

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

PRINTED: 04/08/2025
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 105825	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____		(X3) DATE SURVEY COMPLETED C 03/27/2025
NAME OF PROVIDER OR SUPPLIER SUWANNEE VALLEY NURSING CENTER			STREET ADDRESS, CITY, STATE, ZIP CODE 427 15TH AVENUE NORTHWEST JASPER, FL 32052		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETION DATE	
F 000	INITIAL COMMENTS An unannounced recertification and complaint survey for complaint number 2024013260 was conducted at Suwannee Valley Nursing Center on March 24, 2025 through March 27, 2025. The facility was not in compliance with Code of Federal Regulations (CFR) 42, Part 483, Requirements for Long Term Care Facilities.	F 000			
F 812	Food Procurement,Store/Prepare/Serve-Sanitary CFR(s): 483.60(i)(1)(2) §483.60(i) Food safety requirements. The facility must - §483.60(i)(1) - Procure food from sources approved or considered satisfactory by federal, state or local authorities. (i) This may include food items obtained directly from local producers, subject to applicable State and local laws or regulations. (ii) This provision does not prohibit or prevent facilities from using produce grown in facility gardens, subject to compliance with applicable safe growing and food-handling practices. (iii) This provision does not preclude residents from consuming foods not procured by the facility. §483.60(i)(2) - Store, prepare, distribute and serve food in accordance with professional standards for food service safety. This REQUIREMENT is not met as evidenced by: Based on observation, interview, and record review, the facility failed to ensure foods were properly labeled and stored. Findings include:	F 812			

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

Electronically Signed

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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F 812	Continued From page 1 During an observation on 3/24/2025 at 9:20 AM while conducting the initial tour of the kitchen with the Certified Dietary Manager (CDM), there were thirteen bags of frozen variety of meats, without an identifying label, and one bag that was left open exposing chicken with ice particle buildup and the appearance of freezer burn in the reach-in freezer. During an interview on 3/24/2025 at 9:25 AM, the CDM confirmed that there were thirteen bags of a variety of meats without an identifying label and one bag of chicken that was completely open exposing the product to the elements and freezer burn. Review of the facility policy and procedure titled "Date Marking for Food Safety" dated 11/2020 and revised on 1/2025 showed it read, "Policy Explanation and Compliance Guidelines for Staffing ... 4. The marking system shall consist of a color-coded label, the day/date of opening, and the day/date the item must be consumed or discarded."	F 812		
F 880	Infection Prevention & Control CFR(s): 483.80(a)(1)(2)(4)(e)(f) §483.80 Infection Control The facility must 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. §483.80(a) Infection prevention and control program. The facility must establish an infection prevention	F 880		

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F 880	<p>Continued From page 2</p> <p>and control program (IPCP) that must include, at a minimum, the following elements:</p> <p>§483.80(a)(1) A system for preventing, identifying, reporting, investigating, and controlling infections and communicable diseases for all residents, staff, volunteers, visitors, and other individuals providing services under a contractual arrangement based upon the facility assessment conducted according to §483.71 and following accepted national standards;</p> <p>§483.80(a)(2) Written standards, policies, and procedures for the program, which must include, but are not limited to:</p> <p>(i) A system of surveillance designed to identify possible communicable diseases or infections before they can spread to other persons in the facility;</p> <p>(ii) When and to whom possible incidents of communicable disease or infections should be reported;</p> <p>(iii) Standard and transmission-based precautions to be followed to prevent spread of infections;</p> <p>(iv) When and how isolation should be used for a resident; including but not limited to:</p> <p>(A) The type and duration of the isolation, depending upon the infectious agent or organism involved, and</p> <p>(B) A requirement that the isolation should be the least restrictive possible for the resident under the circumstances.</p> <p>(v) The circumstances under which the facility must prohibit employees with a communicable disease or infected skin lesions from direct contact with residents or their food, if direct contact will transmit the disease; and</p> <p>(vi) The hand hygiene procedures to be followed</p>	F 880			

