

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 375359	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 01/16/2025
NAME OF PROVIDER OR SUPPLIER Glenhaven Retirement Village		STREET ADDRESS, CITY, STATE, ZIP CODE 3003 Iowa Chickasha, OK 73023	

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 0925</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Make sure there is a pest control program to prevent/deal with mice, insects, or other pests.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 46702</p> <p>Based on observation, record review, and interview, the facility failed to maintain an effective pest control program.</p> <p>The DON identified 52 residents resided in the facility.</p> <p>Findings:</p> <p>An undated facility Pest policy, read in part, [name of facility withheld] will have monthly pest services to ensure that the facility remains pest free.</p> <p>On 01/16/24 at 8:32 a.m., the DON stated they had reports of spiders, roaches, and mice at least four times a week.</p> <p>On 01/16/25 at 8:46 a.m. an initial tour of the building was conducted. The following observations were made,</p> <p>a. in room C16 there were 14 dead roaches on the floor and roach egg sacks were visible,</p> <p>b. in room C16 there was one live roach located inside the dresser drawer next to the bed with roach eggs and dead baby roaches, and</p> <p>c. dead roaches were located behind the juice machine in the kitchen.</p> <p>On 01/16/25 at 8:47 a.m., the DON was present in room C16. They stated they saw one live roach and all the dead roaches above during the intital tour.</p> <p>On 01/16/25 at 9:35 a.m., Resident #5 was asked about pest concerns. They stated they saw a roach last night on the wall next to their bed and this morning.</p> <p>On 01/16/25 at 9:39 a.m., three dead roaches were observed behind the refrigerator in room [ROOM NUMBER]B.</p> <p>On 01/16/25 at 9:42 a.m., one dead roach was observed in the hall on the floor outside of room [ROOM NUMBER]B.</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 0925</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>On 01/16/24 at 9:45 a.m., one dead roach and one live roach was observed under the bed in room C17.</p> <p>On 01/16/25 at 9:45 a.m., Resident #4 stated they saw a live roach this morning in their room.</p> <p>On 1/16/24 at 9:00 a.m., the dietary manager was asked to discuss concerns related to pests. They stated the facility was having problems with roaches in the kitchen when they turned the lights on in the morning.</p> <p>On 01/16/25 at 9:12 a.m. the administrator in training was asked about the pest management. They stated they did not feel the previous company was effective because they still had a roach problem. They stated they hired a new company who came out on 01/13/25. They stated roaches were identified in room C16.</p> <p>On 1/16/25 at 9:17 a.m., the administrator stated the company they had used for pest management was not effective. They stated roaches were on B hall, in the kitchen, and in three resident rooms.</p> <p>On 01/16/25 at 9:51 a.m., CNA #1 was asked to discuss the pests at the facility. They stated the facility had a roach problem and they treated on 01/13/25.</p> <p>On 01/16/25 at 10:09 a.m., CMA# 1 was asked about the pests in the facility. They stated, They have been here for a hot minute. They stated the roaches seemed to be present and they were an ongoing problem for quite a few years.</p> <p>On 01/16/24 at 10:15 a.m., Resident #6 was asked about concerns related to pests. They stated they saw a live roach on 01/15/24 in their room.</p>		