

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 675272	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 10/16/2024
NAME OF PROVIDER OR SUPPLIER Willowbend Nursing and Rehabilitation Center		STREET ADDRESS, CITY, STATE, ZIP CODE 2231 Highway 80 E Mesquite, TX 75150	

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 - Minimal harm or potential for 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>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 50445</p> <p>Based on observation, interview and record review, the facility failed to ensure all assistive devices were maintained and free of hazards for one (Resident #73) of three residents reviewed for essential equipment.</p> <p>The facility failed to properly maintain the bedside commode for Residents #73.</p> <p>This failure could place residents at risk for equipment that is in unsafe operating condition, which could cause injury.</p> <p>Findings included:</p> <p>Review of Resident #73's quarterly MDS assessment dated [DATE], reflected she was an [AGE] year-old female admitted to the facility on [DATE] with diagnoses of Dementia (confusion and forgetfulness), coronary artery disease (narrowing or blockage of heart arteries), Peripheral Vascular Disease (narrowed or blocked blood flow to the arms or legs), Diabetes (alteration in blood sugars), and Unsteadiness on Feet, in part. Resident #73 had a BIMS score of 11 indicating moderate cognitive impairment. Further review of section GG revealed she was frequently incontinent of bowel and bladder and able to independently transfer to the toilet.</p> <p>Review of Resident #73's plan of care dated 09/04/24 reflected interventions included the need to monitor Resident #73's extremities for signs and symptoms of injury, infection, or ulcers due to her Peripheral Vascular Disease.</p> <p>In an observation on 10/14/24 at 03:00 p.m., a bedside commode was noted sitting above the toilet in Resident #73's bathroom. The beside commode was noted in significant disrepair with extensive rusting and paint loss on all the metal bars.</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 - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>In an interview and observation on 10/15/24 at 03:50 p.m., Resident #73 was noted in her bathroom sitting on the bedside commode above the toilet. This was the same bedside commode noted on 10/14/24 and it remained in significant disrepair with extensive rusting and paint loss. The back of Resident #73's legs and her hands were noted in contact with the metal areas missing paint and covered in rust. Resident #73 was interviewed and stated that the bedside commode had been covered in rust since she was admitted to the facility about two years ago. She stated she had not reported it as a concern because she had not known she could say anything about it to staff. She stated the condition of the bedside commode had been bothering her and that it would be nice if something had been done about it. She denied having experienced any abrasion or injury related to the bedside commode and none were observed.</p> <p>In an interview on 10/15/24 at 04:10 p.m., LVN C stated he had worked for the facility for three months on evening shift. When shown Resident #73's bedside commode LVN C stated, It needs a new one. I will have to reach out to maintenance. He put a glove on and felt of one area on the bedside commode with missing paint and stated, It's not sharp but it is rusty.</p> <p>In an interview on 10/15/24 at 02:00 p.m., Maintenance Supervisor D stated that he and one other maintenance personnel were responsible for replacing any equipment in disrepair. He stated that the maintenance department did not make rounds on equipment such as bedside commodes, but that they had relied on nursing to report the concern to them using the maintenance binder found at each nurse's station. He denied having had any knowledge of a complaint about a bedside commode being in disrepair. He reported that if rust were found on bedside commodes, they were thrown in the trash and not repaired, but replaced instead. He reported that although he was not medical personnel, he imagined that rust and loss of paint on a bedside commode could hurt a resident.</p> <p>In an interview and observation on 10/15/24 at 04:15 p.m., ADON A when shown Resident #73's bedside commode, stated she would get it replaced. She immediately removed it from resident use and stated she would get another from supply. When asked about potential resident harm she stated, I'm OCD so that would have driven me crazy.</p> <p>In an interview on 10/16/24 at 10:10 a.m., the ADM stated that if a bedside commode/raised toilet chair was noted as rusty or missing paint that it would usually just be tossed in the trash as it couldn't be fixed. He reported that nursing staff would notify maintenance and that the resident would get a new one. He reported potential harm to the resident could occur if the bedside commode/raised toilet chair broke due to rusting or that the resident could be exposed to something if they had a cut on their leg.</p> <p>In an interview on 10/15/24 at 02:00 p.m., a facility maintenance policy was requested. The ADM stated that the facility did not have a policy that covered maintenance and equipment repair, but that if something were broken, the procedure was to put in a maintenance request.</p>		

