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| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION                                     | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:<br><br>055308 | (X2) MULTIPLE CONSTRUCTION<br>A. Building<br>B. Wing                                  | (X3) DATE SURVEY COMPLETED<br><br>04/17/2025 |
| NAME OF PROVIDER OR SUPPLIER<br><br>Windsor Elk Grove Care and Rehabilitation Center |  | STREET ADDRESS, CITY, STATE, ZIP CODE<br><br>9461 Batey Avenue<br>Elk Grove, CA 95624 |  |

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<br>(Each deficiency must be preceded by full regulatory or LSC identifying information)   |
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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><b>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY**</b> 51483</p> <p>Based on observation, interview, and record review, the facility failed to ensure three out of five sampled residents (Resident 1, Resident 2, and Resident 3) were assisted with nail care as part of their Activities of Daily Living (ADLs-routine tasks/activities such as bathing, dressing and toileting a person performs daily to care for themselves), when Resident 1, Resident 2, and Resident 3 were found with long untrimmed nails.</p> <p>This failure had the potential for Resident 1, Resident 2, and Resident 3 to sustain injury and to acquire an infection.</p> <p>Findings:</p> <p>A review of Resident 1 's Admission Record, indicated Resident 1 was admitted to the facility in Winter 2025 with multiple diagnoses including need for assistance with personal care, type two diabetes mellitus (DM-a disorder characterized by difficulty in blood sugar control and poor wound healing) and paraplegia (partial or total loss of function in all four limbs and the torso).</p> <p>A review of Resident 1's Minimum Data Set (MDS, an assessment tool), dated 1/15/25, indicated Resident 1 was cognitively intact.</p> <p>During a concurrent observation and interview on 4/17/25 at 9:39 a.m. in Resident 1 's room, Resident 1's toenails were long with visible debris underneath right and left foot. Resident 1 's feet were dry with visible crusted areas on toes and soles of both feet. Resident 1 confirmed his nails were long, sharp, and uncomfortable and stated No one has ever cut my toenails since being here. No one has taken care of my feet.</p> <p>During an interview on 4/17/25 at 10:47 a.m. with Certified Nurse Assistant (CNA) 2 in Resident 1 's room, CNA 2 confirmed Resident 1's toenail on both feet were long and needed trimming. CNA 2 confirmed Resident 1 's feet needed to be washed and stated [long nails] could cause pain and infection if not cut.</p> <p>During an interview on 4/17/25 at 10:55 a.m. with Licensed Nurse (LN) 1 in Resident 1 's room, LN 1 confirmed Resident 1's toenails on both feet were long, needed trimming, and both feet were crusted.</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.

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| LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE | TITLE | (X6) DATE |
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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>A review of Resident 1's care plans, dated 1/24/25, indicated Resident 1 Requires assistance in ADL care. The resident will maintain bathing, grooming, personal hygiene .</p> <p>A review of Resident 2 ' s Admission Record, indicated Resident 2 was admitted to the facility in Spring 2020 with multiple diagnoses including hemiplegia (loss of ability to move one side of the body) and hemiparesis (weakness or paralysis on one side of the body).</p> <p>A review of Resident 2's MDS, dated [DATE], indicated Resident 2 had moderate cognitive impairment (a stage of cognitive decline that affects a person's ability to think, learn, and remember).</p> <p>During a concurrent observation and interview on 4/17/25 at 10:40 a.m. with Resident 2, Resident 2's fingernails on his left hand were observed long and nails digging into wrist and palm. Resident 2 confirmed his nails were long.</p> <p>During an interview on 4/17/25 at 11 a.m. with the Social Service Assistant (SSA) in Resident 2 ' s room, the SSA confirmed Resident 2 ' s fingernails were long and needed trimming.</p> <p>A review of Resident 2's care plans, dated 4/29/21, indicated, Resident 2 Requires assistance with aspects of following ADLS . bathing/shower, dressing/clothing, personal hygiene .</p> <p>A review of Resident 3 ' s Admission Record, indicated Resident 3 was admitted to the facility in Spring 2025 with multiple diagnoses including chronic weakness of legs.</p> <p>A review of Resident 3 ' s Progress notes, dated 3/17/25, indicated Resident 3 was cognitively intact.</p> <p>During a concurrent observation and interview on 4/17/25 at 12:30 p.m. with Resident 3, Resident 3 stated staff do not provide foot care during bathtime. Resident 3 confirmed her toenails were long and uncut. Resident 3 stated she was too embarrassed to show her feet.</p> <p>A review of Resident 3 ' s care plans, dated 2/28/25, indicated Resident 3 Requires assistance with aspects of following ADLS: eating, oral care, perinea, care, bathing/ shower .</p> <p>During an interview on 4/17/25 at 9:39 a.m. with CNA 1, CNA 1 confirmed staff were responsible for all resident ' s foot and nail care.</p> <p>During an interview on 4/17/25 at 2:32 p.m. with the Director of Nursing (DON), DON stated the expectations were for staff to provide nail care as needed and to check nails on the resident's shower days. DON further stated that if nails were not trimmed or became too long, then residents could potentially scratch themselves and were at risk for skin breakdown.</p> <p>A review of the facility's policy and procedure (P&amp;P) titled, Fingernails/Toenails, Care of, revised 2/2018, indicated, The purposes of this procedure are to clean the nail bed, to keep nails trimmed, and to prevent infections . Nail care includes daily cleaning and regular trimming . Trimmed and smooth nails prevent the resident from accidentally scratching and injuring his or her skin.</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>A review of the facility's P&amp;P titled, Activities of Daily Living (ADLs), Supporting, revised 10/2021, indicated, 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.</p> |

