

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 155564	X2) MULTIPLE CONSTRUCTION A. BUILDING 00 B. WING _____	X3) DATE SURVEY COMPLETED 04/29/2014
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NAME OF PROVIDER OR SUPPLIER MILLER'S MERRY MANOR	STREET ADDRESS, CITY, STATE, ZIP CODE 259 W HARRISON ST MOORESVILLE, IN 46158
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F000000	<p>This visit was for a Recertification and State Licensure Survey.</p> <p>Survey Dates: April 22, 23, 24, 25, 28, & 29, 2014</p> <p>Facility number: 000398 Provider number: 155564 AIM number: 100291110</p> <p>Survey team: Diana McDonald, RN-TC (April 22, 23, 24, & 29, 2014) Melissa Gillis, RN Cheryl Mabry, RN (April 24, 25, 28, & 29, 2014) Angela Patterson, RN (April 22, 23, 24, & 25, 2014)</p> <p>Census bed type: SNF: 15 SNF/NF: 52 Total: 67</p> <p>Census payor type: Medicare: 12 Medicaid: 42 Other: 13 Total: 67</p> <p>These deficiencies reflect state findings cited in accordance with 410 IAC 16.2.</p>	F000000	<p>The Mooresville facility respectfully requests paper compliance. Please accept the following plan of correction for F-Tag 314 and F-Tag 441 as our credible allegation of compliance.</p>	
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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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F000441 SS=E	<p>Quality review completed on June 05, 2014; by Kimberly Perigo, RN.</p> <p>483.65 INFECTION CONTROL, PREVENT SPREAD, LINENS The facility must establish and maintain an Infection Control Program designed to provide a safe, sanitary and comfortable environment and to help prevent the development and transmission of disease and infection.</p> <p>(a) Infection Control Program The facility must establish an Infection Control Program under which it - (1) Investigates, controls, and prevents infections in the facility; (2) Decides what procedures, such as isolation, should be applied to an individual resident; and (3) Maintains a record of incidents and corrective actions related to infections.</p> <p>(b) Preventing Spread of Infection (1) When the Infection Control Program determines that a resident needs isolation to prevent the spread of infection, the facility must isolate the resident. (2) The facility must prohibit employees with a communicable disease or infected skin lesions from direct contact with residents or their food, if direct contact will transmit the disease.</p>			
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	<p>(3) The facility must require staff to wash their hands after each direct resident contact for which hand washing is indicated by accepted professional practice.</p> <p>(c) Linens Personnel must handle, store, process and transport linens so as to prevent the spread of infection.</p> <p>A). Based on observation, interview, and record review, the facility failed to ensure infection control practices were followed related to hand washing and glove changing during patient wound care as indicated by the facility policy. This deficient practice had to potential to affect 1 randomly observed resident during stage 2. (Resident #23) (CNA #2, Pioneer's Unit Manager)</p> <p>B). Based on observation and record review, the facility failed to follow infection control practices related to handwashing observed during medication pass for 7 residents and 2 LPN's. (Resident #43, Resident #16, Resident #72, Resident #6, Resident #90, Resident #129, and Resident #89) (Pioneer Hall Unit Manager and Licensed Practical Nurse (LPN) #3)</p> <p>Findings include:</p> <p>A). On 4/28/14 at 1:15 p.m., observed the Pioneer hall Unit Manager (PUM)</p>	F000441	<p>F 441 It is the policy of Miller's Merry Manor Mooresville to ensure the hands remain clean during patient care and medication pass by washing hands and proper glove use. To prevent recurrence of this deficient practice a Mandatory all nursing staff in-service was conducted on 5/16/14 outlining the Policy and Procedure for Hand Washing and Hand Asepsis (Attachment C), Use of Medical Gloves (Attachment D) and Medication Administration Procedure (Attachment G). All Nurses and Aides were observed and checked off on return demonstration of proper hand washing during the in-service. Nursing new hires will be informed of this policy during new hire orientation paperwork (Attachment H) Hand Washing QA Tool (Attachment F) will be completed all three shifts Monday-Friday for 1 week, then weekly for 4 weeks and monthly thereafter. Any issues will be corrected immediately, recorded on a facility QA Tracking Log and reviewed in the facility QA Meeting monthly with any new</p>	05/16/2014

