STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	115258	A. Building B. Wing	05/23/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
Wellstar Paulding Nursing Ctr	600 West Memorial Drive Dallas, GA 30132

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 0695 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	Provide safe and appropriate respiratory care for a resident when needed. **NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 49811 Based on observations, staff interviews, record review, and review of the policy titled, Oxygen (O2) Administration, the facility failed to maintain a clean O2 concentrator filter consistent with professional standards of practice for two of 23 residents (R) (R56 and R119) who use O2. The deficient practice had the potential to cause respiratory distress for R56 and R119. Findings include: A review of the facility policy titled Oxygen Administration dated 5/12/2022 and revised on 11/16/2022 revealed in the section titled Care of Concentrator Equipment, number five revealed remove and wash the air filter every seven days, documenting on resident's Medication Administration Record (MAR), Change oxygen (O2) tubing every seven days, documenting on resident's MAR, Wash concentrator with WellStar approved cleaning solution, Change humidifying water bottle weekly, Replace facility approved storage bag once a month or (as needed) PRN, and Check connections and flow setting to assure resident oxygenation every shift and PRN. Review of the electronic medical record (EMR) revealed that R56 was admitted to the facility with diagnoses including, but not limited to chronic obstructive pulmonary disease (COPD), and emphysema. Review of R56's quarterly Minimum Data Set (MDS) assessment dated [DATE] revealed a Brief Interview for Mental Status (BIMS) score of 9, which indicates R56 had moderate cognitive impairment with no physical or verbal behaviors exhibited, dependent with extensive assistance for activities of daily living (ADLs) with two-person assistance. Review of R56's care plan dated 4/11/2024 indicated a respiratory problem. Goals included but were not limited to exhibiting no shortness of breath during the next 90 days. Interventions included but were not limited to providing humidification, monitoring for changes in symptoms that may indicate worsening respiratory status, notifying provider of changes, ensuring that supply is available at all times, change tubing per protocol, change O2 Concentrator Set up (nasal cannula (NC) tubing and water) and clean O2 concentrator filter with soap and water weekly on Wednesday and PRN, and administer oxygen therapy as ordered: Oxygen at two liters via nasal cannula at all times. Review of the EMR revealed that the Physician's Orders for R56 included but were not limited to changing the oxygen concentrator setup (NC tubing and water) and cleaning the oxygen concentrator filter with soap and water weekly on Wednesday, as needed, and open back vented area, and wipe with WellStar approved wipes weekly. (continued on next page)

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F 0695 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	Review of the EMR for R56 medication orders revealed oxygen is administered at two liters via nasal cannula per physician orders. Observation on 5/21/2024 at 3:18 pm revealed R56's O2 concentrator filter (in rear of unit) was covered with a thick, white substance. Observation on 5/22/2024 at 12:30 pm revealed that R56's O2 concentrator filter was covered with a thick, white substance. Observation on 5/22/2024 at 5:00 pm revealed that R56's O2 concentrator filter was covered with a thick, white substance. Observation and interview on 5/22/2024 at 5:05 pm with the Dementia Unit Manager (UM) HH confirmed the O2 concentrator filter for R56 was covered with a thick, white substance. The Dementia Unit Manager HH revealed that the O2 concentrator maintenance was conducted on the third shift (11:00 pm to 7:00 am), every Wednesday, and as needed per the physician order. However, R56's MAR revealed the O2 concentrator was clean as ordered. She verified and confirmed that the filter was covered with a thick, white substance. She stated that in her professional opinion the filter did not appear to have been cleaned during the previous third shift as indicated on the MAR. Review of the EMR revealed R119 was admitted to the facility with diagnoses including, but not limited to acute respiratory failure with hypoxia. Review of R119's MDS assessment dated [DATE] revealed a BIMS score of six, which indicated R119 had a severe cognitive impairment. R119 requires partial and moderate assistance with ADLs with one or two-person assistance. Review of the care plan dated03/21/2024 for R119 indicated a problem with receiving oxygen therapy. Goals included but were not limited to exhibiting no shortness of breath during the next 90 days. Interventions included but were not limited to providing humidification, monitoring for changes in symptoms that may indicate worsening respiratory status, notifying the provider of changes, ensuring that supply is always available, changing tubing per protocol, and administer oxygen therapy as ordered. Review of the the Physician's Orders for R119 included but were not limited to changing the oxygen concentrator setup (NC tubing and water) and cleaning the oxygen concentrator filter with soap and water weekly on Wednesday, as needed, and open back vented area, and wipe with WellStar approved wipes weekly. Review of the medication orders for R119 were listed but not limited to oxygen is administered at two liters via nasal cannula per physician orders. Observation on 5/21/2024 at 3:24 pm revealed R119's O2 concentrator filter (rear of unit) covered with a thick, white substance. Observation on 5/22/2024 at 12:28 pm revealed that R119's O2 concentrator filter was covered with a thick, white substance. (continued on next page)

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F 0695 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	Observation on 5/22/2024 at 5:05 pm revealed that R119's O2 concentrator filter was covered with a thick, white substance. Observation and interview on 5/22/2024 at 5:17 pm with Dementia Unit Manager HH revealed the O2 concentrator filter for R119 was covered with a thick, white substance. Dementia Unit Manager HH revealed that the O2 concentrator maintenance was conducted on the third shift, every Wednesday, and as needed per the physician order. She verified and confirmed that the filter on R119's O2 concentrator was covered with a thick, white substance. She stated that in her professional opinion that this filter did not appear to have been cleaned on the previous third shift as indicated on the treatment administration record (TAR). Interview on 5/22/2024 at 2:36 pm with a Certified Nursing Assistant (CNA) CC, she stated that the Licensed Practical Nurse (LPN) was responsible for assisting residents with their respiratory care needs, which included cleaning the oxygen concentrator filters. Interview on 5/22/2024 at 3:06 pm with LPN JJ verified that the nurse assigned to that resident's hall was responsible for maintaining and cleaning the O2 machine filter, ensuring the nebulizer machine was stored properly when not in use, and keeping the O2 tubing in a bag when not in use. Interview on 5/23/2024 at 9:43 am with the Director of Nursing (DON), she revealed that her expectations of staff caring for residents who receive O2 therapy was that the nurses assigned to these residents were to ensure the O2 concentrators were thoroughly cleaned and the filters were cleaned each week and as needed. She stated that the third shift nurse was responsible for cleaning the O2 concentrator and filters weekly and documenting their activities, but all nursing was responsible to check and make sure the equipment was clean and free of debris.