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| <p>F 0687</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>                     | <p>Provide appropriate foot care.</p> <p>51483</p> <p>Based on observation, interview, and record review, the facility failed to ensure professional foot care was delivered to one of five sample residents (Resident 1), when Resident 1 did not receive podiatry (foot) services in a timely manner.</p> <p>This failure had the potential for Resident 1 ' s toenails remaining uncut and overgrown.</p> <p>Findings:</p> <p>A review of Resident 1 ' s Admission Record, indicated Resident 1 was admitted to the facility in Winter 2025 with multiple diagnoses including need for assistance with personal care, type two diabetes mellitus (DM-a disorder characterized by difficulty in blood sugar control and poor wound healing) and paraplegia (partial or total loss of function in all four limbs and the torso).</p> <p>A review of Resident 1's Minimum Data Set (MDS, an assessment tool), dated 1/15/25, indicated Resident 1 was cognitively intact.</p> <p>During a concurrent observation and interview on 4/17/25 at 9:39 a.m. in Resident 1 ' s room, Resident 1's toenails were long with visible debris underneath right and left foot. Resident 1 ' s feet were dry with visible crusted areas on toes and soles of both feet. Resident 1 confirmed his nails were long, sharp, and uncomfortable and stated No one has ever cut my toenails since being here. No one has taken care of my feet. Resident 1 also stated he and his sister have requested podiatry treatment.</p> <p>During an interview on 4/17/25 at 10:20 a.m. with Certified Nursing Assistant (CNA) 1 in Resident 1 ' s room, CNA 1 confirmed Resident 1 was diabetic, and a podiatry nurse was required to trim Resident 1 ' s toenails.</p> <p>During a concurrent observation and interview on 4/17/25 at 10:47 a.m. with CNA 2 in Resident 1 ' s room, CNA 2 confirmed Resident 1's toenails on both feet were long and needed trimming. CNA 2 stated [long nails] could cause pain and infection if not cut.</p> <p>During a concurrent observation and interview on 4/17/25 at 10:55 a.m. with Licensed Nurse (LN) 1, LN 1 confirmed Resident 1's toenails on both feet were long, needed trimming, and both feet were crusted. LN 1 confirmed Resident 1 was diabetic, and no podiatry consult was scheduled. LN 1 confirmed not receiving timely foot care could result in infections and discomfort.</p> <p>During a concurrent observation and interview on 4/17/25 at 11 a.m. with the Social Service Assistant (SSA), SSA stated Resident 1 was diabetic and required a podiatry consult. SSA confirmed there was no referral requested to podiatry for Resident 1 and stated Next step would be to refer to podiatrist if I see nails like that. I never noticed his nails before, the CNA never told me.</p> <p>(continued on next page)</p> |   |  |

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| <p>F 0687</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p> | <p>During an interview on 4/17/25 at 3:51 p.m. with the Director of Nursing (DON), DON confirmed CNAs should report to charge nurses if a diabetic residents ' nails were too long and were at risk for scratching themselves. DON stated she expected the charge nurse to notify the social worker who will then set up a podiatry appointment for a diabetic patient.</p> <p>A review of the facility's policy and procedure titled, Foot Care, revised 10/2022, indicated, Residents are assisted in making appointments and with transportation to and from specialists (podiatrist, endocrinologist, etc.) as needed . Residents with foot disorders or medical conditions associated with foot complications are referred to qualified professionals . Residents are provided with foot care and treatment in accordance with professional standards of practice.</p> |