

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  225273	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED  02/07/2025
NAME OF PROVIDER OR SUPPLIER  Carleton-Willard Village Retirement & Nursing Ctr		STREET ADDRESS, CITY, STATE, ZIP CODE  100 Old Billerica Road Bedford, MA 01730	

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 0656</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Develop and implement a complete care plan that meets all the resident's needs, with timetables and actions that can be measured.</p> <p>48990</p> <p>Based on observations, interviews and record review, the facility failed to implement a comprehensive person-centered care plan for one Resident (#72) out of a total sample of 20 residents. Specifically, for Resident #72:</p> <p>a.) the facility failed to ensure covered cups for hot beverages were implemented as directed by the plan of care.</p> <p>b.) the facility failed to ensure staff cut up food as directed by the plan of care.</p> <p>Findings include:</p> <p>Review of the facility policy titled 'Baseline and Comprehensive Person-Centered Care', revised 6/1/24, indicated, but was not limited to the following:</p> <ul style="list-style-type: none"> <li>- The comprehensive care plan must describe the following: services to attain or maintain the Resident's highest practicable, physical, mental and psychosocial well-being, and any services that would otherwise be required by are not provided due to the Resident's exercise of rights.</li> <li>- The Residents have the right to refuse treatment and the rationale to be stated in the medical records.</li> <li>- Services provided will be in consultation with the Resident and the Resident's representative.</li> </ul> <p>Resident #72 was admitted to the facility in January 2025 with diagnoses including glaucoma and macular degeneration, which are both chronic eye diseases that cause vision loss.</p> <p>Review of the most recent Minimum Data Set (MDS) assessment, dated 1/9/25, indicated Resident #72 had moderate cognitive impairment as evidenced by a Brief Interview for Mental Status (BIMS) score of 11 out of 15. This MDS also indicated Resident #72's vision was highly impaired wearing glasses and required substantial/maximal assistance with eating.</p> <p>a.) Review of Resident #72's plan of care related to nutrition, dated 1/10/25, indicated:</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 0656</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<ul style="list-style-type: none"> <li>- Resident #72 has an alteration in nutrition due to a significant unplanned weight loss due to poor PO (by mouth) intake.</li> <li>- Resident #72 has impaired vision.</li> <li>- Identify placement of foods entree and long [sic] plate.</li> <li>- Provide lip plate, soup in mugs, covered cup for hot beverage.</li> </ul> <p>Review of Resident #72's occupational therapy evaluation, dated 1/3/25, indicated:</p> <ul style="list-style-type: none"> <li>- Patient is legally blind.</li> </ul> <p>Review of Resident #72's Dietitian progress note, dated 1/10/25, indicated:</p> <ul style="list-style-type: none"> <li>- [Resident] reported tea was too hot -- milk added.</li> <li>- Provide covered cup for hot beverage.</li> </ul> <p>Review of Resident #72's occupational therapy progress note, dated 1/21/25, indicated:</p> <ul style="list-style-type: none"> <li>- Resident was noted to be wearing 'bib' to cover his/her clothes and protect his/her skin from spillage.</li> </ul> <p>On 2/5/25 at 9:20 A.M., the surveyor observed Resident #72 eating alone in his/her room with the door closed. There was an uncovered mug of tea next to his/her breakfast tray. The meal slip on the breakfast tray failed to indicate need for covered cup for hot beverages.</p> <p>On 2/5/25 12:22 P.M., the surveyor observed Resident #72 eating alone in his/her room. There was an uncovered mug of tea on his/her lunch tray. The meal slip on the lunch tray failed to indicate need for covered cup for hot beverages. There was tea spilled on the surface of the lunch tray.</p> <p>On 2/6/25 at 9:36 A.M., the surveyor observed Resident #72 eating alone in his/her room. There was an uncovered mug of tea on his/her breakfast tray. The meal slip on the breakfast tray failed to indicate need for covered cup for hot beverages.</p> <p>On 2/6/7 at 12:28 P.M., the surveyor observed Resident #72 eating alone in his/her room with the door closed. There was an uncovered mug of tea on his/her lunch tray. The meal slip on the lunch tray failed to indicate need for covered cup for hot beverages. There was tea spilled on to the surface of the lunch tray. Resident #72 said sometimes he/she spills hot drinks and staff never put covers on the mugs.</p> <p>During an interview on 2/7/25 at 8:32 A.M., the Dietitian said Resident #72 always drinks his/her tea from an uncovered mug. The Dietitian said Resident #72 often spills because of his/her significant visual deficits, but that staff always makes sure the beverages aren't too hot that they would cause burns. The Dietitian was unaware the Resident's care plan indicated provide covered cups for hot beverages but said it should have been implemented if it was in the care plan.</p> <p>(continued on next page)</p>		

