the skin breakdown. RN #4 then stated there were no orders or documentation concerning the securement device for Resident #9 or it could have caused Resident #9's current skin breakdown.</p> <p>2. A review of the Order Summary revealed Resident #25 had diagnoses of acute kidney failure and congestive heart failure (CHF). Further review of indwelling catheter orders revealed no order for a securement device.</p> <p>(continued on next page)</p>		

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<p>F 0656</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>A review of the Quarterly MDS with an ARD of 06/24/2024 revealed that Resident #25 scored a 12 (moderate cognitive impairment) on the BIMS.</p> <p>A review of the Care Plan revealed indwelling catheter interventions are in place but none for a securement device, it states Goal: will be free/remain from catheter-related trauma through review date.</p> <p>On 07/08/2024 at 12:45 PM, the surveyor observed Resident #25 sitting on the side of the bed, with no securement device in place for catheter. Resident #25 confirmed</p> <p>no securement device in place. Resident #25 stated that it sometimes does pull and hurt, that if a securement device existed, they would like one as it could help out.</p> <p>On 07/09/2024 at 9:15 AM, the surveyor observed Resident #25 in bed, no securement device was in place for catheter.</p> <p>On 07/09/2024 at 9:45 AM, RN #4 confirmed no securement device was in place for catheter of Resident #25, then stated it could get pulled out without a securement device. RN #4 stated that there were no orders or documentation on the securement device for Resident #25 including refusals of such care.</p> <p>On 07/10/2024 at 3:50 PM, during an interview the Director of Nursing stated that securement devices should be used if the Resident wants them to keep the catheter from pulling out.</p> <p>A review of the facility policy Catheter Care, Urinary states 2. Ensure that the catheter remains secured with a leg band to reduce friction and movement at the insertion site. (Note: Catheter tubing should be strapped to the Resident's inner thigh.)</p> <p>3. A review of Order Summary reveals that Resident #42 had a diagnosis of hemiplegia and hemiparesis from a stroke affecting the left side.</p> <p>A review of Admission MDS with an ARD of 06/09/2024 revealed that Resident #42 scored a 13 (cognitively intact) on the BIMS. Review of section GG revealed that Resident #42 had limited mobility on one side for lower and upper extremity.</p> <p>A review of the Care Plan for Resident #42 revealed, Goal: Resident #42 will remain free of complications related to immobility, including contractures, thrombus formation, skin-breakdown, fall related injury.</p> <p>On 07/08/2024 at 1:54 PM, the surveyor observed Resident #42 sitting in wheelchair, left hand dropped down in between legs with no interventions in place for contracture. Resident #42 stated it is painful, and that they do range of motion when possible. Resident #42 showed the surveyor the hand was truly contracted and stated that no interventions have been in place since admission in June.</p> <p>On 07/09/2024 at 12:00 PM, the surveyor observed Resident #42 sitting in wheelchair, left hand dropped down in between legs with no intervention in place for contracture. Resident #42 was repeatedly lifting their left arm and moving it to a more comfortable location, before it fell again in between their legs.</p> <p>(continued on next page)</p>		

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<p>F 0656</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>On 07/10/2024 at 10:00 AM, the surveyor observed Resident #42 in bed with no interventions in place for the left-hand contracture.</p> <p>On 07/10/2024 at 3:10 PM, during an interview CNA #6 stated no interventions for Resident #42 's left hand contracture has been in place since admission. CNA #6 stated that they have requested a sling to the nurse and therapy as they have noticed that Resident #42's left arm is constantly dropped into their lap. CNA #6 stated different interventions could be in place to help with Resident #42's contracture including hand rolls, wash clothes, and a sling to prevent dropping. CNA stated that it is important to have interventions in place to prevent the contracture worsening and that they have been concerned about their left arm with how it drops for as long as the Resident had been here.</p> <p>On 07/10/2024 at 3:20 PM, during an interview the MDS Coordinator confirmed the Resident did not have interventions for a contracture. The MDS Coordinator stated it is important to have interventions for a contracture to keep fingernails from digging into the palms and to prevent worsening. The MDS Coordinator stated it is important to revise the care plans so we can provide the best care possible.</p> <p>On 07/10/2024 at 3:50 PM, during an interview the Director of Nursing (DON) stated there have been no interventions in place since admission to facility. The DON stated several interventions could be implemented to prevent worsening of contractures. The DON stated it is important to have interventions to prevent it from worsening or even have the nails dig into the skin causing wounds or infection. The DON stated it is important to revise the care plan so just in case they refuse it we can chart it.</p> <p>A review of the policy Resident Mobility and Range of Motion revealed, 1. Residents will not experience an avoidable reduction in range of motion (ROM). 2- Residents with limited range of motion will receive treatment and services to increase and/or prevent a further decrease in ROM. 3. Residents with limited mobility will receive appropriate services, equipment and assistance to maintain or improve mobility unless reduction in mobility is unavoidable .The care plan will include specific interventions, exercises and therapies to maintain. prevent avoidable decline in and/or improve mobility and range of motion.</p> <p>A review of the policy Care Plans, Comprehensive Person Centered revealed, 13. Assessments of residents are ongoing and care plans are revised as information about the residents and the residents' condition change</p>		

