

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 225356	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 05/29/2024
NAME OF PROVIDER OR SUPPLIER Care One at Randolph		STREET ADDRESS, CITY, STATE, ZIP CODE 49 Thomas Patten Drive Randolph, MA 02368	

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 0658</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Ensure services provided by the nursing facility meet professional standards of quality.</p> <p>43963</p> <p>Based on records reviewed, interviews and observations for one of three sampled residents (Resident #1), the Facility failed to ensure nursing provided care and services that met professional standards, when on 05/28/24, nursing failed to follow acceptable standards of practice related to medication administration.</p> <p>Findings include:</p> <p>Review of the Facility Policy titled, Administrating Medications, dated as last revised 04/2019, indicated that medications are administered in a safe and timely manner and as prescribed.</p> <p>The Policy further indicated the following;</p> <ul style="list-style-type: none"> -The individual administering the medication verifies the resident's identity before administering any medication; -The individual administering the medication checks the label THREE times to verify the right resident, right medication, right dose, right time and right method of administration before giving the medication; and -Medications ordered for a particular resident may not be administered to another resident, unless permitted by State law and facility policy, and approved by the Director of Nurses. <p>Resident #1 was admitted to the Facility in April 2024, diagnoses included paraplegia (the inability to voluntarily move the lower parts of the body) secondary to a cervical six/cervical seven (C-6/C-7) spinal cord injury (damage to the spinal cord in the region of the cervical vertebrae), bilateral pressure injuries to his/her buttocks, anxiety, post-traumatic stress disorder, chronic pain syndrome, and diabetes mellitus.</p> <p>Review of Resident #1's Physician's Orders, dated 04/11/24 through 05/28/24, indicated he/she had an order for nursing to cleanse his/her left and right buttock with normal saline, pat dry, apply Santyl (prescription topical ointment used to remove damaged tissue from chronic skin ulcers) to the wound beds and cover with a foam silicone dressing daily and as needed.</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 0658</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>On 05/28/24 at 11:11 A.M., the Surveyor, accompanied by the Assistant Director of Nurses (ADON), observed Nurse #1 complete dressing changes to Resident #1's bilateral buttocks pressure injury wounds.</p> <p>After the completion of Resident #1's dressing changes, the Surveyor observed the medication tube of Santyl (which had already been opened) used by Nurse #1 in Resident #1's dressing change, was prescribed to and dispensed for a different resident.</p> <p>During an interview on 05/28/24 at 11:20 A.M., Nurse #1 said she had not realized that the tube of Santyl medication that she used and applied to Resident #1 during his/her dressing change, had belong to a different resident, and not to Resident #1. Nurse #1 said she should have checked the name on the tube of Santyl before using it.</p> <p>Nurse #1 said the tube of Santyl was for a resident the had been discharged from the facility. Nurse #1 said they are not allowed to use another resident's medication on any other residents, other than whom the medication is prescribed for.</p> <p>During an interview on 05/28/24 at 11:20 A.M., the ADON said she had not noticed that the tube of Santyl medication, used by Nurse #1 during the dressing change, had not been prescribed for Resident #1, but was for another resident.</p> <p>The ADON said that it is the expectation of the Facility that prescription medications may not be used for any other resident, other than for whom it is prescribed.</p> <p>During an interview on 05/29/24 at 12:48 P.M., the Director of Nurse (DON) said she was made aware of the medication being used during Resident #1's dressing change, had not been prescribed to Resident #1 and that the prescription label on the Santyl had another residents name on it.</p> <p>The DON said it is the expectation of the Facility that all Nurses administering medications by any route double check the five rights for administering medications safely. The DON said medications may only be administered to the Resident for whom it is prescribed.</p>		

