

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 335718	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 11/26/2024
NAME OF PROVIDER OR SUPPLIER The Five Towns Premier Rehab & Nursing Center		STREET ADDRESS, CITY, STATE, ZIP CODE 1050 Central Avenue Woodmere, NY 11598	

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 0641</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Ensure each resident receives an accurate assessment.</p> <p>45349</p> <p>Based on record review and interviews during the recertification survey initiated on 11/20/2024 and completed on 11/26/2024, the facility did not ensure that the Minimum Data Set assessment accurately reflected each resident's status. This was identified for one (Resident #190) of three residents reviewed for Communication. Specifically, Resident #109 utilized hearing aids as per the physician's orders; however, the annual Minimum Data Set assessment for Resident #109, dated 8/17/2024, did not accurately reflect the use of hearing aids or other hearing appliances.</p> <p>The finding is:</p> <p>The facility policy titled MDS Assessments, dated 1/2024 documented that the Resident Assessment Coordinator was responsible for ensuring the Interdisciplinary Team conducted timely and appropriate resident assessments. All persons who have completed any portion of the MDS Resident Assessment Form must sign the document attesting to the accuracy of such information.</p> <p>Resident #190 had diagnoses that included bilateral Hearing Loss. Resident #190's Quarterly Minimum Data Set assessment, dated 5/18/2024 documented a Brief Interview for Mental Status score of 14, which indicated the resident was cognitively intact. The Minimum Data Set assessment documented the resident had moderate hearing difficulty (the speaker has to increase their volume and speak distinctly) and the resident did not use a hearing aid or other hearing appliance.</p> <p>The Annual Minimum Data Set assessment, dated 8/17/2024 documented a Brief Interview for Mental Status score of 14, which indicated the resident was cognitively intact. The Minimum Data Set assessment documented the resident had moderate hearing difficulty (the speaker has to increase their volume and speak distinctly) and the resident did not use a hearing aid or other hearing appliance.</p> <p>A comprehensive care plan titled Communication: Hearing Deficit, effective 11/03/2022 last reviewed on 11/17/2024 documented that the resident was using a hearing aid. The interventions included decreasing background noise when speaking to the resident; staff to speak slowly, clearly, and loudly while facing the resident, and asking the resident to recap what was said to verify understanding.</p> <p>A physician's order dated 12/31/2023 and last renewed 6/17/2024 documented hearing aid (bilateral) insert in A.M.</p> <p>A Physician's order dated 7/29/2024 documented hearing aid (left) insert in A.M.</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 0641</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>A Physician's order dated 8/2/2024 documented hearing aid (right) insert in A.M.</p> <p>During an interview on 11/25/2024 at 2:14 PM Minimum Data Set Coordinator stated the hearing section of the assessment tool is completed by the Minimum Data Set Assessor. They further stated that the Minimum Data Set was coded no for the use of a hearing aid. The Minimum Data Set Coordinator stated the Minimum Data Set was coded incorrectly because the resident was utilizing the hearing aides during the assessment period.</p> <p>The Minimum Data Set Assessor was not available for interview.</p> <p>During an interview on 11/26/2024 at 9:09 AM, the Director of Nursing Services stated that the Minimum Data Set Assessors should review the medical record and code the Minimum Data Set accurately.</p> <p>NYCRR 415.11(b)</p>		

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<p>F 0686</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Provide appropriate pressure ulcer care and prevent new ulcers from developing.</p> <p>34798</p> <p>Based on observation, record review, and staff interviews during the Recertification Survey initiated on 11/20/2024 and completed on 11/26/2024, the facility did not ensure a resident with pressure ulcers received the necessary treatment and services, consistent with professional standards of practice, to promote healing, prevent infection and prevent new ulcers from developing. This was identified for one (Resident #19) of three residents reviewed for Pressure Ulcers. Specifically, during Resident #19's wound care observation on 11/25/2024, Licensed Practical Nurse #1 did not apply the physician-ordered treatment to the wound and the peri-wound (the skin around the wound) area.</p> <p>The finding is:</p> <p>The facility's policy titled Aseptic Dressing Technique, dated 1/2024, documented for the nurses to review the current physician's order for specific treatment instructions and apply treatment as ordered.