

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 366220	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 12/31/2024
NAME OF PROVIDER OR SUPPLIER Harmony Court Rehab and Nursing		STREET ADDRESS, CITY, STATE, ZIP CODE 6969 Glenmeadow Lane Cincinnati, OH 45237	

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** 35770</p> <p>Based on medical record review, observation, staff interview, and review of the facility policy, the facility failed to ensure staff donned appropriate personal protective equipment (PPE) prior to provision of care for residents on enhanced barrier precautions (EBP.) This affected two (Residents #11 and #13) of three residents reviewed. The facility census was 107 residents.</p> <p>Findings include:</p> <p>1. Review of the medical record for Resident #13 revealed an admitted [DATE] with diagnoses including hypotension, gastrotomy, colostomy, obesity, and dysphagia.</p> <p>Review of the Minimum Data Set (MDS) assessment for Resident #13 dated 12/07/24 revealed the resident had mild cognitive deficits and required substantial to total dependence with activities of daily living (ADLs.)</p> <p>Review of care plan for Resident #13 dated 09/23/24 revealed the resident required EBP related to an indwelling medical device (colostomy) regardless of multi drug resistant organisms (MDROs). Interventions included staff should don gowns and gloves prior to and during high-contact resident care activities that provided opportunities for transfer of MDROs to staff hands and clothing. Examples of high-contact interactions included dressing, bathing, showering, transferring, providing hygiene, changing linens, changing briefs/toileting, and device care or use.</p> <p>Observation of incontinence care for Resident #13 on 12/31/24 at 10:00 A.M. per Certified Nursing Assistant (CNA) #33 revealed the aide did not don a gown prior to providing incontinence care to the resident.</p> <p>Interview on 12/31/24 at 10:05 A.M. with CNA #33 confirmed that she did not don a gown prior to providing incontinence care for Resident #13.</p> <p>2. Review of the medical record for Resident #11 revealed an admitted [DATE] with diagnoses including bipolar disorder, schizophrenia, and psychotic disorder.</p> <p>Review of the MDS assessment for Resident #11 dated 10/19/24 revealed the resident had no cognitive deficits and was independent with ADLs.</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>Review of the care for Resident #11 plan dated 06/11/23 revealed the resident required EBP related to a left ankle wound. Interventions included staff should don gowns and gloves prior to and during high-contact resident care activities that provided opportunities for transfer of MDROs to staff hands and clothing. Examples of high-contact interactions included dressing, bathing, showering, transferring, providing hygiene, changing linens, changing briefs/toileting, and device care or use.</p> <p>Observation of wound care for Resident #11 on 12/31/24 at 10:16 A.M. per Licensed Practical Nurse (LPN) #32 revealed the nurse did not don a gown prior to providing wound care for the resident.</p> <p>Interview on 12/31/24 at 10:25 A.M. with LPN #32 confirmed that she did not don a gown prior to providing wound care for Resident #11.</p> <p>Review of the facility policy titled Enhanced Barrier Precautions dated 03/22/24 revealed EBP were indicated for residents with indwelling medical devices and wounds even if the resident was not known to be infected or colonized with an infection. EBP measures included staff should don gowns and gloves during high contact resident care activities.</p>		