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<p>F 0804</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Ensure food and drink is palatable, attractive, and at a safe and appetizing temperature.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 43963</p> <p>Based on records reviewed, interviews and observations for one of four sampled resident care units (2 East), the Facility failed to ensure food and beverages provided to the residents were served at safe and appetizing temperatures, when on 05/28/24, results of test trays observations indicated that the food items were not served at appetizing temperatures, and some foods items were not palatable.</p> <p>Findings include:</p> <p>Review of the Facility Policy titled Food Temperatures, undated, indicated that hot foods should be maintained at a minimum of 140 degrees Fahrenheit (F) and cold foods should be maintained at a maximum of 40 degrees F.</p> <p>Review of the Facility Policy titled Food Safety, undated, indicated temperatures of food will be monitored daily and be in compliance with the Department of Public Health Guidelines in the fold service department.</p> <p>Review of the Resident Council Group meeting minutes held on 04/16/24 at 1:30 P.M., with eight residents in attendance, indicated the residents voiced complaints about food temperatures, foods not being hot enough.</p> <p>During a telephone interview on 05/28/24 at 8:27 A.M., Ombudsman #2 said that the biggest complaint that he had been hearing from the residents at the Facility were the temperature and quality of the food had not been up to par.</p> <p>During an interview on 05/28/24 at 1:03 P.M., Resident #1 said that the food is not very good and is usually always cold. Resident #1 said that the dinner time meals and the weekends are worse, and he/she never gets what he/she ordered.</p> <p>During an interview on 05/28/24 at 12:35 P.M., Resident #2 said that the food at night and on the weekends is inedible, almost always cold and he/she complains for other residents as well because he/she is the President of Resident Council. Resident #2 said he/she had addressed food temperatures in the past with the Director of Nurse (DON) and FSD.</p> <p>Resident #2 said that the menus will say one thing and he/she will receive something different on his/her tray, from what he/she had selected from the menu. Resident #2 said that last evening (5/27/24) he/she got a cheeseburger with no cheese, and that the meat was so hard and cold, he/she thought it was still frozen.</p> <p>During an interview on 05/29/24 at 9:41 A.M., the Dietician said that some residents are reporting that some meals are not hot enough.</p> <p>Review of the Facility's Temperature Log Template, undated, indicated the following temperatures were acceptable holding temperatures;</p> <p>(continued on next page)</p>		

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<p>F 0804</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>-Hot Beverages, 170 degrees to 180 degrees F;</p> <p>-Soups, 140 degrees to 180 degrees F;</p> <p>-Hot Entrees, 140 degrees to 180 degrees F;</p> <p>-Starches, 140 degrees to 180 degrees F;</p> <p>-Vegetables, 140 degrees to 180 degrees F;</p> <p>-Juices, 35 degrees to 40 degrees F; and</p> <p>-Milk. 35 degrees to 40 degrees F.</p> <p>Review of the Facility's Test Tray Worksheet, undated, indicated what the acceptable temperature points (as served)standards for 20 minutes after food is assembled. The Temperature Key indicated the following;</p> <p>-Soups/Hot Beverages, greater then (>) 150 degrees F (standard temperature 20 minutes out);</p> <p>-Hot Entree/Starch/Veg/Eggs, greater than (>)135 degrees F;</p> <p>-Dessert/Fruit, less then (<) 41 degrees F;</p> <p>-Milk/Cold [NAME]/Potentially Hazardous Cold Foods, less than (<) 41 degrees F.</p> <p>Review of the Facility Daily Mealtime Temperature Log, dated 05/28/24, at 11:40 A.M., 40 minutes after lunch service began, indicated the [NAME] had not taken meal temperatures for either the breakfast meal or the lunch meal prior to serving the tray line for the residents.</p> <p>During an interview on 05/29/24 at 10:00 A.M., the [NAME] said that he is supposed to take the temperature of all foods prior to serving the meals to the residents. The [NAME] said he had not taken the temperature of any food for breakfast or lunch on 05/28/24 prior to serving the residents.</p> <p>The following food trays tests were conducted on 5/28/24 and 5/29/24 on the Two East (2 E) Unit by the surveyor accompanied by Facility Staff.</p> <p>On 05/28/24 at 11:58 A.M., the lunchtime meal truck for 2 E left the kitchen.</p> <p>At 12:00 P.M., the first lunch food truck was observed to arrive on the 2 E unit. Diet Aide #1 announced that the food truck had arrived on the unit and left the floor.</p> <p>At 12:11 P.M., Nursing staff began checking and distributing the residents lunch trays.</p> <p>At 12:23 P.M., after the last resident meal tray was removed and served, the test tray was pulled from the cart by Nurse #1.</p> <p>Test Tray #1 observations:</p> <p>(continued on next page)</p>		