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	<p>change Resident #23's wound dressing. The Unit Manager entered Resident #23's room, walked over to the bed, placed supplies on the bedside table and walked into the bathroom. The PUM was observed to handwash for 6 seconds. The PUM walked over to the bedside table, set up treatment supplies, opened right side of brief, removed old wound dressing, placed dressing in the trash can, removed gloves, walked into the bathroom, observed to handwash for 6 seconds, walked over to the bedside, place(d) gloves on and rolled Resident #23 on [gender] left side. The PUM was then observed to cleanse the wound with normal saline and a gauze. The PUM was observed to place the gauze and tube of normal saline on the brief that was partially open. While doing the treatment the PUM noticed that Resident #23 was having a bowel movement. There was stool in rectum. The PUM was observed to remove gloves, walked over to open the door, and exited the room. (to get assistance to clean Resident #23) No hand washing was observed.</p> <p>Resident #23 was left uncovered on the bed with the brief partially off. The PUM was observed to enter room with another tube of normal saline, hand wash for 3 seconds, put on gloves, walk to bedside, remove 1 glove, walk over and open the</p>		recommendations implemented.				

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	<p>door [gave instructions to someone in the hall], returned to the bedside, removed other glove, use hand sanitizer, placed gloves on and removed the old tube of normal saline from the brief and place in the trash can with the gloves on.</p> <p>CNA #2 was observed to enter the room, hand wash, put on gloves, walk over to the bedside, cleansed Resident #23's buttock with a clean washcloth, folded dirty brief under resident's right side, and placed clean brief under residents right side. No changing of gloves nor handwashing was observed.</p> <p>The PUM was observed with gloves on to apply hydrogel [ointment] with a swab and apply a duoderm [dressing for wounds] to the affected area, held pressure on the duoderm, close the right side of the brief with tape, rolled Resident #23 on [gender] right side, pulled /positioned the brief under resident and close left side with tape. No change of gloves nor handwashing was observed.</p> <p>The PUM with gloves on was observed to straighten Resident #23 in bed, placed pillow under legs, rolled on left side, placed pillow under buttock, positioned pillows under head, covered Resident #23 with a blanket, attached the call light to the blanket, and lowered the bed.</p>			

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	<p>The Unit Manager was observed to remove gloves, place in trash bag, removed trash bag, open privacy curtains, enter the bathroom and handwashed for 7 seconds. When asked when should she handwash the PUM indicated, "Before you do anything, after removing dirty dressing, after procedures. "When asked if she did that, indicated, "I think I did." When asked how long she should handwash, the PUM indicated, "Ten seconds, but we usually do twenty. "When asked if she handwashed for 20 seconds, the PUM indicated, " I did the ABC song. Did I not do 10 seconds. "When asked what was the facility policy, the PUM indicated, "I guess I don't know. I will check."</p> <p>On 4/28/14 at 2:45 p.m., Interview with CNA #2 indicated, when asked when should she handwash and change gloves, "When you enter a room, when your hands are dirty, leaving a room." When asked was that done, CNA #2 indicated, "No, I should have changed gloves."</p> <p>On 4/25/14 at 12:25 p.m., the DON provided "Hand Washing and Hand Asepsis" policy, dated 7/27/12, and indicated the policy was the one currently used by the facility. The policy indicated, "To provide protection for resident and</p>			
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	<p>staff when performing direct care procedure. To ensure that hands remain clean so as to assist in maintenance of clean environment and assist in the prevention of and the transmission of disease and infection.... Apply soap to hands from the dispenser. ... Rub vigorously for at least 20 seconds. ... Key Procedural Points: A. SPECIFIC TIMES HANDS MUST BE WASHED: ... II. Before and after direct resident contact, ..."</p> <p>On 4/28/14 at 3:00 p.m., the DON provided "Dressing-Clean Procedure" policy, dated 3/1/2001, and indicated the policy was the one currently used by the facility. The policy indicated, " ... C. PROCEDURE: ...Wash hands thoroughly. ... protective liner under resident's wound area., ... Apply gloves. Remove soiled dressings and discard in plastic bag, including gloves. Apply clean gloves and cleanse wound ... Discard gloves in plastic bag. Apply clean gloves ..."</p> <p>On 4/28/14 at 3:00 p.m., the DON provided "General Instructions for Resident Care" policy, dated 5/30/2006, and indicated the policy was the one currently used by the facility. The policy indicated, " ... Disposable non-sterile examination gloves will be used for procedure involving contact with</p>				

