

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 195533	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 04/11/2024
NAME OF PROVIDER OR SUPPLIER Village Health Care at the Glen		STREET ADDRESS, CITY, STATE, ZIP CODE 403 E. Flornoy Lucas Shreveport, LA 71115	

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 0637</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Assess the resident when there is a significant change in condition</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 40957</p> <p>Based on record reviews and interviews, the facility failed to ensure that 1 (#82) resident out of 35 sampled residents reviewed for a significant change in status was comprehensively assessed using the CMS (Center for Medicare & Medicaid Services) specified Resident Assessment Instrument after Resident #82 was hospitalized following a cerebral infarction and right femoral head fracture on 02/10/2024.</p> <p>Findings:</p> <p>Review of Resident #82's diagnosis revealed hemiplegia following cerebral infarction affecting left non-dominant side, right femoral head fracture.</p> <p>Review of Resident #82's nurse's note dated 02/10/2024 revealed Resident #82 was found lying supine on the floor with no movement to her right lower extremity and tremors to the left side of her body. Resident #82 was assessed by the nurse and 3 staff members assisted Resident #82 into her wheelchair. The Nurse Practitioner was notified and Resident #82 was transferred to the emergency room for evaluation.</p> <p>Review of Resident #82's hospital records revealed the following, in part:</p> <p>Hospital admitted [DATE] and discharge date of [DATE].</p> <p>Final active diagnosis included acute ischemic left MCA (Middle Cerebral Artery) stroke, cytotoxic cerebral edema, fracture of neck of right femur, femur fracture, right hemiparesis .</p> <p>X-ray hip two or three views right (with pelvis when performed) result on 02/10/2024 findings were right complete femoral head fracture, displaced.</p> <p>Review of Resident #82's MDS (Minimum Data Set) for the following dates of 02/10/2024, 02/21/2024, and 02/27/2024 failed to reveal a significant change assessment was completed.</p> <p>During an interview on 04/11/2024 at 4:20 p.m., S2 Medicare Case Manager verified she did not complete a significant change MDS after Resident #82 suffered a cerebral infarction and a right femoral head fracture on 02/10/2024.</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 0637</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>During an interview on 04/11/2024 at 4:30 p.m., S1 Administrator verified a significant change MDS should have been completed by S2 Medicare Case Manager after Resident #82 suffered a cerebral infarction and a right femoral head fracture on 02/10/2024.</p>

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<p>F 0640</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p> <p>Note: The nursing home is disputing this citation.</p>	<p>Encode each resident's assessment data and transmit these data to the State within 7 days of assessment.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 34708</p> <p>Based on record reviews and interviews the facility failed to ensure resident assessments were transmitted within the required timeframe for 10 (#3, #41, #47, #61, #76, #50, #51, #72, #34, #62) of 10 residents reviewed for assessments out of a total of 35 sampled residents.</p> <p>Findings:</p> <p>Review of Resident #3's MDS (Minimum Data Set) assessments revealed an Other State Assessment MDS dated [DATE] with a status of completed on 02/15/2024 and submitted and accepted on 03/21/2024. Further review of Resident #3's MDS revealed a Quarterly MDS dated [DATE] with a status of completed 02/15/2024 and submitted 03/20/2024 and not accepted.</p> <p>Review of Resident #41's MDS assessments revealed a Quarterly MDS dated [DATE] with a status of not completed, not submitted, and not accepted.</p> <p>Review of Resident #47's MDS assessments revealed an Other State Assessment MDS dated [DATE] with a status of completed on 02/22/2024 and submitted and accepted on 03/21/2024. Further review of Resident #47's MDS revealed a 5-Day MDS dated [DATE] with a status of completed 02/22/2024 and submitted 03/20/2024 and not accepted.</p> <p>Review of Resident #61's MDS assessments revealed a Discharge MDS dated [DATE] with a status of not completed, not submitted, and not accepted.</p> <p>Review of Resident #76's MDS assessments revealed an Other State Assessment MDS dated [DATE] with a status of completed 11/16/2023, submitted 02/21/2024, and accepted 02/21/2024.</p> <p>Review of Resident #50's MDS assessments revealed an Entry MDS dated [DATE] with a status of completed 02/15/2024, submitted 03/20/2024, and not accepted.</p> <p>Review of Resident #51's MDS assessments revealed a Quarterly MDS dated [DATE] with a status of not completed, not submitted, and not accepted. Further review of Resident #51's MDS assessments revealed an Other State assessment dated [DATE] with a status of completed 12/08/2023, submitted 12/20/2023, and not accepted.</p> <p>Review of Resident #72's MDS assessments revealed an Other State Assessment MDS dated [DATE] with a status of completed 02/15/2024 and submitted and accepted on 03/21/2023.</p> <p>Review of Resident #34's MDS assessments revealed an Other State Assessment MDS dated [DATE] with a status of completed 02/15/2024 and submitted and accepted on 03/21/2024. Further review of Resident #34's MDS assessments revealed a Quarterly MDS dated [DATE] with a status of completed 02/15/2024 and submitted 03/20/2024, and not accepted.</p> <p>(continued on next page)</p>		

