

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  245255	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED  08/08/2024
NAME OF PROVIDER OR SUPPLIER  Cerenity Care Center on Humboldt		STREET ADDRESS, CITY, STATE, ZIP CODE  512 Humboldt Avenue Saint Paul, MN 55107	

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 0921</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Make sure that the nursing home area is safe, easy to use, clean and comfortable for residents, staff and the public.</p> <p><b>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 43367</b></p> <p>Based on observation, interview, and record review the facility failed to provide a safe, clean, and home like environment for 10 of 25 residents (R12, R13, R4, R5, R6, R7, R8, R9, R10, R11) reviewed and all independently mobile residents on the 3rd floor when concerns related to resident bathrooms and flooring, cleaning practices and cleaning product storage were observed.</p> <p>Findings include:</p> <p>R4's annual Minimum Data Set (MDS) dated [DATE], identified intact cognition.</p> <p>R5's annual MDS dated [DATE], identified moderately impaired cognition.</p> <p>R6's annual MDS dated [DATE], identified moderately impaired cognition.</p> <p>R7's quarterly MDS dated [DATE], identified severely impaired cognition.</p> <p>R8's annual MDS dated [DATE], identified severely impaired cognition.</p> <p>R9's quarterly MDS dated [DATE], identified severely impaired cognition.</p> <p>R10's quarterly MDS dated [DATE], identified severely impaired cognition.</p> <p>R11's annual MDS dated [DATE], identified severely impaired cognition.</p> <p>R12's quarterly MDS dated [DATE], identified intact cognition.</p> <p>R13's quarterly MDS dated [DATE], identified intact cognition.</p> <p>Resident council meeting minutes for May 21, 2024, identified improvement needed in cleaning rooms housekeeping was an issue not getting to rooms.</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 0921</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>During continuous observation on 8/7/24 at 2:05 p.m., located at the end of the south hallway on 2nd floor was a lounge room with door open. The room had two round tables and one long table with chairs positioned around them and a large fish tank. A housekeeping cart was left in the room with storage roll top area unlocked. Included in the storage area were cleaning chemicals all labeled: Rapid Multi Surface Disinfectant Cleaner, Health Care Fuzion Cleaner Disinfectant in spray bottle, bleach germicidal wipes, large can of air freshener, and 73 disinfecting acid bathroom cleaner in spray bottle. At 2:20 p.m. housekeeper (HK)-A walked into the lounge room carried her purse and stated ohhhh, ohhhh, ohhh, hello, was on break and pointed down the hallway. HK-A pushed housekeeping cart out of lounge area and down hallway to the dining room area. HK-A sanitized hands, applied gloves, grabbed a white cloth and spray bottle labeled Rapid Multi Surface Disinfectant Cleaner half full of blue colored liquid.</p> <p>- At 2:30 p.m. HK-A entered 2nd floor dining room and HK-A walked over to a round table where three residents (R4, R5, R11) sat all positioned up to the table. HK-A removed resident items from the table, sprayed the disinfectant cleaner at least 10 inches above the table three times then immediately wiped off the table. When HK-A sprayed the disinfectant cleaner, R4 held her eyes closed. HK-A replaced the resident items back onto the table.</p> <p>- HK-A walked over to a small table located by the window where R6 sat in wheelchair positioned up to the table. HK-A sprayed the disinfectant cleaner in midair at least 10 inches above the table in front of R6 four times. The disinfectant cleaner solution particles were observed while they fell on to the table in mid-air across the room and HK-A immediately wiped off table with white cloth and rinsed out in dining room sink with water.</p> <p>- HK-A walked over to a round table where two residents (R7, R8) sat at the table actively eating root beer floats with a spoon uncovered, and lunch meal trays positioned in front of them with uncovered food. HK-A removed both lunch trays from the table then sprayed the white cloth with disinfectant cleaner two times while she stood next to the table, then wiped the table off. HK-A immediately replaced one of the two meal trays back onto the table. R8 coughed three times and continued eating her root beer float.</p> <p>- HK-A walked over to R9 where he sat in front of the television with a bedside table positioned in front of him, legs draped over the metal bar below with feet placed on the floor. HK-A sprayed the disinfectant cleaner twice over 10 inches above the table and wiped the wet table with the white cloth.</p> <p>- HK-A walked over to R10 where she sat with bedside table positioned in front of her with a root beer float uncovered placed on the table. R10 grabbed the root beer float cup and held it close to her and ate it with a spoon. HK-A sprayed the bedside table twice at least 10 inches above the table then wiped table off with white cloth. End of observation.</p> <p>During an interview on 8/7/24 at 3:36 p.m., R4 stated was not ok with the dining room tables being sprayed with the disinfectant while they (residents) remained at the tables. R4 stated the smell of the spray got to her occasionally and her eyes burned afterwards. R4 stated she noticed her eyes burned for up to 10 minutes after the table was cleaned.</p> <p>(continued on next page)</p>		

