

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 155685	X2) MULTIPLE CONSTRUCTION A. BUILDING 00 B. WING _____	X3) DATE SURVEY COMPLETED 08/11/2015
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NAME OF PROVIDER OR SUPPLIER GOLDEN LIVING CENTER-ELKHART	STREET ADDRESS, CITY, STATE, ZIP CODE 1001 W HIVELY AVE ELKHART, IN 46517
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F 0000 Bldg. 00	<p>This visit was for the Investigation of Complaint IN00179110, IN00176685 and IN00176012.</p> <p>Complaint IN00179110 - Unsubstantiated due to lack of evidence.</p> <p>Complaint IN00176685 - Substantiated. No deficiencies related to the allegation are cited.</p> <p>Complaint IN00176012 - Substantiated. No deficiencies related to the allegation are cited.</p> <p>Unrelated deficiencies are cited.</p> <p>Survey dates: August 7, 10 and 11, 2015.</p> <p>Facility number: 000039 Provider number: 155685 AIM number: 100275130</p> <p>Census bed type: SNF/NF: 146 Total: 146</p> <p>Census Payor type: Medicare: 10 Medicaid: 110 Other: 26</p>	F 0000	Please accept this plan of correction as the facility's response to the alleged deficient practice found during this survey. Because it was cited at a severity level of no actual harm with potential for minimal harm and a scope of pattern or widespread, we would like to request that you consider compliance with a desk review.	

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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F 0465 SS=C Bldg. 00	<p>Total: 146</p> <p>This deficiency reflects State findings cited in accordance with 410 IAC 16.2-3.1.</p> <p>483.70(h) SAFE/FUNCTIONAL/SANITARY/COMFORTABLE ENVIRON The facility must provide a safe, functional, sanitary, and comfortable environment for residents, staff and the public. Based on observation and interview, the facility failed to provide a clean resident environment related to, coffee stains on shelving, multiple cobwebs and dead bugs in a closet, along the baseboards of the facility congregation rooms, in the beauty shop, and an unswept serving kitchen in the Main Dining Room. This affected 2 of 2 units observed, the beauty shop and a serving kitchen.</p> <p>Finding includes:</p> <p>On 8/7/15 at 11:50 A.M., an interview was conducted with Resident D. Resident D indicated, there were bugs in the SouthWest lounge area near her room and she had asked Housekeeping to clean it but as of that morning they had failed to do so.</p> <p>On 8/11/15 an Environmental Tour was</p>	F 0465	<p>The facility's desire is to provide residents, staff and the public a safe, functional, sanitary and comfortable environment. The facility maintains a contract with a housekeeping service provider that is responsible to maintain and supervise the housekeeping services of our building in accordance with the state and federal regulations. 1) Corrective Action for alleged deficient practice: Facility congregation rooms, lounges, beauty shop and main dining room was cleaned. Cobwebs and dead bugs were cleaned up from the corners, and base boards and closet. The coffee stains were cleaned up and the serving kitchen floor was swept and mopped before the start of food service. These areas had been addressed and corrected prior to the surveyor leaving the building. 2) How other areas with potential to be affected will be identified: Unit rounds will be completed by the Unit</p>	09/10/2015

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	<p>conducted between 11:00 A.M., and 11:50 A.M., with the Administrator, during which the following was observed:</p> <p>1. Southwest Unit:</p> <p>At 11:03 A.M., in the small Lounge multiple cobwebs and dead bugs were found along the baseboards and corners of the floor.</p> <p>At 11:10 A.M., in the Dining Room, a large white cabinet was observed with multiple circular coffee stains. Multiple cobwebs and dead bugs were found along the baseboards and corners of the floor.</p> <p>At 11:15 A.M., in the large Lounge, inside the closet multiple dead bugs were observed on the floor.</p> <p>During an interview, with the Administrator conducted at that time, the Administrator indicated the areas needed to be cleaned and that all areas were to be cleaned daily.</p> <p>At 11:18 A.M., multiple dead bugs and cobwebs were found along the base boards and corners of the floor.</p> <p>2. Main Dining Room Serving Kitchen:</p>		<p>Manager and/or Housekeeping supervisor. A round list will identify any areas that show cobwebs and/dead bugs, which will be assigned to the hall housekeeper who will be responsible to go back and clean.</p> <p>3)Measures put into place to ensure alleged deficient practice does not recur: The facility will increase pest control rounds/treatments as needed as well as have the outside parameter treated to help control bugs coming into the building. Cleaning routines for the lounges and congregational rooms revised to require cleaning at the beginning of the shift and again at the end of the shift each day. A specific cleaning schedule will be developed for cleaning of the corners and baseboards on a wkly basis. Mangement round sheets have been updated to include checks of the baseboards and corners in each lounge area and congregational area, including the beauty shop and main dining room service area.4) How Corrective Action will be Monitored: The housekeeping manager will inspect the lounges and congregational areas throughout the building with housekeeping staff prior to the end of their shifts and will record findings/concerns daily for 30 days, then 1 time a wk for 30 days and then 1 time a month for 90 days. Housekeeping</p>	

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	<p>At 11:26 A.M., a large amount of potato chips and other food crumbs were observed on the floor in the Serving Kitchen.</p> <p>During an interview with Employee # 2, conducted at that time, Employee #2 indicated the last time potato chips were served was the night before with the supper meal. She further indicated housekeeping was responsible to sweep the Serving Kitchen and she did not know when it was last swept.</p> <p>3. Beauty Shop:</p> <p>At 11:30 A.M., multiple dead bugs and cobwebs were found along the base boards and corners of the floor.</p> <p>4. East Unit:</p> <p>At 11:34 A.M., in the Dining Room, cobwebs containing dead bugs were found along the base boards and corners of the floor.</p> <p>At 11:38 A.M., in the small Lounge, multiple dead bugs were found along the baseboards and corners of the floor.</p> <p>5. South Unit:</p> <p>At 11:40 A.M., in the small lounge,</p>		<p>supervisor and ED/Designee will discuss the progress of this plan of correction once a week and will make changes as needed to ensure that alleged deficient practice is corrected and maintained. The QAPI committee will review these results monthly for 6 months and will direct monitoring to stop at that time if facility has reached and maintained 3 monthly inspections with no evidence of finding cobwebs and/or dead bugs during the facility tours.</p>		

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	<p>multiple dead bugs and cobwebs were found along the baseboards and corners of the floor.</p> <p>At 11:44 A.M., in the large lounge, a dead bug and food crumbs were found on the floor underneath and behind the furniture.</p> <p>On 8/11/15 at 4:23 P.M., an interview was conducted with the Director of Housekeeping. The Director of Housekeeping indicated the 5-Step Daily Patient Room Cleaning procedure should be followed daily for the cleaning of areas other than patient rooms and bathrooms.</p> <p>On 8/11/15 at 4:27 P.M., the "Healthcare Services Group, INC. Housekeeping IN-Service", received from the Director of Housekeeping and referred to as the current procedure, was reviewed. The In-Service indicated, "... Subject: 5-Step Daily Patient Room Cleaning...Purpose: To show Housekeeping employees the proper cleaning method to sanitize a patient's room or any area in a healthcare facility...4. Dust Mop...The entire floor must be dust mopped...Move all furniture to dust mop...All corners and along all baseboards must be dust mopped...5. Damp Mop... The most important area of a patient's room to disinfect is the floor.</p>			

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	<p>This is where most air-borne bacteria will settle and so it needs to be sanitized daily...As with dust mopping, start in the far corner of the room, move all furniture necessary, and run the mop along the edges first...."</p> <p>3.1-19(f)</p>				