

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  045277	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED  04/09/2025
NAME OF PROVIDER OR SUPPLIER  The Springs of Pine Bluff		STREET ADDRESS, CITY, STATE, ZIP CODE  6301 South Hazel Street Pine Bluff, AR 71603	

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 0880</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Provide and implement an infection prevention and control program.</p> <p><b>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 46724</b></p> <p>[NAME] Deputy</p> <p>Based on observation, record review, review of the glucometer manual, review of facility policies, and staff interviews, the facility failed to ensure staff performed proper handwashing, adhered to Enhanced Barrier Precautions (EBP), and correctly disinfected the facility glucometer for two (Resident #2 and #7) of seven residents sampled for infection control.</p> <p>The findings include:</p> <p>On 04/08/2025 at 8:55 AM, during 200 hall observation, Certified Nursing Assistant (CNA) #1 knocked on Resident #2 's door, verbalized the resident's name, cleansed her hands with hand sanitizer, donned gloves and a gown, then entered the resident's room, closing the door behind her. Signage on Resident #2's door indicated the resident was on EBP. A caddy with the necessary EBP supplies was located hanging on the outside of Resident #2's door. Upon entering Resident #2's room, this surveyor observed CNA #1, without gloves, applying lotion to Resident #2's legs. CNA #1 did not perform hand hygiene, nor don gloves, for the remainder of care which included placing a clean pad under the resident, repositioning the resident, and removing dirty sheets from the bed. CNA #1 stated that she was old school and usually would don four or five pairs of gloves and take off the dirty gloves as she provided care. No hand sanitizer was within access to CNA #1, while she provided care, but was located in the resident's bathroom. After exiting the room, CNA #1 was observed performing hand hygiene with hand sanitizer, prior to entering another resident's room.</p> <p>A review of Resident #2 Care Plan indicated a diagnosis that included gastrostomy status (indicating a feeding tube).</p> <p>Review of Resident #2's Physician's Orders indicated an order for EBP dated 08/31/2024.</p> <p>On 04/08/2025 at 2:40 PM, a review of facility policy titled Enhanced Barrier Precautions indicated an order for EBP will be obtained for residents with a feeding tube. The policy specified gowns and gloves will be available and alcohol-based hand rub will be present in each resident room. The policy listed high-contact resident care activity included changing linens and providing hygiene.</p> <p>Review of a facility in-service training dated 06/07/2024, revealed Centers for Disease Control (CDC) Enhanced Barrier Precautions, which specified Providers and staff must wear gloves and a gown for high-contact resident care activities, including changing linens and providing hygiene.</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 0880</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>On 04/08/2025 at 9:30 AM, CNA #1 reported she was not sure if she had received training on Enhanced Barrier Precautions (EBP). She stated she knew if a resident was on EBP, because there were signs on the door and the personal protective equipment (PPE) would be outside of the resident's door. CNA #1 confirmed she should have washed her hands and changed gloves between handling clean and dirty linens. CNA #1 also stated she should have obtained a personal bottle of hand sanitizer, prior to beginning care on Resident #2. She reported she did not wear gloves when applying the lotion and when placing new linen, because she was not touching the feeding tube site nor the area around it. She acknowledged being in-serviced on handwashing.</p> <p>Review of Care Plan dated 06/27/2019, indicated Resident #7 had a diagnosis that included type 2 diabetes mellitus without complications.</p> <p>Resident #7's Physician Orders dated 06/19/2023, indicated Accu checks one time a day every Fri [Friday] related to type 2 diabetes mellitus without complications. Resident #7 was on EBP with an order date of 06/04/2024.</p> <p>On 04/08/2025 at 11:24 AM, Licensed Practical Nurse (LPN) #2 stated she needed to check Resident #7's blood sugar.</p> <p>A review of Resident #7 orders dated 06/04/2024, indicated the resident was on EBP and signage on the door indicated EBP.</p> <p>On 04/08/2025 at 11:24 AM, LPN #2 was observed performing a fingerstick blood sugar on Resident #7. LPN #2 did not perform hand hygiene prior to donning gown and gloves and entering Resident #7's room. After performing the fingerstick blood sugar, LPN #2 washed her hands with soap and water, then picked up the used glucometer and took it back to the medication cart and placed it on top of the cart.</p> <p>On 04/08/2025 at 11:35 AM, LPN #2 stated she thought she washed her hands before and after donning and removing gloves. LPN #2 then stated she needed to clean the glucometer. She utilized an alcohol prep pad to cleanse the glucometer then placed the glucometer back on the medication cart, where it was placed prior to cleaning. LPN #2 reported she would leave it there until it was dry. LPN #2 went on to state that the glucometer should be cleaned with alcohol, before and after it is used for a resident. She indicated some staff used Sani-Cloth wipes and that either one could be used, but that she used alcohol. LPN #2 stated she used an alcohol pad and wiped the glucometer well, then allowed it to air dry. She indicated before providing care to a resident on EBP, she would put on a gown, wash her hands, put on gloves then before leaving the room, she would remove the gloves and gown and wash her hands.</p> <p>(continued on next page)</p>		