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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>Provide care and assistance to perform activities of daily living for any resident who is unable.</p> <p>49689</p> <p>Based on observation, record review, and interview the facility failed to ensure residents who required assistance with activities of daily living were regularly provided with the necessary assistance to maintain good hygiene and grooming for one (Resident #1) of one sampled Resident.</p> <p>The findings are</p> <p>A review of the Order Summary reveals Resident #1 had diagnoses of dementia, recurrent depressive disorder, and osteoarthritis.</p> <p>A review of the Annual Minimum Data Set (MDS) with an Assessment Reference Date (ARD) of 04/18/2024 revealed that Resident #1 scored an 8 (moderate cognitive impairment) on the Brief Interview for Mental Status (BIMS). According to Section GG Resident #1 is coded as Dependent for Shower/Bathe Self.</p> <p>A review of the Care Plan for Resident #1 revealed Focus: has an ADL self-care performance deficit r/t (related to) functional limitation. Interventions/Tasks: BATHING/SHOWERING: The resident is dependent with showering at least twice weekly and as necessary.</p> <p>On 07/08/2024 at 12:30 PM, Resident #1 stated they have not been shaved for over a week, then stated it is embarrassing and would like to be shaved. The surveyor observed two-inch facial hair spanning across the resident's chin.</p> <p>On 07/09/2024 at 8:15 AM, the surveyor observed Resident #1 had not been shaved.</p> <p>On 07/10/2024 at 9:00 AM, the surveyor observed Resident #1 had not been shaved.</p> <p>On 07/10/2024 at 3:15 PM, during an interview Certified Nursing Assistant (CNA) #6 stated the Resident has stubble on their chin. CNA #6 stated residents are to be shaved on shower days, and their shower day is usually on Monday. CNA #6 stated that facial hair can cause irritation, cause confidence issues, and cause embarrassment.</p> <p>On 07/10/2024 at 3:35 PM, during an interview the MDS Coordinator stated the Resident 's chin was hairy and the facial hair as long. The MDS Coordinator stated residents should be shaved on shower days. Resident #1 rubbed their chin with their right hand and stated that they would like to be shaved and that it's been bothering [the Resident] to not have this done. The MDS Coordinator stated that not shaving facial hair could be seen as a dignity issue. The MDS Coordinator stated bath days were on Monday and Thursday.</p> <p>On 07/10/2024 at 3:50 PM, during an interview the Director of Nursing (DON) stated residents are to be shaved on shower days and anytime in between when it is needed. The DON then stated that this is a dignity issue.</p> <p>On 07/10/2024 at 2:00 PM, the surveyor received bath sheets for the last three months for Resident #1 stopping at 6/27/2024.</p> <p>(continued on next page)</p>		

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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>On 07/11/2024 at 8:30 AM, during an interview the DON stated the July bath sheets may still be in the box, as she has not checked it in over a week. The DON brought one CNA Inspection Report for 07/03/2024 that stated yes for female facial hair being removed. The DON stated this was the only one they could find in the box.</p> <p>A review of the policy Activities of Daily Living (ADLS), Supporting revealed residents who are unable to carry out activities of daily living independently will receive the services necessary to maintain good nutrition, grooming, and personal and oral hygiene. 2. Appropriate care and services will be provided residents who are unable ADLS independently, with the consent of the resident and in accordance with the plan of care, including appropriate support and assistance with: a. Hygiene (bathing, dressing, grooming and oral care);</p>

