

Department of Health & Human Services
Centers for Medicare & Medicaid Services

Printed: 06/30/2025
Form Approved OMB
No. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 115541	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 06/06/2023
NAME OF PROVIDER OR SUPPLIER Crossview Care Center		STREET ADDRESS, CITY, STATE, ZIP CODE 402 E. Bay St Pineview, GA 31071	
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 0584 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Some	<p>Honor the resident's right to a safe, clean, comfortable and homelike environment, including but not limited to receiving treatment and supports for daily living safely.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 21213</p> <p>Based on observations, staff interviews, and review of the facility's housekeeping plan of correction, the facility failed to maintain an environment free from a build-up of dirt, debris, stains, smears, damaged baseboards, peeling/scuffed paint, missing bathroom fixtures, and supplies for three resident bathrooms, two shower rooms, and one dining room on one of three halls (West Hall secured unit). The deficient practice had the potential to affect all residents residing on the secured unit by not providing a clean, sanitary, and homelike environment and living space.</p> <p>Findings include:</p> <p>During an interview on 5/30/2023 at 11:30 a.m., with Project Crew members DD and EE revealed that the previous maintenance person had quit. They stated that they were part of a crew that traveled from facility to facility and had been at this facility for about a week and a half.</p> <p>Interview on 6/1/2023 at 4:30 p.m., with the Director of Nursing (DON) stated that the current Administrator and previous Administrator had identified concerns with housekeeping including the concerns on the secured unit.</p> <p>Interview on 6/1/2023 at 5:00 p.m. with the Administrator revealed that he had identified issues with housekeeping and that it was not up to his expectations.</p> <p>A review of the Client Survey/Facility Assessment-Plan of Correction form, with the contracted housekeeping company, revealed that an onsite visit was completed on 6/1/2023, and the plan of correction was initiated on 6/2/2023. The plan included the concerns of room cleanliness, resident room cleaning, resident rooms, and housekeeping staffing. The plan of correction included the housekeeping staff was provided with in-service education on 6/2/2023. The in-service education included a 5-Step daily patient room cleaning procedure and a 7-step daily washroom cleaning.</p> <p>The following observations were made on the [NAME] Hall secured unit:</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 0584</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>1. During an observation on 5/15/2023 at 1:42 p.m. and on 6/5/2023 at 9:50 a.m., in the shared bathroom for rooms two and four, the toilet tank did not have a lid and the toilet seat was loose and askew. There was a stale urine odor. There was no toilet paper or toilet paper holder. During observations on 6/5/2023 at 9:50 a.m. and again on 6/6/2023 during environmental observations with the Administrator between 11:00 a.m. and 11:30 a.m. there was a pile of clothes in the corner near the sink. There were two spots of a thick brown substance on the floor along with two pieces of opened plastic packaging. There was no toilet paper or toilet paper holder, and the toilet tank did not have a lid. During the observation on 6/6/2023 with the Administrator, he stated that he was going to have to talk with housekeeping.</p> <p>2. During an observation on 5/15/2023 at 1:45 p.m., in the shared bathroom for rooms five and seven, there were spots and smears of a dried brown substance on the wall and baseboard beside the toilet and on the bathroom door frame for the room seven entrance to the bathroom. During an observation on 6/5/2023 at 9:55 a.m., there were dried brown smears and stains on the wall beside the toilet. There was no toilet paper or toilet paper holder. There were no paper towels in the wall-mounted paper towel dispenser. The call light switch was missing the attached string. During environmental observations with the Administrator on 6/6/2023 between 11:00 a.m. to 11:30 a.m., there were dried brown smears and stains on the wall and the baseboard beside the toilet. There was no toilet paper or toilet paper holder. There were no paper towels in the paper towel dispenser, and the call light switch was missing the attached string. The Administrator stated that the cleaning needed to be more thorough.</p> <p>3. During observations on 5/30/2023 at 10:35 a.m. and on 6/1/2023 at 3:10 p.m., in the shared bathroom for rooms [ROOM NUMBERS] the baseboard was partially detached from the wall behind the toilet and near the sink. There was no toilet paper, and the toilet paper holder did not have a spindle. During an observation on 6/5/2023 at 3:50 p.m., there were no paper towels in the wall-mounted paper towel dispenser. There was no toilet paper, and the toilet paper holder did not have a spindle. The baseboard behind the toilet and near the sink remained partially detached from the wall.</p> <p>During environmental observations with the Administrator on 6/6/2023 between 11:00 a.m. to 11:30 a.m., there were no paper towels in the paper towel dispenser. There was no toilet paper, and the toilet paper holder did not have a spindle. The baseboard behind the toilet and near the sink remained partially detached from the wall.</p> <p>4. During observations on 6/5/2023 at 10:00 a.m., 1:05 p.m., 3:53 p.m., and on 6/6/2023 at 9:12 a.m., in the secured unit dining room, there were multiple dried white stains running down the large windows. There were also multiple random pieces of clear tape attached to the windows. There was a buildup and collection of dirt, debris, dried stains, scuffed and peeling paint to the lower portions of the walls, windowsills, and baseboards that wrapped around the dining room.</p> <p>During environmental observations with the Administrator on 6/6/2023 between 11:00 a.m. and 11:30 a.m., a staff member was cleaning and buffing the floor of the dining room. The build-up of dirt, debris, dried stains, scuffed and peeling paint remained on the lower portions of the walls, windowsills, and baseboards. There were multiple dried white stains and pieces of tape attached to the large windows. The Administrator stated that they were going to do some painting in the dining room.</p>		