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<p>F 0880</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>On 04/08/2025 at 4:16 PM, LPN #3 denied knowing what EBP meant. She stated she had not had an in-service on that yet. She reported she knew from the computer; it had to do with wearing gloves, gowns, and masks. She indicated to prevent the transmission of infections to residents, she would glove up after washing her hands, wear a mask or whatever was required. LPN #3 stated she had received training on how to don and remove PPE and the facility did have plenty of PPE supplies. She verbalized there was plenty of hand sanitizer in the facility, but she was not sure all staff used it. She reported she was aware if a resident was on precautions, because there would be signage on the door of the resident's room. LPN #3 reported that the facility did have in-service classes on occasion. LPN #3 indicated a nurse/CNA should not apply lotion to a resident, remove dirty linens, or provide personal care with ungloved hands, and stated we have plenty of gloves. She stated, to clean a glucometer in the facility, she cleaned it with alcohol and let it dry. She reported there were two (2) glucometers on the medication carts, so one can be used while the other was allowed to dry. The nurse realized a glucometer was sitting beside her with alcohol prep pads. She picked up the alcohol prep pad, opened it and wiped the glucometer while stating, This is how I clean the glucometer. She reported she cleaned the glucometer each time, before she used it.</p> <p>On 04/08/2025 at 3:50 PM, the Director of Nurses (DON) was interviewed and indicated nurses and CNAs had been trained on EBP. She stated since 04/01/2024, we have in-serviced, we have put up signs and provided verbal explanations of the different kinds of precautions. She could not remember when the last in-service was but stated it had been recent. She indicated a CNA should look for the signs posted regarding EBP or any precautions, remember the education they were taught, and go to their charge nurse and ask if they are unsure or have questions. The DON stated the facility had plenty of PPE supplies and pocket sized hand sanitizers were available on a cart outside of her office for staff to utilize. She stated a CNA should not apply lotion, provide personal care, nor remove dirty linens, without gloves, especially in an EBP room. She reported the facility used multi-use glucometers and that each medication cart had two (2) glucometers so one could be used while the other one dried completely, after disinfection. The DON reported the glucometers should be cleaned after each use. She stated the facility used the manufacture's guidelines to clean the glucometers, using the blue top (canister) alcohol wipes with a ten (10)-minute dry time or an orange top (canister) with bleach. She also indicated a purple top Sani-cloth wipe could be used with a two (2)-minute contact time. After she removed the manual from her desk drawer and reviewed (the name brand) glucometers manual titled, Cleaning and Disinfecting the glucometer, she verified the instructions did not list alcohol as a validated cleaner for the glucometer. She also verified Sani-cloths were listed as a validated cleaner for the glucometer, but only one cleaner may be utilized at a time for the life of the glucometer.</p> <p>On 04/08/2025 at 1:25 PM, a review of the glucometer manufacturers use manual indicated cleaning the glucometer with a bleach based germicidal cleaning cloth or other type of germicidal cleaning wipe.</p> <p>On 04/08/2025 at 1:30 PM, a review of a facility document titled Obtaining a Fingertick Glucose Level dated as revised October 2011, indicated a disinfected blood glucose meter will be necessary when performing the fingertick glucose level. The document specified Clean and disinfect reusable equipment between uses according to the manufacturer's instructions and current infection control standards of practice.</p> <p>(continued on next page)</p>		

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F 0880  Level of Harm - Minimal harm or potential for actual harm  Residents Affected - Some	On 04/08/2025 at 3:00 PM, a review of a facility policy Handwashing Hand Hygiene indicated an alcohol-based hand rub or soap and water should be used for hand hygiene before and after direct contact with resident, after contact with a resident's skin, before applying non-sterile gloves, and after removing gloves.		