

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 105440	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 09/30/2025
NAME OF PROVIDER OR SUPPLIER Aviata at Colonial Lakes		STREET ADDRESS, CITY, STATE, ZIP CODE 15204 W Colonial Dr Winter Garden, FL 34787	

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 0694</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Provide for the safe, appropriate administration of IV fluids for a resident when needed.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on observation, interview, and record review, the facility failed to ensure a Midline Intravenous (IV) dressing care was completed as per professional standards for 1 of 1 resident of a total sample of 4 residents, (#1). Resident #1, an [AGE] year-old female was readmitted to the facility on [DATE]. Her diagnoses included abscess left great toe, cerebral infarction (stroke), type 2 diabetes, heart failure, peripheral vascular disease, elevated white blood cell count and lymphedema. A Midline Catheter is a thin, flexible tube placed into a vein in the arm. The catheter is 8-10 centimeters long and can stay in the arm for up to 29 days. This allows patients to get IV (intravenous) medicines and have blood samples drawn. The catheter is placed by a trained nurse. (retrieved on 10/4/25 at 3:57 PM from https://patient.uwhealth.org/healthfacts). On 9/30/25 at 12:30 PM, resident #1 was observed lying in recliner type chair in her room. The 200 Unit Manager was observed doing wound care to the resident #1's left great toe which was swollen and red. The Unit Manager acknowledged that resident #1 had transparent dressing on her right upper arm midline IV site dated 9/26/25. She acknowledged the IV dressing was dirty, half off and gauze was covering the insertion site. The nurse explained the resident had been getting antibiotics in her IV for foot wound infection and the physician wanted to keep the IV in place should she need more IV antibiotics. The Unit Manager said because there was gauze present covering the IV the dressing should have been changed on 9/28/25. The nurse added that even if there are no orders it is standard of nursing practice to change IV dressing every 7 days when clear dressing present and every 2 days when gauze is used. Current nursing orders for resident #1's midline IV were dated 9/22/25: flush with normal saline every shift, measure right arm circumference and external catheter length on admission and with each dressing change, evaluate right forearm IV site for leakage/bleeding /signs of infection every shift. Resident #1 received IV Zosyn every 6 hours for 7 days starting on 9/18/25. The resident had care plan in effect last updated on 9/22/25 for IV medication related to left great toe abscess with goal that she will not have any complications related to her IV therapy. Review of the medication administration record revealed that although the nurses were flushing the midline IV twice daily with saline, they failed to notice the dressing needed to be changed 5 times between 9/28/25 to 9/30/25. On 9/30/25 at 12:57 PM, the Regional Registered Nurse (RN) said they teach the nurses who take the IV course that when gauze is present to change the IV dressing every 48 hours and it is preferred, they place a clear transparent dressing instead to allow for visualization of the IV insertion site. Review of the facility Catheter Insertion and Care policy revised 1/17/19 read, Midline catheter dressings will be changed at specified intervals, or when needed, to prevent catheter-related infections associated with contaminated, loosened or soiled catheter -site dressings. General Guidelines 1. Change midline catheter dressing 24 hours after catheter insertion, every 5-7 days, or if it is wet, dirty, not intact, or compromised in anyway. The facility workbook provided to the nurses for IV training on page 60 gave instructions Change dressing weekly or per facility policy or every 2 days if gauze is used.</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
FORM CMS-2567 (02/99) Previous Versions Obsolete	Event ID:	Facility ID: 105440
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