

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  285130	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED  04/09/2025
NAME OF PROVIDER OR SUPPLIER  Beatrice Health and Rehabilitation		STREET ADDRESS, CITY, STATE, ZIP CODE  1800 Irving Street Beatrice, NE 68310	

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 0812</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Many</p>	<p>Procure food from sources approved or considered satisfactory and store, prepare, distribute and serve food in accordance with professional standards.</p> <p>47406</p> <p>Licensure Reference Number 175 NAC 12-006.11C</p> <p>The facility failed to ensure hand hygiene was performed in the kitchen in order to prevent the spread of food borne illness. This had the potential to affect all the resident that reside in the facility. The facility census was 55.</p> <p>Findings are:</p> <p>Observation of meal preparation on 4/8/25 at 6:45 AM with Cook-A. Cook-A had gloves on when surveyor arrived. The chili recipe was on the prep table. Cook-A took hamburger out of the packages and placed in a pan and placed on the stove. At 6:49 AM Cook-A performed hand hygiene with soap and water for 13 seconds. Cook-A donned gloves and cut up onion and placed in another pan after measuring. At 6:52 AM Cook-A performed hand hygiene with soap and water for 10 seconds. Cook-A placed 1 can of chili beans, and 3/4 of can of diced tomatoes and put these in the pan, added water, tomato juice, a packet of chili mix, and stirred. At 7:00 AM Cook-A performed hand hygiene with soap and water for 15 seconds.</p> <p>Observation of Cook-A obtaining food temperatures for the South dining room on 4/8/25 at 7:58 am. Cook-A then prepared cold cereal into bowls and placed on counter, put the gallon milk into pan of ice, placed tray lids on cart close to door, opened the steam table pan lids. At 8:03 AM Cook-A applied gloves without hand hygiene and began giving the residents' breakfast plates to the staff to serve.</p> <p>Interview on 4/9/25 at 9:37 AM with the Certified Dietary Manager (CDM) confirmed that the cook should have performed hand hygiene for 20 seconds with soap and water and perform hand hygiene before donning gloves.</p> <p>Record review of the facility's undated Infection Control Prevention and Control Program-Hand Hygiene Policy revealed:</p> <p>The facility considers hand hygiene the primary means to prevent the spread of infection.</p> <p>Use of alcohol-based hand rub containing at least 62% alcohol; or, alternatively, soap (antimicrobial or non-antimicrobial) and water for the following situations:</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 0812</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Many</p>	<p>Before and after eating or handling food.</p>

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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>Provide and implement an infection prevention and control program.</p> <p><b>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY**</b> 47406</p> <p>Licensure reference number 175 NAC 12-006.18(B)</p> <p>The facility failed to ensure hand hygiene was performed during catheter and peri-cares for Residents 28 and 54, failed to ensure wipes were not removed from the wipes container with contaminated gloves for Residents 28 and 54, failed to ensure the drainage catheter bag was kept below the level of the bladder during a transfer for Resident 28, and failed to perform hand hygiene after removal of gloves for Resident 28 to prevent the potential for cross contamination. The facility census was 55.</p> <p>Findings are:</p> <p>A.</p> <p>Record review of Resident 28's Admission Record dated 4/7/25 revealed re-admission to the facility was 6/22/2023.</p> <p>Observation on 4/6/25 at 12:34 PM revealed Resident 28 had sediment in catheter tubing.</p> <p>Observation on 4/07/25 at 10:00 AM Resident 28's urine in catheter tubing is cloudy, mucous with small amount of red tinge.</p> <p>(continued on next page)</p>

