STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	675112	A. Building B. Wing	06/04/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
Viridian Wellness & Rehabilitation	1112 Gibbins Rd Arlington, TX 76011

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)
F 0690 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	Provide appropriate care for residents who are continent or incontinent of bowel/bladder, appropriate catheter care, and appropriate care to prevent urinary tract infections. **NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on observations, interview and record review the facility failed to ensure a resident who was incontinent received appropriate treatment and services for 1 of 3 (Resident #1) reviewed for quality of care. The facility failed to ensure that CNA A provided perineal care according to professional standards of practice when she cleaned a female resident's (Resident#1) perineal area from back to front, rather than from front to back.This failure could place residents the risk of urinary tract infections and compromised health and safety.Findings included: Record review of Resident #1's Quarterly MDS Assessment, dated 04/15/26, reflected a [AGE] year-old female, admitted [DATE] with reentry on 04/18/2025. There was no BIMS record indicating no interview was conducted. The resident had diagnoses which included neurogenic bladder (a condition where nerve damage disrupts the communication between your brain and bladder, leading to loss of control over storing or emptying urine) and obstructive uropathy (a structural or functional blockage of the urinary tract that restricts the normal flow of urine). Record review of Resident #1's Comprehensive Care Plan, revised 05/25/2026, reflected [NAME] has an actual UTI R/T E coli (bacteria, which normally live in the gut, enter the urethra and multiply) in the urine. Facility interventions included: Administer IV ABX as prescribed Cefepime HCl Intravenous Solution (antibiotic administered intravenously to treat severe bacterial infections, including pneumonia, urinary tract infections). During an observation on 06/04/26 at 11:38 A.M., incontinent care on Resident #1 by CNA A revealed Resident #1 had a bowel movement and her brief was wet. CNA A put on clean gloves, unfastened Resident #1's brief, CNA B assisted with repositioning Resident #1 to the left. CNA A cleaned Resident #1 with cleansing wipe, moving from back to front, with each stroke from the anus (opening at the end of the digestive tract where solid waste (feces) leaves the body) to the urethra (muscular tube that drains urine from the bladder out of the body) and vaginal opening.Resident#1 was non-verbal and un-interviewable. During an interview on 06/04/26 at 11:40 A.M., CNA A stated she cleaned Resident #1 from back to front but swiped to the side and did not reach the urethral or vaginal opening. She stated she had always cleaned residents like that and thought that if she wiped away from the vaginal opening it was okay. She stated the risk to the resident when cleaned from back to front was urinary tract infection. She stated she had a one on one in-serviced on infection control and peri care (he process of washing and gently cleaning the genital and anal areas) by the DON. During an interview on 06/04/26 at 11:18 A.M., CNA B stated while providing peri care to a female resident, the resident should be cleaned from front to back. He stated the risk of cleaning a female resident from back to front was causing urinary tract infection. CNA B stated he was in serviced on infection control and peri care. During an interview on 06/04/26 at 12:28 PM, LVN C, who was in the room while Resident #1 was receiving peri care, stated she observed CNA A clean Resident #1 from back to front. She stated CNA A should have cleaned Resident #1 from front to back. She stated the risk to the resident was getting a urinary tract infection. During an interview on 06/04/26 at 12:38 PM, the ADON stated female residents should be cleaned from front to back. She sated the risk of cleaning a female resident from back to front was stool getting into the urinary and causing the resident to have a UTI. During an interview on 06/04/26 (continued on next page)

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 0690 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	at 1:41 PM, the DON stated her expectation was that the staff should perform peri care on female residents cleaning the resident from front to back. She stated the risk to a female resident being cleaned from back to front was the resident could get recurrent urinary tract infections. She stated the staff started an in-service and was going to have skills checkoffs on infection control and peri care. Record review of the facility policy titled, Perineal Care, dated 06/2020, reflected: Purpose: To maintain cleanliness of the genital area, to reduce odor, and to prevent infection or skin breakdown.I. Wash hands.II. Explain procedure to residents.III. Gather equipment:IV. Provide privacy.V. Put on gloves.VI. Wash the pubic area.A. For female residents:i. Separate the labia. Wash with soapy washcloth/cleansing wipe, moving from front to back, oneach side of the labia and in the center over the urethra and vaginal opening, using a cleanwashcloth/cleansing wipe for each stroke.ii. Rinse area, moving from front to back, using a clean washcloth/cleansing wipe for each stroke.iii. Dry area moving from front to back, using a blotting motion with towel. Record review of the facility policy titled, Infection Prevention and Control Program, dated 06/2020, reflected: Purpose: The ensure the Facility establishes and maintains an Infection Control Program designed to provide asafe, sanitary, and comfortable environment and to help prevent the development and transmission.of disease and infection in accordance with Federal and State requirementsThe facility must establish an Infection Prevention and Control Program under which it -1. Identifies, investigates, controls, and prevents infections in the Facility;2. Decides what procedures, such as isolation, should be applied to an individual resident; and3. Maintains a record of incidents and corrective actions related to infections.