

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER / SUPPLIER / CLIA IDENTIFICATION NUMBER <b>045189</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED <b>07/14/2020</b>
NAME OF PROVIDER OF SUPPLIER <b>SOMERSET SENIOR LIVING AT PINE HILLS</b>		STREET ADDRESS, CITY, STATE, ZIP <b>900 MAGNOLIA RD CAMDEN, AR 71701</b>	
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  <b>Level of harm - Minimal harm or potential for actual harm</b>  <b>Residents Affected - Some</b>	<p><b>Provide and implement an infection prevention and control program.</b></p> <p>Based on observation, record review, and interview, the facility failed to maintain social distancing of 6 feet between residents eating in the Main Dining Room and in the dining rooms of the Secured Co-Ed Unit and Male Secured Unit and / or serve the residents in their rooms for 12 (Residents #1, #2, #3, #4, #5, #11, #12, #13, #16, #17, #24 and #25) residents who dined in the Main Dining Room, 10 (Residents #6, #7, #8, #9, #10, #15, #18, #19, #20, and #2) residents who dined in the Secured Co-Ed Unit Dining Rooms, and 2 (Residents #22 and #23) residents who dined together in the Male Secured Unit Dining Room. These failed practices had the potential to affect 12 residents who dined in the Main Dining Room, 11 residents who dined in the Secured Co-Ed Unit Dining Room, and 2 residents who dined together in the Male Secured Unit, as documented on a list provided by the Administrator on 7/14/2020. The findings are: 1. On 7/10/2020 at 12:33 p.m., six tables were in the Main Dining Room located by the Dietary Department. There were 2 residents at each of the tables, with Residents #1, #2, #3, #4, #5, #11, #12, #13, #16, #17, #24, and #25 not distanced at least 6 feet apart for appropriate social distancing. The residents were seated approximately 1 to 2 feet apart. Certified Nursing Assistants (CNA) #1 and #2 were seated at 2 of the dining tables during the noon meal and made no attempt to distance any resident at least 6 feet apart. a. On 7/10/2020 at 12:40 p.m., the Director of Nursing (DON) was asked to accompany the surveyor to the Main Dining Room where the residents were seated at a distance of approximately 1 to 2 feet apart. The DON was asked if the residents who were seated 2 to a table were distanced at least 6 feet apart. The DON stated, No. 2. On 7/10/20 at 12:48 p.m., the residents seated at the dining tables in the Main Dining Room of the Co-Ed Secured Unit were not socially distanced at least 6 feet apart. Residents #8 and #9 were seated at one table and were sitting across from each other. The residents were approximately one and one-half feet to two feet apart. Residents #6, #18, #20, and #21 were seated at a table and were sitting approximately 1 to 2 feet apart. In the adjoining Dining Room there were 2 tables. There were 2 residents at each table (Residents #7, #10, and #15) and the residents were seated approximately one to two feet apart at each of the two tables. The CNA in the Dining Room did not intervene to distance the residents at least 6 feet apart or redirect the residents to sit further apart. The DON was asked to accompany the Surveyor to the Co-Ed Secured Unit and was asked if the tables with 2 residents seated at each table were socially distanced at least 6 feet apart. The DON stated, No. The DON was asked if the residents seated at the table with 4 residents were socially distanced at least 6 feet apart. The DON stated, No. At 12:49 p.m., the DON was asked if the residents seated at the 2 tables in the adjoining dining area were seated with at least 6 feet distance between them. The DON stated, No. 3. On 7/10/20 at 12:52 p.m., two residents were seated at the long dining tables on the Male Secured Unit, each with a meal tray. The residents were seated approximately 6 feet apart with each resident seated diagonally across from each other. A third meal tray was on the end of the table, approximately 8 to 10 inches from Resident #22. a. On 7/10/2020 at 12:53 p.m., Resident #23 propelled his wheelchair to the dining table and positioned the wheelchair at the end of the table by the third meal tray. This resident was seated approximately 10 inches from Resident #22 who was seated at the table. The CNA staff did not attempt to socially distance the 2 residents. The DON was asked to accompany the Surveyor to the Male Secured Unit and was asked, Are the two residents at the end of the table socially distanced at least 6 feet apart? The DON stated, No.</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.