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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>Observation of Resident 28's catheter cares on 4/7/25 at 10:30 AM by Nurses aide (NA)-B and (NA)-C. NA-B and NA-C applied gowns and gloves without performing hand hygiene. NA-B placed a paper towel on the floor, sat the graduate container on the paper towel, and emptied the catheter drainage bag without using goggles or a face shield for protection. NA-B did not perform hand hygiene after emptying the urine into the toilet. NA-B and NA-C took resident's slacks down to ankles and took brief off without performing hand hygiene after. NA-B took 3 cleansing wipes from the wipe container using contaminated gloves and wiped resident's left groin and pubis area groin. NA-B used the other wipe and wiped the right groin with noting some BM on the wipe. NA-B then used the same glove and took out another wipe from the container to wipe right groin again. NA-B took out 3 wipes and cleansed the glans of penis, another wipe for the urethral opening and another for the tubing from urethral opening down tube about 2 inches and did not perform hand hygiene. NA-B and NA-C repositioned resident to [gender] left side. NA-C moved trash can with gloved hands and did not change the gloves. NA-C took wipes from wipe container with contaminated gloves 8 different times and used these wipes to cleanse the back area of the right groin and rectal area. NA-C removed gloves without performing hand hygiene, then assisted NA-B with repositioning resident onto [gender] back and placed a new brief under the resident. NA-B took 2 wipes out of container with contaminated gloves and cleansed the right groin again, then took 2 more wipes out of container with same gloves and continued to wipe right groin. NA-B took 2 more wipes from the container and wiped scrotal area in front, then taped the brief on. NA-B and NA-C removed their gowns and gloves and put in the trashcan. NA-B performed hand hygiene with soap and water for 10 seconds and did not put gloves on. NA-B lifted catheter bag and placed it on the bed which was the same level as the bladder and did not wash hands. Both NA's assisted with putting resident's slacks up and placed lift sling under resident, hooked sling to the Hoyer lift, and placed the catheter hook onto hoier lift hook which is by resident's head and above bladder. NA-B and NA-C transferred resident into electric wheelchair, took catheter bag down from sling hook area and finished positioning resident.</p> <p>Interview on 4/7/25 at 11:30 AM with NA-B confirmed [gender] should have washed hands for 20 seconds, should not have taken wipes out of the container with contaminated gloves, and not have the catheter bag above the bladder.</p> <p>Interview on 4/7/25 at 11:31 AM with NA-C confirmed [gender] should not have taken wipes out of the container with contaminated gloves, not have the catheter bag above the bladder, and should wash hands after removing gloves.</p> <p>Interview on 4/7/25 at 1:28 PM with the Director of Nursing (DON) confirmed the NA's (NA- B and NA-C) should not have taken wipes out of the container with contaminated gloves and should not have the catheter bag above the bladder. DON confirmed that staff should wash hands after removing gloves, and wash hands for 20 seconds.</p> <p>Record review of Resident 28's MDS (Minimum Data Set, a federally mandated comprehensive assessment tool used to determine a resident's functional capabilities and helps nursing home staff identify health problems) dated 12/26/24 revealed:</p> <p>-Section C: BIMS (Brief Interview for Mental Status, a brief screener that aids in detecting cognitive impairment) score as follows: 13-15: cognitively intact, 8-12: moderately impaired, 0-7: severe impairment. Resident 28 scored 15 indicating cognitively intact.</p> <p>(continued on next page)</p>		

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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>-Section G: Dependent with all cares, has limitation in both upper and lower range of motion, and uses electric wheelchair.</p> <p>-Section H: Catheter</p> <p>Record review of Resident 28's physician orders dated 4/7/25 revealed:</p> <p>-Catheter Care every shift Date 8/30/2022.</p> <p>-Enhanced Barrier Precautions with High Contact Cares related to Indwelling Catheter every shift - Order Date 1/14/2025.</p> <p>-Monitor Indwelling Catheter for Proper Functioning Every 4 Hours -Order Date 8/30/2022.</p> <p>Record review of Resident 28's Care plan on date 4/7/25 revealed Indwelling Catheter with interventions:</p> <p>-Position catheter bag and tubing below the level of the bladder and away from entrance room door.</p> <p>-Enhanced Barrier Precautions with high contact cares.</p> <p>-Provide catheter care every shift and as needed.</p> <p>Record review of Resident # 28 Diagnosis dated 4/7/25 revealed: Neuromuscular Dysfunction of Bladder, Multiple Sclerosis, Other Reduced Mobility, and Need for assistance with personal care.</p> <p>Record review of Infection Control Prevention and Control Program-Hand Hygiene Policy undated revealed:</p> <p>It is the policy of this facility to implement infection control measures to prevent the spread of communicable diseases and conditions.</p> <p>Transmission-Based Precautions are the second tier of basic infection control and used in addition to Standards Precautions for patients who are or may be infected or colonized with certain infectious agents for which additional precautions are needed to prevent infection transmission.</p> <p>Enhanced Barrier Protection (EBP): expand the use of Personal protective equipment (PPE) and refer to the use of gown and gloves during high-contact resident care activities that provide opportunities for indirect transfer of Multi-drug Resistant Organisms (MDROs) to staff hands and clothing then indirectly transferred to residents or from resident-to-resident. (e.g., residents with wounds and indwelling medical devices are at especially high risk of both acquisition of and colonization with MDROs). Face protection may also be needed if performing activity with risk of splash or spray.</p> <p>Examples of high contact resident care activities requiring gown and gloves use for Enhanced Barrier Precautions include:</p> <p>Dressing, transferring, providing hygiene, changing briefs or assisting with toileting, device care or use: indwelling urinary catheter.</p> <p>(continued on next page)</p>