</p> <p>The facility's policy titled Medication Administration dated 1/2024, documented the licensed nurse assures the six rights: right resident, right medication, right dose, right time, right route, and right documentation. Compare the medication administration record against the prescription label. Always check three times prior to administration of medication.</p> <p>The facility's policy titled Pressure Ulcer and Wound Management dated 1/2024, documented it is the policy of the facility to comply with the New York State Department of Health related to pressure ulcers and prevention. A resident with pressure ulcers receives the necessary treatment and services to promote healing, prevent infection, and prevent new ulcers from developing.</p> <p>Resident #19 was admitted with diagnoses including Dependence on the Ventilator, Diabetes Mellitus, and Stage 4 (full-thickness tissue loss with exposed bone, tendon, or muscle visible within the wound) Pressure Ulcer to the Right Buttock. The 11/7/2024 Quarterly Minimum Data Set assessment documented no Brief Interview for Mental Status score as the resident had severely impaired cognitive skills for daily decision-making. The Minimum Data Set assessment documented the resident had a Stage 4 pressure ulcer.</p> <p>A Comprehensive Care Plan titled Presence of Stage 4 of Right Buttock, effective 8/21/2024 and last updated 11/21/2024, documented Stage 4 pressure ulcer to the right buttock measuring 2.3 centimeters in length, 2 centimeters in width, and 0.5 centimeters in depth with undermining (an undermining wound where the damage under the tissue is larger than what appears at the surface) measuring 2 centimeters deep. The wound bed was noted with 100% pink granulation (new tissue as the wound heals) tissue and moderate serous (pale yellow) drainage.</p> <p>A physician's order dated 11/19/2024 documented: cleanse the right buttock pressure ulcer with normal saline, apply Puracol Plus AG (collagen with silver dressing- collagen is a protein that encourages wound healing and silver is an antimicrobial agent), and cover with a dry protective dressing daily and as needed.</p> <p>(continued on next page)</p>		

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<p>F 0686</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>A physician's order dated 11/21/2024 documented: cleanse the right buttock pressure ulcer with normal saline, apply Clotrimazole (antifungal medication) 1% topical cream to the peri-wound of right buttock pressure ulcer, and then apply treatment to the wound bed.</p> <p>During Resident #19's wound care observation on 11/25/2024 at 10:13 AM, Licensed Practical Nurse #1 was performing the treatment and was assisted by Certified Nursing Assistant #1. The packaging of the collagen wound dressing used during the wound care did not indicate silver as an ingredient. Licensed Practical Nurse #1 stated the treatment dressing included silver as an ingredient and then applied the dressing to the wound. Licensed Practical Nurse #1 did not apply the Clotrimazole cream to the peri-wound and stated they were unaware that Resident #19 had a treatment order for the peri-wound. Licensed Practical Nurse #1 then completed the wound care and applied the dry protective dressing.</p> <p>During an interview on 11/25/2024 at 10:30 AM, Registered Nurse #1, who was another treatment nurse on the unit, reviewed the wound treatment product packaging box for the wound care dressing that Licensed Practical Nurse #1 had applied to Resident #19's wound. Registered Nurse #1 confirmed the treatment product did not include silver as an ingredient.</p> <p>A review of the packaging box revealed that the label provided by the Pharmacy affixed to the box documented: collagen wound dressing by topical route to right buttock, cleanse with normal saline, pat dry, apply Puracol Plus AG, then dry [cover with] protective dressing; however, the treatment product was a generic manufacturer of the collagen product and there was no indication that the product contained silver as an ingredient. The order was refilled as a new order on 11/19/2024.</p> <p>During an interview on 11/25/2024 at 10:52 AM, Pharmacist #1 stated the wound care product that was supplied to the facility by the pharmacy for Resident #19 did not contain silver as one of the ingredients. Pharmacist #1 stated they were not sure why this product was sent to the facility mislabeled, and that they would have to look into it.</p> <p>During an interview on 11/25/2024 at 2:29 PM, the Wound Care Registered Nurse stated the resident's right buttock pressure ulcer peri-wound area was inflamed and that is why the Clotrimazole cream was prescribed. The Wound Care Registered Nurse stated that peri-wound treatment and the actual wound treatment should be applied during the wound care and the order was written that way. The Wound Care Registered Nurse stated Licensed Practical Nurse #1 should have checked the wound product packaging to ensure that the actual product was consistent with the physician's order. Licensed Practical Nurse #1 should have notified their supervisor if the treatment product sent by the pharmacy did not match the physician's orders.</p> <p>During an interview on 11/26/2024 at 8:28 AM, the Director of Nursing Services stated the nurses are supposed to follow the physician's orders and follow the rights of medication administration. All of the treatments (the periwound and the wound) should have been done at the same time and the nurse was expected to know that there was a periwound treatment. The Director of Nursing Services that Licensed Practical Nurse #1 was supposed to check the wound care treatment product box and make sure the product consistent with the physician's orders was being used.</p> <p>10 NYCRR 415.12(c)(1)</p>		

