

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 045385	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 03/28/2024
NAME OF PROVIDER OR SUPPLIER The Blossoms at North Little Rock Rehab & Nursing		STREET ADDRESS, CITY, STATE, ZIP CODE 2501 John Ashley Drive North Little Rock, AR 72114	

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 0584</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Honor the resident's right to a safe, clean, comfortable and homelike environment, including but not limited to receiving treatment and supports for daily living safely.</p> <p>37634</p> <p>Based on observation and interview, the facility failed to ensure residents had a clean and homelike environment. The findings are:</p> <p>1. On 03/28/2024 at 09:44 AM, the Surveyor observed a wall on D-Hall with large sections of chipped and missing paint with black rub marks along the wall. The bathroom on D-Hall had missing floor tiles and thick, black matter under the shower seat on the floor, along the baseboards, in the corners, and around the commode. The Secure Unit on D-Hall had a cobweb in the corner behind the entrance door. The wall above the rail behind the entrance door had brown matter. A bag with dry, pink matter and an empty medicine cup was tucked behind the handrail. The fire extinguisher cover had small rust spots along the bottom of the door. In room D29 the heating and air conditioning wall unit had dark matter with loose particles inside the vent and one of the vent's slats was broken. The horizontal blinds covering the window had a broken string, would not go up and down, or close. The bathroom between rooms D27 and D29 had black, crusty matter around the commode and in the corners. The commode was twisted 5-6 inches to the right.</p> <p>1a. On 03/28/2024 at 09:57 AM, the Surveyor asked the Housekeeper (HSKP), Can you describe the walls behind the entrance doors? The HSKP said there is a cobweb in the corner and that could be coffee or spit on the wall. The Surveyor asked, Can you describe what is behind the handrail? The HSKP said trash. The Surveyor asked, Can you describe the bathroom between Rooms D27 and D29? The HSKP said it looked like it could be feces or rust around the toilet and in the corner. The Surveyor asked, How often do you clean the handrails, rooms, and bathrooms? The HSKP said I clean the handrails, rooms, and bathrooms once a day and whenever it is needed.</p> <p>1b. On 03/28/2024 at 10:09 AM, the Administrator confirmed the following on D-Hall; chipped paint on the wall of the hallway, trash behind the handrail, rust spots on the fire extinguisher door, a cobweb in the corner behind the door, and the dirty wall above the handrail; the shower room with missing tiles, and the dirt under the shower seat, and the corners. The broken blinds in Room D29 the dirty air conditioning unit, the bathrooms between Rooms D27 and D29 and the loose commode.</p> <p>1c. On 03/28/2024 at 10:27 PM, the Surveyor asked the Director of Nursing (DON) who was responsible for reporting maintenance concerns. The DON said everyone is. If housekeeping, nursing, or dietary notices anything that needs to be fixed they should report it immediately.</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 0584</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>1d. On 03/28/2024 at 11:05 AM, the Surveyor asked Maintenance, How are you made aware of problems in the facility that need to be fixed? Maintenance said we have a text system and a maintenance request book at the front desk. I wasn't made aware of the toilet on D-Hall until this morning. The Surveyor asked, Can you describe what is wrong with the commode? Maintenance said it look like loose bolts.</p> <p>1e. Review of the Maintenance Request Book showed no requests related to the above issues.</p> <p>2. On 03/25/2024 at 10:57 AM, in room B8 scrapped paint was observed on the walls.</p> <p>a. On 03/25/2024 at 10:58 AM, in room B10 scrapped paint was observed on the walls.</p> <p>b. On 03/25/2024 at 11:16 AM, in room B12 scrapped paint was observed on the walls.</p> <p>c. On 03/25/2024 at 11:39 AM, in room B1 scrapped paint was observed on the walls.</p> <p>d. On 03/28/2024 at 09:15 AM, the Maintenance Supervisor was asked, Can you tell me why the walls are scrapped in rooms B8, B10, B12, and B1? He stated, We're working on them.</p> <p>3. On 03/26/2024 at 07:45 AM a form titled Policies and Procedures: Resident Rights Effective Date 4/2021 Review Date 1/2024 was received from the administrator. It documented, .federal and state laws guarantee certain basic rights to all residents of this facility . include the right to . a safe, clean, homelike environment .</p> <p>4. On 03/25/2024 at 10:57 AM, in room B8 scrapped paint was observed on the walls.</p> <p>a. On 03/25/2024 at 10:58 AM, in room B10 scrapped paint was observed on the walls.</p> <p>b. On 03/25/2024 at 11:16 AM, in room B12 scrapped paint was observed on the walls.</p> <p>c. On 03/25/2024 at 11:39 AM, in room B1 scrapped paint was observed on the walls.</p> <p>d. On 03/28/2024 at 09:15 AM, the Maintenance Supervisor was asked, Can you tell me why the walls are scrapped in rooms B8, B10, B12, and B1? He stated, We're working on them.</p> <p>3. On 03/26/2024 at 07:45 AM, a form titled Policies and Procedures: Resident Rights Effective Date 04/2021 Review Date 01/2024 was received from the administrator. It documented, .federal and state laws guarantee certain basic rights to all residents of this facility .include the right to .a safe, clean, homelike environment .</p> <p>48483</p>		