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<p>F 0921</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>During an interview on 8/7/24 at 3:45 p.m., HK-A stated the residents should have been removed from the dining room when Rapid Multi Surface Disinfectant Cleaner was used. HK-A stated that disinfectant cleaner was potent stuff and some of them were eating and drinking while the solution was sprayed onto tables and could have been inhaled or gotten into their food/drinks. HK-A stated she had chosen to use the Rapid Multi Surface Disinfectant Cleaner on the tables due to a positive COVID resident in the building, usually used it to clean toilets and floors. HK-A stated she had used Clorox Health Care Fuzion disinfectant cleaner on surfaces with no harsh odor prior to the positive resident.</p> <p>During a continuous observation on 8/8/24, from 8:45 a.m. to 9:30 a.m. on the 3rd floor:</p> <p>- 8:45 a.m. to 9:22 a.m. housekeeping cart was in an unoccupied resident room (301), door was open, and cart had been placed inside the door visible from hallway. No housekeeping staff were seen on 3rd floor. The roll top section on the top of the cart was left opened and all contents were visible: Rapid Multi Surface Disinfectant Cleaner spray bottle 3/4 full of blue colored liquid, airlift air freshener spray can 3/4 full, bleach germicidal wipes, 73 disinfecting acid bathroom cleaner spray bottle 3/4 full of pink colored fluid, label indicated keep out of reach of children, caution avoid contact with eyes and clothing.</p> <p>-At 9:22 a.m. HK-B stepped off the elevator, walked down the hallway to room [ROOM NUMBER], and pushed housekeeping cart down to the end of the west wing hallway.</p> <p>- At 9:23 a.m. to 9:30 a.m. HK-B entered the dining room bagged up a clear garbage bag 1/2 of garbage down the hallway to the cart. At 9:35 a.m. HK-B entered the dining room again, walked to the back of the dining room past the juice machine and through a door/hallway connected to the main hallway, out of sight of surveyor.</p> <p>Observation started again at 9:43 a.m.</p> <p>-At 9:43 a.m. HK-B approached the housekeeping cart, wrung out the wet mop, carried it down hallway to room [ROOM NUMBER] (unoccupied resident room) and mopped the floor. No wet floor sign was observed to be posted. HK-B returned the mop back to cart, pushed cart to elevator, and exited 3rd floor at 9:45 a.m.</p> <p>During an observation on 8/8/24 at 9:50 a.m., room [ROOM NUMBER] floor appeared unkept, dirty, with two four-inch pieces of plastic located on the floor along with a cardboard cover from a box of gloves. An area approximately four to five feet in diameter of tobacco was scattered on floor near where R12 rolled his own cigarettes.</p> <p>During an interview on 8/8/24 at 10:30 a.m., director of environmental services (DES) stated housekeeping arrived at 7:00 a.m. and was expected to have completed the following duties by the end of their shift in all common areas: empty trash, sweep mop floors, dust the rooms like window ledges and spot clean walls as needed. The housekeeper was also responsible for the resident rooms for the entire floor.</p> <p>(continued on next page)</p>		