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<p>F 0925</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Make sure there is a pest control program to prevent/deal with mice, insects, or other pests.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 21213</p> <p>Based on observations, resident and staff interviews, and review of pest control service records, the facility failed to maintain an environment free from flies on two of three halls (East and [NAME] Hall), in one of two dining rooms and for one of 15 resident's resident (R)(A).</p> <p>Findings include:</p> <p>A review of the facility fly control program contract revealed a fly control program has been in place since 6/8/2018. A review of pest control service records for 2023 revealed pest control services, including for flies, had been provided monthly on 1/18/2023, 2/20/2023, 3/20/2023, 4/19/2023, 5/19/2023, and 6/5/2023. However, flies were observed in the facility in the following areas:</p> <p>East Hall</p> <p>A review of the 5/19/2023 pest control service record revealed a notation from the service technician to please keep all ultraviolet light (UVL) fly equipment plugged in. However, during observations on 6/5/2023 at 11:23 a.m. and 2:03 p.m., the UVL mounted on the wall at the end of the East Hall was unplugged.</p> <p>During a medication pass task observation on 6/5/2023 at 11:41 a.m., on the East Hall, two flies were observed in room [ROOM NUMBER] crawling on (R) A's pillow, bed linens, overbed table, and his forehead. RA attempted to swat the flies away. During a subsequent observation on 6/5/2023 at 1:00 p.m., two flies were observed flying around RA while he was in bed eating lunch. The flies were observed crawling on the resident, the bed linens, and overbed table where his lunch tray was set up. RA, when asked if he usually had flies in his room, responded yes, every day.</p> <p>West Hall (secured unit)</p> <p>1. During an observation of room four, on the [NAME] Hall (secured unit), on 5/15/2023 at 1:42 p.m., flies were observed flying around the room, near the closed bathroom door. When the bathroom door was opened multiple small insects, which were flying around the bathroom, flew out toward the door when it was opened. During an observation of room four on 6/5/2023 at 9:50 a.m., two flies were flying around the room. Flies were also observed flying around the room four bathroom. During environmental observation rounds with the Administrator on 6/6/2023 from 11:00 a.m. to 11:30 a.m., two flies were observed on the privacy curtain in room four, near the open bathroom door.</p> <p>2. During an observation of room seven, on the [NAME] Hall (secured unit), on 6/5/2023 at 9:55 a.m., two flies were observed crawling on the first bed. During an environmental observation rounds with the Administrator on 6/6/2023 from 11:00 a.m. to 11:30 a.m., a fly was observed crawling on the first bed in room seven.</p> <p>Main Dining Room</p> <p>During observations on 6/5/2023 at 4:39 p.m. and 6/6/2023 at 8:05 a.m., multiple dead flies (more than 27) were observed on the windowsills underneath the line of windows in the main dining room.</p> <p>(continued on next page)</p>		

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F 0925 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Some	During environmental observation rounds with the Administrator on 6/6/2023 from 11:00 a.m. to 11:30 a.m., he confirmed that the pest control company was at the facility the day prior, on 6/5/2023, for their monthly service visit. The Administrator stated that he had spoken to the pest control service technician about flies, and they discussed adding additional UVL's in the facility.		