

Indiana State Department of Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>014279</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING: _____	(X3) DATE SURVEY COMPLETED  <b>C</b> <b>05/31/2023</b>
NAME OF PROVIDER OR SUPPLIER  <b>OASIS AT 56TH</b>		STREET ADDRESS, CITY, STATE, ZIP CODE <b>4940 WEST 56TH STREET</b> <b>INDIANAPOLIS, IN 46254</b>		
(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) COMPLETE DATE
R 000	<p><b>INITIAL COMMENTS</b></p> <p>This visit was for the Investigation of Complaints IN00406978, IN00408715, IN00408977, IN00409101, IN00409503, and IN00409553.</p> <p>Complaint IN00406978 - No deficiencies related to the allegations are cited.</p> <p>Complaint IN00408715 - State deficiencies related to the allegations are cited at R0149.</p> <p>Complaint IN00408977 - No deficiencies related to the allegations are cited.</p> <p>Complaint IN00409101 - State deficiencies related to the allegations are cited at R0149.</p> <p>Complaint IN00409503 - State deficiencies related to the allegations are cited at R0149.</p> <p>Complaint IN00409553 - No deficiencies related to the allegations were cited.</p> <p>Survey date: May 30 and 31, 2023</p> <p>Facility number: 014279</p> <p>Residential Census: 114</p> <p>These State Residential Findings are cited in accordance with 410 IAC 16.2-5.</p> <p>Quality review completed on June 2, 2023</p>	R 000		
R 149	<p>410 IAC 16.2-5-1.5(f) Sanitation and Safety Standards - Deficiency</p> <p>(f) The facility shall have a pest control program in operation in compliance with 410 IAC 7-24.</p>	R 149		6/16/23

Indiana State Department of Health

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

06/27/23

Indiana State Department of Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>014279</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING: _____		(X3) DATE SURVEY COMPLETED  <b>C</b> <b>05/31/2023</b>
NAME OF PROVIDER OR SUPPLIER  <b>OASIS AT 56TH</b>			STREET ADDRESS, CITY, STATE, ZIP CODE <b>4940 WEST 56TH STREET</b> <b>INDIANAPOLIS, IN 46254</b>		
(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) COMPLETE DATE
R 149	<p>Continued From page 1</p> <p>This RULE is not met as evidenced by: Based on interview and record review, the facility failed to ensure an effective pest control program that included drying residents' clothing on high heat for a certain period of time to kill bed bugs and eggs. This affected 7 out of 114 residents that reside in the facility.</p> <p>Findings include:</p> <p>A document titled "Bed Bud Log 2023", was provided by the Maintenance Director on 5/30/23 at 12:30 p.m. The document indicated there were 6 apartments in May of 2023 that reported and/or was treated for bed bugs and 7 apartments in April of 2023.</p> <p>An interview conducted with the Interim Executive Director (IED), on 5/30/23 at 12:30 p.m., indicated she found out on 5/25/23, that the facility has "smart washers and dryers". These dryers do not have the ability to stay on high heat for up to 20 minutes that's required to kill bed bugs. So, the staff have been taking the clothing to the local laundry mat. The Scheduling Coordinator has been taking the clothing to the laundry mat.</p> <p>An interview conducted with the Director of Nursing (DON), on 5/30/23 at 2:00 p.m., indicated the Scheduling Coordinator was the one taking residents clothing to the laundry mat. There was no setting on the "smart dryers" to be able to place clothing on high heat for up to 20 minutes. The facility has been in a "staffing crunch" lately and the Scheduling Coordinator has been needed on the floor to work. The Scheduling Coordinator has been working on the floor for the past month, so she didn't know the ability for the Scheduling Coordinator to take clothing to the laundry mat.</p>	R 149			

Indiana State Department of Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>014279</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING: _____		(X3) DATE SURVEY COMPLETED  <b>C</b> <b>05/31/2023</b>
NAME OF PROVIDER OR SUPPLIER  <b>OASIS AT 56TH</b>			STREET ADDRESS, CITY, STATE, ZIP CODE <b>4940 WEST 56TH STREET</b> <b>INDIANAPOLIS, IN 46254</b>		
(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) COMPLETE DATE
R 149	<p>Continued From page 2</p> <p>An interview conducted with the DON, on 5/30/23 at 3:10 p.m., indicated the previous Executive Director (ED), ED 2's last day to work was 5/19/23. She didn't recall the Scheduling Coordinator taking residents' clothing to the laundry mat since 5/19/23.</p> <p>An interview conducted with the Maintenance Director, on 5/31/23 at 10:34 a.m., indicated the pest control company was coming on 5/31/23 between 2:00 p.m. and 4:00 p.m. He communicates with nursing in regards to bed bug activity and nursing is responsible for laundry. He stated the facility was "waiting from corporate on how they want us to move forward" in regards to the handling of pests in the facility. Since the facility has smart dryers that do not meet the temperature requirements to kill bed bugs and eggs. He was not able to manually adjust the dryer to ensure a high temperature for a certain period of time. That was why the facility came up with the idea to take clothing to the laundry mat.</p> <p>An anonymous interview conducted during the survey indicated there are only certain individuals that were permitted to driving the facility bus. The facility bus was utilized to take residents clothing to the laundry mat. They indicated there was only one occasion, in April of 2023, to where 2 residents clothing items were taken to the laundry mat. ED 2 would use their own personal change for the laundry mat service. ED 2 would communicate with applicable staff for such need to take items to the laundry mat.</p> <p>An interview conducted with the IED, on 5/31/23 at 2:00 p.m., indicated she just received approval for a conventional dryer to have and she also found out, on 5/31/23, that the Maintenance</p>	R 149			

Indiana State Department of Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>014279</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING: _____	(X3) DATE SURVEY COMPLETED  <b>C</b> <b>05/31/2023</b>
NAME OF PROVIDER OR SUPPLIER  <b>OASIS AT 56TH</b>		STREET ADDRESS, CITY, STATE, ZIP CODE <b>4940 WEST 56TH STREET</b> <b>INDIANAPOLIS, IN 46254</b>		
(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) COMPLETE DATE
R 149	<p>Continued From page 3</p> <p>Director located one that was already in the facility and was not connected. The Maintenance Director has it connected so the facility doesn't need to utilize the laundry mat anymore.</p> <p>An interview conducted with the IED, on 5/31/23 at 4:05 p.m., indicated there was no policy related to bed bugs. The facility follows the pest control company's recommendations.</p> <p>An interview conducted with the Maintenance Director, on 5/31/23 at 4:00 p.m., indicated the pest control company had just left the facility and there was a significant infestation of bed bugs to Resident E's wheelchair. He indicated they were going to ensure that the resident's wheelchair be checked each time to ensure it's clear from pests.</p> <p>A document from the United States Environmental Protection Agency (EPA), updated 7/19/2022, indicated the following, "...Preparing for Treatment Against Bed Bugs...Clean All Items Within a Bed-Bug-Infested Living Area...Heat treat clothing, bedding, and other items that can withstand a hot dryer (household dryer at high heat for 30 minutes), which will kill bed bugs and eggs...Washing alone might not do the job...."</p> <p>This Residential Tag relates to Complaint IN00408715, IN00409101 and IN00409503.</p>	R 149		