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<p>F 0921</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>During a follow up interview on 8/8/24 at 1:00 p.m., DES stated no product should be left unattended in the housekeeping cart because it could cause physical harm if a resident got a hold of it. Manufacturers simplify the products and make them more multipurpose and somewhat safer, but we must error on the side of caution to protect residents. DES identified each chemical located on the housekeeping carts as:</p> <ul style="list-style-type: none"> <li>-Rapid Multi surface disinfect cleaner, could be used on any surface, even on dining room tables. DES indicated staff were expected to wait until resident's were done eating and only clean dining rooms after meals so residents would not breath in the chemical spray or get it in their eyes and food as that could have a negative effect on a resident.</li> <li>-Air freshener - base products is water - nonhazardous.</li> <li>-73 Disinfecting acid bathroom cleaner - avoid contact with eyes or clothing. Do not drink. If ingested could have caused some negative effects on a resident. Used to bathrooms, toilet bowel cleaner specifically.</li> <li>-Clorox Bleach Wipes germicidal - Used on high touched surfaces. Keep out of reach of children. (or vulnerable populations)</li> </ul> <p>An environmental tour was conducted with the environmental service consultant (ESC) on 8/8/24, at 10:35 a. m. The following items were observed and verified on 3rd floor:</p> <ul style="list-style-type: none"> <li>-lounge area located at end of the west wing had two cleaning supply items placed on a bedside table to the left of the doorway identified as: Fuzion Cleaner Disinfectant spray bottle full bottle and Lysol disinfectant spray can 1/2 full.</li> <li>- room [ROOM NUMBER] floor appeared unkept, dirty, two four inch pieces of plastic were located on floor along with a cardboard cover from a box of gloves. An area approximately five feet in diameter of tobacco was scattered on the floor near where R12 rolled his own cigarettes. Bathroom fan moderate amount of ceiling dust and dirt hung from it and underneath bathroom sink excessive amount of moisture.</li> <li>-room [ROOM NUMBER] no sign posted for wet floor (post mopping).</li> <li>-dining room floor was dirty and unkept with small pieces of food underneath three tables, and six pieces of paper towels on floor. A wet floor sign was positioned in middle of floor towards back of room with a three-inch pile of dark substance appeared like feces.</li> </ul> <p>Following tour, at 10:45 a.m. ESC stated the two cleaning supplies left in the west wing lounge area should not have been left unattended, anyone could have gotten hold of them and used to their physical detriment and/or misused in their eyes, definitely a safety issue. All housekeeping carts should be locked when unattended and/or brought down to the broiler room when staff went on a break. Regarding room [ROOM NUMBER], ESC indicated it was obvious the room had not been swept. Bathroom sink had not been cleaned underneath; ceiling fan should have been cleaned weekly. Expectation was resident rooms should have been cleaned at least daily.</p> <p>(continued on next page)</p>		

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<p>F 0921</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>During an interview on 8/8/24 at 9:53 a.m., NA-B verified room [ROOM NUMBER] floor was wet without a caution sign placed. NA-B verified resident dining room floor located on 3rd floor was filthy dirty with small pieces of food located under the large round tables. NA-B stated there was a yellow wet floor sign placed over a three-inch diameter brown soft glob located in the back of the room by the juice machine. NA-B was unsure as to what that was. NA-B stated it was obvious the dining room floor had not been swept or mopped in a long while. NA-B stated they had almost fell by the nurse's station when housekeeping used too much water and had grabbed onto the counter otherwise her feet would have slipped out from underneath her. NA-B stated she had talked to HK-B, but he just looked at her, made no comment and walked away. NA-B stated the dining room floor had not been mopped all week and was a continuous problem. NA-B indicated the residents lived here, it was their home, and she would not have wanted her mother living in a facility like this. NA-B also indicated she had talked to the DON and the administrator, and they indicted the agency would be emailed regarding HK-B. NA-B also stated most of the residents on 3rd were able to bring themselves to the dining room and wandered throughout 3rd floor.</p> <p>During an interview on 8/8/24 at 10:00 a.m., registered nurse (RN)-A stated the dining room floor appeared it had not been swept or mopped. RN-A verified she saw garbage (pieces of paper towels, small pieces of food) and dirt all over the floor and was disgusting.</p> <p>During an interview on 8/8/24 at 11:00 a.m., RN-B stated cleaned up the brown spot on the dining room floor, placed contents in a plastic bag and there was no smell noted such as stool. RN-B stated unsure as to what it was thought it was maybe food.</p> <p>During a telephone interview on 8/8/24 at 11:59 p.m., HK-B stated they had worked as housekeeper for four weeks. HK-B stated he had only cleaned three rooms today because had to leave early. HK-B confirmed he had placed the housekeeping cart unlocked in an empty resident's room [ROOM NUMBER] when he left the floor, and that was not ok as there were chemicals in the cart that would be unsafe residents. HK-B verified he had mopped room [ROOM NUMBER] floor and should have placed a wet floor sign to prevent a fall. HK-A indicated when he arrived at work at 7:00 a.m. there was a yellow wet floor sign placed in the dining room over an area that looked like a dog had pooped on the floor, he did not know what it was, could have been chocolate pudding, thought it was taken care of, and probably should have cleaned it up. Lastly, HK-B stated was not aware two cleaning items were left in the west wing lounge and should not have been as it could have been concerning if ingested.</p> <p>During an interview/observation on 8/8/24 at 2:14 p.m., R13 laid in bed. Floor was visibility dirty, numerous (over 8) small areas where stool had dried onto the floor. The room smelled strongly of stool and a garbage can was located on the floor by R13's bed which was full of garbage and included an old colostomy bag with stool in it. R13 stated his colostomy bag leaked all over the floor about 18 hours ago and he had cleaned it up as much as he could. R13 stated he grabbed the larger globs of stool with a towel and flushed it in the toilet or placed in the garbage can, and that was most likely why the room smelled strongly like stool. R13 stated last time his room was cleaned and floor mopped was two days ago. R13 verified three days a week there were no housekeeping staff. R13 indicated he wished they would come in and clean his room and floor more often and felt bad when he asked for help because they were understaffed. R13 indicated he had told staff he needed his floor cleaned but they were so busy.</p> <p>(continued on next page)</p>		

