

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER / SUPPLIER / CLIA IDENTIFICATION NUMBER <b>165309</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED <b>06/15/2020</b>
NAME OF PROVIDER OF SUPPLIER <b>SHELL ROCK SENIOR LIVING</b>		STREET ADDRESS, CITY, STATE, ZIP <b>920 NORTH CHERRY STREET SHELL ROCK, IA 50670</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 - Minimal harm or potential for actual harm</b>  <b>Residents Affected - Few</b>	<p><b>Provide and implement an infection prevention and control program.</b> <b>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY**</b> Based on observation, interview and document review, the facility failed to utilize proper personal protective equipment (PPE) and isolation precautions during COVID -19 for 3 out of 3 residents, (Resident #1, #2 and #3). The facility identified a census of 36 residents. Finding include: 1. During an observation on 6/15/20 at 12:45 p.m. the surveyor noted several staff members providing meal assistance to residents in the dining room wearing personal prescription eye glasses and medical masks. During an observation on 6/15/20 at 12:55 p.m. Staff A, Certified Nursing Assistant, (C.N.A.), observed exiting room [ROOM NUMBER] and performing hand hygiene after providing resident care. Staff A wore prescription eye glasses that did not cover the sides of the eyes and a medical mask. During an interview on 6/15/20 at 1:12 p.m., Staff A reported goggles are only used if the staff do not wear (prescription) eye glasses. She reported the Administrator, Director of Nursing and charge nurses have all told them that (prescription) eye glasses are appropriate PPE. During an interview on 6/15/20 at 1:23 p.m. the Administrator stated the facility implemented PPE of goggles or eye glasses at the same time other PPE equipment, such as masks, were implemented. She reported they follow the Accura PPE Policy. During an interview on 6/15/20 at 1:27 p.m. Staff B, Licensed Practical Nurse, LPN, reported staff were told by Administration they could wear personal eye glasses instead of the goggles. During an observation on 6/15/20 at 1:35 p.m. Staff B assisted local emergency medical services (EMS) to transfer a resident to the hospital emergency department. Staff B wore personal prescription eye glasses that did not cover the sides of the eyes and a medical mask as she walked along side the residents cot to transfer the resident to the ambulance. During an interview on 6/15/20 at 2:50 p.m. the Administrator reported she expected staff should wear the larger goggles over the prescription eye glasses or wear regular goggles that cover the sides of the eyes with the medical mask. She stated the larger goggles fit over prescription eye glasses. A document titled, Guideline: PPE Selection and Use, dated 9/26/17, provided by the facility identified the following purpose: Improve personal safety with the appropriate use of personal protective equipment (PPE). PPE is clothing or equipment worn by an employee for protection against infectious materials. The Occupational Safety and Health Administration (OSHA) requires: That the employer provide appropriate PPE for employees. Ensure that PPE is disposed or reusable PPE is cleaned, laundered, repaired and stored after use. OSHA specifies circumstances for when PPE is indicated. Center for Disease Control and Prevention (CDC) recommends when and how to use PPE The document listed the following types of PPE: Gloves: protect hands Gowns or aprons: protect skin or clothing Mask and respirators: protect mouth and nose Goggles: protect the eyes Face shields: protect the face, mouth, nose and eyes The document identified the following for eye and face protection: Goggles help protect only your eyes from splatters. A face shield provides splatter protection to facial skin, eyes, nose and mouth. Position goggles over the eyes and secure to the head using the ear pieces or headband Position face shield over face and secure on brow with headband Adjust to fit comfortably The PPE Shortage Order document, dated 4/25/20, from the Iowa Department of Public Health, provided by the Administrator, listed the following under Implement Crisis Capacity Strategies: Eye protection: consider using safety glasses such as trauma glasses that have extensions to cover the sides of the eyes. The National Institute for Occupational Safety and Health (NIOSH), Eye Safety Infection Control (March 29, 2013), retrieved from <a href="https://www.cdc.gov/niosh/topics/eye/eye-infectious.html">https://www.cdc.gov/niosh/topics/eye/eye-infectious.html</a>, stated workers should understand that regular prescription eyeglasses and contact lenses are not considered eye protection.