

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 366175	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 10/23/2024
NAME OF PROVIDER OR SUPPLIER Carecore at the Meadows		STREET ADDRESS, CITY, STATE, ZIP CODE 11760 Pellston Court Cincinnati, OH 45240	

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 - Some</p>	<p>Procure food from sources approved or considered satisfactory and store, prepare, distribute and serve food in accordance with professional standards.</p> <p>43062</p> <p>Based on observations, interviews, and record review, the facility failed to prepare food in a safe and sanitary manner. This had the potential to affect all residents with the exception of three Residents (#09, #19, and #39) who does not receive any food from the facility kitchen. The facility census was 83.</p> <p>Findings include:</p> <p>Observation of the kitchen on 10/23/24 at 11:54 A.M. with Dietary Manager (DM) # 195 revealed the following:</p> <ul style="list-style-type: none"> a) The paint under the handwashing sink was bubbled up and peeling off. b) The soap dispenser near the handwashing sink was broken. c) The walls near the floor were heavily soiled with an unknown black and brown substance and pieces of the wall were missing. d) The ceiling near the walk-in refrigerator had an unknown brown colored substances splattered across it including on the light fixture. e) The appliances throughout the kitchen were heavily soiled with liquid splatter stains running down the sides. f) Multiple trash cans were heavily soiled with liquid splatter stains running down the sides. g) The counter near the sink contained an unknown brownish substance. h) There was a large white bath blanket with brown and yellow stains underneath the garbage disposal. The floor around the garbage disposal was heavily soiled with dirt and a black substance. i) A large white bath blanket with brown stains was stuffed under the three-compartment sink . j) The dish washer was heavily soiled with food debris, dirt, and crumbs across the top of it. <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 - Some</p>	<p>Interview with DM #195 on 10/23/24 at 12:10 P.M. verified the current conditions in the kitchen. DM #195 stated the black substance throughout the kitchen was consistent with mold. DM #195 stated the bath blankets were under the garbage disposal and the three compartment sinks due to the pipes leaking DM #195 stated the kitchen was in need of a deep cleaning.</p> <p>Interview with Maintenance Supervisor (MS) #106 on 10/23/24 at 1:05 P.M. revealed the three-compartment sink was leaking a few weeks ago but he repaired it. MD #106 indicated he was not aware it was leaking again. MS #106 stated the black substance across the kitchen appeared to be mold.</p>		

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<p>F 0921</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</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>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 43062</p> <p>Based on observations, interviews, and record review, the facility failed to maintain a clean and sanitary environment. This affected three (#10, #59, and #63) of the three residents reviewed. The facility census was 87.</p> <p>Findings include:</p> <p>1) Review of the medical record for Resident #10 revealed the resident was admitted to the facility on [DATE]. Diagnoses included vascular dementia, insomnia, diabetes mellitus (DM), obstructive sleep apnea, essential primary hypertension, anxiety disorder, chronic kidney disease, and hyperlipidemia.</p> <p>Review of the Minimum Data Set (MDS) assessment, for Resident #10, dated 08/09/24, revealed Resident #10 was cognitively intact.</p> <p>Interview with Resident #10 on 10/23/24 at 12:21 P.M., revealed the floors were so dirty in her room, she attempted to clean them herself with a cloth and soap. Observation of the resident's room at the same time revealed two large peeling black non-skid strips in front of Resident #10's bed. The floor in the resident's room and bathroom were very sticky. The bathroom walls were stained with brown splatter stains running down the walls. The floor in Resident #10's bathroom was lifted up around the toilet and the floor was soiled. Resident #10's toilet was soiled and heavily stained with an unknown brown substance.</p> <p>Interview with Licensed Practical Nurse (LPN) #161 on 10/23/24 at 12:23 P.M. verified the condition of the resident's room. LPN #161 stated the black strips on the floor were from a previous Resident's fall interventions.</p> <p>2) Review of the medical record for Resident #59 revealed the resident was admitted to the facility on [DATE]. Diagnoses included, neurocognitive disorder with Lewy bodies, diabetes mellitus, history of Coronavirus 2019 (COVID-19), insomnia, edema, and major depressant disorder.</p> <p>Review of the MDS assessment, dated 10/01/24, revealed Resident #59 had impaired cognition.</p> <p>Observation of Resident #59's room on 10/23/24 at 12:14 P.M. with Housekeeping Director (HD) #179 revealed the resident's floor was sticky and soiled with a brown and black stain all around the walls. There was a bed frame with no mattress and missing a wheel which made the bed tilt to one side. There were two concrete bricks stacked next to the broken wheel on the floor. HD #179 verified the condition of the resident's room and the broken bed in the resident's room. HD #179 stated the two bricks stacked next to the bed was an attempt to fix the bed by maintenance staff. HD #179 stated the broken bed, and bricks were safety hazards for a memory care unit.</p> <p>Interview with Maintenance Supervisor (MS) #106 on 10/23/24 at 1:05 P.M., verified the broken bed frame and bricks located in Resident #59's room. MS #106 verified the concrete blocks lying on the floor next to the broken bed was an attempt to repair the broken bed frame.</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 - Few</p>	<p>3) Review of the medical record for Resident #63 revealed the resident was admitted to the facility on [DATE]. Diagnoses included ataxia, major depressant disorder, osteoarthritis, dementia, anxiety, Alzheimer's disease, kidney disease, and anxiety. The resident received Hospice services.</p> <p>Review of the MDS assessment, dated 09/03/24, revealed Resident #63 had severely impaired cognition.</p> <p>Observation of Resident #63's room on 10/23/24 at 12:11 P.M. with HD #179 revealed the cove base was hanging from the wall and the base of the wall had black spots throughout the resident's room. The floor was sticky and soiled, and a white towel stained with an unknown yellow substance which was pushed up against the television plug. HD #179 stated the towel was soaked with urine and the floor was sticky related to the resident's urine.</p> <p>Review of the facility policy titled, Quality of Life-Homelike Environment, dated May 2017, revealed the facility will provide residents with a clean, safe, and homelike environment. This includes a clean, safe, and orderly environment.</p> <p>This deficiency represents non-compliance investigated under Complaint Number OH00158493.</p>		