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| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 365305 | (X2) MULTIPLE CONSTRUCTION A. Building B. Wing | (X3) DATE SURVEY COMPLETED 08/07/2024 |
| NAME OF PROVIDER OR SUPPLIER Legacy Willoughby | | STREET ADDRESS, CITY, STATE, ZIP CODE 37603 Euclid Ave Willoughby, OH 44094 | |

For information on the nursing home's plan to correct this deficiency, please contact the nursing home or the state survey agency.

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| (X4) ID PREFIX TAG | SUMMARY STATEMENT OF DEFICIENCIES (Each deficiency must be preceded by full regulatory or LSC identifying information) |
| <p>F 0584</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p> | <p>Honor the resident's right to a safe, clean, comfortable and homelike environment, including but not limited to receiving treatment and supports for daily living safely.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 47570</p> <p>Based on observation, interview and record review, the facility failed to maintain a clean, comfortable, homelike environment for Resident #134 and Resident #109. This affected two residents (#134 and #109) of three residents reviewed for physical environment. The facility census was 128.</p> <p>Findings include:</p> <p>Review of the closed record for Resident #134 revealed an admitted [DATE] with diagnoses including congestive heart failure, anemia, hypertension, hyperlipidemia and glaucoma.</p> <p>Review of the Minimum Data Set 3.0 assessment dated [DATE] revealed Resident #134 had intact cognition.</p> <p>Review of Resident Grievance Concern Log dated 01/15/24 revealed the family of Resident #134 had concerns about a window in Resident #134's room.</p> <p>Interview on 07/23/24 at 3:05 P.M. with Resident #134's family member revealed when the resident was residing in the facility during February 2024 the family member felt the room was not being cleaned thoroughly because there were spider webs formed up the entire right side of the outside of the window sill and underneath the sink in the room there was an exposed sink pipe and a black substance on the wall under the sink and under the sink counter. The family member said she would submit photos as evidence. She said the photos were taken before Resident #134 was discharged in February 2024.</p> <p>Review of photo evidence submitted by Resident #134's family member revealed a photo of spider webs formed up the entire right side of the outside window sill and another picture of the underside of a sink with open pipes and black like substance on the wall and under the sink counter.</p> <p>Observation on 07/23/24 at 4:00 P.M. of the room previously occupied by Resident #134 and at the time of the survey was occupied by Resident #109 revealed spider webs remained up the entire right side of the outside window sill upon looking out the window and the sink pipe was exposed with black like substance on the wall and under the sink counter which were the same details in the pictures submitted by Resident #134's family.</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.

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| LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE | TITLE | (X6) DATE |
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| <p>F 0584</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p> | <p>Interview on 07/23/24 at 4:12 P.M. with Maintenance Director # 395 verified the spider webs had not been cleaned from the window sill and the pipe under the sink remained exposed with black like substance on the wall and under the counter.</p> <p>Interview on 07/23/23 at 4:15 P.M. with the Administrator revealed the Administrator reviewed the photos and verified that in the photo spider webs formed up the entire right side of the outside window sill and another picture of the underside of a sink with open pipes and black like substance on the wall and under the sink counter.</p> <p>Review of facility policy titled, Routine Cleaning dated 11/30/23, revealed rooms and areas were disinfected according to current Centers for Disease Control recommendation for healthcare facilities.</p> <p>This deficiency represents non-compliance investigated under Complaint Number OH00155736</p> | | |