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<p>F 0689</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Ensure that a nursing home area is free from accident hazards and provides adequate supervision to prevent accidents.</p> <p><b>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 38200</b></p> <p>Based on observations, record review, and interview, the facility left an extra treatment cart unlocked and the whirlpool next to the secure unit was left unlocked with the key inside the doorknob exposing residents to chemical hazards.</p> <p>The finding are:</p> <p>1. On 07/08/2024 at 9:40 PM, the surveyor observed a key left in the doorknob of a shower room next to the secure unit. Upon entry the top of the tub had a bottle of lotion, a can of shaving cream, a bottle of body wash, a pink bar of soap, and a half full container of gel. Next to the tub is a bag of dirty linen tied off with dirty gloves resting on top of it. To the right is a small three tiered metal rack with two hair dryers plugged in, and one curling iron unplugged. Next to the metal rack is a three-tiered black plastic shelf the top shelf contains spray deodorant, roll-on deodorant, body wash and shampoo 16 ounces, lotion, a pump bottle of body wash, a medicine cup containing white cream, and a container of cleaning clothes with the lid left opened. Across from the shelves is a shower stall, that was wet from the last bath with a white residue splatter on the floor, the shower chair was dripping water, in the back left corner a pink bath loofah lies in a puddle with the pump part of a container, the handrail has containers of shampoo, a white container missing the pump bottle part, shaving cream, and a clear container only filled a 1/4 of the way with a purple substance. The handrail along the back wall has a small container of shampoo and a clear bottle nearly empty with a blue substance in it. The containers on both rails were dripping water.</p> <p>On 07/08/2024 a 9:45 AM, on the wooden cabinet above the metal shelf and the plastic shelf states CNAS (Certified Nursing Assistants) It is your responsibility to clean shower and shower room after each use.</p> <p>On 07/08/2024 at 9:47 AM, during an interview Licensed Practical Nurse (LPN)#1 confirmed the shower room should be locked and all the products left out should be put away into locked cabinets. LPN #1 stated the shower should have been cleaned immediately after the shower, to spray it down and clean it. Then stated a resident could get into the room and have access to chemicals they should not have access to, and it, some of which could be poisonous if ingested or allergic to some of the products. LPN #1 stated that that the medicine cup may contain zinc but they were unsure as it was not labeled or dated.</p> <p>On 07/08/2024 at 9:50 AM, during an interview CNA #2 stated they had just recently given a bath in the tub and it should not have been left unlocked because residents have access to things they need to and could ingest chemicals. CNA #2 stated the shower room should be cleaned immediately after by spraying it down and cleaning it.</p> <p>On 07/10/2024 at 3:50 PM, during an interview the Director of Nursing (DON) stated the shower room should not be left unlocked, and it is to prevent residents from getting access to things they should not have access to.</p> <p>(continued on next page)</p>

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NAME OF PROVIDER OR SUPPLIER  Gassville Therapy and Living		STREET ADDRESS, CITY, STATE, ZIP CODE  203 Cotter Road Gassville, AR 72635	

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<p>F 0689</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>A review of the material safety data sheet for [brand] gel revealed, Eye contact: in the case of contact with eyes, rinse immediately with plenty of water for 15 minutes and seek medical attention. Skin Contact: If a person feels unwell or symptoms of skin irritation appear, consult a physician. Ingestion: If ingested, seek medical attention immediately and show the label.</p> <p>A review of the policy of the Hazard Communication Program states that b. Hazards are properly labeled and recognized; b. List of hazardous chemicals in the workplace.</p> <p>2. On 07/08/2024 at 9:15 PM, the Surveyor observed the treatment cart unlocked at the end of the 200 Hallway outside of room [ROOM NUMBER].</p> <p>On 07/08/2024 at 9:21 PM, the Surveyor interviewed LPN #1 and asked, What type of cart is this? She stated, It's the extra treatment cart. When asked, Is it unlocked? She stated, Yes. When asked, Should it be kept locked? She stated, Yes, ma'am it should be. When asked, Why should it be kept locked when unattended? She stated, To prevent the residents from getting into it. When asked, How long has it been unlocked? She stated, I don't know. The surveyor requested LPN #01 to open the treatment cart. Inside the treatment cart the Surveyor observed:</p> <ul style="list-style-type: none"> <li>a. three packages of five count Monoject 29-gauge one half inch insulin needles</li> <li>b. zinc oxide cream in two medicine cups labeled zinc</li> <li>c. gas relief pills mint flavor</li> <li>d. Triamcinolone Acetonide Cream 0.1%</li> <li>e. Arginaid powder packets approximately 08</li> <li>f. bottle of wound cleanser spray</li> <li>g. Ostomy supplies</li> <li>h. COVID-19 Ag Card box with tests</li> <li>i. Dorzolamide Hydrochloride and Timolol Maleate Ophthalmic Solution 60 single use containers X 2 boxes</li> <li>j. Exuderm Hydrocolloid Wound Dressing</li> <li>k. Calcium Alginate Dressings</li> <li>l. Diclofenac Sodium (tube)</li> <li>m. Ketoconazole 2% Shampoo</li> <li>n. Vitamin D-3 2000 IU</li> <li>o. Vitamin E, vitamin B-12 500 mcg</li> </ul> <p>(continued on next page)</p>

