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| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION                  | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:<br><br>675877 | (X2) MULTIPLE CONSTRUCTION<br>A. Building<br>B. Wing                                     | (X3) DATE SURVEY COMPLETED<br><br>11/20/2024 |
| NAME OF PROVIDER OR SUPPLIER<br><br>Greenbrier Health Care Center |  | STREET ADDRESS, CITY, STATE, ZIP CODE<br><br>301 W Randol Mill Rd<br>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<br>(Each deficiency must be preceded by full regulatory or LSC identifying information)  |
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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>Keep residents' personal and medical records private and confidential.</p> <p>45053</p> <p>Based on observations, interviews, and record review, the facility failed to ensure that each resident had a right to personal privacy and confidentiality of residents' personal and medical information for 1 of 4 medication carts reviewed for clinical records on Station 3.</p> <p>MA E failed to lock and secure the laptop on medication cart on Station 3.</p> <p>This failure could affect 48 residents by placing them at risk of resident-identifiable information being accessed by the public.</p> <p>Findings included:</p> <p>An observation on 11/20/24 at 3:11 PM revealed a laptop medication cart on the hallway of Station 3 that was unattended, unlocked, and unsecured. HHSC surveyor observed resident information (name, date of birth, photo etc.) on the screen from the laptop on the medication cart that was unlocked, unattended and unsecured. There were not any staff in the hall and a resident was observed walking in the hallway past the medication cart on Station 3. MA E was observed inside a resident ' s room.</p> <p>In an interview on 11/20/24 at 3:19 PM, MA E said she was the only Medication Aide for the facility. She stated that she was responsible for ensuring that the laptop on the medication cart was locked and always secured. She said that she thought that she locked the laptop on the medication cart prior to entering the resident ' s room. She stated that the laptop on the medication cart should remain locked and always secured to ensure that no one could look at the screen on the laptop and have access to resident ' s confidential medical records. MA E stated that the risk of the laptop on the medication cart being unlocked and not properly secured was that anyone could have access to the resident ' s information. She stated that if someone gained access to any resident ' s private information, they could use it against them and could cause harm to a resident. MA E stated that she has been employed at the facility for a couple of months and received In-Service Trainings relating to medication administration, storage, and HIPPA since being employed at the facility.</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.

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| LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE | TITLE | (X6) DATE |
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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>In an interview on 11/20/24 at 3:35 PM, LVN F stated that she was unaware that MA E did not properly lock and secure the laptop on her medication cart on Station 3. LVN F stated that if she observed a medication cart that was unlocked, she would lock the medication cart. She stated that she has been trained via In-Service Trainings that the medication carts were to remain locked and always secured when they were unattended. She stated that she has been employed at the facility for 6 years and she and other staff were regularly retrained and reeducated on medication storage and securing the medication carts. She stated that the risk of a resident or anyone else having access to an unlocked laptop medication cart could cause the potential for someone to obtain residents confidential information and medical records. She stated that harm could be caused to a resident if someone gained unauthorized access to their medical records and could use the information against them.</p> <p>In an interview on 11/20/24 at 3:42 PM, the DON stated that she was unaware the MA E left the laptop on her medication cart unlocked in the hallway of Station 3. She stated that her expectation was that her staff were to lock and secure any computer or laptop they used when they were not in use. She stated that the laptop on each medication cart was to be always locked and secured. She stated residents, visitors, and guests could look at and obtain confidential and private information from the open laptop. She stated that harm could be caused to residents if anyone looked at their information on the laptop, which should be accessed only by staff. She stated that a resident or someone in a wheelchair would not be able to look at the information on the laptop on the medication cart due to the medication cart being too high for a person in a wheelchair to have eye level access to the information on the laptop. The DON stated that she will retrain and educate MA E and staff on medication administration and storage because they all have access to the medication carts.