

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  105571	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED  12/27/2024
NAME OF PROVIDER OR SUPPLIER  Palm Garden of Gainesville		STREET ADDRESS, CITY, STATE, ZIP CODE 227 SW 62nd Blvd Gainesville, FL 32607	

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 - Few</p>	<p>Provide and implement an infection prevention and control program.</p> <p><b>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 49289</b></p> <p>Based on observation, interview, and record review, the facility failed to prevent the possible spread of infection when failing to perform hand hygiene or use appropriate personal protective equipment (PPE) when performing care for 1 (Resident #1) of 3 residents on Enhanced Barrier Precautions.</p> <p>Findings include:</p> <p>Review of the admission record for Resident #1 documented the resident was readmitted to the facility on [DATE] with diagnoses including a pressure ulcer of the sacral region, Stage 4 [a wound on the lower back that extends through all layers of skin, exposing underlying muscle, tendons, and bone and requires extensive and prolonged treatment], schizophrenia [a disorder that affects a person's ability to think, feel, and behave clearly], major depressive disorder, difficulty in walking, and urinary tract infection.</p> <p>Review of the physician's order dated 11/12/2024 for Resident #1 read, Enhanced Barrier Precautions - Wound/Catheter every shift for Stage 4/catheter.</p> <p>Review of the physician's order dated 11/25/2024 for Resident #1 read, Indwelling [urinary] Catheter #18 FR [French] per 10ml [milliliters]. DX [diagnosis]: Stage IV [four] wound to sacrum.</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 - Few</p>	<p>During an observation on 12/27/2024 at 10:02 AM there was an Enhanced Barrier Precautions (EBP) sign on Resident #1's door. There was a blue storage unit hung on the door containing Personal Protective Equipment (PPE) including gowns, gloves, and masks. At 10:05 AM Staff A, Certified Nursing Assistant (CNA) and Staff B, CNA entered Resident #1's room and without performing hand hygiene, Staff A and Staff B donned gloves and proceeded to the resident's bedside. Without wearing gowns, Staff A stood at the right side and Staff B stood at the left side of Resident #1's bed. Staff B, CNA pulled down the resident's top blanket, unfastened the front of Resident #1's incontinence brief, grabbed a package of disposable wet wipes, used for cleaning the resident's skin, and cleaned the skin around the resident's urinary catheter. Staff A and Staff B, without wearing gowns, pulled Resident #1 onto her right side. Staff B, CNA cleaned the stool off from the resident's buttock area using the wet wipes, threw the soiled incontinence brief into the trash beside the resident's bed, and placed a clean incontinence brief under the resident. Staff A, CNA and Staff B, CNA then rolled the resident partially onto her back and Staff B pulled up the clean incontinence brief over the foley catheter and fastened the brief at the resident's waist. Staff A, CNA removed the stool soiled reusable blue absorbent under pad from under Resident #1's bottom and tossed the under pad on the floor against the wall at the foot of the bed. Staff B removed his gloves and without performing hand hygiene, re-opened the package of hygiene wipes and wiped Resident #1's face. Staff A, CNA removed his gloves, and without performing hand hygiene, exited the room at 10:12 AM. At 10:13 AM Staff A, CNA re-entered Resident #1's room with a clear plastic bag, and without performing hand hygiene or wearing gloves, picked up the stool soiled blue under pad from the floor and placed it the bag, and without performing hand hygiene, exited the room. After wiping Resident #1's face with the hygiene wipes and without performing hand hygiene, Staff B, CNA opened and closed the drawers of Resident #1's nightstand, grabbed a tube of facial moisturizer from the top of the stand, and applied the moisturizer cream to Resident #1's face. At 10:15 AM, without performing hand hygiene, Staff B, CNA picked up the clear bag of trash from the trash can, exited Resident #1's room, proceeded down the hallway to the dirty utility room, punched the keypad code, opened the door, and entered the room.</p> <p>During an interview on 12/27/2024 at 10:16 AM, Staff B, Certified Nursing Assistant stated, She (Resident #1) is on Enhanced Barrier Precautions because she has a foley catheter. I should have performed hand hygiene before I put on my gloves and after I took my gloves off before I did any other care with her.