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<p>F 0689</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>p. Nystatin 100,000 units</p> <p>q. Hydrogen peroxide topical solution 3% H2O2</p> <p>r. Suppositories for hemorrhoids (box of 12)</p> <p>s. Hemorrhoidal cream</p> <p>t. Voltaren Gel 1% (2 tubes)</p> <p>u. (Named trpocal analgesic)</p> <p>v. Clindamycin</p> <p>w. Estradiol Vaginal Cream 0.01%</p> <p>x. Ketoconazole Cream 2%</p> <p>y. Stoma adhesive</p> <p>z. Acetaminophen 325 mg</p> <p>aa. Chloraseptic sore throat spray</p> <p>bb. Niacin 500 mg</p> <p>cc. Alpha Lipoic Acid 200 mg</p> <p>The facility provided a Material Safety Data Sheet for 9 (Named) gas relief tables with a prepared date of April 18, 2002, that revealed, Section 4 First Aid Measures Ingestion: In case of accidental overdose/ over-ingestion, seek medical attention or contact a poison control center immediately.</p> <p>The facility provided a Material Safety Data Sheet for Clindamycin Palmitate Hydrochloride for Oral Solution with a revision date of July 27, 2010, that documented, 4. First Aid Measures: Eye Contact: Flush with water while holding eyelids open for at least 15 minutes. Seek medical attention immediately. Skin Contact: Remove contaminated clothing. Flush area with large amounts of water. Use soap. Seek medical attention. Ingestion: Never give anything by mouth to an unconscious person. Wash out mouth with water. Do not induce vomiting unless directed by medical personnel. Seek medical attention immediately. Inhalation: Remove to fresh air and keep patient at rest. Seek medical attention immediately.</p> <p>The facility provided a Safety Data Set for Diclofenac sodium with a revision date of July 13, 2011, that revealed, 2. Hazard(s) identification: Hazard Statements: Toxic if swallowed. 3. Composition/ Information on Ingredients: Eye Contact: Rinse immediately with plenty of water, also under the eyelids, for at least 15 minutes. Get medical attention. Skin Contact: Wash off immediately with plenty of water for at least 15 minutes. Get medical attention. Ingestion: Do not induce vomiting. Call a physician or poison control center immediately.</p> <p>(continued on next page)</p>

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<p>F 0689</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>The facility provided an Actavis Safety Data Sheet for Estradiol Cream with an effective date of December 18, 2013, that revealed, 4. First-Aid Measures: Skin Exposure: Basic hygiene should prevent any problems. If the product contaminates the skin, and adverse effect occurs, begin decontamination with running water. Minimum flushing is for 20 minutes. Do not interrupt flushing. Remove exposed or contaminated clothing taking care not to contaminate eyes. Seek medical attention if adverse effect occurs after flushing. Eye Exposure: If this product enters the eyes, open victim's eyes while under gently running water. Use sufficient force to open eyelids. Have the victim roll eyes. Minimum flushing is for 20 minutes. Do not interrupt flushing. Seek medical attention after flushing if adverse effect occurs. Ingestion Exposure: If this product is swallowed, call physician or poison control center for most current information. 16. Other Information: ANSI Labeling (Based on 129.1, Provided to Summarize Occupational Exposure Hazards): Warning! May be harmful if swallowed.</p> <p>The facility provided a Material Safety Data Sheet for (Named topical analgesic cream) with 4% Lidocaine with a revision date of August 14, 2014, that documented, IV. First Aid Measures: Ingestion: In case of overdose or child ingestion, vomiting. Seek immediate medical attention or contact poison control center. VII. Handling and Storage: Keep out of reach of children.</p> <p>The facility provided a US- OSHA Safety Data Sheet for (Named Acetaminophen) Regular Strength Tablets with a revision date of November 12, 2014, that revealed, 2. Hazards Identification: Other Information: When used as directed, side effects associated to acetaminophen are rare. If ingested in large doses, long term chronic use or with alcohol, acetaminophen may cause liver damage, acute renal failure and jaundice. 4. First Aid Measures: Eye contact: In case of eye contact, immediately flush eyes with fresh water for at least 15 minutes while holding the eyelids open. Remove contact lenses if worn. Get medical attention if irritation persists. Ingestion: If symptomatic, seek medical advice. If ingestion of a large amount does occur, call a poison control center immediately.</p> <p>The facility provided a Safety Data Sheet for Hydrogen Peroxide 3% with a revision date of December 16, 2014, that revealed, Section 2: Hazards identification: Hazards statements: Harmful if swallowed; Causes severe skin burns and eye damage; Harmful if inhaled. Precautionary statements: Keep out of reach of children; Read label before use. Avoid release to the environment; Wear protective gloves/ protective clothing; eye protection/ face protection. Store locked up. Section 4: First aid measures: After skin contact: flush with water for 15 minutes. Get medical assistance if irritation develops. Wash affected area with soap and water. Rinse thoroughly. Seek medical attention if irritation, discomfort or vomiting persists. After eye contact: Immediately flush eyes with water for at least 15 minutes. Immediately get medical assistance. Protect unexposed eye. Rinse/ flush exposed eye(s) gently using water for 15-20 minutes.</p> <p>The facility provided a Safety Data Sheet for Niacinamide with a revision date of June 03, 2015, that revealed, Section 2. Hazards Identification: Hazard and precautionary statements: Hazard Statement(s): H303 May be harmful if swallowed. P280 Wear protective gloves/ eye protection/ face protection. P312 Call a poison center or doctor/ physician if you feel unwell. P405 Store locked up. Potential Health Effects: Ingestion: May be harmful if swallowed. Section 4. First Aid Measures: In case of eye contact: Rinse thoroughly with plenty of water for at least 15 minutes and consult a physician. Section 8. Exposure Controls/ Personal Protection: Hand protection: Handle with gloves. Gloves must be inspected prior to use. Use proper glove removal technique (without touching glove's outer surface) to avoid skin contact with this product. Section 11. Toxicological Information: Potential Health Effects: Inhalation: May be harmful if inhaled. Causes respiratory tract irritation. Ingestion: May be harmful if swallowed. Skin: May be harmful if absorbed through skin. Causes skin irritation.</p> <p>(continued on next page)</p>		