</p> <p>In an interview on 11/20/24 at 4:18 PM, the Administrator stated that she was not aware that MA E left the laptop on her medication cart unlocked on the hallway of Station 3. She stated that all staff have been trained via In-Service Training relating to how to properly secure the laptops on the medication carts. She stated that harm could be caused to a resident if a laptop on a medication cart was unlocked, which was a HIPPA violation, which meant that access to personal and confidential records and information should not be available for anyone to access. She stated that staff at the facility are In-Serviced on HIPPA at least on a quarterly basis. She reported that MA E was a new hire and received HIPPA training as part of her New Hire Orientation.</p> <p>Record review of MA E ' s CEU Certificate revealed that she completed 1 hour of development and/or training for HIPPA and You on 11-04-24.</p> <p>Record review of the facility's policy titled, Medication Storage - in the Home, dated 12/2018 reflected no information regarding securing clinical records.</p> <p>An email from the Administrator received on 11/22/24 at 1:42 PM revealed the facility did not have a policy related to HIPPA policies, procedures, and guidelines. She stated that the facility follows the HIPPA Guidelines in relation to the Health Insurance Portability and Accountability Act of 1966.</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>35747</p> <p>Based on observation, interview, and record review, the facility failed to store, prepare, distribute, and serve food in accordance with professional standards for food service safety for 1 of 1 kitchen reviewed for food and nutrition services.</p> <ol style="list-style-type: none"> <li>[NAME] G failed to wear a beard guard while prepping food.</li> <li>The facility failed to ensure foods in the refrigerator were properly stored, labeled with the item's contents, and dated with the date in which the food was to be used or discarded.</li> </ol> <p>These failures could place residents at risk for food borne illness.</p> <p>Findings included:</p> <p>Observation of the facility's only kitchen on 11/18/24 at 8:33AM, revealed the following:</p> <ul style="list-style-type: none"> <li>-Cook G was prepping food, with a beard guard pulled down to his neck (Cook G's beard appeared to be approximately 1/4 in. in length)</li> <li>-a block of Swiss cheese in the refrigerator that had been partially wrapped but was still exposed to air/elements, and which was not dated with the date in which the food was to be used or discarded</li> <li>-a plastic container of green beans in the refrigerator that was covered in plastic wrap, was not labeled with the item's contents, and was not dated with the date in which the food was to be used or discarded</li> </ul> <p>During an interview with [NAME] G on 11/18/24 8:36AM, he stated he had pulled his beard guard down to his neck a few minutes prior, as he had briefly left the kitchen. He did not pull his beard guard back up to his face upon re-entering the kitchen, which left his beard exposed while he was prepping food. [NAME] G stated the risk of not wearing a beard guard while prepping food included the potential for bacteria to contaminate the food. [NAME] G confirmed that in the refrigerator, there was an undated block of Swiss cheese that had been previously opened and partially re-wrapped, but was still exposed to air/elements. He also confirmed there was an undated and unlabeled plastic container in the refrigerator that held green beans; he did not know when the green beans were prepared or the date in which they needed to be used or discarded. [NAME] G stated all foods in the refrigerator should be labeled, dated, and completely sealed. He stated the risk of improper food storage and/or improper labeling included contamination of said food items.</p> <p>Review of the facility's Food Storage policy, dated 2018, reflected, .Date, label and tightly seal all refrigerated foods using clean, nonabsorbent, covered containers that are approved for food storage .</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>The Food and Drug Administration Food Code dated 2017 reflected, .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 3-305.11 Food Storage. (A) .food shall be protected from contamination by storing the food: (1) In a clean, dry location; (2) Where it is not exposed to splash, dust, or other contamination .(B) .refrigerated, ready-to eat time/temperature control for safety food prepared and packaged by a food processing plant shall be clearly marked, at the time the original container is opened in a food establishment and if the food is held for more than 24 hours, to indicate the date or day by which the food shall be consumed on the premises, sold, or discarded, based on the temperature and time combinations specified in (A) of this section and: (1) The day the original container is opened in the food establishment shall be counted as Day 1; and (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 .</p> |