</p> <p>During an interview on 12/27/2024 at 11:13 AM, Staff A, Certified Nursing Assistant stated, I didn't wear a gown, but I wore gloves when caring for (Resident #1's name). I didn't think I needed to wear a gown. She has a catheter, but I was just helping with care. I put her dirty under pad on the floor because I didn't have a bag. I shouldn't have done that. I washed my hands before I came in the room. I should have washed my hands after I removed my gloves, but I didn't. I didn't wear gloves when I picked up the dirty pad of the floor either.</p> <p>During an interview on 12/27/2024 at 11:15 AM, the Administrator in Training stated, Staff needs to perform hand hygiene before they go in the room, before they put on and after they take off their gloves. We never place anything dirty on the floor. The staff need to wear a gown and gloves for residents on Enhanced Barrier Precautions when performing care. That includes foley catheters and wounds.</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 - Few</p>	<p>During an interview on 12/27/2024 at 1:48 PM, the Director of Clinical Services confirmed that the staff should have been wearing a gown when performing incontinence care for Resident #1 because she had an indwelling urinary catheter device. The Director of Clinical Services stated, The expectation is to wear a gown and gloves for anyone with a line, tube, or drain. Staff should perform hand hygiene when entering the room, before putting on their gloves, when changing their gloves, when going from dirty to clean areas of the body, and after resident care.</p> <p>Review of the signage, by the U.S. Department of Health and Human Services Centers for Disease Control and Prevention, posted on Resident #1's door read, Enhanced Barrier Precautions: Everyone MUST perform hand hygiene with alcohol-based hand rub (ABHR) or soap and water before entering and exiting. Wear gloves and a gown for the following high-contact resident care activities: Transferring, Bathing/Showering, Changing Linens, Providing Hygiene, Changing briefs/assisting with toileting, and Device care or use: Central line, urinary catheter .Wound Care.</p> <p>Review of the policy titled, Enhanced Barrier Precautions, implemented 08/16/2022 read, Policy: It is the policy of this facility to implement enhanced barrier precautions for the prevention of transmission of multidrug-resistant organisms. Definitions: Enhanced Barrier Precautions refer to the use of gown and gloves for use during high-contact resident care activities for residents known to be colonized or infected with MDRO (multidrug-resistant organisms) as well as those at increased risk of MDRO acquisition (e.g., residents with wounds or indwelling medical devices. Policy Explanation and Compliance Guidelines: c. Clear signage will be posted on the door or wall outside of the resident room indicating the type of precautions, required personal protective equipment (PPE), and the high-contact resident care activities that require the use of gown and gloves. 2. b. An order for enhanced barrier precautions will be obtained for residents with any of the following: i. Wounds (e.g., chronic wounds such as pressure ulcers, diabetic foot ulcers, unhealed surgical wounds, and chronic venous stasis ulcers) and/or indwelling medical devices (e.g., central lines, hemodialysis catheters, urinary catheters .even if the resident is not known to be infected or colonized with a MDRO. 4. High-contact resident care activities include: e. Changing linens, f. changing briefs or assisting with toileting, g. Device care or use: central lines, urinary catheters .</p> <p>Review of the U.S. Centers for Disease Control and Prevention website titled, Clinical Safety: Hand Hygiene for Healthcare Workers, last updated 2/27/2024, read, Know when to clean your hands: Immediately before touching a patient, before moving from work on a soiled body site to a clean body site on the same patient. After touching a patient or patient's surroundings. After contact with blood, body fluids, or contaminated surfaces. Immediately after glove removal. Know when to wear (and change) gloves: Gloves are not a substitute for hand hygiene. If your task requires gloves, perform hand hygiene before donning gloves and touching the patient or the patient's surroundings. Always clean your hands after removing gloves. When to wear gloves: When you anticipate that you will come in contact with blood or other infectious materials, mucous membranes, non-intact skin, potentially contaminated skin or contaminated equipment). When to change gloves and clean hands: If gloves become soiled with blood or body fluids after a task. If moving from work on a soiled body site to a clean body site on the same patient or if a clinical indication for hand hygiene occurs. Before exiting a patient room. <a href="https://www.cdc.gov/clean-hands/hcp/clinical-safety/index.html">https://www.cdc.gov/clean-hands/hcp/clinical-safety/index.html</a></p>		