

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER / SUPPLIER / CLIA IDENTIFICATION NUMBER 045140	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 08/20/2020
NAME OF PROVIDER OF SUPPLIER SEARCY HEALTHCARE LLC		STREET ADDRESS, CITY, STATE, ZIP 1205 SKYLINE DRIVE SEARCY, AR 72143	
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)		
F 0550 Level of harm - Minimal harm or potential for actual harm Residents Affected - Few	Honor the resident's right to a dignified existence, self-determination, communication, and to exercise his or her rights. **NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on observation, interview, and record review, the facility failed to ensure staff did not stand over residents while assisting with meals to promote residents rights and dignity for 1 (Resident #3) of 6 residents who required assistance with meals on Hall #6 according to list provided by the Administrator on 08/07/2020. The findings are: Resident #3 had a [DIAGNOSES REDACTED]. The Quarterly Minimum Data Set (MDS) with an Assessment Reference Date (ARD) of 05/01/2020, documented the resident scored 13 (13-15 cognitively intact) per a Brief Interview for Mental Status and required set up help only for eating. An in-progress Significant Change MDS with an ARD of 07/31/2020, documented Resident #3 required limited assist of 1 person for eating. a. A care plan with a revision date of 08/06/2020 documented, . at risk for decline in ADL (activities of daily living) functioning r/t (related to) cognitive deficits & behaviors . EATING: Independent after set-up at times, however, at other times she requires limited assist X (times) 1 staff . b. On 08/06/2020 at 12:34 p.m., Resident #3 was sitting at the dining table on Hall #6 being assisted with eating. Occupational Therapy Assistant (OTA) #1 was standing to the left side and over Resident #3 assisting with eating. OTA #1 was asked, Should you stand over the residents while feeding them? OTA #1 replied, No, I'm just here to help out, I hadn't planned on helping to feed. OTA #1 was asked, Does (Resident #3) need assistance to eat? OTA #1 replied, She has had a decline. OTA #1 was asked, Would standing over a resident and feeding them be considered a dignity issue? OTA #1 replied, Yes. c. On 08/07/2020 at 08:42 a.m., the Administrator was asked, Should staff stand over a resident when assisting with eating? The Administrator replied, No. The Administrator was asked, Would that be considered a dignity issue? The Administrator replied, Yes. d. On 08/07/2020 at 08:49 a.m., the Director of Nursing (DON) was asked, Should staff stand over a resident when assisting with eating? The DON replied, No. The DON was asked, Would that be considered a dignity issue? The DON replied, Yes. e. On 08/07/2020 at 11:30 a.m., Licensed Practical Nurse (LPN) # 2 was asked, Should staff stand over a resident when assisting with eating? LPN #2 replied, No. LPN #2 was asked, Would that be considered a dignity issue? LPN #2 replied, Yes. f. The Resident Rights Policy provided by the Administrator on 08/06/2020 documented, .The resident has the right to a dignified existence, self-determination, and communication with and access to persons and services inside and outside the facility .The resident has a right to be treated with respect and dignity .		