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F 880	<p>Continued From page 3 by staff involved in direct resident contact.</p> <p>§483.80(a)(4) A system for recording incidents identified under the facility's IPCP and the corrective actions taken by the facility.</p> <p>§483.80(e) Linens. Personnel must handle, store, process, and transport linens so as to prevent the spread of infection.</p> <p>§483.80(f) Annual review. The facility will conduct an annual review of its IPCP and update their program, as necessary. This REQUIREMENT is not met as evidenced by: Based on observation, interview, and record review, the facility failed to ensure staff performed hand hygiene and followed infection control standard of practice during medication administration for 1 of 4 residents observed for medication administration, Resident #7, to prevent the possible spread of infection and communicable diseases.</p> <p>Findings include:</p> <p>During an observation on 3/26/2025 at approximately 9:10 AM, Staff A, Licensed Practical Nurse (LPN), prepared medications for administration to Resident #7, which included Baby Shampoo on a wet washcloth. Staff A donned a gown and gloves and proceeded to clean Resident #7's eyelids with the washcloth containing Baby Shampoo and placed the soiled washcloth on a piece of aluminum foil. Staff A did not remove her gloves or did not perform hand hygiene and proceeded to administer medications to Resident #7 through her gastrostomy tube</p>	F 880		

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F 880	<p>Continued From page 4</p> <p>(G-tube: a thin, flexible tube inserted through the abdominal wall and into the stomach. It is used to provide nutrition and medication to individuals who cannot eat or drink adequately by mouth.) While holding a medicine cup containing a crushed pill of Amlodipine (a medicine for treating high blood pressure) mixed with a small amount of water, Staff A used her gloved finger to stir the mixture before she administered it through Resident #7's G-tube.</p> <p>Review of Resident #7's physician order dated 3/18/2025 showed it read, "Enhanced Barrier for tube feeding."</p> <p>During an interview on 3/26/2025 at approximately 9:30 AM, Staff A, LPN, stated, "I should have washed my hands and changed my gloves after I washed her eyes, before I gave her meds. I shouldn't have mixed the medicine with my finger."</p> <p>During an interview on 3/26/2025 at 10:50 AM, the Director of Nursing (DON) stated, "For a resident who was on Enhanced Barrier Precautions who had a procedure requiring cleaning on her eyes, the nurse should wash her hands and change her gloves before administering any medications through the gastric tube. The nurse should only use a spoon to mix the crushed medication suspended in water in a medication cup."</p> <p>Review of the facility's policy and procedures titled "Medication Administration" last reviewed on 1/19/2025 showed it read, "Policy: Medications are administered by licensed nurses, or other staff who are legally authorized to do so in this state, as ordered by the physician and in</p>	F 880			

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F 880	<p>Continued From page 5</p> <p>accordance with professional standards of practice, in a manner to prevent contamination or infection."</p> <p>Review of the facility's policy and procedures titled "Infection Prevention and Control Program" last reviewed on 1/19/2025 showed it read, "Policy: This facility has established and maintains 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 infection as per accepted national standards and guidelines... Policy Explanation and Compliance Guidelines... 4. Standard Precautions... b. Hand hygiene shall be performed in accordance with our facility's established hand hygiene procedures."</p> <p>Review of the facility's policy and procedures titled "Hand Hygiene" last reviewed on 1/19/2025, showed it read, "Policy: All staff will perform proper hand hygiene procedures to prevent the spread of infection to other personnel, residents, and visitors. This applies to all staff working in all locations within the facility ... Policy Explanation and Compliance Guidelines: 1. Staff will perform hand hygiene when indicated, using proper technique consistent with accepted standards of practice. 2. Hand hygiene is indicated and will be performed under the conditions listed in, but not limited to, the attached hand hygiene table... Hand Hygiene Table - Condition... Before preparing or handling medications... After handling items potentially contaminated with blood, body fluids, secretions, or excretions... When, during resident care, moving from a contaminated body site to a clean body site."</p>	F 880			