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<p>F 0656</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>During an interview on 2/7/25 at 9:03 A.M., Certified Nurse Assistant (CNA) #2 and CNA #3 said special instructions, such as covered mugs, would be indicated on the meal slip on the tray or communicated to the CNAs by nurse report or on the assignment list. CNA #2 and CNA #3 said they were unaware Resident #72 required covered cups for hot beverages.</p> <p>During an interview on 2/7/25 at 9:08 A.M., Nurse Unit Manager #2 said any interventions on Resident #72's active care plan should be implemented. Nurse Unit Manager #2 was unaware Resident #72 required covered mugs for hot beverages. Nurse Unit Manager #2 observed the uncovered mug on Resident #72's tray and said that it was not a covered cup such as was indicated in his/her care plan.</p> <p>During an interview on 2/7/25 at 10:11 A.M., the Director of Nursing (DON) said any interventions on Resident #72's active care plan should be implemented, including providing a covered cup for hot beverages.</p> <p>b.) Review of Resident #72's plan of care related to nutrition, dated 1/10/25, indicated:</p> <ul style="list-style-type: none"> <li>- Resident #72 has an alteration in nutrition due to a significant unplanned weight loss due to poor PO (by mouth) intake.</li> <li>- Resident #72 has impaired vision, needs food cut up for him/her.</li> <li>- Identify placement of foods entree and long [sic] plate.</li> <li>- Diet as ordered.</li> <li>- Assess for finger foods as needed.</li> </ul> <p>Review of Resident #72's active physician's order, dated 1/3/25, indicated:</p> <ul style="list-style-type: none"> <li>- Diet Type: Regular; Diet Consistency: Cut-Up.</li> </ul> <p>Review of Resident #72's occupational therapy evaluation, dated 1/3/25, indicated:</p> <ul style="list-style-type: none"> <li>- Patient is legally blind.</li> </ul> <p>Review of Resident #72's Dietitian progress note, dated 1/10/25, indicated:</p> <ul style="list-style-type: none"> <li>- Food cut up because resident cannot see to do it himself/herself.</li> </ul> <p>Review of Resident #72's Dietitian progress note, dated 1/23/25, indicated:</p> <ul style="list-style-type: none"> <li>- Resident #72 is tolerating a regular cut up diet which he/she needs because he/she is not able to see to do it himself/herself.</li> </ul> <p>Review of Resident #72's occupational therapy progress note, dated 1/19/25, indicated:</p> <ul style="list-style-type: none"> <li>- noted mild difficulty with cutting egg.</li> </ul> <p>(continued on next page)</p>		

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<p>F 0656</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>On 2/5/25 at 9:20 A.M., the surveyor observed Resident #72 eating alone in his/her room with the door closed. Resident #72 was using a red built up fork to attempt to eat a runny fried egg. There also were other finger foods on the plate, including an english muffin and bacon. Resident #72 repeatedly attempted to load the fork with the egg and bring the fork to his/her mouth unsuccessfully. The meal slip on the breakfast tray indicated the need for a regular, cut up diet and that a cut-up egg-fried should be on this meal tray.</p> <p>On 2/6/25 at 9:36 A.M., the surveyor observed Resident #72 eating alone in his/her room. There was an uncut over-easy fried egg, with the yolk appearing to be runny. There also were other finger foods on the plate, including an english muffin and bacon. The meal slip on the breakfast tray indicated the need for a regular, cut up diet and that a cut-up egg-fried should be on this meal tray.</p> <p>On 2/6/7 at 12:28 P.M., the surveyor observed Resident #72 eating alone in his/her room with the door closed. There was a sandwich cut in half filled with a filling that appeared to be tuna fish. There was also two large leaves of lettuce and two slices of tomatoes. Resident #72 was holding one triangle slice of bread containing a large mound of tuna fish filling. Resident #72 was mouthing the bread and unsuccessfully attempting to eat the tuna fish filling by licking it. Resident #72 said he/she has trouble eating things when it isn't cut up into smaller pieces.</p> <p>During an interview on 2/7/25 at 8:32 A.M., the Dietitian said Resident #72 had difficulty with his/her meals because of significant visual impairment and requires staff to identify the location of food on the meal tray and cut up food that is not finger foods. The Dietitian said Resident #72 needed his/her food cut up because he/she cannot see the food. The Dietitian said Resident #72's fried egg should have been cut-up, as indicated on the meal-slip. The Dietitian said Resident #72 usually did well with finger foods, but a runny fried egg was not a finger food.</p> <p>During an interview on 2/7/25 at 9:03 A.M., Certified Nurse Assistant (CNA) #2 and CNA #3 said Resident #72 had significant visual deficit and requires staff to identify the location of food on the meal tray. CNA #2 and CNA #3 said runny, fried eggs should be cut up as indicated on the meal slip on the tray.</p> <p>During an interview on 2/7/25 at 9:08 A.M., Nurse Unit Manager #2 said Resident #72 had significant visual deficit and required staff to identify the location of food on the meal tray and to cut up food that was not finger foods. Nurse Unit Manager #2 said runny, fried eggs should be cut up as indicated on the meal slip on the tray.</p> <p>During an interview on 2/7/25 at 10:11 A.M., the Director of Nursing (DON) said the fried egg should have been cut up if indicated on the meal slip and all interventions, such as a cut up diet, should be implemented following the Resident's active plan of care.</p>		