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<p>F 0640</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p> <p>Note: The nursing home is disputing this citation.</p>	<p>Review of Resident #62's MDS assessments revealed Other State Assessment MDS dated [DATE] with a status of completed 02/22/2024 and submitted and accepted 03/21/2024. Further review of Resident #62's MDS assessments revealed a Quarterly MDS dated [DATE] with a status of completed 02/22/2024, submitted 03/20/2024, and not accepted.</p> <p>During an interview on 04/11/2024 at 3:15 p.m. S2 Medicare Case Manager reviewed Resident #3, #41, #47, #61, #76, #50, #51, #72, #34, and #62's MDS assessments and acknowledged their MDS assessments had not been completed and transmitted to CMS (Centers for Medicare and Medicaid Services) within the required time frame.</p>		

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<p>F 0812</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Procure food from sources approved or considered satisfactory and store, prepare, distribute and serve food in accordance with professional standards.</p> <p>36665</p> <p>Based on observations and interviews the facility failed to store, prepare, distribute and serve food under sanitary conditions. This had the potential to affect 12 residents who received trays out of the main kitchen on 04/08/2024.</p> <p>Findings:</p> <p>Review of the facility's Basic Standards-Food Services -Health Care Policy (revised March 2022) revealed the following:</p> <p>Sanitation:</p> <p>7. Effective methods of cleaning all equipment and work areas are followed as outlined in individual assignment procedures.</p> <p>9. Food is stored following sanitary code. All open containers are dated and labeled with first use date and discarded prior to expiration. All food items removed from original containers are properly packaged, dated and labeled prior to being stored.</p> <p>Observation on 04/08/2024 at 8:30 a.m. of the main kitchen revealed the following:</p> <ol style="list-style-type: none"> 1. Meat covered in ice with frost bitten appearance inside a plastic bag without a label inside the freezer. 2. An opened, unlabeled jar of jalapenos, tartar sauce, and pepperoncini's and lime juice inside the walk in refrigerator. 3. Stand Mixer was unclean with yellow and white food residue on the top and underneath the hood of the mixer. 4. Grease and food residue noted on the outside of both fryers and on the floor between the stove and fryers. The pipes and the wall behind the fryer and stove had grease and food residue present. 5. Walk-in refrigerator with food and debris on the floor. <p>During an interview on 04/08/2024 at 8:30 a.m. S3 Cook reported the meat should have been removed from the refrigerator before going bad and the opened, unlabeled items in the refrigerator should have been labeled with an opened date. S3 Cook further confirmed the walk in refrigerator's floor, the stand mixer, the fryer, and the floors and walls behind the fryers should have been cleaned.</p> <p>(continued on next page)</p>		

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<p>F 0812</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>During an interview on 04/09/2024 at 10:15 a.m. S4 Chef reported the morning and evening kitchen staff have assignments to clean the main kitchen and the equipment daily. S4 Chef confirmed the kitchen and equipment should have been cleaned daily. S4 Chef further confirmed the the meat should have been removed from the refrigerator before going bad and the opened, unlabeled items in the refrigerator should have been labeled with an opened date.</p>		