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<p>F 0755</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Provide pharmaceutical services to meet the needs of each resident and employ or obtain the services of a licensed pharmacist.</p> <p>34798</p> <p>Based on observation, record review, and interviews during the Recertification Survey initiated on 11/20/2024 and completed on 11/26/2024, the facility did not ensure that it provided pharmaceutical services (including procedures that assure the accurate acquiring, receiving, dispensing, and administering of all drugs and biologicals) to meet the needs of each resident. This was identified for one (Resident #19) of three residents reviewed for Pressure Ulcers. Specifically, Resident #19 had a physician's order for a collagen wound treatment product that included silver as an ingredient. The treatment product delivered by the Pharmacy had a label affixed to the box by the pharmacy that corresponded with the physician's order (included silver as an ingredient); however, the actual wound care product provided did not include silver as an ingredient.</p> <p>The finding is:</p> <p>The facility's policy titled Pharmacy Services dated 1/2024, documented the facility has contracted with the pharmacy to provide pharmacy and prescription delivery services. The pharmacy will provide a continuum of pharmaceutical services to the facility and essential medication and services for the facility.</p> <p>Resident #19 was admitted with diagnoses including Dependence on the Ventilator, Diabetes Mellitus, and Stage 4 (full-thickness tissue loss with exposed bone, tendon, or muscle visible within the wound) Pressure Ulcer to Right Buttock. The 11/7/2024 Quarterly Minimum Data Set assessment documented no Brief Interview for Mental Status score as the resident had severely impaired cognitive skills for daily decision-making. The Minimum Data Set assessment documented the resident had a Stage 4 pressure ulcer.</p> <p>A Comprehensive Care Plan titled Presence of Stage 4 of Right Buttock effective 8/21/2024 and last updated 11/21/2024, documented an intervention to provide treatments as ordered by the physician. An update on 11/21/2024 included a treatment of collagen with silver alginate.</p> <p>A physician's order dated 11/19/2024 documented: cleanse the right buttock pressure ulcer with normal saline, apply Puracol Plus AG (collagen with silver dressing- collagen is a protein that encourages wound healing and silver is an antimicrobial agent), and cover with a dry protective dressing daily and as needed.</p> <p>During Resident #19's wound care observation on 11/25/2024 at 10:13 AM, Licensed Practical Nurse #1 was performing the treatment and was assisted by Certified Nursing Assistant #1. The packaging of the collagen wound dressing used during the wound care did not indicate silver as an ingredient. Licensed Practical Nurse #1 stated the treatment dressing included silver as an ingredient and then applied the dressing to the wound. Licensed Practical Nurse #1 then completed the wound care and applied the dry protective dressing.</p> <p>(continued on next page)</p>

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<p>F 0755</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>During an interview on 11/25/2024 at 10:30 AM, Registered Nurse #1 (another treatment nurse on the unit) reviewed the wound treatment product packaging box for the wound care dressing that Licensed Practical Nurse #1 had applied to Resident #19's wound. Registered Nurse #1 confirmed the treatment product did not include silver as an ingredient.</p> <p>A review of the packaging box revealed that the label provided by the pharmacy affixed to the box documented: collagen wound dressing by topical route to right buttock, cleanse with normal saline, pat dry, apply Puracol Plus AG then dry protective dressing. The order was refilled as a new order on 11/19/2024. The treatment product was a generic manufacturer of the collagen product (not Puracol) and there was no indication that the product contained silver as an ingredient.</p> <p>During an interview on 11/25/2024 at 10:52 AM, Pharmacist #1 stated the wound care product supplied by the pharmacy for Resident #19 did not have silver as one of the ingredients. Pharmacist #1 stated they were not sure why this product was sent to the facility mislabeled, and would have to look into it.</p> <p>During an interview on 11/26/2024 at 8:28 AM, the Director of Nursing Services stated treatment product box was mislabeled by the Pharmacy. The Director of Nursing Services stated even though the label affixed by the Pharmacy indicated silver as one of the ingredients, the actual treatment product delivered did not include silver. The Director of Nursing Services stated the treatment nurse should have checked the product box and notified the supervisor.</p> <p>10 NYCRR 415.18(d)</p>		