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<p>F 0761</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Ensure drugs and biologicals used in the facility are labeled in accordance with currently accepted professional principles; and all drugs and biologicals must be stored in locked compartments, separately locked, compartments for controlled drugs.</p> <p><b>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY**</b> 50338</p> <p>Based on observations, and interviews, the facility failed to ensure medications were labeled and dated once opened, according to manufacturer's guidelines, in three out of three medication carts.</p> <p>Findings include:</p> <p>Review of the facility policy titled Storage of Medications, dated 4/26/21, indicated the following:</p> <p>It is the policy of [NAME]-[NAME] Village that medications and biologicals are stored safely, securely, and properly, following manufacture's recommendations or those of the supplier. The medication supply is accessible only to licensed nursing personnel, pharmacy personnel, or staff members lawfully authorized to administer medications.</p> <p>-Outdated, contaminated, or deteriorated medications and those in containers that are cracked, soiled, or without secure closures are immediately removed from inventory, disposed of according to procedures for medication disposal, and reordered from the pharmacy, of a current order exists.</p> <p>During an observation on 2/6/25 at 8:47 A.M., the following medications were observed in the Ross-[NAME] medication cart low side:</p> <p>-One 887mL (milliliter) bottle of (Pro-Stat) Liquid Protein opened and undated, therefore unable to determine an expiration date. Manufacturer instructions indicate to discard the bottle after 90 days of opening.</p> <p>During an interview on 2/6/25 at 8:55 A.M., Nurse #1 said medications must be dated when opened and should be discarded if undated as unable to determine the expiry date.</p> <p>During an observation on 2/6/25 at 9:05 A.M., the following medications were observed on the Ross-[NAME] medication cart high side:</p> <p>-One bottle of fluticasone nasal spray (nasal spray contain steroid used to treat allergies) 50 mcg (micrograms) open and undated, therefore unable to determine the expiration date. Manufacturer instructions indicate to discard after using 120 sprays.</p> <p>-One bottle of atropine 1% ophthalmic eye drops (used orally for increased secretions) opened and undated, therefore unable to determine an expiration date. Manufacturer instructions indicate to discard 28 days after opening.</p> <p>During an interview on 2/6/25 at 9:20 A.M., Nurse # 2 said medications should have been dated when opened and undated medications need to be removed from medication cart.</p> <p>(continued on next page)</p>		

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<p>F 0761</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>During an observation on 2/6/25 at 9:22 A.M., the following medications were observed in the [NAME] medication cart low side:</p> <p>-One bottle of brinzolamide suspension 1% (used to treat increased pressure in the eye) opened and undated, therefore unable to determine an expiration date. Manufacturer instructions indicate to discard 28 days after opening.</p> <p>During an interview on 2/6/25 at 9:30 A.M., Nurse #3 said medications should have been dated when opened and undated medications need to be removed from medication cart.</p> <p>During an interview on 2/6/25 at 1:30 P.M., the Director of Nursing (DON) said medications must be dated and labeled appropriately when opened according to the manufacturer's instructions and said expired medications must be removed.</p>