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<p>F 0689</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>The facility provided a Safety Data Sheet for Alpha Lipoic Acid with a revision date of October 5, 2015, that revealed, Section 2. Hazards Identification: Hazards statements H302: Harmful if swallowed. Precautionary statements: P301+P312+P330: If swallowed, call a poison control center or doctor/ physician if you feel unwell. Rinse mouth. Section 4. First Aid Measures: Skin contact: Wash off with soap and plenty of water. Consult a physician.</p> <p>The facility provided Safety Data Sheet for Dorzolamide Hydrochloride-Timolol Maleate Ophthalmic Solution with a revision date of May 29, 2015, that revealed, 4. First Aid Measures: Ingestion: If swallowed, seek medical advice immediately and show the container or label. Eye contact: Remove source of exposure. Flush with copious amounts of water for at least 15 minutes. If irritation persists or signs of toxicity occur, seek medical attention. Skin Contact: Remove from source of exposure. Remove and isolate contaminated clothing and shoes. Flush with copious amounts of water for at least 20 minutes. Use soap. If irritation persists or signs of toxicity occur, seek medical attention.</p> <p>The facility provided a Safety Data Sheet for Zinc Oxide Ointment 20% with an Effective Date of May 30, 2015, that revealed, Emergency Overview Health Hazards: May be harmful if swallowed. 4 First-Aid Measures: Eye Exposure: If this product contaminates the eyes, rinse eyes under gently running water. Use sufficient force to open eyelids and then roll eyes while flushing. Minimum flushing is for 20 minutes. The contaminated individual must seek medical attention if any adverse effect continues after rinsing. Ingestion: If this product is swallowed, Call physician or poison control center for most current information. 7. Handling and Use: Precautions for safe handling: All employees who handle this product should be thoroughly trained to handle it safely.</p> <p>The facility provided a Safety Data Sheet for (Named Hemorrhoid medication)</p> <p>Suppositories with a revision date of August 29, 2015, that documented, 4. First Aid Measures: Eye contact: Flush with water while holding eyelids open for at least 15 minutes. Seek medical attention immediately. Ingestion: Never give anything by mouth to an unconscious person. Wash out mouth with water. Do not induce vomiting unless directed by medical personnel. Seek medical attention immediately. Inhalation: Remove to fresh air and keep patient at rest. Seek medical attention immediately. 11. Toxicological Information: Short Term: Active ingredients may be harmful if swallowed.</p> <p>The facility provided a Safety Data Sheet for Dermal Wound Cleanser with a revision date of November 11, 2015, that documented, Section 4: First-Aid Measures: Eyes: Immediately flush eyes with plenty of water for at least 15 minutes.</p> <p>The facility provided a Safety Data Sheet for [named brand of diclofenac cream] Gel 2% with an issue date of August 31, 2016, that revealed, Section 4: First aid measures: General information: In the case of accident or if you feel unwell, seek medical advice immediately. Eye contact: Rinse thoroughly with plenty of water for at least 15 minutes and consult a physician. Ingestion: If swallowed, rinse mouth with water (only if the person is conscious). If ingestion of a large amount does occur, call a poison control center immediately. Do not induce vomiting without advice from poison control center. Section 11: Toxicological information: 11.1. Information on toxicological effects: Acute toxicity: Health injuries are not known or expected under normal use. Harmful if swallowed.</p> <p>(continued on next page)</p>		

