STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	065113	A. Building B. Wing	06/16/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
Medallion Post Acute Rehabilitation	1719 E Bijou St Colorado Springs, CO 80909

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)
F 0925 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Some	Make sure there is a pest control program to prevent/deal with mice, insects, or other pests. **NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on observations, record review and interviews, the facility failed to provide an effective pest control program to ensure the facility was free of pests. Specifically, the facility failed to: -Ensure the facility was kept free from mice, spiders and other insects; and,-Consistently follow recommendations from the pest control company to decrease the potential for mice, spiders and other insects to enter the facility.Findings include: I. Professional reference According to the Centers for Disease Control(CDC) Guidelines for Environmental Infection Control in Health-Care Facilities (revised July 2019), retrieved on 6/19/26 from https://www.cdc.gov/infection-control/media/pdfs/Guideline-Environmental-H.pdf,From a public health and hygiene perspective, pests should be eradicated from all indoor environments. Approaches to institutional pest management should focus on: eliminating food sources, indoor habitats, and other conditions that attract pests; excluding pests from entering the indoor environments; and applying pesticides as needed. Rodents can transmit viruses such as lymphocytic choriomeningitis, bacteria such as campylobacteriosis, leptospirosis, plague, salmonellosis, tularemia, yersiniosis, and fungi such as dermatophytosis. Spiders and mice are among the typical arthropod and vertebrate pest populations found in health-care facilities. Insects can serve as agents for the mechanical transmission of microorganisms or as active participants in the disease transmission process as vectors. Sealing windows helps to minimize insect intrusion. When windows need to be opened for ventilation, ensuring that screens are in good repair and closing doors to the outside can help with pest control. A pest-control specialist with appropriate credentials can provide a regular insect-control program that is tailored to the needs of the facility and uses approved chemicals and/or physical methods.II. Facility policy and procedure The Pest Control Program policy, dated January 2025 and revised 6/9/26, was received from the nursing home administrator (NHA) on 6/17/26 at 11:02 a.m. It read in pertinent part, The policy is to maintain an effective pest control program that eradicates and contains common household pests and rodents. The facility will maintain a written agreement with a qualified outside pest service to provide comprehensive pest control services on a regular and scheduled basis. The facility will utilize a variety of methods in controlling certain seasonal pests. These will involve indoor and outdoor methods that are deemed appropriate by the outside pest service and state and federal regulations.III. Facility observations staff interviewOn 6/10/26 at 8:51 a.m. a tour of the kitchen was conducted. The door to the alleyway in the back of the kitchen was observed to be propped open and no staff members were walking in or out of the doorway.On 6/10/26 at 9:21 a.m. a gap was observed under the emergency exit door at the end of the [NAME] hallway, which exited to the outside of the facility. There was daylight visible through the gap.On 6/10/26 at 2:40 p.m. a spider was observed crawling on the floor in the middle of the hallway at the intersection of the Silverthorn and Aspen unit hallways. Resident #51 was walking with a member of the therapy staff. The therapy staff member crushed the spider with her shoe. Resident #51 told the therapy staff member that she had seen spiders in her room.On 6/10/26 at 3:22 p.m. a large spider was observed by the doorframe of the exit door at the eastern end of the [NAME] hallway.On 6/12/26 at 1:30 p.m. there were two mousetrap boxes observed on the floor at the end of (continued on next page)

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

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	065113	A. Building B. Wing	06/16/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
Medallion Post Acute Rehabilitation	1719 E Bijou St Colorado Springs, CO 80909

