

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 285230	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 06/16/2025
NAME OF PROVIDER OR SUPPLIER Heritage Crossings		STREET ADDRESS, CITY, STATE, ZIP CODE 501 North 13th Street Geneva, NE 68361	

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 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>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Licensure reference number 175 NAC 12-006.18</p> <p>The facility failed to ensure staff wear gowns and masks while performing wound care, not wear 2 sets of gloves, and to perform hand hygiene between glove changes for 1 (Resident 4) out of 3 sampled residents to prevent the potential cross contamination. The facility had a census of 38.</p> <p>Findings are:</p> <p>Record review of the facility's policy Enhanced Barrier Precautions (EBP) dated 4/12/24 revealed:</p> <p>It is the policy of [NAME] Senior Living to implement EBP to help prevent the transmission of multidrug-resistant organisms (MDRO).</p> <p>-EBP will be initiated on residents with any of the following: Wounds (chronic wounds such as pressure injuries, diabetic foot ulcer, venous status ulcer, etc), and indwelling medical devices.</p> <p>-Implementation of EBP: Make gowns and gloves available neat or outside of the resident's room. Note: face protection may also be needed if performing activity with the risk of splash or spray (i.e., wound irrigation or tracheostomy care).</p> <p>-High-contact resident care activities include: Wound care for above mentioned wounds (skin tears are not included in chronic wounds).</p> <p>Record review of the facility's undated policy Hand Hygiene Competency revealed:</p> <p>When to wash hands:</p> <p>-before and after gloving.</p> <p>Record review of Resident 4's Clinical Census dated 6/12/25 revealed admission to the facility was on 12/15/22.</p> <p>Record review of Resident 4's Diagnosis Form dated 6/12/25 revealed a diagnosis of pressure ulcer (injury to skin and underlying tissue resulting from prolonged pressure on the skin) of sacral (area at the base of the spine) region, Stage 4.</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 0880</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Record review of Resident 4's Minimum Data Set (MDS, a comprehensive assessment of each resident's functional capabilities) dated 5/27/25 revealed:</p> <p>-BIMS (Brief Interview for Mental Status, a test used to get a quick snapshot of a resident's cognitive function, scored from 0-15, the higher the score, the higher the cognitive function) score was 14.</p> <p>-The resident had no rejection of care, required maximum assistance with toileting hygiene, bathing, upper/lower dressing, footwear, personal hygiene, rolling left and right in bed and transfers. The resident had a catheter and was frequently incontinent bowels.</p> <p>Record review of Resident 4's Physician Orders dated 6/12/25 revealed an order of:</p> <p>-Cleanse coccyx pressure ulcer daily with normal saline and apply collagen sprinkles to wound bed surface and loosely place Silver Alginate rope dressing in wound bed, skin prep to periphery and cover with waterproof super absorbent adhesive edged dressing every day shift related to pressure ulcer of sacral region, stage 4-order 5/30/25.</p> <p>Observation on 6/12/25 at 10:05 AM of wound cares for Resident 4 by MDSC (Minimum Set Data Coordinator) with SSS (Social Service Supervisor) assisting with repositioning. The MDSC and SSS performed hand hygiene with soap and water x 20 seconds, donned (put on) gloves, but did not put on a gown. MDSC cleaned the bedside table with a cleansing wipe, placed a chux (disposable bed pad) on top of table, and then placed some wound supplies on top of chux. MDSC removed gloves, applied hand gel, then put new gloves on. MDSC put more wound supplies on the chux. MDSC performed hand hygiene with soap and water x 20 seconds and donned 2 gloves on each hand stating, I'm from the old school for wearing 2 gloves. MDSC asked the resident if [gender] had any pain and resident said no. MDSC and SSS positioned resident to the right side. MDSC removed the old dressing, then removed the top set of gloves from each hand without performing hand hygiene, then measured the wound using a Q-tip. MDSC removed gloves, applied hand sanitizer, and donned new gloves. MDSC cleansed the wound with Dermal wound cleanser spraying it into the wound with MDSC's face approximately 15 inches away from wound when spraying the wound with cleanser and did not have goggles or face shield on. MDSC placed gauze into the wound with finger and wiped around the wound bed attempting to remove loose exudate MDSC stated. MDSC said, I forgot, we should have gowns on. MDSC removed gloves and went out of room to get 2 gowns, which the MDSC and SSS put on. MDSC then donned new gloves without first performing hand hygiene. SSS performed hand hygiene x 20 seconds. MDSC cleansed wound again with spray, and removed gloves, performed hand hygiene with alcohol gel and donned new gloves. MDSC placed collagen sprinkles in wound, then Silver Alginate dressing into wound bed. MDSC wiped the peri-wound area with a skin prep and applied a mepilex dressing.</p> <p>Interview on 6/12/25 at 10:40 AM with MDSC confirmed [gender] should have worn a gown during the entire time of performing wound care, not to double glove, and perform hand hygiene between glove changes.</p> <p>Interview on 6/12/25 at 10:42 AM with SSS confirmed [gender] should have worn a gown during the entire time of performing wound care.</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>Interview on 6/12/25 at 11:00 AM with the Administrator confirmed the staff should have had gowns on during wound care, masks on when performing wound care, not wear 2 gloves, and hand hygiene between glove changes.</p>