STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	675417	A. Building B. Wing	02/22/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
Fair Park Health & Rehabilitation Center	2815 Martin Luther King Jr Blvd Dallas, TX 75215

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 0880 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	Provide and implement an infection prevention and control program. **NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 37028 Based on observation, interview, and record review the facility failed to establish and maintain an infection prevention and control program designed to provide a safe, sanitary, and comfortable environment and to help prevent the development and transmission of communicable diseases and infections for 1 (Resident #1) of 3 residents reviewed for infection. The facility failed to ensure CNA A performed hand hygiene during incontinence care for Resident #1. This failure placed residents at risk for infection. Findings included: Review of Resident #1's Face Sheet dated 02/21/24, reflected he was an [AGE] year-old male admitted on [DATE]. His diagnosis included Alzheimer's disease. An observation and interview on 02/21/23 at 11:15 AM with CNA B and CNA A revealed they were preparing to provide Resident #1 with incontinence care. The resident was lying in bed, with his brief already removed. CNA A washed her hands and put on gloves. CNA A cleansed the resident's penis and scrotal area. Resident #1 was assisted to turn onto his right side by CNA B. CNA A cleaned the resident's buttocks. CNA A started to grab a clean brief. CNA B stopped her and prompted her to change her gloves. CNA A stopped, changed her gloves, and picked up the clean brief. CNA A was asked if she was going to perform hand hygiene since she changed her gloves. CNA A said, After I finish completely, I will wash my hands. An interview on 02/21/24 at 11:30 AM, with the DON revealed staff were supposed to perform hand hygiene when changing gloves. An interview on 02/21/24 at 1:30 PM, with CNA A revealed she said she forgot to perform hand hygiene when she changed gloves during incontinence care for Resident #1. She said hand hygiene was necessary to prevent infection . An interview on 02/21/24 at 2:55 PM, with the DON revealed hand hygiene was important to prevent transmission of infection . Record review of facility's policy, Infection Control Plan - Overview, dated 2019, reflected : (continued on next page)

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
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(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (Each deficiency must be preceded by full regulatory or LSC identifying information)
F 0880 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	Preventing Spread of Infection . (3) The facility will require staff to wash their hands after each direct resident contact for which hand washing is indicated by accepted professional practice.