

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

PRINTED: 10/12/2018
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 150056		X2) MULTIPLE CONSTRUCTION A. BUILDING 00 B. WING		X3) DATE SURVEY COMPLETED 09/11/2018	
NAME OF PROVIDER OR SUPPLIER INDIANA UNIVERSITY HEALTH				STREET ADDRESS, CITY, STATE, ZIP CODE 1701 N SENATE BLVD INDIANAPOLIS, IN 46202			
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)		ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)		(X5) COMPLETION DATE	
S 0000 Bldg. 00	<p>This visit was for the investigation of one State hospital complaint.</p> <p>Complaint Number: IN00215071 Unsubstantiated; lack of sufficient evidence. Unrelated deficiency cited.</p> <p>Date: 9/11/2018</p> <p>Facility Number: 005051</p> <p>QA: 9/17/18</p>		S 0000				
S 0554 Bldg. 00	<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, interview and observation, the facility failed to provide a safe and healthful environment in one of one clean storage supply rooms observed.</p> <p>Findings included: 1. Housekeeping Guidelines, Form 1136 - C5 Day Shift, indicated priority for C5 Clean Utility C525, is Essential. Steps Description: A. High Dusting B. Damp Wipe Surfaces C. Dry Mop D. Damp Mop</p> <p>2. On 9/11/2018 at 1530 hours, staff member #3,(Regulatory Consultant), indicated in interview that we have struggled with these housekeeping</p>		S 0554	<p>S 554 410 IAC 15-1.5-2 INFECTION CONTROL 410 IAC 15-1.5-2(a)</p> <p>Based on document review, observation and interview, the facility failed to provide a safe and healthful environment in one clean storage supply room observed.</p> <p>Responsible Person (s): The director of supply chain is accountable for ensuring that the blue bins on the supply</p>		10/10/2018	

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>issues.</p> <p>3. While touring the C5 Medical Unit on 9/11/2018 at 1500 hours, accompanied by staff members #3 (Regulatory Consultant), 4 (Clinical Manager, C5), 5 (Shift Co-ordinator, C5) and 6 (Shift Co-ordinator, C5), observations of Infection Control issues were made in clean utility/storage room C525.</p> <p>A. Shelves of supply return cart had dust and brownish spots on them.</p> <p>B. Floor had dust and debris on it.</p> <p>C. A bedpan and box of commode liners was on the floor.</p> <p>D. IV poles, which were to have been cleaned, had dust, reddish/brown spots and debris on them.</p> <p>E. Blue storage bins on supply shelves were dusty.</p> <p>F. Blue storage bins containing lotion, cleansing body wash and odor eliminator spray bottles, had spilled substances in them.</p>				<p>shelf are clean. The director of environmental services is accountable to ensure the daily cleaning needs of the clean supply rooms are met. The EVS manager is accountable to ensure EVS team members have a clear understanding of daily cleaning task expectations within all clean supply storage rooms and the tools and resources needed to meet the expectations.</p> <p>Corrective Action(s): The environmental services (EVS) manager met with the EVS team members that will be accountable for cleaning clean utility rooms on a daily basis to ensure IV poles are clean, no boxes on the floor, shelves are clean, and floors are cleaned with no debris. This was completed on 9/12/2018. The supply chain supervisor met with the supply chain team and cleaned all the blue storage bins and shelves on the C5 unit. This was completed on 10/10/2018</p> <p>Monitoring: The EVS team will clean the clean utility room 3 times a day. The EVS manager will round on the unit monthly to visually inspect the cleanliness</p>		

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					<p>of the clean supply room on the C5 Medical unit. If cleaning deficiencies are noted they will be corrected immediately. Monthly rounding will begin on 9/12/2018 The supply chain supervisor will round weekly to ensure all bins are dust free with no spilled substances in the bins. Weekly rounding will begin on 10/10/18</p>		