

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  115641	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED  03/18/2026
NAME OF PROVIDER OR SUPPLIER  Riverview Health & Rehab Ctr		STREET ADDRESS, CITY, STATE, ZIP CODE  6711 Laroche Avenue Savannah, GA 31406	

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>Based on observations, staff interviews, record reviews, and review of the facility policies titled Enhanced Barrier Precautions and Hand Washing/Hand Hygiene, the facility failed to ensure proper hand hygiene during wound care and colostomy care for two of thirty-two sampled residents (R) (R78 and R97). In addition, the facility failed to ensure the correct use of required personal protective equipment during care provided to three residents (R103, R78, and R97) receiving intravenous therapy, wound care, and colostomy care under enhanced barrier precautions. These deficient practices had the potential to place residents at increased risk for infection. Findings include:</p> <p>1. Review of the facility's policy titled, Enhanced Barrier Precautions, review date 01/21/2026, revealed that the Policy Interpretation and Implementation, Enhanced barrier precautions (EBPs) are used as an infection prevention and control intervention to reduce the transmission of multi-drug resistant organisms (MDROs) to residents. 3. Example of high contact resident care activities requiring the use of gown and gloves for EBPs include: .b. bathing/showering.g.device care or use (central line, urinary catheter, feeding tube, tracheostomy/ventilator, etc.); and h. wound care (any skin opening requiring a dressing).</p> <p>Review of the facility's policy titled, Handwashing/Hand Hygiene, review date 01/21/2026, revealed that Indications for Hand Hygiene . 1. Hand Hygiene is indicated: a immediately before touching a resident,. b. before performing an aseptic task (for example, placing an indwelling device or handling an invasive medical device);. c. after contact with blood, body fluids, or contaminated surfaces;. d. after touching a resident;. e. after touching the resident's environment;. f. before moving from work on a soiled body site to a clean body site on the same resident;. and. g. immediately after glove removal.</p> <p>Observation on 03/16/2026 at 9:02 AM of Licensed Practical Nurse (LPN) EE revealed she prepared supplies for intravenous (IV) therapy for Resident R103. LPN EE entered the room without wearing a gown. She washed her hands, applied gloves, and completed the IV connection.</p> <p>Interview on 03/16/2026 at 9:02 AM with LPN EE confirmed she was not wearing a gown. She stated she should have worn a gown because R103 has a peripherally inserted central catheter (PICC). She acknowledged that enhanced barrier precautions (EBP) are identified in the electronic medical record next to the resident's name and that signage is posted on the resident's door.</p> <p>Observation on 03/17/2026 at 9:32 AM revealed Wound Care LPN GG prepared a tray with supplies while wearing gloves. She removed gauze, ABD pads, and a super-absorbent dressing from their packaging with ungloved hands. She entered the resident's room wearing a gown and gloves. After packing the wounds, she did not change her gloves or wash her hands before applying the gauze, ABD pad, and super-absorbent dressing.</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>Interview on 03/17/2026 at 10:09 AM with LPN GG confirmed she did not wear gloves while preparing supplies. She also confirmed she did not wash her hands or change gloves after packing the wound.</p> <p>Interview on 03/17/2026 at 1:07 PM with Unit Manager LPN II revealed that residents with PICC lines, wounds, feeding tubes, and catheters require staff to wear gowns and gloves during wound care, activities of daily living, transferring, and IV antibiotic administration. She stated there is a box outside the resident's room containing gowns and gloves.</p> <p>Interview on 03/17/2026 at 1:54 PM with the Director of Nursing (DON) revealed staff are required to wear gowns and gloves when caring for residents with open wounds, IV access, and dialysis. The DON stated residents on enhanced barrier precautions are identified in the electronic medical record and by signage on the door. She reported that carts in the hallway contain gowns, gloves, and masks. The DON stated the wound care nurse should use gloves when removing items from packaging and should change gloves and sanitize hands after packing the wound and before applying the outer dressings. Staff are required to wash hands and don new gloves when transitioning from dirty to clean tasks.</p> <p>3.Review of the facility's policy titled, Handwashing/Hand Hygiene, review date 1/21/2026, revealed that Indications for Hand Hygiene . 1. Hand Hygiene is indicated: a immediately before touching a resident,. b. before performing an aseptic task (for example, placing an indwelling device or handling an invasive medical device);. c. after contact with blood, body fluids, or contaminated surfaces;. d. after touching a resident;. e. after touching the resident's environment;. f. before moving from work on a soiled body site to a clean body site on the same resident;. and. g. immediately after glove removal.</p> <p>Interview on 03/18/2026 at 1:19 PM with Licensed Practical Nurse (LPN) RR confirmed he did not wear a gown while providing care to Resident R78. LPN RR stated he was aware the resident was under enhanced barrier precautions and acknowledged he should have worn a gown, mask, and gloves. He further admitted he did not change his gloves or wash his hands after cleaning the colostomy site with soap and water and stated he should have changed gloves and washed his hands before cutting out the colostomy bag.</p> <p>Interview on 03/18/2026 at 1:25 PM with Certified Nurse Assistant (CNA) SS confirmed she was not wearing a gown while providing care. CNA SS stated she could not recall what precautions the resident was under but acknowledged she should have worn a gown and gloves. She confirmed she used wipes to clean the skin and wafer after removing the bag, reported she ran out of soap, and admitted she should not have used wipes to clean the area.</p> <p>Interview on 03/18/2026 at 1:41 PM with LPN CC revealed that residents with colostomies are under enhanced barrier precautions. LPN CC stated staff should wear gowns and gloves. She explained that nurses manage the colostomy, while CNAs empty and burp the colostomy bag. Staff are required to clean the area with soap and water and should not use bed wipes. LPN CC stated nurses should wash their hands and change gloves after cleaning the colostomy area, and staff should wash hands when moving from dirty to clean tasks. She further stated staff should not use alcohol wipes to remove the wafer because they can cause burning, and that powder should be applied first, followed by wiping the edges with skin prep.</p> <p>Interview on 03/18/2026 at 2:14 PM with the Director of Nursing (DON) revealed that residents with colostomies are under enhanced barrier precautions and staff should wear gowns, gloves, and (continued on next page)</p>		

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