

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 385136	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 07/24/2024
NAME OF PROVIDER OR SUPPLIER Glisan Care Center		STREET ADDRESS, CITY, STATE, ZIP CODE 9750 NE Glisan Street Portland, OR 97220	

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 0689</p> <p>Level of Harm - Actual harm</p> <p>Residents Affected - Few</p>	<p>Ensure that a nursing home area is free from accident hazards and provides adequate supervision to prevent accidents.</p> <p>41453</p> <p>Based on interview and record review it was determined the facility failed to ensure cognitively impaired residents did not have access to excessively hot liquids for 1 of 3 sampled residents (#2) reviewed accidents and hazards. This failure resulted in Resident 1 sustaining a second-degree burn (partial thickness involving the first two layers of skin) to her/his thigh. Findings include:</p> <p>Resident 2 was admitted to the facility in 9/2022 with diagnoses including diabetes.</p> <p>A 11/13/23 progress note indicated Staff 9 (Agency CNA) notified Staff 2 (LPN) that Resident 2 spilled hot coffee on her/his lap.</p> <p>A 11/13/23 facility investigation revealed nursing staff took the coffee cart out of the kitchen prior to the coffee cooling to a safe temperature. Resident 2 was provided with coffee that was too hot (above 155 degrees). The resident was found by Staff 9 after she/he spilled the coffee in her/his lap.</p> <p>A 11/23/23 progress note indicated Resident 2 was assessed to have a second degree burn described as a large area of reddened skin noted to the right lateral thigh with several ruptured blisters with clear fluid drainage. The resident reported pain.</p> <p>On 7/22/24 at 11:02 AM and 7/24/24 at 12:36 PM Staff 7 (Dietary Aide) and Staff 8 (Cook) confirmed the coffee was brewed too hot to serve and was supposed to cool before it was served to residents.</p> <p>On 7/22/24 at 11:28 AM Staff 1 (Administrator) stated staff went into the kitchen and took the coffee cart out prior to the coffee cooling to a safe temperature on 11/13/23 which resulted in Resident 2 receiving a second-degree burn. Staff 1 stated there were no other incidents related to hot coffee temperatures since the 11/13/23 incident. Staff 1 stated the facility had already completed their own corrections.</p> <p>On 7/23/24 at 11:35 AM and 12:15 PM Staff 3 (CNA) and Staff 2 (LPN Resident Care Manager) stated coffee temperatures were not checked prior to Resident 2's incident.</p> <p>The deficient practice was determined to be past non-compliance as the facility self-identified this problem (on 11/13/23) and initiated a plan of correction that included:</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 0689</p> <p>Level of Harm - Actual harm</p> <p>Residents Affected - Few</p>	<ul style="list-style-type: none"> - Policy/procedure change related to coffee preparation. - audit for other potentially effected residents. - All staff education related to hot liquid safety. - audits of new process for distributing hot beverages to ensure completion. - coffee machine brew temperature lowered. <p>These corrections were completed 11/16/23.</p>		