

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTIONS		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:		(X2) MULTIPLE CONSTRUCTION A. BUILDING B. WING	(X3) DATE SURVEY COMPLETED 03/31/2022
NAME OF PROVIDER OR SUPPLIER SILVER BIRCH OF MISHAWAKA		STREET ADDRESS, CITY, STATE, ZIP CODE 3630 HICKORY ROAD, MISHAWAKA, , 46545			
(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 the Investigation of Complaint IN00376558 Complaint IN00376558- Substantiated. State Residential Findings related to the allegations are cited at R144. Survey date: March 30 and 31, 2022 Facility number: 014260 Residential Census: 118 These State Residential Findings are cited in accordance with 410 IAC 16.2-5. Quality review completed on 4/1/22.	R 0000			
R 0144	Sanitation and Safety Standards - Deficiency 410 IAC 16.2-5-1.5(a) (a) The facility shall be clean, orderly, and in a state of good	R 0144	The submission of this plan does not constitute admission or agreement by the provider of the truth of facts alleged or correction set forth on the statement of deficiencies. The Plan of correction is prepared and submitted because	04/30/2022	

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FORM APPROVED

OMB NO. 0938-0391

repair, both inside and out, and shall provide reasonable comfort for all residents.

Based on observation, record review and interview, the facility failed to ensure the policy regarding bed bugs was followed timely for 2 of 2 residents whose room had bed bug activity confirmed.
(Residents B and C)

Finding includes:

During a tour of each room of the facility, conducted on 3/30/2021 from 11:30 A.M. to 1:00 P.M. and 2:00 P.M. to 4:00 P.M. and 3/31/2022 from 9:15 A.M. through 11:20 A.M. , accompanied by the Corporate Director of Nursing, the following was noted:

Several small dark colored oval shaped debris were noted on the floor near the right side of the head of Resident C's bed. The Corporate Director of Nursing placed some of the debris on a white tissue and took a picture of the debris with her cell phone. After enlarging the photograph, the debris was noted to be insects. The corporate Director of Nursing confirmed they appeared to be bed bugs.

Bed bugs and bed bug debris were noted on Resident D's mattress. Resident D indicated

of requirements under state law. Please accept this plan of correction for this survey. Please find the sufficient documentation providing evidence of compliance with the plan of correction. The documentation serves to confirm the facility's allegation of compliance. Thus, the facility respectfully requests the granting of paper compliance. Should additional information be necessary to confirm said compliance, please feel free to contact me.

R-0144

What corrective action will be accomplished for those residents found to have been affected by the deficient practice.

Resident C and D Clothes and bedding has been laundered. Both resident apartments have received pest control treatment from outside contracted provider. Resident D mattress has been removed and replaced with a new mattress.

How the facility will identify other residents having the potential to be affected by the same deficient practice and what

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he/she was waiting on her room to be treated and the mattress to be removed. Resident D indicated he/she had been sleeping on the couch since he/she realized there were bugs on the mattress.

During an interview with Employee 1, the receptionist, conducted on 3/31/2022 at 11:30 A.M., she indicated on or around March 23, Resident D notified Employee 1 that his/her mattress needed to be removed because it had "bugs" on it. Employee #1 indicated she immediately notified the Maintenance Supervisor. She indicated the Maintenance Supervisor went and looked at Resident D's mattress and had called a local pest company. Employee 1 indicated the pest company had been into the facility, but she could not remember the exact date.

Review of a service inspection report and invoice, from Arrow Pest Control, dated 3/25/2022, indicated bed bug activity was noted in Resident C and Resident D's rooms. The invoice indicated the two rooms were scheduled to be treated on 4/01/2022.

Review of the facility's policy and procedure, titled "Bed Bug Treatment Policy and Procedure", provided by the Corporate Director of Nursing,

corrective action will be taken;

Environmental service manager and designee will inspect 100% of apartments and report findings to ED and pest control log.

What measures will be put into place or what systemic changes the facility will make to ensure that the deficient practice does not recur;

ESM or designee will inspect resident's personal belongings and furniture during move in process. Pest control service provider will provide 30 day follow up on treated apartments. Housekeepers will report any pest control findings at time of housekeeping services. Finding will be logged in the pest control binder for service request made for treatment.

Bed bug treatment policy and procedures reviewed and revised. Executive Director (ED), Environmental Service Manager (ESM) and DONW reeducated on policy.