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<p>F 0812</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Procure food from sources approved or considered satisfactory and store, prepare, distribute and serve food in accordance with professional standards.</p> <p>45349</p> <p>Based on record review and interview during the recertification survey initiated on 11/20/2024 and completed on 11/26/2024, the facility did not ensure to store, prepare, distribute, and serve food in accordance with professional standards for food safety. This was evident during Kitchen and Dining Tasks. Specifically, during the kitchen tour on 11/20/2024 tuna salad dated 11/12/2024 was observed in the walk-in refrigerator. Additionally, the temperature of the egg salad, macaroni salad, and potato salad served during the lunch meal was above acceptable standards for safe serving temperatures.</p> <p>The finding is:</p> <p>The undated facility policy and procedure titled Food Storage Temperatures and Storage Life Guidelines documented that foods will be stored at appropriate temperatures and for a specified duration to assure freshness and nutritional adequacy.</p> <p>The facility policy and procedure titled Food Handling and Storage, dated 3/2024, documented that all aspects of food handling from receiving and storing are done according to guidelines and monitored to keep foods free from harmful microorganisms, and contaminants and ensure the quality and freshness are preserved. Items that are opened, need to be labeled with an open date and must be used within the appropriate time frame. Prepared foods must be labeled with the date of preparation, kept covered, and stored appropriately. All refrigerated foods, such as tuna salad, egg salad, etc., will be discarded after 72 hours.</p> <p>The undated facility policy and procedure titled Taking Temperature of Food Items documented food temperatures will be monitored and recorded during preparation, holding, and service to ensure compliance with food safety standards. Temperature standards: cold foods are maintained at or below 41 degrees Fahrenheit. Cold food holding temperatures are measured every two hours during storage or serving. Check and record food temperatures just before service. If temperatures fall outside safe ranges, immediately reheat, chill, or discard the food. Record all temperature readings in the designated food temperature log, including date, time, food item, temperature reading, and corrective action (if any).</p> <p>During the kitchen tour on 11/20/2024 at 9:21 AM with the Food Service Director, a container of tuna salad dated 11/12/2024 was observed in the kitchen refrigerator.</p> <p>A dining observation was conducted on the third floor on 11/20/2024 at 12:04 PM. Dietary Aide #1 was observed serving the lunch meal utilizing individual resident trays that were prepared with sandwiches and other side dishes such as egg salad, potato salad, and or macaroni salad.</p> <p>During an interview on 11/20/2024 at 12:08 PM, Dietary Aide #1 stated that the sandwiches, egg salad, potato salad, and macaroni salad were placed on the trays in the kitchen, prior to delivery to the unit. The food temperature is taken by the Cooks in the kitchen, and they (Dietary Aide #1) do not take the temperatures of either the hot or cold foods on the unit.</p> <p>(continued on next page)</p>		

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<p>F 0812</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>On 11/20/2024 at 12:29 PM, the Executive Chef took the temperatures of the side dishes. The following results were obtained: The egg salad temperature was 68 degrees Fahrenheit, the potato salad temperature was 65 degrees Fahrenheit, and the macaroni salad temperature was 62 degrees Fahrenheit. The Executive Chef was immediately interviewed and stated that the food temperature recorded was high and was not in the appropriate range.</p> <p>During an interview on 11/20/2024 at 12:50 PM, the Dietary Supervisor stated the facility did not maintain temperature logs for the cold food items.</p> <p>During an interview on 11/20/24 at 12:51 PM, the First [NAME] stated they checked the hot food temperatures before sending the meals to the units. They further stated that they do not take cold food temperatures unless the cold food is the main entree.</p> <p>During an interview on 11/20/2024 at 12:58 PM, the Food Service Director the food temperatures obtained during observation on the unit were in the danger zone (the temperature range where bacteria grow most rapidly) and the food was not safe to serve.