

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

PRINTED: 05/26/2015  
FORM APPROVED  
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>146119</b>		(X2) MULTIPLE CONSTRUCTION A. BUILDING _____  B. WING _____		(X3) DATE SURVEY COMPLETED  <b>R</b> <b>05/05/2015</b>	
NAME OF PROVIDER OR SUPPLIER  <b>MEADOWOOD</b>				STREET ADDRESS, CITY, STATE, ZIP CODE <b>320 SECOND STREET</b> <b>GRAYVILLE, IL 62844</b>			
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F 000  {F 366} SS=E	<p><b>INITIAL COMMENTS</b></p> <p>First Certification Revisit to Survey of 4/2/15</p> <p><b>483.35(d)(4) SUBSTITUTES OF SIMILAR NUTRITIVE VALUE</b></p> <p>Each resident receives and the facility provides substitutes offered of similar nutritive value to residents who refuse food served.</p> <p>This REQUIREMENT is not met as evidenced by: Based on observation, record review and interview, the facility failed to provide food substitutes of similar nutritive value for 1 of 7 residents (R6) reviewed for food substitutions in the sample of 7 and 8 residents (R16, R19, R20, R21, R22, R23, R24 and R25) the supplemental sample.</p> <p>The findings include:</p> <p>1. The spreadsheet menu for the noon meal of 5/4/15 called for the service of broccoli to all diets provided by the facility. At 11:35am the steam table of food for the noon meal service contained cooked broccoli and pureed broccoli for service. When questioned E16 (cook) indicated that cauliflower was the substitute vegetable.</p> <p>E7 (Dietary Manager) was questioned about the vegetable substitution during the observation. E7 stated she had a list of A vitamin vegetables for the broccoli substitution on the side of the 3 door reach in cooler. Review of the posted list did not include cauliflower. E7 stated she had looked up the substitution on the Internet and found it was A vitamin suitable. E7 was asked but could not</p>			F 000  {F 366}			

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

TITLE

(X6) DATE

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 366}	Continued From page 1 produce the information she reviewed.	{F 366}			
{F 441} SS=D	<p>The diet cards for the residents R16, R22 and R25 indicated a dislike of broccoli and they were served cauliflower. The residents (R6, R19, R20, R21, R23 and R24) who dislike both vegetables were not served a vegetable. E7 stated during the meal service that if the residents do not like the planned vegetable or the alternate then they are not served a vegetable at that meal.</p> <p>483.65 INFECTION CONTROL, PREVENT SPREAD, LINENS</p> <p>The facility must establish and maintain an Infection Control Program designed to provide a safe, sanitary and comfortable environment and to help prevent the development and transmission of disease and infection.</p> <p>(a) Infection Control Program The facility must establish an Infection Control Program under which it - (1) Investigates, controls, and prevents infections in the facility; (2) Decides what procedures, such as isolation, should be applied to an individual resident; and (3) Maintains a record of incidents and corrective actions related to infections.</p> <p>(b) Preventing Spread of Infection (1) When the Infection Control Program determines that a resident needs isolation to prevent the spread of infection, the facility must isolate the resident. (2) 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.</p>	{F 441}			

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{F 441}	<p>Continued From page 2</p> <p>(3) The facility must require staff to wash their hands after each direct resident contact for which hand washing is indicated by accepted professional practice.</p> <p>(c) Linens Personnel must handle, store, process and transport linens so as to prevent the spread of infection.</p> <p>This REQUIREMENT is not met as evidenced by: Based on interview, record review, and observations the facility failed to use a barrier to prevent the spread of infection, for wound care for 3 of 3 residents (R1, R2, R18) reviewed for wound care in the sample of 7.</p> <p>Findings Include:</p> <p>1. On 5/4/15 at 10:40AM, E18 (Licensed Practical Nurse) pushed the treatment cart into R1's room for wound care. E18 washed her hands and applied gloves before setting up the supplies needed for wound care. E18 placed 2 blue cups with 4x4 gauze in them and a medication cup with Hibiclens solution on top of the treatment cart without a barrier. E18 at this time stated she did not clean the top of the treatment cart before she pushed it into R1's room. E18 then put saline on the 4x4 gauze in one of the cups. E18 then removed the dressing from around the Gastrostomy Tube (G Tube). The site around the G Tube is very red, the dressing has moderate amount of purulent drainage on it, and there is a small amount of purulent drainage around the G Tube. E18 then cleaned the G Tube site with</p>	{F 441}			

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{F 441}	<p>Continued From page 3</p> <p>Hibiclens and then saline. The site was then dried with a 4x4 gauze. E18 then removed her gloves and washed her hands. E18 then applied gloves and applied a split sponge dressing to the G Tube site. On 5/5/15 at 8:10AM E8 (Registered Nurse/ Minimum Data Set Coordinator) stated the G Tube site appearance has changed since last week. E8 went on to say R1's physician was notified, an order for a culture of the G Tube site was received, obtained, and sent to the laboratory.</p> <p>The G Tube Care Policy (undated) documents 'It is the policy of this facility to provide and maintain an environment that reduces the risk of transmission and healthcare associated infections'. Procedure #7 documents 'set up supplies onto clean barrier'.</p> <p>2. On 5/4/15 at 1:15PM, E19 (Registered Nurse) placed 2 blue cups with 2 gauze 4x4's in each cup, a medication cup containing Hibiclens, and a package of dressings on top of the treatment cart without a barrier. All supplies were then taken into R2's room and set on a bedside table without a barrier. E19 then washed her hands, applied gloves and then removed the old dressing. E19 then placed the old dressing into the trash bag and removed her gloves. E19 again washed her hands and applied gloves. E19 started to clean the Gastrostomy Tube (G Tube) but stopped to pull table closer to her. E19 did not change her gloves or wash her hands but continued to clean around the G Tube with the Hibiclens solution, saline solution gauze, and then dry around the G Tube with a 4x4 gauze. E19 placed all used supplied into the trash bag and removed her gloves. E19 then washed her hands, applied gloves, and applied a split sponge dressing to the</p>	{F 441}			

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{F 441}	<p>Continued From page 4</p> <p>G Tube site.</p> <p>The G Tube Care Policy (undated) documents 'It is the policy of this facility to provide and maintain an environment that reduces the risk of transmission and healthcare associated infections'. Procedure #7 documents 'set up supplies onto clean barrier'.</p> <p>3. On 5/4/15 at 1:30PM, E19 (Registered Nurse) placed two blue cups with 2- 4x4's gauze in each blue cup on the treatment cart, without a barrier. E19 touched the top of the saline bottle to the gauze dressing in one of the cups. E19 did not dispose of dressings that touched the top of the saline bottle. Next E19 placed the two medication cups on top of the treatment cart without a barrier, and putting Hibiclens in one and Muperion Ointment in the other. E19 then picked up all cups and a dressing and took them to R18's room and placed them on R18's side table, without a barrier, that he shares with his wife. The side table has drinks and paper items on it. E19 then picked up the blue cups containing gauze, medications cups, and the dressing and placed a barrier under the items on the table. E19 then washed her hands and applied gloves. E19 then cleaned the wound under R18's left jaw with Hibiclens, wiped with saline soaked 4x4 gauze, and dried with a 4x4 gauze placing all item in a trash bag as she used them. Next, E19 removed her gloves, placed them in the trash, and washed her hands. E19 then applied gloves, applied Muperion Ointment to the wound and covered the wound with a dressing. E19 then disposed of the trash and washed her hands.</p> <p>The General Wound Care Policy (undated) documents to use clean technique during wound care.</p>	{F 441}			

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