

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  675645	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED  11/21/2024
NAME OF PROVIDER OR SUPPLIER  Mesa Springs Healthcare Center		STREET ADDRESS, CITY, STATE, ZIP CODE  7171 Buffalo Gap Rd Abilene, TX 79606	

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 0583</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Keep residents' personal and medical records private and confidential.</p> <p><b>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 44766</b></p> <p>Based on observation, interview, and record review, the facility failed to ensure residents have a right to personal privacy for 2 of 3 (Residents #1 and Resident #2) residents observed for dignity.</p> <p>CNA A and CNA B failed to provide Resident #1 with full privacy while providing incontinent care on 10/29/24.</p> <p>Facility failed to provide Resident #2 with a privacy curtain installed in her room on 11/19/2024.</p> <p>These failures could place residents at risk of not being treated with dignity and respect.</p> <p>The findings included:</p> <p>Record review of Resident'#1's Admission Record, dated 11/21/24, revealed the resident was a [AGE] year-old female admitted to the facility on [DATE] with diagnoses which included dementia, anemia, repeated falls, and lack of coordination.</p> <p>Record review of a Significant Change MDS assessment dated [DATE] indicated Resident #1 had a BIMS score of 99 which indicated Resident #1 could not complete BIMS examination.</p> <p>Record review of a comprehensive care plan dated 11/19/24 indicated Resident #1 was incontinent of bowel and bladder and to check and change as needed.</p> <p>Record review of Resident'#2's Admission Record, dated 11/21/24, revealed the resident was a [AGE] year-old female admitted to the facility on [DATE] with diagnoses which included dementia, repeated falls, pulmonary disease, and lack of coordination.</p> <p>Record review of a Significant Change MDS assessment dated [DATE] indicated Resident #2 had a BIMS score of 13 which indicated she was not cognitively impaired.</p> <p>Record review of a comprehensive care plan dated 11/19/24 indicated Resident #1 was incontinent of bowel and bladder and to check and change as needed.</p> <p>Observation of Video dated 10/29/24 at 6:24 am indicated CNA A and CNA B assisting Resident #1 in her bed after receiving a shower. Resident #1 was left uncovered and undressed while both CNAs waited on RN C, privacy curtain was never pulled.</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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NAME OF PROVIDER OR SUPPLIER  Mesa Springs Healthcare Center		STREET ADDRESS, CITY, STATE, ZIP CODE  7171 Buffalo Gap Rd Abilene, TX 79606	
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<p>F 0583</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Observation on 11/19/24 at 10:45 am indicated that Resident #2 did not have a privacy curtain in their room.</p> <p>During an interview on 11/20/24 at 10:5 am Resident #2 stated she did not have a privacy curtain, but her roommate did.</p> <p>During an interview on 11/21/24 at 1:05 pm CNA A stated that the door was shut but the privacy curtain was not closed. She stated the curtain was used for the privacy of the resident but was not pulled because there was no roommate, and the door was shut. She stated when the door was opened when the nurse came to the room the resident could have been seen from the hallway.</p> <p>During an interview on 11/21/24 at 1:15 pm CNA B she stated she cannot remember if the privacy curtain was shut or not. She stated she knows the door was shut. She stated that she and the other aide were the only ones in the room, so it didn't really matter. She stated that when the door was opened when the nurse came in the room the resident could have been seen.</p> <p>During an interview on 11/21/24 at 1:35 pm RN C stated that the door was shut if she can remember correctly, but upon entering the room the resident was not clothed and the privacy curtain was not pulled. She stated that Resident #2 should have a privacy curtain. She stated she went and checked and no there is no privacy curtain in her room. She stated all rooms should have privacy curtains and she was not sure why that room does not have one.</p> <p>Record review of a facility policy dated 11/28/17 titled Resident Rights indicated, each resident has the right to be free from abuse, neglect, misappropriations of resident property, and exploitation. The facility will provide oversight and monitoring to ensure that its staff, who are agents of the facility, deliver care and services in a way that promotes and respects the rights of the residents to be from abuse, neglect, misappropriations of resident property, and exploitation .</p>		