</p> <p>2. An interview conducted on 6/15/2020 at 12:45 p.m. with facility Administrator identified 1 resident (Resident #1) on isolation precautions due to the resident being out of the facility for medical appointments. The Administrator reported the facility had identified 4 rooms on the far end of the east hallway for residents requiring COVID isolation and quarantine. During an observation on 6/15/2020 at 1:15 p.m., Resident # 1's room, located on the far end of the east wing with the door opened widely. Resident #1's door had signs that identified Droplet and Contact Precautions were to be followed. The signs instructed staff to wear gloves, gown, and to make sure their eyes, nose and mouth are fully covered before room entry. A three drawer wooden stand was located outside Resident #1's room. A box of vinyl powder free exam gloves sat on top of the wooden stand. The top drawer of the wooden stand contained a box of surgical type face masks, head caps and several large black plastic bags, drawer 2 held additional boxes of gloves and drawer 3 held shoe covers. No disinfectant wipes or gowns were located in or on top of the 3 drawer wooden stand and no gowns were visible in Resident # 1's room. During an observation on 6/15/2020 at 1:47 p.m. Residents #1's room door was closed. Staff D, CNA, opened Resident #1's door and stepped out of the room. Staff D had on protective eyewear and a face mask. Staff D, verbalized she had not worn a gown but verbalized she should have. Staff D, stated gowns were kept in the wooden stand by the door. Staff D, opened all three drawers and said, oh, I guess there aren't any. Staff D did not clean her protective eyewear and reported the staff cleaned their eyewear at the nurses station at the other end of the hallway and did not disinfect protective eyewear when they left an isolation resident's room. During an observation on 6/15/2020 at 2:30 p.m., Staff E, CNA, came out of Residents #2 and #3's room, another isolation room at the far end of the east wing, with a door marked for Contact and Droplet precautions. Staff E did not clean her protective eyewear and stated staff clean their protective eyewear with PDI Lens cleaning wipes that are located at the nurses station on the other end of the hallway. During an observation on 6/15/2020 at 1:57 p.m. the facility Administrator looked for protective isolation gowns in the three drawer wooden stand outside of Resident #1's room and verified the lack of gowns. The Administrator confirmed all staff entering Resident # 1's room should be wearing a gown as the isolation sign on the door directed. The Administrator replaced gowns in the wooden stand at 1:59 PM. Review of facility document titled, PPE (Personal Protective Equipment) provided by the facility Administrator on 6/15/2020 at approximately 2:00 p.m., revealed in part, Contact Precautions .wear a fluid resistant, non-sterile gown Droplet Precautions .goggles or face shields are used for diseases or germs that are spread in tiny droplets Doffing (removing) Personal Protective Equipment (PPE) . PPE is removed before exiting the resident room .the outside of goggles or face shields are contaminated! If reusable, place in designated receptacle for reprocessing. Otherwise, discard in a waste container. The document failed to provide instructions for staff on how to disinfect their protective eyewear for continued use at the resident's room. An interview conducted on 6/15/2020 at 2:40 p.m. the facility Administrator verified protective eyewear should be cleaned when care staff leave the room of a resident on isolation precautions. The facility Administrator placed a box of PDI Lens cleaner wipes on the stand outside of the room. 3. During an observation on 6/15/2020 at 1:15 p.m., Resident #2 and #3's room, located on the far end of the east hallway, next to Resident #1's room, also had signs that identified Droplet and Contact Precautions were in place. Residents #2 and #3's door was wide open. Two large fans were located against the far side of the room with the blowing air directed toward the room's open door. The noise of the running fans was audible and the movement of air was felt in the hallway, several feet outside of the room. An interview conducted on 6/15/2020 at 1:53 p.m., Staff B, Licensed Practical Nurse (LPN) reported that Residents #2 and #3 are on standard, contact and droplet isolation due to being new admissions to the facility. Staff B reported the room should not have fans blowing air out of the room at this time. During interview conducted on 6/15/2020</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.

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<p>F 0880</p> <p><b>Level of harm</b> - Minimal harm or potential for actual harm</p> <p><b>Residents Affected</b> - Few</p>	<p>(continued... from page 1)</p> <p>at 1:58 p.m., the Administrator reported she would talk to the residents (#2 and #3) about getting rid of the fans and closing the door. The Administrator did not stop the fans or close the door at that time. The Administrator returned at 2:07 p.m. and confirmed the fans should not blow air from the room into the hall and reported the fans had been removed and the room door had been closed.</p>		