

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 150129	X2) MULTIPLE CONSTRUCTION A. BUILDING 00 B. WING _____	X3) DATE SURVEY COMPLETED 12/30/2013
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NAME OF PROVIDER OR SUPPLIER COMMUNITY WESTVIEW HOSPITAL	STREET ADDRESS, CITY, STATE, ZIP CODE 3630 GUION RD INDIANAPOLIS, IN 46222
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S000000	<p>This visit was for a State complaint survey.</p> <p>Intake Number IN00139710 Unsubstantiated: lack of sufficient evidence. One (1) unrelated State deficiency cited</p> <p>Survey Date: 12-30-13</p> <p>Facility Number: 005110</p> <p>Surveyor: Jack I. Cohen, MHA Medical Surveyor</p> <p>QA: claughlin 02/07/14</p>	S000000		
S000554	<p>410 IAC 15-1.5-2 INFECTION CONTROL 410 IAC 15-1.5-2(a)</p> <p>(a) The hospital shall provide a safe and healthful environment that minimizes infection exposure and risk to patients, health care workers, and visitors.</p> <p>Based on document review and interview, the hospital failed to follow its policies related to pest control in 52 pest control inspection services reports</p>	S000554	The Director of Facilities has updated Policy ES 30 to reflect our current procedures for pest control. The Director of Facilities has revised the areas of coverage and how often the inspections will	02/21/2014

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.

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	<p>reviewed and failed to follow its policies for visual inspections in 4 instances of alleged bed bug sightings.</p> <p>Findings:</p> <p>1. Review of hospital policy SPP NO: E.S. - 30, entitled Pest Control, reviewed 10/18/12, indicated areas to be covered <u>WEEKLY</u> -</p> <p>1. Hospital common areas i.e. the following:</p> <ul style="list-style-type: none"> Nurses' Station Diet Kitchen Main Kitchen Dietary Storage Areas Canteen Area Storage Areas Unit Hallways "A" Hallway Entire Basement Area Loading Dock Area Outside Entrances and Doorways <p>2. Review of 52 pest control inspection services reports for the time period January 1 through December 23 of calendar year 2013, completed, dated and signed by the pest control service company's service technician, indicated none of the reports included all areas serviced, as required by the hospital's policy. All of the reports only included</p>		<p>occur in Policy ES 30. The Director of Facilities will inservice our contracted pest control company on the required documentation of all inspections and treatment on their service reports. The Infection Prevention Policy was revised to include documentation and monitoring of the Pest Control Log by the Infection Control nurse, Facilities Management and the Environmental Services Supervisor. The Infection Prevention Policy was revised to state that reports of lice, bedbugs or rodents will be reported at the Infection Prevention Control Quarterly meetings. Environmental Infestation Report will be a standing report to the Infection Prevention Control Committee.</p>		

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	<p>1-3 of the 10 specified areas.</p> <p>3. Review of a hospital policy entitled Infection Prevention Policy for Policy for care of Patients with Lice Or Bedbugs, effective April 30, 2013, indicated EVS [Environmental Services] will follow their bedbug protocol [of] visual inspection of the room.</p> <p>4. Review of a document entitled Pest Control Log, a log used by the hospital to document the date of alleged sightings of insects and rodents, and the date of service conducted by the pest control service tech, indicated, between 1-1-13 and 12-23-13, there were 4 instances of alleged sightings of bed bugs: 4-8-13 - Rehab 211, 4-30-13 - Unit 3 Room 312, 5-3-13 Unit 3 Room 313, and 5-16-13 - Unit 3 326. Further review indicated there was no visual inspection of the area by EVS personnel.</p> <p>5. Review of 52 Pest Control Inspection Service Reports, completed, dated and signed by the pest control service company's service technician, indicated no documentation of any action taken in response to the alleged sightings, no discussion with hospital personnel regarding the alleged sightings, and no visual inspection of the area by EVS</p>						

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	<p>personnel.</p> <p>6. In interview, on 12-30-13 at 1:30 pm, employee #A2 confirmed the data in the Pest Control Log and the ATLAS PEST CONTROL Pest Control Inspection Service Reports and no further documentation was provided prior to exit.</p> <p>7. Review of Infection Control Committee meeting minutes in year 2013, dated February 6, April 10, June 12, August 21, October 9, and December 11, indicated there were no discussions or references to alleged sightings and/or treatment for bedbugs.</p> <p>8. In interview, on 12-30-13 at 1:45 pm, employee #A3 confirmed there was nothing documented in the Infection Control Committee minutes in year 2013 concerning discussions or references to alleged sightings and/or treatment for bed bugs and no further documentation was provided prior to exit.</p>				

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