

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 455522	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 09/17/2024
NAME OF PROVIDER OR SUPPLIER Tlc West Nursing and Rehabilitation		STREET ADDRESS, CITY, STATE, ZIP CODE 1700 Marlandwood Rd Temple, TX 76502	

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 0550</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Honor the resident's right to a dignified existence, self-determination, communication, and to exercise his or her rights.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 49410</p> <p>Based on interview, and record review, the facility failed to care for residents in a manner and in an environment that promotes maintenance or enhancement of his or her quality of life for 1 of 4 residents (resident #17) reviewed for resident rights.</p> <p>The facility failed to ensure Resident #17 was not given showers late at night since that was not his preference.</p> <p>This failure could place residents at risk for diminished quality of life.</p> <p>The findings include:</p> <p>Record review of Resident #17's face sheet revealed Resident #17 was a [AGE] year-old male with an admitted [DATE] into the facility. Resident #17 has a primary diagnosis of bacterial infection (infection inside the body created by bacteria), resistance to carbapenem (when germs are not healed by antibiotics), acute respiratory failure (not enough oxygen or too much carbon dioxide in your body), and quadriplegia (paralysis of all four limbs).</p> <p>Record review of Resident #17's MDS assessment revealed a BIMS score of 15 which noted the resident had no cognitive impairment. The MDS revealed that Resident #17 was dependent for ADL needs including showering and bathing. Resident #17 being dependent meant the helper does all of the effort while the resident does not effort in completing the task. Or the assistance of two or more helpers is needed to complete the task.</p> <p>Record review of Resident #17's care plan revealed there were no preferences for a late shower at the facility. It also revealed that Resident #17 is dependent for ADL's due to a diagnosis of functioning quadriplegia, with staff would anticipate and meet the needs of the resident.</p> <p>Record review of Resident #17's shower log revealed he had received his showers multiple times after 09:00 PM in the month of August and September. The log showed:</p> <ol style="list-style-type: none"> 1. Shower provided on 08/25/2024 at 12:10AM with total assistance provided 2. Shower provided on 08/31/2024 at 11:10PM with total assistance provided <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 0550</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>3. Shower provided on 09/07/2024 at 11:53PM with total assistance provided</p> <p>4. Shower provided on 09/11/2024 at 12:03AM with total assistance provided</p> <p>5. Resident's shower schedule was for Tuesday, Thursday and Saturdays provided on the evening shift.</p> <p>On 09/15/2024 at 01:54 PM, an interview was conducted with Resident #17. Resident #17 stated that he received showers three times a week at night.</p> <p>On 09/16/2024 at 11:00 AM, an interview with Resident #17 revealed that his typical shower times had been any time after 9:00 pm. He stated that it was not a preference of his, but the staff shower everybody else first before him. He stated they wait to shower him so that he can get his treatment and then go to bed. He stated that a late shower was better than no shower. Resident #17 stated that he would wait in his wheelchair until after staff gave him a shower so he could go to bed.</p> <p>On 09/17/2024 at 12:03 PM an interview was conducted with CNA G that revealed Resident #1's showers were provided at night. CNA G stated that Resident #17 would often leave the premises early in the morning and would be gone all day. CNA G believed that it was preference of Resident #17 to receive showers late at night.</p> <p>On 09/17/2024 at 12:45 PM, an interview was conducted with CNA F that revealed residents are offered at least 3 showers per week. CNA F stated that Resident #17 typically received showers on Tuesdays, Thursdays and Saturdays at night. CNA F stated that Resident #17 is provided showers late at night due to Residents #17 being out of the facility until 9 PM. CNA F believed that it was Resident #17's preference to shower at night then go to bed. CNA F stated Resident #17 has not wanted to take a shower early. CNA F stated that Resident #17 could feel upset for having to wait for showers until late at night. CNA F reported she received training on resident rights. She stated an example of resident rights are the right to be treated with dignity and respect, right to take showers and the right to come and go whenever they want.</p> <p>On 09/17/2024 at 01:47PM, an interview was conducted with DON that revealed residents are offered showers three times a week at minimum with Sunday being a day without showers. DON A stated showers are provided on day and evening shifts depending on where the resident resided in the facility. DON A stated there was not a specific time that the showers should get completed each day. DON A stated that the schedule is flexible for residents. DON A stated that there are residents that leave the facility in their wheelchair and do not return until late at night which resulted in late showers. DON A stated it is not normal to receive a shower after midnight but it has happened before due to residents not returning to the facility until late at night. DON A stated that there is no documentation to identify when a resident was late to the facility resulting in a late shower. DON A stated that residents have the right to shower when they want to. DON A stated that Resident #17 will typically arrive back to the facility late at night and refuses a shower. DON A stated Resident #17 likes to get up in the morning and leave the facility. DON A denied offering an earlier shower time to Resident #17. DON A stated documentation for late showers for Resident #17 meant that Resident #17 got back to the facility late that night.</p> <p>(continued on next page)</p>		

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<p>F 0550</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>On 09/17/2024 at 2:09PM, an interview was conducted with ADM. ADM reported that showers are provided during the day and night shift depending on the preferences of the resident. ADM reported his expectation is that all residents are offered showers 3 times a week or as needed. ADM reported that there was no expectation for when showers should be completed by during the night shift due to residents not wanting to take a shower until later. ADM stated Resident #17 would stay out in the community a lot, and he will come and go late at night. ADM stated that Resident #17's out of the facility schedule is not routinely documented to know when a late night shower occurred due to resident being out of the facility. ADM stated that Resident #17 had been offered earlier shower times but denied Resident #17 wanting an earlier shower time.</p> <p>RR of facility provided policy titled Your Rights and Protections as a Nursing Home Resident with an unknown date revealed that resident have the right to:</p> <ol style="list-style-type: none"> 1. To participate in the decisions that affects your care.