

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER / SUPPLIER / CLIA IDENTIFICATION NUMBER 155272	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 10/09/2020
NAME OF PROVIDER OF SUPPLIER ALLISON POINTE HEALTHCARE CENTER		STREET ADDRESS, CITY, STATE, ZIP 5226 E 82ND ST INDIANAPOLIS, IN 46250	
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 Level of harm - Minimal harm or potential for actual harm Residents Affected - Some	<p>Provide and implement an infection prevention and control program.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY**</p> <p>Based on observation, interview and record review, the facility failed to ensure appropriate mask wearing while within close proximity to a resident (Resident D) and ensure face masks were stored in an appropriate manner for use in 8 rooms observed for infection control practices. Findings include: 1. During an observation conducted on 10/9/20 at 1:32 p.m., three residents were observed in the smoking area, off of the Cambridge Unit. Resident D was sitting at the table smoking, with his face mask down, and Certified Nursing Assistant (CNA) 2 was noted sitting next to Resident D with her mask pulled down that exposed her nose and mouth. CNA 2 was not social distancing while sitting at the same table as Resident D with her mask pulled down. 2. An observation was conducted of the facility's isolation rooms, on 10/9/20 at 2:10 p.m., and the following was noted: room [ROOM NUMBER] with a face mask hanging on the inside of the room not enclosed, room [ROOM NUMBER] with 2 face masks hanging on the inside of the room not enclosed, room [ROOM NUMBER] with 2 face masks hanging on the inside of the room not enclosed, room [ROOM NUMBER] with 1 face mask hanging on the inside of the room not enclosed, room [ROOM NUMBER] with 2 face masks hanging on the inside of the room not enclosed, room [ROOM NUMBER] with 1 mask and 1 gown hanging on a hook outside of the room, room [ROOM NUMBER] with 1 mask hanging on the door not enclosed & room [ROOM NUMBER] with 1 mask hanging on the inside of the room not enclosed. An interview conducted with Staff Member 4, on 10/9/20 at 2:14 p.m., indicated the gowns and face masks, identified as N95 respirator masks, are located on the inside of the room for the nursing staff to don such upon entrance to those specific rooms. The staff are to remove a surgical mask, if worn, and apply the N95 respirator mask for residents on transmission based precautions. An interview conducted with the Regional Director of Clinical Operations (RDCO), on 10/9/20 at 4:00 p.m., indicated the staff are not to hang the N95 respirator mask(s) in the rooms. They needed to be secured in a paper bag. She believes the facility staff were under the impression to utilize N95 masks for single use. The staff should maintain social distancing guidelines and utilize a face mask while at work. The face mask should not be pulled down to expose nose and/or mouth. A policy titled Criteria for COVID-19 Isolation, revised 8/18/2020, was provided by the RDCO on 10/9/20 at 3:30 p.m. The policy indicated the following, ' .Policy: .This policy is to assist with guidance on how to manage COVID-19 Isolation Unit .2. An at risk unit (yellow) .At Risk for COVID-19 Unit .This unit will be used for residents who may be at risk for developing COVID-19, such as new admits (admissions), residents who have been exposed, but not showing signs and symptoms, etc .Process for the At Risk unit: .2. Full PPE (personal protective equipment) will be used while working on the unit. Full PPE consist of N95 mask, gloves, gown and eye covers .3. N95 masks will be used per the N95 policy .5. N95 and face shield/goggles will be changed out (sic) if they become damaged or soiled A policy titled N95 Respirators, revised 5/8/2020, was provided by the RDCO on 10/9/20 at 3:30 p.m. The policy indicated the following, .The similarities among surgical masks and surgical N95's are: .They should not be shared or reused .All FDA-cleared N95 respirators are labeled as single-use, disposable devices. If your respirator is damaged or soiled, or if breathing becomes difficult, you should remove the respirator, discard it properly, and replace it with a new one. To safely discard your N95 respirator, place it in a plastic bag and put it in the trash 3.1-18</p>		

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.