

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

PRINTED: 10/08/2020
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 435107	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 09/25/2020
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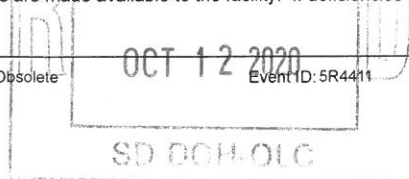
NAME OF PROVIDER OR SUPPLIER BOWDLE NURSING HOME	STREET ADDRESS, CITY, STATE, ZIP CODE 8001 W 5TH STREET POST OFFICE BOX 556 BOWDLE, SD 57428
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F 000	<p>INITIAL COMMENTS</p> <p>Surveyor: 41895 A COVID-19 Focused Infection Control Survey was conducted by the South Dakota Department of Health Licensure and Certification Office on 9/25/20. Bowdle Nursing Home was found not in compliance with 42 CFR Part 483.80 infection control regulation: F880.</p> <p>Bowdle Nursing Home was found in compliance with 42 CFR Part 483.73 infection control regulations: F882, F885, and F886.</p> <p>Bowdle Nursing Home was found in compliance with 42 CFR Part 483.73 related to E-0024(b)(6).</p> <p>Total residents: 30</p>	F 000		
F 880 SS=D	<p>Infection Prevention & Control CFR(s): 483.80(a)(1)(2)(4)(e)(f)</p> <p>§483.80 Infection Control The facility must establish and maintain an infection prevention and control program designed to provide a safe, sanitary and comfortable environment and to help prevent the development and transmission of communicable diseases and infections.</p> <p>§483.80(a) Infection prevention and control program. The facility must establish an infection prevention and control program (IPCP) that must include, at a minimum, the following elements:</p> <p>§483.80(a)(1) A system for preventing, identifying, reporting, investigating, and controlling infections and communicable diseases for all residents, staff, volunteers, visitors, and other individuals</p>	F 880	<p>This deficiency has the potential to affect all residents. The facility's COVID-19 Outbreak Policy has been updated to reflect the CDC 7/15/20 Interim Infection Prevention and Control Recommendations for Healthcare Personnel during the Coronavirus disease 2019 pandemic. Infection control guidance that cloth face covering shall not be worn due to HCP located in an area with moderate to substantial community transmission are more likely to encounter asymptomatic/pre-symptomatic residents with COVID-19 infection. All HCP will be required to wear eye protection as well as face mask to ensure protection from respiratory secretions during resident care.</p> <p>Updated policy will be reviewed with staff and staff will sign off on State Survey Education notification from 9.25.2020. Control checks that all HCP are wearing appropriate PPE with resident encounters will be completed on all staff by October 18th, 2020. Control checks will be monitored on a weekly basis by DON And reported to QA committee until the committee recommends discontinuing.</p>	10/18/20

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE Darwyn Kleffman	TITLE CEO	(X6) DATE 10/12/2020
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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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F 880	<p>Continued From page 1</p> <p>providing services under a contractual arrangement based upon the facility assessment conducted according to §483.70(e) and following accepted national standards;</p> <p>§483.80(a)(2) Written standards, policies, and procedures for the program, which must include, but are not limited to:</p> <p>(i) A system of surveillance designed to identify possible communicable diseases or infections before they can spread to other persons in the facility;</p> <p>(ii) When and to whom possible incidents of communicable disease or infections should be reported;</p> <p>(iii) Standard and transmission-based precautions to be followed to prevent spread of infections;</p> <p>(iv) When and how isolation should be used for a resident; including but not limited to:</p> <p>(A) The type and duration of the isolation, depending upon the infectious agent or organism involved, and</p> <p>(B) A requirement that the isolation should be the least restrictive possible for the resident under the circumstances.</p> <p>(v) The circumstances under which 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; and</p> <p>(vi) The hand hygiene procedures to be followed by staff involved in direct resident contact.</p> <p>§483.80(a)(4) A system for recording incidents identified under the facility's IPCP and the corrective actions taken by the facility.</p> <p>§483.80(e) Linens.</p>	F 880			