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<p>F 0812</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Procure food from sources approved or considered satisfactory and store, prepare, distribute and serve food in accordance with professional standards.</p> <p>47855</p> <p>Based on observation, interview, and record review the facility failed to store food in accordance with professional standards for food service safety in the facility's only kitchen, reviewed for food safety.</p> <ol style="list-style-type: none"> 1. The facility failed to correctly label and date a storage bag full of sliced cheese. 2. The facility failed to correctly label a package of diced peppers stored in the refrigerator. 3. The facility failed to label and date 5 supplemental meal bags intended for Dialysis patients. 4. The facility failed to discard the remaining sugar by the written use by date. 5. The facility failed to change the label on a container identified as flour to the actual substance being stored in the container to sugar. <p>These failures could place residents at risk for food-borne illness and cross contamination.</p> <p>Findings included:</p> <p>Observation of the kitchen on 10/13/2024 at 9:40 a.m., revealed in refrigerator 2, a storage bag containing sliced cheese was observed with a date in and no use by date, and no information describing the contents.</p> <p>Observation of refrigerator #1 on 10/13/2024 at 9:43 a.m., revealed 5 storage bags, each containing a bottle of water, a sandwich, and a package of crackers. There were no dates on the bags and no description of the contents. The refrigerator had a note written on the outside that read make 5 Dialysis meals.</p> <p>Observation on 10/13/2024 at 9:45 a.m., of a large white wheeled container sitting on the floor of the kitchen, with label stating Flour was observed with what was later identified as sugar was observed. The container was labeled 09/01/2024 thru 10/01/2024.</p> <p>Observation of refrigerator #3, on 10/13/2024 at 9:46 a.m., a storage bag with cut vegetables was observed stored on the shelf. There was no label indicating what was stored in the bag, when it was placed in the bag and when it should be discarded.</p> <p>(continued on next page)</p>		

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<p>F 0812</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>In an interview and observation with the DM on 10/13/2024 at 10:15 a.m., she revealed that she received orders every week and she usually made sure items were labeled with received and use by dates. She stated her most recent order came in 2 days ago. She stated they reviewed the dates last week. The DM stated that the cheese in the refrigerator was taken from the larger package and put in the storage bag without her knowledge. She stated they knew better but was not aware of who did it. She pointed to the corresponding package of cheese next to it. She identified the item in the container labeled as flour as sugar, and stated it should have been discarded as of 10/01/2024. She removed the flour label from the container as we spoke. In the walk-in refrigerator (refrigerator 3) she identified the vegetables in the bag as peppers and said she would label the items. She stated that she understood the potential that food borne illness, contamination and food allergies could have a negative effect on a resident and did not want that to happen to any resident. She stated she did not know how this got past her inspection. She stated the bags in the refrigerator were snacks for the diabetic resident and nursing would come to get them when they were not there. She stated she would make sure they were getting the proper labels to indicate the contents of the bags.</p> <p>Interview with the Cook, on 10/13/2024 at 10:25 a.m., he stated that he does not usually put the food up, but understands that they need to be labeled correctly, stored properly and of good quality. He stated that the Resident's deserve that and should be given the best food they can provide. He understands that they can get sick from food and does not want anyone to get sick by anything he does.</p> <p>Correspondence from Administrator on 10/14/2024 at 2:01p.m. reveal the facility does not have a food storage policy. He stated they follow the Texas Food Establishment Rules.</p> <p>Review of the Texas Food Establishment Rules dated August 2021, found on the DSHS website does not reveal any specific requirements labeling and dating food items.</p> <p>(continued on next page)</p>		

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<p>F 0812</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Review of the U.S. FDA Food Code 2022 reflected: Chapter 3 . section 3-201.11 Compliance and Food Law. . C. Packaged Food shall be labeled as specified in Law, including 21 CFR 101 Food Labeling [* .(b) A food which is subject to the requirements of section 403(k) of the act shall bear labeling, even though such food is not in package form. (c) A statement of artificial flavoring, artificial coloring, or chemical preservative shall be placed on the food or on its container or wrapper, or on any two or all three of these, as may be necessary to render such statement likely to be read by the ordinary person under customary conditions of purchase and use of such food. The specific artificial color used in a food shall be identified on the labeling when so required by regulation in part 74 of this chapter to assure safe conditions of use for the color additive.], 9 CFR 317 Labeling, [* (a) When, in an official establishment, any inspected and passed product is placed in any receptacle or covering constituting an immediate container, there shall be affixed to such container a label .Marking Devices, and Containers, and 9 CFR 381 Subpart N Labeling and Containers, and as specified under S 3-202.18. Section 3-302.12 Food Storage Containers, Identified with Common Name of Food: Except for containers holding FOOD that can be readily and unmistakably recognized such as dry pasta, working containers holding food or food ingredients that are removed from their original packages for use in the food establishment, such as cooking oils, flour, herbs, potato flakes, salt, spices, and sugar shall be identified with the common name of the food. Section 3-501.17 . Commercial processed food: Open and hold cold . B. 1. The day the original container is opened in the food establishment shall be counted as Day 1. 2. The day or date marked by the food establishment may not exceed a manufacturer's use-by date if the manufacturer determined the use-by date based on food safety. C. 2. Marking the date or day of preparation, with a procedure to discard the food on or before the last date or day by which the food must be consumed on the premises, sold, or discarded as specified under (A) of this section. 3. Marking the date or day the original container is opened in a food establishment, with a procedure to discard the food on or before the last date or day by which the food must be consumed on the premises, sold, or discarded as specified under (B) of this section. Definitions 3. Food Receiving and Storage - When food, food products or beverages are delivered to the nursing home, facility staff must inspect these items for safe transport and quality upon receipt and ensure their proper storage, keeping track of when to discard perishable foods and covering, labeling, and dating all PHF/TCS foods stored in the refrigerator or freezer as indicated.</p>		