

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

PRINTED: 11/24/2020  
FORM APPROVED  
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>435134</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____  B. WING _____		(X3) DATE SURVEY COMPLETED  <b>11/12/2020</b>
NAME OF PROVIDER OR SUPPLIER  <b>GOOD SAMARITAN SOCIETY - ST MARTIN VILLAGE</b>			STREET ADDRESS, CITY, STATE, ZIP CODE <b>4825 JERICHO WAY RAPID CITY, SD 57702</b>		
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F 000	INITIAL COMMENTS  Surveyor: 40788 A COVID-19 Focused Infection Control Survey was conducted by the South Dakota Department of Health Licensure and Certification Office on 11/12/20. Good Samaritan Society St. Martin Village was found not in compliance with 42 CFR Part 483.10 resident rights and 42 CFR Part 483.80 infection control regulation: F880.  Good Samaritan Society St. Martin Village was found in compliance with 42 CFR Part 483.10 resident rights and 42 CFR Part 483.80 infection control regulations: F550, F562, F563, F583, F882, F885, and F886.  Good Samaritan Society St. Martin Village was found in compliance with 42 CFR Part 483.73 related to E-0024(b)(6).  Total residents: 52	F 000			
F 880 SS=D	Infection Prevention & Control CFR(s): 483.80(a)(1)(2)(4)(e)(f)  §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.  §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:	F 880	All residents had the potential to be affected by this deficiency.  All residents had signs placed in residents bathroom to wash hands for proper handwashing. It was also discussed with staff after the survey to immediately begin washing hands and/or put hand sanitizer on residents to properly break the chain of infection.		

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

TITLE

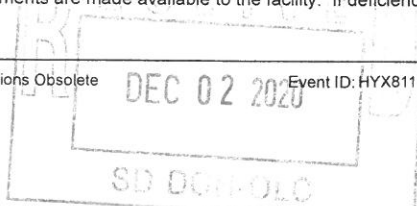
(X6) DATE

*Kyle Rickards*

Executive Director

12/2/2020

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>§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 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</p>	F 880	<p>Nursing staff and CNAs will be educated by December 4th on proper handwashing for all residents before meal services. Nursing staff and CNAs will be educated and signed off on the policy of Dignity in Dining-Food and Nutrition Services by December 4th.</p> <p>Audits will be completed to ensure staff are assisting residents in handwashing on the following schedule: weekly x 3 weeks, bimonthly x3 months, and monthly x3 months by the DNS or designee of 5 residents in the facility.</p> <p>The audits will be reported to QAPI Committee on a monthly basis. The QAPI Committee will review for compliance and if necessary recommended actions for improvements.</p>	<p>Dec 4th, 2020</p> <p>Dec 4th, 2020</p>	

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F 880	<p>Continued From page 2</p> <p>identified under the facility's IPCP and the corrective actions taken by the facility.</p> <p>§483.80(e) Linens. 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: 40788 Based on observation, interview, and policy review, the provider failed to ensure infection control practices and facility policy and procedure had been followed for the current coronavirus disease 2019 (COVID-19) pandemic for: *Assisting six of nine unidentified random residents with hand hygiene prior to meal service by one of one personal care attendants (PCA) (C), one of one unlicensed assistive personnel (UAP) (D), and one of one registered nurse (RN) (E). Findings include:</p> <p>1. Observation and interview on 11/12/20 at 11:40 a.m. with PCA C in the south assisted dining area revealed: *She had transported seven residents there for meal service. *She said she helped three of those residents after bathroom use with hand hygiene before transporting them to the dining area. *She had not helped the other four residents with hand hygiene. *She agreed all residents should have been assisted with hand hygiene prior to eating.</p>	F 880		

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F 880	<p>Continued From page 3</p> <p>Observation and interview on 11/12/20 at 11:45 a.m. with UAP D in that same dining area revealed:</p> <ul style="list-style-type: none"> <li>*She had transported one resident there for meal service.</li> <li>*She confirmed she had not assisted that resident with hand hygiene prior to transporting him to the dining area.</li> <li>*She agreed that resident should have been assisted with hand hygiene prior to eating.</li> </ul> <p>Observation and interview on 11/12/20 at 11:50 a.m. with RN E outside a random unidentified resident room revealed:</p> <ul style="list-style-type: none"> <li>*She verbally directed that resident to go to the dining area for meal service.</li> <li>-She confirmed she had not asked or reminded that resident to perform hand hygiene before she had left her room.</li> <li>*She said she had thought one of the PCAs might have done that.</li> </ul> <p>Interview on 11/12/20 at 1:20 p.m. with director of nursing B regarding meal time hand hygiene revealed it was her expectation that all residents had been or would be reminded or assisted to perform hand hygiene prior to and following all meal services.</p> <p>Review of the provider's 4/30/20 Dignity in Dining policy revealed the following procedure:</p> <ul style="list-style-type: none"> <li>*Encourage residents to wash their hands before dining.</li> <li>*Encourage residents to wash their hands and face after dining.</li> </ul> <p>Review of the 8/18/20 Infection Control Precautions for Employees, Residents/Patients/Children, Family and Visitors</p>	F 880			

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F 880	Continued From page 4 policy revealed: "To break this chain of infection, it is important for Society employees, residents, patients, children, family members and visitors to follow standard precautions, proper handwashing techniques and isolation precautions when required."	F 880			