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<p>F 0804</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>The food temperatures were measured by the Surveyor, who also taste tested food items, in the presence of Nurse #1, observations were noted as follows:</p> <ul style="list-style-type: none"> -turkey meatloaf was 110 degrees F (25 degrees less than acceptable standard), and tasted lukewarm, -Mashed potatoes were 120 degrees F (15 degrees less than the acceptable standard), tasted warm and quite bland, -Broccoli was at 100 degrees F (35 degrees less than the acceptable standard), was lukewarm, very hard and bitter, -coffee was 104 degrees F (46 degrees less than the acceptable standard), was tepid and not palatable, -Milk was 52 degrees F (11 degrees greater than the acceptable standard), -Cranberry juice was 52 degrees F (11 degrees greater than the acceptable standard); and -Canned peaches were 64 degrees F (25 degrees greater than the acceptable standard). <p>Review of the Facility Daily Mealtime Temperature Log, dated 05/29/24, at 7:40 A.M., 40 minutes after breakfast service began, indicated the cook had not taken the temperature of the breakfast meal prior to serving the tray line.</p> <p>The [NAME] said that he is supposed to take the temperature of all foods prior to serving the meals to the residents. The [NAME] said he had not taken the temperature of the breakfast food on 05/29/24 prior to serving the residents.</p> <p>On 5/29/24 at 7:53 A.M., the first breakfast meal truck was observed to arrive on the 2 E unit. Diet Aide #1 announced the food truck had arrived on the unit and left the floor.</p> <p>At 7:56 A.M., the Nursing staff began checking and distributing the resident's breakfast trays.</p> <p>At 8:09 A.M., after the last resident meal tray was removed from the cart and delivered, the test tray was removed from the cart by Nurse #1.</p> <p>Test Tray #2 observations:</p> <p>The temperatures were taken by the Food Service Director (FSD) in the presence of the Surveyor.</p> <ul style="list-style-type: none"> -Hard-boiled egg was 82 degrees F, (53 degrees less than the acceptable standard), -Toast was 80 degrees F (55 degrees less than the acceptable standard), was moist and wilted. -Cream of wheat was 124 degrees F (11 degrees less than acceptable standards). - Milk was 48 degrees F (7 degrees greater than the acceptable standard) <p>(continued on next page)</p>		

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<p>F 0804</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>On 5/29/24 at 12:06 P.M., the first lunchtime meal truck was observed to arrive on the 2 E unit. Diet Aide #1 announced the food truck had arrived on the unit and left the floor.</p> <p>At 12:08 P.M., the Nursing staff began checking and distributing the resident's lunch trays.</p> <p>At 12:20 P.M., after the last resident meal tray was removed and delivered, the test tray was removed from the cart by Nurse #1.</p> <p>The temperatures were taken by the Food Service Director (FSD) in the presence of the Surveyor.</p> <p>Test Tray #3 observations:</p> <ul style="list-style-type: none"> -Pork Stir Fry was 138 degrees F (met facility acceptable standards) -Rice was 134 degrees F, (although this was only 1 degree less than acceptable standard) was warm, however some grains were hard and crunchy, (rice was tasted by both the FSD and Surveyor); -Coffee was 138 degrees F (12 degrees less than the acceptable standard), -Milk was 48 degrees F (7 degrees greater than the acceptable standard); and -Apple juice was 50 degrees F (9 degrees greater than the acceptable standards). <p>During a telephone interview on 06/03/24 at 12:06 P.M., Unit Manager #2 said that she had received resident complaints regarding the food in the past and said residents complain that some meals are not hot enough and some meals just don't taste good.</p> <p>During an interview on 05/28/24 at 1:33 P.M. and 05/29/24 at 7:40 A.M., the Food Service Director (FSD) said he had been unaware that the [NAME] had not taken the temperatures of any of the food items prior to the breakfast or lunch service on 05/28/24 until it was brought to his attention.</p> <p>The FSD said he was also unaware that the [NAME] had not taken any of the required food temperatures on 05/29/24 prior to the morning breakfast service.</p> <p>The FSD said it is the expectation of the Facility for Kitchen Staff to take the food temperatures of the final products and then a holding temperature prior to serving the food line getting to the residents to ensure proper temperatures.</p>		