STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTIONS	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
		A. BUILDING B. WING	12/09/2021

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
EVERGREEN VILLAGE AT BLOOMINGTON	3607 SOUTH HEIRLOOM DRIVE, BLOOMINGTON, , 47401

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES...	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION...	(X5) COMPLETION DATE
R 0000	INITIAL COMMENTS This visit was for a State Residential Licensure Survey. Survey dates: December 8 and 9, 2021 Facility number: 014002 Residential Census: 115 This State Residential Finding is cited in accordance with 410 IAC 16.2-5. Quality Review completed on December 10, 2021.	R 0000	Plan of Correction 12/27/21 Facility ID: 014002 Survey Event ID: EX4911 **1. Describe what the facility did to correct the deficient practice for each client cited in the deficiency.**	

			a. No residents experienced adverse effects from the alleged deficient practice. **2. Describe how the facility reviewed all clients in the facility that could be affected by the same deficient practice, and state, what actions the facility took to correct the deficient practice for any client the facility identified as being affected.** a. All residents requiring the use of glucometers, by the facility, had the potential to be affected by the alleged deficient practice. DON or designee will provide an in-service to all medical staff on procedures of appropriately disinfecting glucometers. Employees found to be out of compliance with disinfecting glucometers will receive additional education and possible corrective action.	

			3. Describe the steps or systemic changes the facility has made or will make to ensure that the deficient practice does not recur, including any in-services, but this also should include any system changes you made. a. All clinical staff will be re-educated and in-serviced on disinfecting glucometers no later than January 31, 2022. with 1:10 bleach/water disinfectant, wipe dry.Allow glucometer to dry thoroughly between uses. Any clinical staff member out of compliance with facility's policies and protocols relating to disinfecting glucometers will receive progressive corrective action. The Director of Nursing, or designee will educate all newly hired clinical staff on policies and protocols relating to disinfecting glucometers during employee job-specific orientation moving forward.	

			4. Describe how the corrective action(s) will be monitored to ensure the deficient practice will not recur (ie what quality assurance program will be put into place) a. The Director of Nursing or designee will audit the cleaning of glucometers two (2) times per week for eight (8) weeks, then one (1) time a week for four (4) weeks, then one (1) time a month for one (1) month and then as needed to ensure that proper disinfecting technique is being executed. Results to be reviewed at monthly QI meetings and make further recommendations based off audit results **5. By what date will the systematic changes be completed** a. Education and in-service will	

			be provided to all clinical staff between now and concluding on January 31, 2022	
R 0407	Infection Control - Noncompliance 410 IAC 16.2-5-12(b)(1-4) (b) The facility must establish an infection control program that includes the following: (1) A system that enables the facility to analyze patterns of known infectious symptoms. (2) Provides orientation and in-service education on infection prevention and control, including universal precautions. (3) Offering health information to residents, including, but not limited to, infection transmission and immunizations. (4) Reporting communicable disease to public health authorities. Based on observation, interview, and record review, the facility failed to ensure an appropriate disinfecting cleanser was used to clean a glucometer machine after use for 1 of 1 resident observed for accucheck during Medication Administration. (Resident 8) Findings include: On 12/8/2021 at 11:30 a.m., Licensed Practical Nurse 1	R 0407	Plan of Correction 12/27/21 Facility ID: 014002 Survey Event ID: EX4911 a. No residents experienced adverse effects from the alleged deficient practice. b. All residents requiring the use of glucometers, by the facility, had the potential to be affected by the alleged deficient practice. DON or designee will provide an in-service to all medical staff on procedures of appropriately disinfecting glucometers. Employees found to be out of compliance	01/15/2022