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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>Record review of Catheter Drainage Bag Policy dated 5/2007 revealed:</p> <p>Position the drainage bag below the level of the resident's bladder.</p> <p>Hand washing should be done immediately before and after any manipulation of the drainage bags and/or tubing.</p> <p>Record review of Infection Control Prevention and Control Program-Hand Hygiene Policy undated revealed:</p> <p>The facility considers hand hygiene the primary means to prevent the spread of infection.</p> <p>Use of alcohol-based hand rub containing at least 62% alcohol; or , alternatively, soap (antimicrobial or non-antimicrobial) and water for the following situations:</p> <p>Before or after direct contact with residents.</p> <p>Before or after handling an invasive device (e.g. urinary catheter, IV access sites).</p> <p>Before moving from a contaminated body site to a clean body site during resident care.</p> <p>After contact with a resident's intact skin.</p> <p>After contact with blood or bodily fluids.</p> <p>45484</p> <p>B.</p> <p>A record review of the facility's undated Perineal Care policy revealed that the basic infection control-concept for pericare is to wash from the cleanest area to the dirtiest area. The policy did not address glove use or application of barrier cream.</p> <p>A record review of the facility's undated Hand Hygiene policy revealed that staff should use an alcohol-based hand rub containing at least 62% alcohol; or, alternatively, soap (antimicrobial or non-antimicrobial) and water for the following situations:</p> <p>Before and after handling an invasive device (e.g. urinary catheters, IV access sites);</p> <p>Before moving from a contaminated body site to a clean body site during resident care; and</p> <p>After removing gloves.</p> <p>The policy also stated that</p> <p>Hand hygiene is the final step after removing and disposing of personal protective equipment, and that the use of gloves does not replace hand hygiene.</p> <p>(continued on next page)</p>

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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>A record review of Resident 54's Admission Record printed 04/07/2025 revealed the resident was admitted to the facility on [DATE] and had diagnoses of a fractured right femur (thigh bone), fractures of both bones of the right forearm, chronic (long-term) respiratory failure, heart failure, an irregular heartbeat, and urine retention.</p> <p>A record review of Resident 54's Order Summary printed 04/07/2025 revealed the resident had an indwelling catheter (a flexible tube that drains urine from the bladder to a bag outside the body).</p> <p>An observation on 04/08/2025 at 7:55 AM of catheter and peri-cares (washing the genitals and anal areas) performed by Nurse Aide (NA) D and NA E revealed that both NAs performed hand hygiene and put on gowns and gloves. NA D then prepared the work area and gathered supplies, and both NAs removed the resident's pants and performed hand hygiene and put on clean gloves. NA D then unfastened Resident 54's incontinence brief, got a wipe out of the package with the right hand, moved the wipe into the left hand and picked up the peri wash spray with the right hand to spray it on the wipe, then put the wipe back into the right hand to clean between Resident 54's labia from front to back and discarded the soiled wipe. NA D then with the same soiled gloves, reached back into the package of wipes with the right hand to get a clean wipe, put the clean wipe into the left hand, picked up the peri wash spray with the same soiled glove on the right hand, sprayed the wipe, then put the wipe back into the right hand and wiped between the resident's labia from front to back. NA D with the same soiled gloves reached into the wipes package with the right hand to get another wipe, put the wipe into the left hand and used the right hand to spray the peri wash spray on the wipe, then put the wipe back into the right hand and used it to wipe the catheter tubing from the urethra out. NA D repeated this process two more times to wipe each side of the resident's groin prior to removing their gloves and performing hand hygiene. NA D then put on clean gloves, assisted Resident 54 to roll onto their left side, and removed the resident's soiled brief. The resident had been incontinent of bowel. Without changing gloves, NA D reached into the wipes package with the right hand to get a clean wipe, put the wipe in the left hand, picked up the peri wash spray in the right hand and sprayed the wipe, then put the wipe in the right hand to wipe between the resident's buttocks. NA D then removed the right glove, patted the resident's buttocks dry using a towel with the gloved left hand, then performed hand hygiene and put on new gloves. NA D then tucked a clean brief and soaker pad under Resident 54, and applied barrier cream to the resident's buttocks and peri anal area using the right hand. NA D and NA E assisted Resident 54 to roll over to finish placing the soaker pad and brief, and with the same soiled glove, NA D applied barrier cream to the resident's labia and groin folds using the right hand.</p> <p>An interview on 04/08/2025 at 8:20 AM with NA D confirmed they should not have put their soiled gloves back into the wipes package, and that they should have changed gloves and performed hand hygiene after applying barrier cream to the buttocks and peri-anal area and before applying it to the labia and groin.</p> <p>An interview on 04/09/2025 at 1:20 PM with the DON confirmed that the NA should not have put soiled gloves back into the package of wipes, and that the NA should not have put barrier cream on the buttocks and peri anal area and then on the labia and groin without changing gloves and performing hand hygiene. The DON further confirmed that when performing peri-care, the NA should have gone front to back.</p>		