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	<p>...providing wound care, ... Hand-washing should follow policy and procedures of the facility. Technique is important. ... Hands must be washed after removal of gloves. ..."</p> <p>B). Based on observation and record review, the facility failed to follow infection control practices related to handwashing observed during medication pass for 7 residents and 2 LPN's. (Resident #43, Resident #16, Resident #72, Resident #6, Resident #90, Resident #129, and Resident #89) (Pioneer Hall Unit Manager and Licensed Practical Nurse (LPN) #3)</p> <p>B1). Observation on 4/3/14, of Pioneer Hall Unit Manager (PUM) during medication pass indicated the following:</p> <p>Observation of PUM at 9:00 a.m., indicated she passed medications to Resident #43. After she passed medications to Resident #43, PUM</p>				

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	<p>went into the resident's bathroom to wash her hands. She wet her hands and then applied soap. She rubbed her hands together while letting water run over her hands. She did this for a total of 5 seconds. PUM then turned the water off and grabbed a paper towel and dried her hands off.</p> <p>Observation of PUM at 9:15 a.m., indicated she passed medications to Resident #16. After she passed medications to Resident #16, PUM went into the resident's bathroom to wash her hands. She wet her hands and then applied soap. She rubbed her hands together while letting water run over her hands. She did this for a total of 7 seconds. PUM then turned the water off and grabbed a paper towel and dried her hands off.</p> <p>Observation of PUM at 9:30 a.m., indicated she passed medications to Resident #72. After she passed medications to Resident #72, PUM went into the resident's bathroom to wash her hands. She wet her hands and then applied soap. She rubbed her hands together while letting water run over her hands. She did this for a total of 7 seconds. PUM then turned the water off and grabbed a paper towel and dried her hands off.</p>				

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	<p>Observation of PUM at 9:45 a.m., indicated she passed medications to Resident #6. After she passed medications to Resident #6, while he was sitting in the activities room, she went to the medication cart and used hand sanitizer. PUM then poured Ensure in a cup for Resident #90. Resident #90 was in the dining room and PUM served the Ensure to him while he was sitting in there. He requested ice cream to be put in the Ensure. PUM put a teaspoon of ice cream in Resident #6's Ensure. PUM then walked back to the medication cart and used hand sanitizer.</p> <p>Observation of PUM at 10:00 a.m., indicated she passed medications to Resident #129. After she passed Resident #129's medication to him, she went into the resident's bathroom to wash her hands. She wet her hands and then applied soap. She rubbed her hands together while letting the water run over her hands. She did this for a total of 6 seconds. PUM then turned the water off and grabbed a paper towel and dried her hands off.</p> <p>B2). On 4/25/14 at 12:00 p.m., observation of LPN #3 indicated she entered Resident #89's room with the resident's insulin pen. LPN #3 went</p>				

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	<p>into the resident's bathroom to wash her hands. LPN #3 turned on the water, put soap on her hands, rubbed her hands, and then washed her hands. She washed her hands for 5 seconds. LPN #3 walked towards the door to close it. LPN #3 tried to close the door with her foot, but instead used her left hand to close the door. She then gave insulin to Resident #89. LPN #3 walked out of the room to the medication cart, threw the needle away, and then put Resident #89's insulin pen back into the medication cart. While she was walking to the dining room to help assist lunch, she stopped in Resident #89's room and washed her hands.</p> <p>On 4/25/14 at 12:25 p.m., the Director of Nursing (DON) provided the facility's "Hand Washing and Hand Asepsis" policy, dated 7/27/12, and indicated the policy is currently used by the facility. Review of the policy indicated, "Policy: To provide protection for resident and staff when performing direct care procedure. To ensure hands remain clean so as to assist in maintenance of disease and infection. Procedure:...A. Prepare paper toweling...C. Apply soap to hands from the dispenser. D. Angle arms down holding hands lower than elbows...Rub vigorously for at least</p>			
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	<p>20 seconds. (Lace your fingers together to wash in between them). E. Clean nails by rubbing them in palm of other hand. F...keeping downward, allow the water to run from the wrist to the fingers...H. Turn off faucets with paper towel and discard towel immediately in waste receptacle...Special Times Hands Must be Washed: II. Before and after direct resident contact...Hand Hygiene: Hand hygiene has been cited as the single most important practice to reduce the transmission of infectious agents in health care settings and is an essential element of Standard Precautions..."</p> <p>3.1-18(1)</p>			