

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER / SUPPLIER / CLIA IDENTIFICATION NUMBER <b>425142</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED <b>08/04/2020</b>
NAME OF PROVIDER OF SUPPLIER <b>HEARTLAND HEALTH CARE CENTER - UNION</b>		STREET ADDRESS, CITY, STATE, ZIP <b>709 RICE AVENUE UNION, SC 29379</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</b> - Minimal harm or potential for actual harm  <b>Residents Affected</b> - Some	<p><b>Provide and implement an infection prevention and control program.</b></p> <p>Based on guidance from the Centers for Disease Control (CDC), facility records, staff interviews and the Environmental Protection Agency (EPA) list of disinfectants for use with COVID-19, the facility failed to screen two of 31 staff members prior to beginning their shift, and also failed to use a disinfectant in the kitchen that was effective against COVID-19. This deficient practice occurred during the COVID-19 pandemic. The findings included: 1. The CDC guidance, Preparing for COVID-19 in Nursing Homes, last updated 06/25/20, states, Screen all HCP (Healthcare Personnel) at the beginning of their shift for fever and symptoms of COVID-19. *Actively take their temperature and document absence of symptoms consistent with COVID-19. The facility's document titled, Focused Employee Temperature and Signs/Symptoms Log was reviewed for 08/04/20 and compared to the list of employees working in the facility that day. Review and comparison revealed two of the 31 staff members had not signed in, recorded their temperatures, or completed the questionnaire regarding possible COVID-19 symptoms on 08/04/20. On 08/04/20 at 1:34 PM, Certified Nursing Assistant (CNA) #1 was interviewed about the failure to sign in and respond to the potential COVID-19 symptoms prior to beginning work. CNA #1 said, There was nobody out here when I got here. I took my own temperature and then went to the time clock to clock in because I was running late and forgot to come back to sign in at the book. The CNA confirmed that training had been provided about the importance of being screened prior to beginning the shift and providing care for the residents. On 08/04/20 at 2:11 PM, CNA #2 was interviewed about failure to sign in and respond to the potential COVID-19 symptoms prior to beginning work. CNA #2 said, I just ran in and took my temperature and clocked in and forgot to sign in and fill in the blanks (respond to the questions about potential symptoms). The CNA confirmed that training had been provided about the importance of being screened prior to beginning the shift and providing care for the residents. An interview was conducted with the Director of Nursing/Infection Preventionist (DON/IP) on 08/04/20 at 3:09 PM. The DON/IP stated that training had been provided to all staff about screening prior to beginning work and the expectation was that all staff would respond to the COVID-19 questionnaire before every shift. 2. The Dietary Manager (DM) was interviewed on 08/04/20 at 10:02 AM, about the measures taken to prevent the spread of COVID-19 and the effectiveness of the sanitizing solution used in the kitchen. The DM stated the kitchen staff disinfect more frequently and change out the disinfecting solution about every two to four hours. The DM indicated they were using the same solution they had always used and specified, We are using the Quat 146 solution. The facility provided the Safety Data Sheet for the Multi-Quat Sanitizer with the EPA Registration number: 1677-198. The data sheet did not indicate the sanitizer was effective against COVID-19. Review of the EPA website titled, Disinfectant Use and Coronavirus (COVID-19) revealed a list of disinfectants for use on pathogens like the novel coronavirus that caused COVID-19. The Multi-Quat sanitizer was not listed on the EPA website. The facility was unable to provide evidence that the Multi-QUAT 146 sanitizer was effective against COVID-19. An interview was conducted with the Administrator on 08/04/20 at 3:26 PM. The Administrator had an expectation that the Dietary Manager would know what was effective and should be used in the kitchen. The Administrator indicated they would switch to a disinfectant effective against COVID-19.</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.