STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	115563	A. Building B. Wing	03/12/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
Westbury Center of Jackson for Nursing and Healing	922 McDonough Road Jackson, GA 30233

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 0880 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	Provide and implement an infection prevention and control program. Based on observations, staff interviews, and the facility policy titled Infection Prevention and Control Program, the facility failed to maintain sanitary conditions to prevent the transmission of communicable diseases and infections. This deficient practice created a potential for infection and crossˆcontamination for 53 sampled residents (R).Findings Include:Review of the Facility's Infection Prevention and Control Program Policy, implemented on 10/01/2022, showed that the Facility has established and maintains an infection prevention and control program designed to provide safe, sanitary, and comfortable environment and to help prevent the development and transmission of communicable diseases and infections as per accepted national standard and guidelines. 11. Linens: a. Laundry and direct care staff shall handle, store, process, and transport linens to prevent spread of infection. b. Clean linen shall be separated from soiled linen at all times. c. Clean linen shall be delivered to resident care units on covered linen carts with covers down. d. Linen shall be stored on all resident care units on covered carts, shelves, in bins, drawers, or linen closet.Observation on 03/11/2026 from 1:00 PM to 1:30 PM revealed that on the 200 Hall, 400 Hall, 600 Hall, and 800 Hall, the linen carts were stocked with nonˆlinenˆcart items, including food items, gloves, and other miscellaneous items. An additional observation showed a resident's towel placed on top of the linen cart, which was not covered.Interview on 03/11/2026 at 1:35 PM with the Assistant Director of Nursing (ADON) revealed that leaving nonˆlinen items on the linen cart was not an acceptable practice. The ADON stated that the potential hazard associated with this practice was infection. After the interview was completed, the ADON removed the nonˆlinen items from the linen cart.Interview on 03/12/2026 at 12:15 PM with the Director of Nursing (DON) and the Administrator confirmed that linen carts were required to contain clean linens only and were not to be used to store or transport nonˆlinen items. Both leaders acknowledged that the presence of nonˆlinen items on the carts was not consistent with facility expectations.

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