

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  675279	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED  07/18/2024
NAME OF PROVIDER OR SUPPLIER  Villa Haven Health and Rehabilitation Center		STREET ADDRESS, CITY, STATE, ZIP CODE 300 S Jackson St Breckenridge, TX 76424	

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 0880</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Provide and implement an infection prevention and control program.</p> <p><b>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY**</b> 33198</p> <p>Based on observation, interview, and record review, the facility failed to maintain an infection prevention and control program designed to provide a safe, sanitary, and comfortable environment to help prevent the development and transmission of communicable diseases and infections for one (Resident #1) of three residents reviewed for infection control practices.</p> <p>LVN A failed to perform hand hygiene and prevent cross contamination of resident care items while providing blood sugar checks for Resident #1.</p> <p>These failures could affect the residents by placing them at risk for the spread of infection.</p> <p>Finding included:</p> <p>Review of Resident #1's Face Sheet dated 07/18/20, revealed an [AGE] year-old female admitted to the facility on [DATE] with diagnoses of retention of urine, malignant neoplasm of breast (breast cancer), constipation, and dementia (brain damage)</p> <p>Review of Resident #1's Minimum Data Set (MDS) assessment dated [DATE] revealed Resident #1 required moderate assistance with most activities of daily living (ADLs) and was always incontinent of bladder and frequently incontinent of bowel.</p> <p>Review of Resident #1's care plan dated 06/26/24 revealed a plan for hypoglycemia/hyperglycemic episodes related to diabetes mellitus. Its goal was for Resident #1 to be absence of signs of hypoglycemia (diaphoretic. Rapid pulse, confusion, lethargic, etc.) or hyperglycemia (increase thirst, dry mouth, blurred vision, fatigue, etc.) over the next 90 days.</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 0880</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Observation of blood sugar checks on Resident #1 on 07/17/20 at 11:31 a.m. revealed LVN A did not wash hands or perform hand hygiene before start of care. She did not prepare a clean field before start of care to prevent cross contamination. LVN A placed the required supplies on top of the medication cart without wiping it down. The top of the table was visibly dirty. These supplies include glucometer, diabetic pins, test strips and alcohol pads. LVN A donned her gloves and picked up the supplies from the medication cart and entered Resident #1's room. She dumped the supplies on top of the resident's dressing table. She did not wipe the dressing table down. LVN A proceeded to prick the resident's finger which resulted in a blood sugar reading of 190 mg/dl (milligrams per deciliter). LVN A picked up her supplies and walked out of the room without washing her hands or performing hand hygiene. On her way out of Resident #1's room, the glucometer fell on the floor. LVN A picked up the glucometer and placed it on top of medication cart.</p> <p>In an interview on 07/17/20 at 11:42 a.m. with LVN A, she said she had been employed in the facility for over 7 years. LVN A acknowledged she should have washed her hands, performed hand hygiene, and prepared a clean field while providing blood sugar checks to Resident #1. LVN A stated she had infection control training about two months ago. She said cross contamination was mixing clean with dirty and the resident could get sick if good infection practice was not followed.</p> <p>During an interview with the DON on 07/18/20 at 3:30 p.m. she acknowledged she was aware of some of the concerns raised about infection control practices. The DON stated he expected the nurses to follow clean procedure while checking blood sugar.</p> <p>Review of the facility's policy on disinfection of patient/resident care equipment: Blood sugar glucose meter, point of care testing dated May 2023 reflected,</p> <p>POLICY:</p> <ol style="list-style-type: none"> <li>1. Glucometers and point of care testing devices will be maintained, cleaned and disinfected in accordance with acceptable policies.</li> <li>2. Manufacturers' recommendations will be followed when cleaning or disinfecting medical equipment.</li> </ol> <p>PROCEDURES:</p> <p>LEVELS OF DISINFECTION</p> <p>Three levels of disinfection can be utilized in the maintenance of patient/resident-care equipment:</p> <ol style="list-style-type: none"> <li>1. Cleaning: the physical removal of organic material or soil from objects is usually done using water with a soap or detergent. Generally, cleaning is designed to remove rather than kill microorganisms.</li> <li>2. Sterilization: the destruction of all forms of microbial life, carried out with steam under pressure, liquid or gaseous chemicals, or dry heat.</li> </ol> <p>(continued on next page)</p>		

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