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<p>F 0689</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>The facility provided a Safety Data Sheet for Cyanocobalamin, USP Grade (Vitamin B12) with a revision date of June 08, 2019, that revealed, 4. First Aid Measures: Eye Contact: Rinse immediately with plenty of water, also under the eyelids, for at least 15 minutes. Get medical attention. Skin Contact: Wash off immediately with soap and plenty of water while removing all contaminated clothes and shoes. Obtain medical attention. Inhalation: Remove from exposure, lie down. Move to fresh air. If not breathing, give artificial respiration. Obtain medical attention. Ingestion: Clean mouth with water. Get medical attention. 7. Handling and Storage: Handling Storage: Avoid contact with skin and eye. Do not breathe dust.</p> <p>The facility provided a Safety Data Sheet for Ketoconazole with revision date of December 24, 2021, that revealed, 2. Hazard(s) identification: Label Elements: Hazard Statements: Toxic if swallowed. Precautionary Statements Prevention: Do not handle until all safety precautions have been read and understood. Use personal protective equipment as required. Ingestion: If swallowed: Immediately call a poison center or doctor/ physician. 4. First-aid measures: Skin contact: Wash off immediately with plenty of water for at least 15 minutes. Immediate medical attention is required. Inhalation: Remove to fresh air. If not breathing, give artificial respiration. Do not use mouth-to-mouth method if victim ingested or inhaled the substance; give artificial respiration with the aid of a pocket mask equipped with a one-way valve or other proper respiratory medical device. Immediate medical attention is required. Ingestion: Do not induce vomiting. Call a physician or poison control center immediately. 7. Handling and storage: Storage: Keep containers closed in a dry, cool and well-ventilated place. Keep refrigerated.</p> <p>The facility provided a Safety Data Sheet for L+ Arginine with a revision date of December 24, 2021, that revealed, 3. Composition/ Information on Ingredients: Eye Contact: Rinse immediately with plenty of water, also under the eyelids, for at least 15 minutes. Get medical attention. Skin Contact: Wash off immediately with plenty of water for at least 15 minutes. Get medical attention if symptoms occur. Inhalation: Remove to fresh air. Get medical attention if symptoms occur. If not breathing, give artificial respiration. Ingestion: Do not induce vomiting. Get medical attention if symptoms occur. 7. Handling and storage: Handling: Wear personal protective equipment/ face protection. Ensure adequate ventilation. Avoid dust formation. Avoid contact with skin, eyes or clothing. Avoid ingestion and inhalation.</p> <p>The facility provided a Safety Data Sheet for Nystatin with a revision date of December 24, 2021, that revealed, 4. First-aid measures: Eye contact: Rinse immediately with plenty of water, also under the eyelids, for at least 15 minutes. Get medical attention. Skin contact: Wash off immediately with plenty of water for at least 15 minutes. Get medical attention immediately if symptoms occur. Inhalation: Remove to fresh air. Get medical attention immediately if symptoms occur. Ingestion: Clean mouth with water and drink afterwards plenty of water. Get medical attention if symptoms occur. 7. Handling and storage: Handling: Wear personal protective equipment/ face protection. Ensure adequate ventilation. Avoid contact with skin, eyes or clothing. Avoid ingestion and inhalation. Avoid dust formation.</p> <p>(continued on next page)</p>		

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<p>F 0689</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>The facility provided a Safety Data Sheet for Vitamin E (D-a-Tocopherol) with a revision date of December 26, 2021, that revealed, 2. Hazard(s) identification: Hazards not otherwise classified (HNOC): Other hazards: May cause skin, eye, and respiratory tract irritation. May be harmful by ingestion, or skin absorption. 3. Composition/ Information on Ingredients: Eye contact: Rinse immediately with plenty of water, also under the eyelids, for at least 15 minutes. Get medical attention. Skin Contact: Wash off immediately with plenty of water for at least 15 minutes. Get medical attention. Inhalation: Remove to fresh air. Get medical attention immediately if symptoms occur. If not breathing, give artificial respiration. Ingestion: Do not induce vomiting. Get medical attention.</p> <p>The facility provided a Safety Data Sheet for Vitamin D3 with a revision date of March 29, 2024, that revealed, 2. Hazard(s) identification: Fatal if swallowed, in contact with skin or if inhaled. Precautionary Statements: Inhalation: If inhaled: Removed victim to fresh air and keep at rest in a position comfortable for breathing immediately call a poison center or doctor/ physician. Skin: Immediately call a poison center or doctor/ physician. Ingestion: If swallowed: immediately call a poison center or doctor/ physician. Rinse mouth. Storage: Store locked up.</p> <p>The facility provided a Safety Data Sheet for Triamcinolone acetonide with a revision date of March 30, 2024, that revealed, 2. Hazard(s) Identification: Hazard Statements: Harmful if swallowed. Precautionary Statements: Ingestion: If swallowed call a poison center or doctor/ physician if you feel unwell. Storage: Store locked up. 4. First-aid measures: Eye Contact: Rinse immediately with plenty of water, also under the eyelids, for at least 15 minutes. Get medical attention. Skin Contact: Wash off immediately with plenty of water for at least 15 minutes. If skin irritation persists, call a physician. 7. Handling and storage: Storage: Keep refrigerated.</p> <p>The facility provided a Material Safety Data Sheet for Ketoconazole Cream 2% that revealed, 7. Handling and Storage Handling: Avoid contact with eyes, skin or clothing. Use only with appropriate personal protective equipment, safe work practices, and good hygiene practices. 8. Exposure Control/ Personal Protection: Eye/ Skin Protection: Avoid contact with eyes and skin. Wear eye protection and appropriate gloves while handling.</p> <p>The facility provided an in-service titled Attention: All Nurses dated 03/11/24 that revealed, Inservice overview: All med carts are to remain locked when you walk away from it.</p> <p>On 07/10/24 at 10:12 AM, the Surveyor interviewed the DON and asked, Should the treatment carts be kept lock at all times when unattended? She stated, Yes. When asked, Why should it be kept locked when unattended? She stated, So the residents don't get in it and get something out that shouldn't have.</p> <p>A facility policy titled Storage and Medications with a revision date on April 2007 revealed, Policy Statement The facility shall store all drugs and biologicals in a safe, secure, and orderly manner. Policy Interpretation and Implementation 2. The nursing staff shall be responsible for maintaining storage AND preparation areas in a clean, safe, and sanitary manner. 7. Compartments (including, but not limited to, drawers, cabinets, rooms, refrigerators, carts, and boxes.) containing drugs and biologicals shall be locked when not in use, and trays or carts used to transport such items shall not be left unattended if open or otherwise potentially available to others.</p> <p>49689</p>		