	(LPN) was observed to obtain an accucheck (blood sugar) from Resident 8 using a glucometer (machine used to obtain blood sugar) located in the resident's room. After obtaining a blood sample from Resident 8, LPN 1 cleaned the glucometer with an unnamed brand alcohol wipe which contained 75% alcohol. No other cleaning method known to kill HIV and Hepatitis spores was observed. On 12/8/2021 at 11:31 a.m., LPN 1 indicated most of the residents have their own glucometer machine but there are times the residents machines turn up missing and they will have to use a facility glucometer to obtain blood sugars. She cleaned all facility machines with a 75% alcohol wipe after use. On 12/9/2021 at 11:50 a.m., the Nursing Supervisor indicated the glucometer should be cleaned with an approved cleanser for 3 minutes. On 12/9/2021 at 2:30 p.m., the Nursing Supervisor provided the manufacture guidelines for the glucometer. The guidelines indicated, "... Cleaning and Disinfecting your [brand name] Meter ... Cleaning and disinfecting your meter and lancing device is very important in the prevention of infection		with disinfecting glucometers will receive additional education and possible corrective action. **3.** c. All clinical staff will be re-educated and in-serviced on disinfecting glucometers no later than January 31, 2022. Any clinical staff member out of compliance with facility's policies and protocols relating to disinfecting glucometers will receive progressive corrective action. The Director of Nursing, or designee will educate all newly hired clinical staff on policies and protocols relating to disinfecting glucometers during employee job-specific orientation moving forward. **4.** d. The Director of Nursing or designee will audit the cleaning of glucometers two (2) times per week for eight (8) weeks, then one (1) time a week for four (4) weeks, then two (2) times a month	

	disease ... The following products are validated for disinfecting the [brand name] meter ... Hospital Cleaner Disinfectant Towels with Bleach ... Medline Micro Kill Disinfecting Cleansing Wipes with Alcohol, Clorox Healthcare Bleach Germicidal and Disinfectant Wipe and, Medline Micro Kill Bleach Germicidal Bleach Wipes ..." On 12/9/2021 at 3:05 p.m., the Administrator indicated the facility did not have a policy related to the cleansing and disinfecting of glucometers with an approved cleanser. Based on observation, interview, and record review, the facility failed to ensure an appropriate disinfecting cleanser was used to clean a glucometer machine after use for 1 of 1 resident observed for accucheck during Medication Administration. (Resident 8) Findings include: On 12/8/2021 at 11:30 a.m., Licensed Practical Nurse 1 (LPN) was observed to obtain an accucheck (blood sugar) from Resident 8 using a glucometer (machine used to obtain blood sugar) located in the resident's room. After obtaining a blood sample from Resident 8, LPN 1 cleaned the glucometer with an unnamed		for one (1) month and then as needed to ensure that proper disinfecting technique is being executed. Results to be reviewed at monthly QI meetings and make further recommendations based off audit results **5. Community compliance will be:** a. Education and in-service will be provided to all clinical staff between now and concluding on January 15, 2022	

brand alcohol wipe which contained 75% alcohol. No other cleaning method known to kill HIV and Hepatitis spores was observed.

On 12/8/2021 at 11:31 a.m., LPN 1 indicated most of the residents have their own glucometer machine but there are times the residents machines turn up missing and they will have to use a facility glucometer to obtain blood sugars. She cleaned all facility machines with a 75% alcohol wipe after use.

On 12/9/2021 at 11:50 a.m., the Nursing Supervisor indicated the glucometer should be cleaned with an approved cleanser for 3 minutes.

On 12/9/2021 at 2:30 p.m., the Nursing Supervisor provided the manufacture guidelines for the glucometer. The guidelines indicated, "... Cleaning and Disinfecting your [brand name] Meter ... Cleaning and disinfecting your meter and lancing device is very important in the prevention of infection disease ... The following products are validated for disinfecting the [brand name] meter ... Hospital Cleaner Disinfectant Towels with Bleach ... Medline Micro Kill Disinfecting Cleansing Wipes with Alcohol, Clorox Healthcare Bleach Germicidal and Disinfectant

	Wipe and, Medline Micro Kill Bleach Germicidal Bleach Wipes ..." On 12/9/2021 at 3:05 p.m., the Administrator indicated the facility did not have a policy related to the cleansing and disinfecting of glucometers with an approved cleanser.			

Any deficiency statement ending with an asterisk (*) denotes a deficiency which the institution may be excused from correcting provided it is determined that other safeguards provide sufficient protection to the patients. (See instructions.)

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE