

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER / SUPPLIER / CLIA IDENTIFICATION NUMBER <b>425115</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED <b>09/30/2020</b>
NAME OF PROVIDER OF SUPPLIER <b>HONORAGE NURSING CENTER</b>		STREET ADDRESS, CITY, STATE, ZIP <b>1207 NORTH CASHUA ROAD FLORENCE, SC 29501</b>	
For information on the nursing home's plan to correct this deficiency, please contact the nursing home or the state survey agency.			
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)		
F 0880  <b>Level of harm</b> - Minimal harm or potential for actual harm  <b>Residents Affected</b> - Many	<p><b>Provide and implement an infection prevention and control program.</b></p> <p><b>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY**</b></p> <p>Based on observation, interview and policy review, the facility failed to ensure appropriate standard and transmission based precautions were implemented to prevent the spread of coronavirus (COVID)-19. Qualified Environmental Protection Agency (EPA)-registered disinfectants were not being used to clean residents' rooms. The Assistant Housekeeping Director did not realize the product used was not registered with the EPA for being an effective chemical against COVID-19. The disinfectant being used required specific timelines for the product to dwell on surfaces in order to breakdown all membranes that surrounded bacteria [MEDICAL CONDITION]. Interview with staff responsible for using the EPA-registered disinfectants revealed two (2) out of four (4) environmental staff were not aware of the proper dwell times. The failure to utilize disinfectant products as required to prevent the spread of COVID-19 had the potential to affect all the residents in the facility. Findings include: Review of the Novel Coronavirus policy updated on 4/7/2020, included information for cleaning and disinfecting. Listed under Environmental Infection Control the plan indicated, Housekeeping staff shall adhere to transmission-based precautions as applicable. Housekeeping staff will clean using disinfectants known to be effective against emerging [MEDICAL CONDITION] pathogens or novel coronavirus. The Facility Assessment undated documented, Supplies necessary for appropriate cleaning and disinfection procedures ( e.g., EPA-registered, for use in healthcare facilities, including products labelled as effective against [DIAGNOSES REDACTED] icille and norovirus) are available and used according to manufacturer instructions for use. The policy Environmental Services Guidelines, revised July 2011 documented, All horizontal surfaces such as tabletops, windows, ledges, bedside stands, counters, sinks, tubs, shower floors, toilet seats, floors, etc. will be cleaned daily with an acceptable hospital grade disinfectant/germicide. This procedure will vary with the item being cleaned. Follow manufacturer's recommendations and the recommendation of the infection preventionist. All chemicals used in the facility must have an approved EPA registration number; be labeled with the product name, product action, and correct use. An interview was conducted with the Assistant Director of Environmental Services on 9/29/2020 at 10:30 a.m. He/she stated, We use CDC-10, we leave it on for about five (5) minutes. We clean countertops, handrails and anything being touched a lot with this. Upon reading the container of CDC-10 it was documented the product was to remain on the surface for 10 minutes. The Assistant Director of Environmental Services stated they had used the product for years. On 9/30/2020 at 9:15 a.m., Housekeeper #1 who normally worked on the east hall, stated in an interview, We clean heavily soiled areas such as toilets and sinks with CDC-10. I leave it on the surfaces for about three (3) to five (5) minutes. CDC-10 was observed on the housekeeping cart. On 9/30/2020 at 9:30 a.m., Housekeeper #2 who was working on the east hall, stated in an interview, I clean with CDC-10 and leave it on surfaces for about three (3) to five (5) minutes. CDC-10 was observed on the housekeeping cart. On 9/30/2020 at 10:30 a.m., the Customer Service Representative from Spartan Chemicals stated, CDC-10 hasn't made it to the list of approved chemicals from the CDC (Center for Disease Control) yet. It doesn't have a COVID kill claim per CDC. In an interview on 9/30/2020 at 10:45 a.m. the Housekeeping Supervisor stated, I didn't realize there was a problem with the dwell time. I am coming back to work tomorrow. I will fix the situation. I will in-service the staff. Review of information obtained from the Environmental Protection Agency (EPA) government website revealed CDC-10 was not listed as being effective against COVID-19. <a href="https://www.epa.gov/pesticide-registration/list-n-disinfectants-use-against-[DIAGNOSES REDACTED]-cov-2">https://www.epa.gov/pesticide-registration/list-n-disinfectants-use-against-[DIAGNOSES REDACTED]-cov-2</a>. On 9/30/2020, at 2:00 p.m., the Administrator stated in an interview, We are going to remove the CDC-10 from the carts and only use chemicals from the CDC list. According to the Administrator, at one time the facility had a total of 16 residents and 12 staff positive with COVID-19. On 9/30/2020, at 2:15 p.m., the Assistant Housekeeping Director stated, I'm going to remove the CDC-10 from the housekeeping carts before I leave work today. I didn't realize it wasn't approved. The facility's failure to ensure staff utilized EPA-registered disinfectants properly when cleaning surface areas of the facility increased the risk of the spread of infections to all residents, including the spread of COVID-19.</p>		

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.