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<p>F 0690</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</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>49689</p> <p>Based on observation, interview, and record review the facility failed to have a securement device in place for a catheter for 2 out of 2 sampled residents.</p> <p>A review of the Order Summary reveals that Resident #9 has these diagnoses hemiplegia and hemiparesis from a stroke, acute kidney disease, benign prostatic hyperplasia with urinary tract infection symptoms. Further review of foley catheter orders reveals no order for a securement device.</p> <p>A review of the Order Summary revealed an active order from 06/07/2024 that states Cleanse open tear to base of right side of penis with wound cleanser, or ns and pat dry. Leave open to air. every shift for wound care.</p> <p>A review of the Quarterly Minimum Data Set (MDS) with an Assessment Reference Date (ARD) of 05/03/2024 reveals that Resident #9 scored a 2 (severe cognitive impairment) on the Brief Interview for Mental Status (BIMS).</p> <p>A review of the Care Plan reveals that foley catheter interventions are in place but none for a securement device in place, it states Goal: will be free/remain from catheter-related trauma through review date.</p> <p>On 07/08/2024 at 1:40 PM Observed Resident #9 up in geri-chair with no securement device in place for catheter.</p> <p>On 07/09/2024 at 9:00 AM Observed Resident #9 up in ger-chair with no securement device in place for catheter.</p> <p>On 07/09/2024 at 9:36 AM During an interview Certified Nursing Assistant (CNA) #3 confirmed no securement device in place after giving Resident #9 a complete bed bath. Then stated that without it the catheter could pull and rip.</p> <p>On 07/09/2024 at 9:45 Am During an interview Registered Nurse (RN) #4 stated that the resident has a current peri-wound and was not sure what caused, has not put on a securement device as it could of caused the skin breakdown. RN #4 then stated that there were no orders or documentation on the securement device for Resident #9 or that it could have caused Resident #9's current skin breakdown.</p> <p>A review of the Order Summary reveals that Resident #25 had diagnoses of acute kidney failure and congestive heart failure (CHF). Further review of foley catheter orders reveals no order for a securement device.</p> <p>A review of the Quarterly MDS with an ARD of 06/24/2024 reveals that Resident #25 scored a 12 (moderate cognitive impairment) on the Brief Interview for Mental Status (BIMS).</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 - Some</p>	<p>A review of the Care Plan reveals that foley catheter interventions are in place but none for a securement device in place, it states Goal: will be free/remain from catheter-related trauma through review date.</p> <p>On 07/08/2024 at 12:45 PM Observed Resident #25 sitting on the side of the bed, with no securement device in place for catheter. Resident #25 confirmed</p> <p>no securement device in place. Resident #25 stated that it sometimes does pull and hurt, that if a securement device existed they would like one as it could help out.</p> <p>On 07/09/2024 at 9:15 AM Observed Resident #25 in bed, no securement device in place for catheter.</p> <p>On 07/09/2024 at 9:45 AM RN #4 confirmed no securement device in place for catheter on Resident #25. Then stated it could get pulled out without a device. RN #4 stated that there were no orders or documentation on the securement device for Resident #25 including refusals of such care.</p> <p>On 07/10/2024 at 3:50 PM During an interview with the Director of Nursing stated that securement devices should be used if the resident wants them to keep the catheter from pulling out.</p> <p>A review of the facility policy Catheter Care, Urinary states 2. Ensure that the catheter remains secured with a leg band to reduce friction and movement at the insertion site. (Note: Catheter tubing should be strapped to the resident's inner thigh.)</p>

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  045218	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED  07/11/2024
NAME OF PROVIDER OR SUPPLIER  Gassville Therapy and Living		STREET ADDRESS, CITY, STATE, ZIP CODE  203 Cotter Road Gassville, AR 72635	