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on 3/31/2022 at 11:45 A.M., indicated the following:
"...Policy: It is our policy to be able to identify and treat efficiently and effectively any infestations of bed bugs to prevent the spread to other residents and staff. Procedure: Bag and seal a complete clean outfit and 1 clean bath towel for the resident. Take the bagged outfit and towel to the laundry room and place in a dryer (without the plastic bag) - do not wash. Make sure the dryer is set on high heat and run the dryer a minimum of 15 minutes - this is to kill any bed bugs or eggs that are on the clothing. If bed bugs are visualized on the outfit run the dryer at least 20 minutes. When the dryer time is complete check the clothes and towel thoroughly for bed bugs. If the clothes and towel are free of bed bugs place them in a new plastic bag and seal it. Assist the resident to shower and wash thoroughly - in the shower with the water as hot as the resident can tolerate. Shampoo the residents hair thoroughly with a dandruff shampoo. Make sure to scrub the scalp, rinse thoroughly. Comb with a fine tooth comb straight back, looking closely for any bed bus - if begs are found repeat the shampoo. Use the towel from the dryer to assist the resident to dry off and cover private parts. Assist resident to dress in clean clothes from the dryer.

ED and Interim DONW will provide an in-service to staff on bed bug treatment policy and procedures by 4/22/22

How the corrective action will be monitored to ensure the deficient practice will not recur, i.e., what quality assurance program will be put into place;

ED or designee will review pest control binder weekly for 8 weeks and then on going as needed. Findings will be reported at monthly QAPI.

What date the systemic changes will be completed:

Changes will be completed by 4/30/22

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Blow dry the resident's hair. 1 staff member to assist resident to another apartment or a lounge area that has been checked for bed bugs (doff PPE upon exiting resident's apartment) Instruct resident to remain in location until staff return...Resident's apartment: all clothing bagged - only enough in a bag to all the bag to be sealed. Each bag of clothing is to be put in the dryer on high heat for 15 minutes (20 minutes if bugs are visualized). Upon removal from the dryer the clothing is to be washed in hot water and dried on high heat...All bedding bagged - only enough inn a bag to allow the bag to be sealed. Bagged bedding is to remain in resident's apartment for treatment...ESM or ED to contact established contractor for apartment remediation immediately upon verification of bed bugs for treatment following resident preparation and removal form the apartment...."

During an interview with Laundry Employees 2 and 3, conducted on 3/31/2022 at 11:38 A.M., they indicated they were aware of the procedure for bagging and laundering clothing and linens from rooms suspected and/or confirmed to have bed bugs but in the past two weeks, neither staff member had been made aware of any bed bug issues in the building,

nor had they been asked to launder any specific bagged items for bed bug issues.

This State Residential finding relates to Complaint IN00376558.

Based on observation, record review and interview, the facility failed to ensure the policy regarding bed bugs was followed timely for 2 of 2 residents whose room had bed bug activity confirmed. (Residents B and C)

Finding includes:

During a tour of each room of the facility, conducted on 3/30/2021 from 11:30 A.M. to 1:00 P.M. and 2:00 P.M. to 4:00 P.M. and 3/31/2022 from 9:15 A.M. through 11:20 A.M. , accompanied by the Corporate Director of Nursing, the following was noted:

Several small dark colored oval shaped debris were noted on the floor near the right side of the head of Resident C's bed. The Corporate Director of Nursing placed some of the debris on a white tissue and took a picture of the debris with her cell phone. After enlarging the photograph, the debris was noted to be insects. The corporate Director of Nursing confirmed they appeared to be bed bugs.

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Bed bugs and bed bug debris were noted on Resident D's mattress. Resident D indicated he/she was waiting on her room to be treated and the mattress to be removed. Resident D indicated he/she had been sleeping on the couch since he/she realized there were bugs on the mattress.

During an interview with Employee 1, the receptionist, conducted on 3/31/2022 at 11:30 A.M., she indicated on or around March 23, Resident D notified Employee 1 that his/her mattress needed to be removed because it had "bugs" on it. Employee #1 indicated she immediately notified the Maintenance Supervisor. She indicated the Maintenance Supervisor went and looked at Resident D's mattress and had called a local pest company. Employee 1 indicated the pest company had been into the facility, but she could not remember the exact date.

Review of a service inspection report and invoice, from Arrow Pest Control, dated 3/25/2022, indicated bed bug activity was noted in Resident C and Resident D's rooms. The invoice indicated the two rooms were scheduled to be treated on 4/01/2022.

Review of the facility's policy and procedure, titled "Bed Bug

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Treatment Policy and Procedure", provided by the Corporate Director of Nursing, on 3/31/2022 at 11:45 A.M., indicated the following:
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two weeks, neither staff member had been made aware of any bed bug issues in the building, nor had they been asked to launder any specific bagged items for bed bug issues.

This State Residential finding relates to Complaint IN00376558.

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