| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | (X1) PROVIDER / SUPPLIER / CLIA IDENNTIFICATION NUMBER | (X2) MULTIPLE CONSTRUCTION | (X3) DATE SURVEY COMPLETED |
|---|---|---|---|
| | **155735** | A. BUILDING _____ B. WING _____ | **10/14/2020** |

| NAME OF PROVIDER OF SUPPLIER | STREET ADDRESS, CITY, STATE, ZIP |
|---|---|
| **ASHFORD PLACE HEALTH CAMPUS** | **2200 N RILEY HWY SHELBYVILLE, IN 46176** |

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 0880<br><br>**Level of harm -** Minimal harm or potential for actual harm<br><br>**Residents Affected -** Few | **Provide and implement an infection prevention and control program.**<br>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY**<br>Based on observation, interview, and record review, the facility failed to ensure staff performed hand hygiene prior to donning PPE (personal protective equipment) and discard PPE prior to exiting a resident's room who was on droplet isolation for 1 of 3 residents reviewed for infection control. (Resident B) Findings include: The clinical record for Resident B was reviewed on 10/14/20 at 2:23 p.m. The [DIAGNOSES REDACTED]. She was admitted to the facility on [DATE]. The physician's orders [REDACTED]. Observations of the facility were made with the facility's IP (Infection Preventionist) on 10/14/20 at 1:40 p.m. The facility had a hallway with closed double doors to a unit labeled as the yellow zone where Resident B resided. LPN (Licensed Practical Nurse) 1 was observed to enter Resident B's room with a mask, face shield, gown and gloves. There was a white isolation bin just outside of the room that contained PPE and hand sanitizer. Upon exiting Resident B's room, LPN 1 had her used gloves balled up in her hand. She walked down the hall towards the nurses desk where she threw the gloves away inside of a small trash can with no lid. QMA (Qualified Medication Aide) 2 took the trash can down the hall and placed it outside of Resident B's room, next to the white isolation bin. The gloves were visible inside of the trash can. The DPO (Director of Plant Operations) entered the yellow unit wearing a surgical mask and face shield, carrying a television to install in Resident B's room. The DPO asked the IP if he could enter Resident B's room. The IP informed him he need to don additional PPE prior to entering. The DPO set the television on the floor in the hallway, opened the drawer to Resident B's isolation cart and retrieved a gown. The DPO put the gown on, with assistance from LPN 1. The DPO then retrieved gloves from the isolation bin and donned the gloves. The DPO did not perform hand hygiene prior to donning the additional PPE. The DPO then donned an additional mask directly over his surgical mask and entered Resident B's room. An interview was conducted with LPN 1 on 10/14/20 at 2:00 p.m. She indicated she left her used gown in Resident B's restroom on a rack, and she brought her used gloves out of the room into the hallway to throw away, because there was no trash can in the room. An interview was conducted with the DPO on 10/14/20 at 2:05 p.m., prior to him entering Resident B's room. He indicated he did not perform hand hygiene prior to donning his gown and gloves, but he washed his hands before he entered the unit carrying the television. An interview was conducted with the IP on 10/14/20 at 2:10 p.m. She indicated the residents on the unit had just moved into their rooms earlier that day and she hadn't yet done an assessment of what was still needed on the unit, but she knew they needed trash cans for the rooms. She did not see the DPO perform any hand hygiene prior to donning additional PPE, but he should have. The CDC (Centers for Disease Control) Covid-19 Using Personal Protective Equipment Guidance reads, How to Put On (Don) PPE Gear .1. Identify and gather the proper PPE to don. Ensure choice of gown size is correct (based on training). 2. Perform hand hygiene using hand sanitizer. 3. Put on isolation gown. Tie all of the ties on the gown. Assistance may be needed by other healthcare personnel. 4. Put on NIOSH-approved N95 filtering facepiece respirator or higher .5. Put on face shield or goggles 6. Put on gloves. Gloves should cover the cuff (wrist) of gown. 7. Healthcare personnel may now enter patient room. How to Take Off (Doff) PPE Gear .1. Remove gloves. Ensure glove removal does not cause additional contamination of hands. Gloves can be removed using more than one technique (e.g., glove-in-glove or bird beak). 2. Remove gown. Untie all ties (or unsnap all buttons). Some gown ties can be broken rather than untied. Do so in gentle manner, avoiding a forceful movement. Reach up to the shoulders and carefully pull gown down and away from the body. Rolling the gown down is an acceptable approach. Dispose in trash receptacle. 3. Healthcare personnel may now exit patient room. 4. Perform hand hygiene The Guideline for Handwashing/Hand Hygiene policy was provided by the ED (Executive Director) on 10/14/20 at 3:23 p.m. It indicated, All health care workers shall utilize hand hygiene frequently and appropriately. |

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE | TITLE | (X6) DATE