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F 880	<p>Continued From page 2</p> <p>Personnel must handle, store, process, and transport linens so as to prevent the spread of infection.</p> <p>§483.80(f) Annual review. The facility will conduct an annual review of its IPCP and update their program, as necessary. This REQUIREMENT is not met as evidenced by: Surveyor: 41895 Based on observation, interview, record review, and policy review, the provider failed to ensure infection control policies and procedures for COVID-19 were followed for appropriate personal protective equipment (PPE) use for five of five randomly observed staff (A, B, C, D, and E). Findings include:</p> <p>1. Observation on 9/25/20 at 12:00 noon of registered nurse B revealed she was only wearing a cloth face mask and did not have eye protection on while passing medications on both wings A and B.</p> <p>Observation and interview on 9/25/20 at 12:15 p.m. of certified nursing assistant (CNA) E revealed: *She was in the hallway on wing B. *She had been wearing an N95 face mask and face shield. *She always wore both, because she was going into COVID-19 positive residents' rooms.</p> <p>Observation and interview on 9/25/20 at 12:23 p.m. of physical therapist D revealed: *She had been in an unidentified resident's room on wing B only wearing a medical face mask. *The resident was a new admission who had just arrived at the facility.</p>	F 880			

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F 880	<p>Continued From page 3</p> <p>*She usually wore a face shield but had forgotten to put it on when she came to see the resident.</p> <p>Observation and interview on 9/25/20 at 12:28 p.m. of CNA C revealed: *She had been going in and out of residents' rooms in wing A collecting lunch trays. *She was wearing a cloth face mask. *She did not have eye protection on. *She had been told she could wear a cloth mask if she was not working with residents who had tested positive for COVID-19. *Only staff going into a COVID-19 positive resident's room were to wear a medical face mask and face shield.</p> <p>Observations and interviews on 9/25/20 between 12:00 noon and 2:10 p.m. with director of nursing A revealed: *She had been wearing a medical face mask. *She had not been wearing eye protection. *She had told staff they could wear a cloth face mask if they were not going into a resident's room who had tested positive for COVID-19. *When staff had cared for or entered residents' rooms with COVID-19 they had been required to wear an N95 face mask, face shield, gown, and gloves. *She was not aware cloth face coverings were not considered PPE. *She was not aware eye protection was recommended even if those staff were not going into residents' rooms that had COVID-19.</p> <p>Review of the provider's undated log for county positivity rates revealed on: *9/14/20 it was 17.5 percent. *9/21/20 it was 12.8 percent. *Those numbers indicated the county positivity</p>	F 880		

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F 880	<p>Continued From page 4 rate was high.</p> <p>Review of the provider's 9/4/20 Nursing Home COVID Outbreak September 2020 policy revealed: **Staff working on Wing A must wear full PPE - gown, gloves, N95 mask, and face shield." **Other staff throughout the facility must wear an N95 mask and face shield. Those not able to wear an N95 mask should wear a cloth or surgical mask and face shield."</p> <p>Review of the Center for Disease Control and Prevention (CDC) 7/15/20 Interim Infection Prevention and Control Recommendations for Healthcare Personnel During the Coronavirus Disease 2019 (COVID-19) Pandemic Infection Control Guidance revealed: **Cloth face coverings should NOT be worn instead of a respirator or facemask if more than source control is needed." **HCP [healthcare personnel] working in facilities located in area with moderate to substantial community transmission are more likely to encounter asymptomatic or pre-symptomatic patients [residents] with SARS-CoV-2 infection [COVID-19]." **They should wear eye protection in addition to their face mask to ensure the eyes, nose, and mouth are all protected from exposure to respiratory secretions during patient care encounters."</p>	F 880			