F 0880 Level of harm - Minimal harm or potential for actual harm Residents Affected - Some	Provide and implement an infection prevention and control program. **NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on observation, interview, and record review, the facility failed to ensure implementation of proper infection prevention and control practices to prevent the development and transmission of COVID-19 and other communicable diseases and infections by not properly wearing face masks to cover the mouth and nose, and failed to ensure trash and linens were not on the floor, urinals were emptied and not on bedside tables, and nebulizer tubing and mouthpiece equipment was contained in a plastic bag when not in use to prevent the potential spread of infection. This failed practice had the potential to affect 95 residents according to the Roster Matrix provided by the Director of Nurses (DON) on 08/06/2020. The findings are: 1. On 08/06/2020 at 9:29 a.m., Housekeeper #1 was cleaning the dining room on Hall 3. Housekeeper #1's face mask was not covering the nose. Housekeeper #1 was asked, Is your mask supposed to cover your mouth and nose? Housekeeper #1 pulled the mask over the nose and replied, It is now, it's big and falls. (Photo taken.) 2. On 08/06/2020 at 9:52 a.m., in Resident room [ROOM NUMBER] a urinal with 325cc (cubic centimeters) of yellow liquid was sitting on a bedside table and a nebulizer mouthpiece and tubing dated 08/03/2020 was in a recliner and was not contained in a plastic bag. (Photos taken.) 3. On 08/06/2020 at 9:59 a.m., a clear plastic bag with linens was on the floor in Resident room [ROOM NUMBER]. Certified Nursing Assistant (CNA) #1 was asked, What is that in the bag on the floor? CNA #1 replied, They are clean towels, I was fixing to give a shower. CNA #1 was asked, Should they be on the floor? CNA #1 replied, No. CNA #1 was asked, Would that be an infection control issue? CNA #1 replied, Yes. CNA #1 was asked, Should urinals be sitting on resident's bedside table with 325cc of yellow liquid? CNA #1 replied, No. CNA #1 was asked, Would that be considered an infection control issue? CNA #1 replied, Yes. CNA #1 was asked, Who is responsible for ensuring urinals are emptied? CNA #1 replied, Anyone who walks into the room. (Photos taken.) 4. On 08/06/2020 at 10:22 a.m., two clear plastics bags containing, briefs, newspaper, and cans were on the floor on Hall 6. Licensed Practical Nurse (LPN) #1 was asked, What is that in the bags on the floor, does it have briefs in it? LPN #1 replied, Yes. LPN #1 was asked, Would this be considered an infection control issue? LPN #1 replied, Yes. (Photos taken.) 5. On 08/06/2020 at 10:48 a.m., in Resident room [ROOM NUMBER] a nebulizer mouthpiece and tubing were resting on the nebulizer machine and not contained in a plastic bag. (Photos taken.) 6. On 08/06/2020 at 12:16 p.m., three staff members and four residents were gathered around the dining table and not six feet apart on Hall 2. CNA #2's face mask was not covering the mouth or nose. CNA #2 was asked, Should your mask cover your mouth and nose? CNA #2 replied, Yes. 7. On 08/07/2020 at 8:42 a.m., the Administrator was asked, Should bags of trash be on the floor? The Administrator replied, No. The Administrator was asked, Should nebulizer tubing be left out in the open and not bagged when not in use? The Administrator replied, No. The Administrator was asked, Should linens be on the floor? The Administrator replied, No. The Administrator was asked, Should urinals be left on a resident's bedside table? The Administrator replied, No. The Administrator was asked, Should staff wear face masks covering their mouth and nose? The Administrator replied, Yes. The Administrator was asked, Would all these things be considered an infection control issue? The Administrator replied, Yes. 8. On 08/07/2020 at 8:49 a.m., the Director of Nursing (DON) was asked, Should bags of trash be on the floor? The DON replied, No. The DON was asked, Should nebulizer tubing be left out in the open and not bagged when not in use? The DON replied, No. The DON was asked, Should linens be on the floor? The DON replied, No. The DON was asked, Should urinals be left on a resident's bedside table? The DON replied, No. The DON was asked, Should staff wear face masks covering their mouth and nose? The DON replied, Yes. The DON was asked, Would all these things be considered an infection control issue? The DON replied, Yes. 9. The Garbage and Refuse Disposal Policy provided by the Administrator on 08/07/2020 documented, .To maintain an odorless and safe environment that minimizes sanitary concerns to the extent possible. 1. Resident rooms will have garbage/refuse picked up daily and disposed of in approved container . 10. The Laundry/Linen Handling Policy provided by the Administrator on 08/06/2020 documented, .Personnel must handle, store, process and transport linens to aide in prevention of the spread of infection . Prevent and control outbreaks and cross-contamination using transmission-based precautions in addition to standard precautions . 11. The Infection Control Policy provided by the Administrator on 08/06/2020 documented, .The infection control policy is designed to provide a safe, sanitary and comfortable environment to help prevent the development and transmission of communicable disease and infections . 12. The Standard of Care For Cleaning Nebulizer Equipment provided by the Administrator on 08/06/2020 documented, .when equipment is dry store in plastic bag with date on it . 13. An Arkansas Department of Health Face		
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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<p>F 0880</p> <p>Level of harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>(continued... from page 1)</p> <p>Coverings Directive, Issued July 18, 2020 and Effective July 20, 2020 documented, .The Secretary of Health requires every person in Arkansas to wear a face covering completely over the mouth and nose in all indoor environments .</p>		