</p> <p>During an additional interview on 11/26/2024 at 9:56 AM, the Food Service Director stated all refrigerated foods, such as tuna salad, egg salad, etc., should be discarded after 72 hours.</p> <p>10 NYCRR 415.14(h)</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>34798</p> <p>Based on observation, record review, and interviews during the Recertification Survey initiated on 11/20/2024 and completed on 11/26/2024, the facility did not maintain an infection prevention and control program designed to help prevent the development and transmission of communicable diseases and infections. This was identified for one (Resident #19) of three residents reviewed for Pressure Ulcers. Specifically, during Resident #19's wound care observation on 11/25/2024, Licensed Practical Nurse #1 placed rested the normal saline soaked gauze pads directly on the exposed skin of the resident's right hip and then used the same gauze pads to cleanse the resident's right buttock pressure ulcer.</p> <p>The finding is:</p> <p>The facility policy titled Aseptic Dressing Technique, dated 1/2024 documented that aseptic technique (practices that prevent the spread of germs and contamination with microorganisms) is to be performed during all dressing changes and/or treatments unless otherwise indicated by the Physician. A clean barrier is placed on the over-bed table to protect the equipment from contamination.</p> <p>Resident #19 was admitted with diagnoses including Dependence on the Ventilator, Diabetes Mellitus, and Stage 4 (full-thickness tissue loss with exposed bone, tendon, or muscle visible within the wound) Pressure Ulcer to the Right Buttock. The 11/7/2024 Quarterly Minimum Data Set assessment documented no Brief Interview for Mental Status score as the resident had severely impaired cognitive skills for daily decision-making. The Minimum Data Set assessment documented the resident had a Stage 4 pressure ulcer.</p> <p>A Comprehensive Care Plan titled Presence of Stage 4 of Right Buttock, effective 8/21/2024 and last updated 11/21/2024 documented Stage 4 pressure ulcer to the right buttock measuring 2.3 centimeters in length, 2 centimeters in width, and 0.5 centimeters in depth with undermining (an undermining wound where the damage under the tissue is larger than what appears at the surface) measuring 2 centimeters deep. The wound bed was noted with 100% pink granulation (new tissue as the wound heals) tissue and moderate serous (pale yellow) drainage.</p> <p>A physician's order dated 11/19/2024 documented: cleanse the right buttock pressure ulcer with normal saline, apply Puracol Plus AG (collagen dressing with silver-collagen is a protein that encourages wound healing and silver is an antimicrobial agent), and then apply dry protective dressing daily and as needed.</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>During Resident #19's wound care observation on 11/25/2024 at 10:13 AM, Licensed Practical Nurse #1, who was assisted by Certified Nursing Assistant #1, prepared the wound care supplies outside of the resident's room at the treatment cart. Licensed Practical Nurse #1 placed all of the supplies, including the normal saline-soaked gauze pads and dry gauze pads, on a barrier that was on a Styrofoam tray. The nurse brought the tray to the resident's bedside and placed the tray on the overbed table, but did not sanitize the overbed table. Licensed Practical Nurse #1 turned Resident #19 on their left side, removed the dressing from the right buttock wound, washed their hands, and changed their gloves. Licensed Practical Nurse #1 took the normal saline-soaked gauze pads from the Styrofoam tray and placed them directly on the exposed skin of the resident's right hip. Licensed Practical Nurse #1 then used these pads to cleanse the resident's right buttock wound. This infection control breach was brought to Licensed Practical Nurse #1's attention by the surveyor; however, Licensed Practical Nurse #1 continued the treatment and did not re-cleanse the wound.</p> <p>During an interview on 11/25/2024 at 12:23 PM, the Registered Nurse Infection Preventionist/Nurse Educator stated it was not appropriate for Licensed Practical Nurse #1 to place the normal saline soaked gauze pads on the resident's hip and then use those same gauze pads to cleanse the wound. The hip is not considered a clean area. The goal of wound care is to maintain an aseptic technique and placing the normal saline soaked gauze pads on the resident's hip did not maintain an aseptic technique.</p> <p>During an interview on 11/25/2024 at 2:29 PM, the Registered Nurse Wound Care Nurse stated it would not be appropriate to rest the normal saline soaked gauze pads on the resident's hip and then clean the wound with those same gauze pads. During wound care, all of the supplies should be kept on the tray.</p> <p>During an interview on 11/26/2024 at 8:28 AM, the Director of Nursing Services stated it was inappropriate for the nurse to put the normal saline soaked gauze on the resident's hip and then use those gauze pads to cleanse the wound. The nurse did not maintain an aseptic technique and has received educational counseling.</p> <p>10 NYCRR 415.19(a) (1-3)</p>		