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)
F 0925 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Some	the 100 hallway.On 6/16/26 at 11:53, following an initial interview (see interview below), the maintenance director went to Resident #3 and Resident #7's shared room. The maintenance director said that there were no spiders in that room. He said that there were sticky traps in the residents' room because when one resident requested a sticky trap, they were placed in every residents' room.Resident #7 said she did see spiders in their room.Resident #3 said she saw a centipede at night but she had not yet reported it. The maintenance director proceeded to remove the sticky traps that had been placed under each sink in Resident #3's room. He confirmed that the first sticky trap had one spider and mouse droppings on it and the second sticky trap had bugs and mouse droppings on it. The maintenance director said the sticky traps were changed out every Friday. He said he would spray for insects when the NHA asked him to spray. During the interview, a bug was observed walking across the floor. The maintenance director said the bug was a glow bug. IV. Resident interviews and observationsResident #51 was interviewed on 6/10/26 at 10:55 a.m. Resident #51 said she had spiders in her room and saw them every day. Resident #51 said she had previously had an ant issue in her room and the sanitary conditions of the facility left something to be desired. A glue trap was observed under Resident #51's sink. The glue trap had several spiders of varying sizes on it and a spider was observed walking across the resident's wall during the interview.Resident #27 was interviewed on 6/10/26 at 4:56 p.m. Resident #27 said he had seen a mouse in his room and the last time he had seen it was two days (6/8/26) ago, around 3:00 p.m., by the radiator. During the interview, several mouse droppings were observed by the window sill and under the sink. There was a mouse trap underneath the radiator and under the sink. Resident #27 said he did not like having a mouse in his room.Resident #7 was interviewed on 6/11/26 at 9:41 a.m. Resident #7 said she had seen a spider on her bed the other day and said she had seen several large spiders crawling under her bed and on her walls. During the interview, a glue trap was observed under the resident's sink. The glue trap contained several mouse droppings on it.Resident #48 was interviewed on 6/11/26 at 9:50 a.m. Resident #48 said she had mouse droppings in her room. She said she reported it to the facility staff. Resident #48 said she cleaned out her room and removed all food from her room to try to eliminate the mouse problem. Resident #25 was interviewed on 6/11/26 at 10:00 a.m. Resident #25 said she had seen mouse droppings in her room and she had cleaned out all her food from her room. She said she did not have any food in her drawers. Resident #25 said she hoped not to see any more mice because she did not like them.Resident #3 was interviewed on 6/11/26 at 10:18 a.m. Resident #3 said she had seen a bug parade on her floor this morning (6/11/26). She said she had seen several insects crawling along her floor.V. Resident group interviewSix residents (#43, #56, #1, #19, #23 and #27) who frequently attended the monthly resident council meetings and who were identified as alert and oriented by facility and assessment were interviewed on 6/15/26 at 10:01 a.m. Resident #19 and Resident #43 both reported seeing spiders in their rooms and both residents said they had been bitten by spiders in the facility recently.Resident #1 and Resident #19 said the facility had tons of mice. Resident #19 said the residents had been voicing their concerns about mice each month in resident council meetings since January 2026. Resident #19 said he had found several mice in his room and had seen mouse feces on his bed. He said the way the facility was trying to treat the mice problem was not working.Resident #27 said he saw mice running from resident room to resident room and down the facility's hallways.VI. Resident council meeting minutesReview of the facility's resident council meeting minutes, from December 2025 through May 2026 revealed the following:The 12/29/25 resident council meeting minutes documented there was a continued mouse problem and the facility would continue checking the traps and putting new traps down.The 1/15/26 resident council meeting minutes documented would continue to monitor mice in the building and the mouse traps. The minutes did not identify that the concern regarding the mouse problem had been resolved.The 2/19/26 resident council meeting minutes did not identify that the facility's mouse problem had been discussed at the meeting or that the concern regarding the mouse problem had been resolved. The March 2026 (no day specified) resident council meeting minutes documented there were no (continued on next page)

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	065113	A. Building B. Wing	06/16/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
Medallion Post Acute Rehabilitation	1719 E Bijou St Colorado Springs, CO 80909

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)
F 0925 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Some	unresolved issues from the February 2026 resident council meeting. However, the meeting minutes additionally documented that maintenance would continue checking the mouse traps daily.The April 2026 (no day specified) resident council meeting minutes did not identify that the facility's mouse problem had been discussed at the meeting or that the concern regarding the mouse problem had been resolved.The 5/21/26 resident council meeting minutes documented that mouse traps in resident rooms had been observed to have mouse activity and the traps were checked daily.-Review of the resident council meeting minutes, from December 2025 through May 2026 did not identify that the facility was attempting to address the mouse problem in other ways besides placing and checking mouse traps.VII. Additional record reviewReview of pest control service invoices were provided by the facility for 1/13/26, 2/5/26, 3/6/26, 4/15/26, 5/8/26 and 6/1/26.The 4/25/26 pest control service invoice documented that the pest control company identified an area in the facility that had a door gap and a door that was open when it was not in use. The recommendation was for the facility to add/repair the door sweep (the plastic or rubber part that attaches to the bottom of the door). Additionally, the 4/15/26 pest control service invoice documented the pest control company identified a second area in the facility that had a door gap. The recommendation was for the facility to seal the gap.The 5/8/26 pest control service invoice documented the pest control company identified that the door to the dumpster area outside the facility had a door gap and was observed to be open when not in use. The service invoice documented the concern remained an open action issue from the April 2026 service visit. The recommendations were for the facility to add/repair the door sweep and keep the door closed. The service invoice documented that a resolution by the facility was needed.The 6/1/26 pest control service invoice documented the openings around the penetration points (entry points into the facility) remained an open action issue from the April 2026 visit and the status of the resolution was still pending.-However, observations during the survey revealed the door to the alleyway in the back of the kitchen was propped open when it was not in use and there was a gap under the emergency exit door at the end of the [NAME] hallway, which exited to the outside of the facility (see facility observations above).VIII. Staff interviewsCertified nurse aide (CNA) #1 was interviewed on 6/15/26 at 11:40 a.m. CNA #1 said he had seen a spider in the charting room. He said he killed it and disposed of it. CNA #1 said he did not report it. CNA #1 said he had heard discussions about mice being an issue in the facility from residents and other staff members. Housekeeper (HK) #1 was interviewed on 6/16/26 at 11:15 a.m. HK #1 said she had heard residents complain about mice. She said she attended the resident council meetings and had heard the residents' discussion of pests leaving droppings in the residents' rooms.The maintenance director was interviewed on 6/16/26 at 11:45 a.m. The maintenance director said the pest control company came to the facility monthly to address the issues with mice. He said he called the pest control company to come out more frequently when needed. He said he had requested two additional mousetrap boxes for the facility and said the facility had a total of six mousetrap boxes. He said he had requested that housekeeping frequently check the residents' rooms and floors after meals to sweep up and clean crumbs. The maintenance director said he had not seen any notes regarding doors being left open or other recommendations on the pest control invoices. The maintenance director said when he received invoices from the pest control company, he looked at what services were provided and what they cost. He said he must have missed the notes in the service invoices regarding the pest control company's recommendations (see record review above).