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(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (Each deficiency must be preceded by full regulatory or LSC identifying information)
<p>F 0805</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Ensure each resident receives and the facility provides food prepared in a form designed to meet individual needs.</p> <p>49689</p> <p>Based on observations, record review and interview the facility failed to ensure that pureed food was processed to the correct consistency to meet the needs one (Resident #9) of one sampled resident.</p> <p>The findings are:</p> <p>A review of the Order Summary revealed Resident #9 had a diagnosis hemiplegia and hemiparesis from a stroke.</p> <p>A review of the Order Summary revealed Resident #9 had an active order as of 06/24/2024 for consistent carbohydrate, pureed texture diet, honey consistency, for nutrition.</p> <p>A review of the Care Plan for Resident #9 revealed Focus: Resident# 9 has an Activity of Daily Living (ADL) self-care performance deficit r/t right side hemiplegia and hemiparesis; Intervention: Eating .The resident is dependent x1 staff for meal consumption.</p> <p>On 07/09/2024 at 11:34 AM, Dietary [NAME] #5 added 2 scoops of polish sausage to the food processor. The Dietary [NAME] then added 2 ounces of gravy and ran the food processor. Surveyor observed the texture was gritty with small sausage pieces in the puree. Dietary [NAME] stated that it was of a pudding like consistency.</p> <p>On 07/09/2024 at 11:40 AM, Dietary [NAME] #5 added 2 scoops of zucchini and squash to the food processor, which was then ran. Surveyor observed that the vegetables were smooth in consistency but runny and did not hold form. The Dietary [NAME] stated that it is soupy and a little runny but it will be in a bowl.</p> <p>On 07/09/2024 at 11:45 AM, Dietary [NAME] #5 added 2 scoops of red beans and rice to the food processor with 2 two-ounce ladles of gravy, which was then ran. The surveyor observed that the red beans and rice were gritty with pieces of beans still in the mixture. The Dietary [NAME] stated that it is pudding like in consistency.</p> <p>On 07/09/2024 at 12:30 PM, the surveyor observed Resident #9 being assisted by a Certified Nursing Assistant (CNA). Surveyor observed the zucchini and squash did not hold form and was soupy. The red beans and rice had pieces of beans throughout it, and the sausage had pieces throughout it as well.</p> <p>On 07/10/2024 at 3:00 PM, during an interview the Dietary Manager described the puree for lunch yesterday as the vegetable was soupy, the rest of it looks like gritty paste, then stated pureed foods are supposed to be pudding-like in consistency to prevent aspiration.</p> <p>A review of the facility recipe Slice Smoked Sausage Puree stated that The desired thickness should be mashed potato or pudding. There should be no large lumps or particles.</p> <p>(continued on next page)</p>

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NAME OF PROVIDER OR SUPPLIER  Gassville Therapy and Living		STREET ADDRESS, CITY, STATE, ZIP CODE  203 Cotter Road Gassville, AR 72635	

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<p>F 0805</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>A review of the facility recipe Red Beans and Rice Puree states that the The desired thickness should be mashed potato or pudding texture. There should be no lumps or particles.</p> <p>A review of the facility recipe Soft Cooked Vegetable Puree states that the The desired thickness should be mashed potato or pudding.</p>

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  045218	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED  07/11/2024
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<p>F 0812</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Procure food from sources approved or considered satisfactory and store, prepare, distribute and serve food in accordance with professional standards.</p> <p><b>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 49689</b></p> <p>Based on observation, record review, and interview the facility failed to ensure items were dated and labeled in the walk-in refrigerator, expired items were discarded, and cross contamination of food occurred during lunch service.</p> <p>The findings are:</p> <p>On [DATE] at 11:28 AM, the following items were observed in the facility kitchen:</p> <ol style="list-style-type: none"> <li>1. a pint of lime juice, expired [DATE], confirmed by the Dietary Manager.</li> <li>2. half a bag of purple cabbage, expired on [DATE], confirmed by the Dietary Manager.</li> <li>3. full bag of green leaf romaine lettuce full bag with no date, confirmed by the Dietary Manager.</li> </ol> <p>On [DATE] at 12:56 PM, the surveyor observed during lunch service the pureed vegetable scoop, and the pureed bean scoop were placed in the puree sausage steam table bin. The Dietary [NAME] took the original scoop for the sausage around the steam table bin rattling the other scoops, before plating it for the puree tray.</p> <p>On [DATE] at 1:06 PM, the surveyor observed during lunch service, Dietary [NAME] #5 plated the red beans and rice and sausage in a scoop plate, scooped zucchini and squash in a separate bowl. Added the bowl into the scoop plate, where Dietary [NAME] #5 fingers touched the food that is on the plate. The Dietary Manager was standing next to Surveyor and stated they saw it occur and it is cross contamination.</p> <p>On [DATE] at 8:30 AM, during an interview the Dietary [NAME] #5 confirmed scoops should not go in other steam table bins, and fingers should not touch food as it is cross contamination.</p> <p>A review of the facility policy Food Service and Storage revealed 7. Dry foods that are stored in bins will be removed from original packaging, labeled and dated ('use by' date). Such foods will be rotated using a first in - first out system, e. Other opened containers must be dated and sealed or covered during storage.</p>