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<p>F 0921</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>During an interview on 8/8/24 at 3:10 p.m., R12 stated his room used to be cleaned everyday but now only gets cleaned once a week. R12 stated it bothered him when the floor was dirty and staff hardly ever wiped things down, took out the garbage or swept the floor. R12 did indicate that someone came in today and cleaned his floor, best cleaning in weeks, wished it could be that way every day.</p> <p>During a telephone interview on 8/8/24 at 3:45 p.m., with the facility's commercial cleaning products representative (CCR) stated Rapid Multi Surface Disinfectant (destroys bacteria) Cleaner (RMSDC) was a disinfectant, had a sticky component, and required to be rinsed afterwards with a sanitizer. CCR indicted the RMSDC was not food safe due to being a disinfectant. CCR also stated the disinfectant could have caused irritation/harm due to direct ingestion into the eyes or throat/mouth especially when the resident had sat close by when sprayed onto a table. CCR verified the RMSDC should have only been used on high touch areas such as bathrooms and door handles/knobs in resident rooms.</p> <p>During an interview on 8/8/24 at 4:00 p.m. administrator stated the dining room was expected to be cleaned (tables wiped down, floor swept and mopped) after meals and not during consumption of food or beverage. Administrator verified would be a big-time safety concern when a resident would have ingested or gotten the sprayed disinfectant into their eyes or food. Administrator stated resident rooms would be expected to be cleaned (high touched areas wiped down, floors swept, and mopped) daily to ensure cleanliness and safety for all residents but the daily log did not reflect that was done, especially on 3rd floor. Administrator also indicated cleaning audits had been completed from 7/19/24, through 7/25/24, on all resident's rooms, but understood housekeeper HK-A had completed those cleanings on the 3rd floor and later discovered he did not. HK-A had worked for the facility for about 3 1/2 weeks and decided to not fill out log forms that indicted which rooms were cleaned daily. Administrator stated housekeeping manager (HKM) should have reviewed the audit documents but on leave now, so not sure what was done with the missed rooms. Administrator stated all housekeeping carts should have been locked when left unattended or placed in the housekeeping storage area on 1st floor during a break. Administrator stated would have prevented anyone getting hold of the chemical solutions and ingested or placed on their skin.</p> <p>Facility document undated, Cleaning of Common Areas identified: Dining room (after breakfast and lunch) sweep dining room floor, dust mop and wet mop floor with germicidal solution, clean all horizontal surfaces by dusting then wiping down with germicidal solution, wipe down chair and arm rests, chair backs, and chair legs if visibly soiled, and empty trash and replace with new trash bag.</p> <p>Safety Data Sheet dated 8/18/22, identified Rapid Multi Surface Disinfectant (RMSD) Cleaner was reserved for industrial and professional use sold as a hazard pictogram (nature and degree of the risks posed by the product represented by pictures). RMSD caused severe skin burns and severe eye damage and harmful if inhaled and must be stored locked up. RMSD should be used in well-ventilated areas. Protective gloves/ protective clothing/ eye protection/ face protection were recommended.</p> <p>Product Specification Document dated 2023, identified Rapid Multi Surface Disinfectant Cleaner product was recommended for use on non-food contact hard surfaces, glass, and soft surfaces only. For spray application, spray 6-8 inches from the surface and allow surface to remain wet for 3 minutes. Allow to air dry or remove solution with a wipe, mop, cloth, or sponge. Diluted solution causes moderate eye irritation and harmful if inhaled. Avoid breathing mist or vapors. Wash skin thoroughly after handling. If swallowed: Rinse mouth. Do NOT induce vomiting. If on skin (or hair): Take off immediately all contaminated clothing. Rinse skin with water/ shower. If inhaled: Remove person to fresh air and keep comfortable for breathing, and 911 should immediately be called.</p> <p>(continued on next page)</p>		

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