

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 676266	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 08/26/2024
NAME OF PROVIDER OR SUPPLIER Longhorn Village		STREET ADDRESS, CITY, STATE, ZIP CODE 12001 Longhorn Parkway Austin, TX 78732	

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 - Some</p>	<p>Provide and implement an infection prevention and control program.</p> <p>42600</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 and to help prevent the development and transmission of communicable diseases and infections for 3 (Server A, Server B and Dietary Manager) of 3 staff members reviewed in that:</p> <p>The facility failed to ensure Server A, Server B and the Dietary Manager performed hand hygiene when serving residents during lunch service.</p> <p>This failure placed residents at an increased risk of exposure to infections to include COVID- 19, decreased quality of life or hospitalization s.</p> <p>Finding include:</p> <p>An observation on 08/26/2024 at 12:14 PM revealed Server A, Server B exiting the dining room and serving residents. Server A was observed with gloves on while serving residents and touching door of kitchen when returning to the kitchen from the dining room.</p> <p>An observation on 08/26/2024 at 12:18 PM revealed the DM entering and exiting kitchen serving food to residents without performing hand hygiene.</p> <p>An observation on 08/26/2024 at 12:19 PM revealed Server A and Server B exit kitchen to dining room to serve residents without performing hand hygiene.</p> <p>An observation on 08/26/2024 at 12:20 PM revealed no hand sanitizer or hand washing sink immediately outside or inside of the kitchen.</p> <p>An observation on 08/26/2024 at 12:25 PM revealed Server A wearing gloves and place plate on tray and exiting kitchen to serve residents. Further observation revealed Server A returned to kitchen with the same gloves and placed other plates on tray for residents.</p> <p>An observation on 08/26/2024 at 12:56 PM revealed Server A replaced gloves without performing hand hygiene. Server A was observed touching door handle when exiting kitchen. Server A returned to kitchen and removed gloves, but no hand hygiene was performed before Server A provided a cup to nursing staff for resident.</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 - Some</p>	<p>An observation on 08/26/2024 at 1:01 PM revealed Server A was wearing gloves in the dining room and cleaned up dirty dishes.</p> <p>An observation on 08/26/2024 at 1:03 PM revealed Server A removed dirty gloves and grabbed a new pair of gloves to put on without performing hand hygiene. Further observation revealed Server A put on one glove and dropped one glove on the floor and pick it up and put it on without performing hand hygiene.</p> <p>During an interview on 08/26/2024 at 12:56 PM, Server A stated that she was usually responsible for placing plates on trays and serving residents in the dining room. She stated that when staff entered and exited the kitchen or when they touched something they were supposed to clean their hands. She stated that before gloves were put on and when they were taken off staff were supposed to perform hand hygiene. Server A did not answer when asked why she did not perform hand hygiene when exiting and reentering the kitchen.</p> <p>During an interview on 08/26/2024 at 1:02 PM, Server B stated staff were supposed to wash their hands when they entered the kitchen and stated staff were supposed to wash hands in between any tasks performed. He stated he did not wash his hands when re-entering kitchen because he was busy.</p> <p>During an interview on 08/26/2024 at 1:05 PM, the DM she stated staff were supposed to wash their hands when they came in to dining room and when they re-entered the kitchen. The DM stated staff were also supposed to wash their hands or perform hand hygiene after they exit the kitchen and serve meals. She stated they were not supposed to wear gloves in dining room only if they are preparing food. She stated if staff are wearing gloves while serving, they were not correct. The DM stated when staff enter the kitchen, they were supposed to wash their hands at hand washing sink.</p> <p>During an interview on 08/26/2024 at 2:42 PM with the ADM, she stated that staff were expected to wash their hands prior to serving and any time they needed to wash their hands. She stated staff were supposed to wash their hands or perform hand hygiene when handling resident plates and put gloves on to deliver trays. The ADM stated staff were supposed to wash their hands or perform hand hygiene after they change glove. The ADM stated that If they are touching the door handle staff should have washed their hands before serving another resident. The ADM stated that it was not expected that staff wash hands in between serving residents if they did not touch anything. The ADM stated if staff got new gloves and dropped the gloves on the floor they were supposed to throw away the gloves and perform hand hygiene.</p> <p>Review of facility in-service dated 07/21/2024 was completed for the topic of handwashing and glove usage in food service. In-service included policy titled Handwashing and Glove Usage in Food service dated in 2016. The policy reflected hand washing was the most important way to stop the spread of infection. Food handlers were supposed to wash their hands after clearing tables or busing dirty dishes, after leaving and returning to the kitchen/prep area and after touching any other surfaces. In-service included that single-use gloves should be used when handling ready-to eat food. Further review reflected hands should be washed before putting gloves on.</p> <p>(continued on next page)</p>		

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<p>F 0880</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Review of the facility's policy titled Handwashing/Hand Hygiene policy dated October 2023 reflected staff are trained regarding the importance of hand hygiene in preventing the transmission of healthcare-associated infections. Staff are expected to adhere to hand hygiene policies and practices to help prevent the spread of infections to other personnel, resident and visitors. Further review revealed hand hygiene is indicated after touching a resident's environment. Hand hygiene should be performed before applying gloves.</p>		