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Form Approved OMB
No. 0938-0391

| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: | (X2) MULTIPLE CONSTRUCTION | (X3) DATE SURVEY COMPLETED |
|---|---|---|---|
| | 375230 | A. Building<br>B. Wing | 06/19/2024 |

| NAME OF PROVIDER OR SUPPLIER | STREET ADDRESS, CITY, STATE, ZIP CODE |
|---|---|
| Leisure Village Health Care Center | 2154 South 85th East Avenue<br>Tulsa, OK 74129 |

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<br>(Each deficiency must be preceded by full regulatory or LSC identifying information) |
|---|---|
| F 0677<br><br>Level of Harm - Minimal harm or potential for actual harm<br><br>Residents Affected - Few | Provide care and assistance to perform activities of daily living for any resident who is unable.<br><br>46703<br><br>Based on record review and interview, the facility failed to provide showers for two (#5 and #6) of two sampled residents reviewed for assistance with activities of daily living.<br><br>The administrator identified 76 residents resided in the facility.<br><br>Findings:<br><br>1. Resident #5 had diagnoses which included COPD and Parkinson's disease.<br><br>Resident #5's quarterly assessment, dated 05/24/24, documented Resident #5's cognition was intact.<br><br>On 06/18/24 at 2:14 p.m., Resident #5 stated they have not had a shower in over a week. They stated they feel dirty. The staff tells them they don't have enough staff to get showers done.<br><br>On 06/18/24 at 2:14 p.m., Resident #6 stated they had not had a shower in over a week. They stated they only get a shower when they have a doctor's appointment.<br><br>On 06/19/24 at 2:10 p.m., CNA #6 stated they can't always get baths done because they run out of time.<br><br>On 06/19/24 at 3:00 p.m., CNA #5 stated the documentation for showers is very inconsistent and documents showers were done when they were not done because they didn't know how to document correctly.<br><br>On 06/19/24 at 3:30 p.m., the DON stated they are in the process of hiring bath aides to just take care of showers and baths. |

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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| F 0725<br><br>Level of Harm - Minimal harm or potential for actual harm<br><br>Residents Affected - Few | Provide enough nursing staff every day to meet the needs of every resident; and have a licensed nurse in charge on each shift.<br><br>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 46703<br><br>Based on record review and interview, the facility failed to answer call lights in a timely manner for three (#2, #3 and #4) of three residents reviewed for sufficient staff to meet the needs of residents.<br><br>The administrator identified 76 residents resided in the facility.<br><br>Findings:<br><br>A document dated January 2024, titled Resident Council Minutes, stated in part .A. Nursing - call lights not being answered. Number of residents who share the concern: 10.<br><br>A document dated February 2024, titled Resident Council Minutes, stated in part .B. Nursing - answering call lights and not retuning. Taking too long to answer call lights.<br><br>A document dated March 2024, titled Grievance/Missing Property Monthly Tracking Log, stated in part .call lights not answered timely.<br><br>A document titled Device Activity Report dated 06/01/24 through 06/03/24 documented the following: A) on 06/01/24 the call light was activated for 23 minutes in room [ROOM NUMBER]; B) on 06/01/24 the call light was activated for 23 minutes in room [ROOM NUMBER]; C) on 06/02/24 the call light was activated for 24 minutes in room [ROOM NUMBER]; D) on 06/02/24 the call light was activated for 60 minutes in room [ROOM NUMBER]; E) on 06/02/24 the call light was activated for 27 minutes in room [ROOM NUMBER]; F) on 06/02/24 the call light was activated for 46 minutes in room [ROOM NUMBER]; G) on 06/02/24 the call light was activated for 49 minutes in room [ROOM NUMBER]; H) on 06/03/24 the call light was activated for 31 minutes in room [ROOM NUMBER]; and I) on 06/03/24 the call light was activated for 28 minutes for room [ROOM NUMBER].<br><br>On 06/14/24 at 2:00 p.m., Resident #2 stated it can take 45 minutes to an hour to get the call light answered. They stated it is mostly on the night shift that call lights are not answered.<br><br>On 06/17/24 at 2:18 p.m., Resident #3 stated they have waited for up to an hour to get the call light answered. They reported their colostomy bag has busted several times while waiting for the call light to be answered.<br><br>On 06/17/24 at 2:22 p.m., Resident #4 stated it takes a long time, over an hour at times to get the call light answered.<br><br>On 06/18/24 at 11:10 a.m., CNA #2 stated they have enough time to get their assignment done. They stated it should take no longer than 5 minutes to answer a call light.<br><br>On 06/18/24 at 11:15 a.m., CNA #3 stated if they have three CNAs they can get done with their work. They stated a call light should be answered in 5-10 minutes.<br><br>(continued on next page) |

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| F 0725<br><br>Level of Harm - Minimal harm or potential for actual harm<br><br>Residents Affected - Few | On 06/18/24 at 1:00 p.m., LPN #1 stated they watch the call light board and if they do not see the CNAs on the floor, they answer the call light. They stated a call light should be answered in 5-10 minutes.<br><br>On 06/18/24 at 1:07 p.m., LPN #2 stated call light should be answered in 5 minutes. They stated if they do not see the CNAs close by, they will answer the call light.<br><br>On 06/18/24 at 1:15 p.m., the DON stated they do not have a written policy for answering call lights. They stated call lights should be answered in 5-10 minutes, it is everyone's responsibility to answer call lights. |

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| F 0880<br><br>Level of Harm - Minimal harm or potential for actual harm<br><br>Residents Affected - Few | Provide and implement an infection prevention and control program.<br><br>46703<br><br>Based on observation and interview, the facility failed to ensure infection control practices were followed during the administration of medication.<br><br>The administrator identified 76 residents resided in the facility.<br><br>Findings:<br><br>On 06/19/24 at 10:20 a.m., CMA #1 was observed popping pills into a medication cup then using bare fingers to break the potassium pill in two before giving to a resident.<br><br>O 06/19/24 a.m., CMA #1 stated they should have used gloves and a pill cutter. |