

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER / SUPPLIER / CLIA IDENTIFICATION NUMBER 155793	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 10/15/2020
NAME OF PROVIDER OF SUPPLIER HAMILTON TRACE OF FISHERS		STREET ADDRESS, CITY, STATE, ZIP 11851 CUMBERLAND RD FISHERS, IN 46037	
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 Level of harm - Minimal harm or potential for actual harm Residents Affected - Some	Provide and implement an infection prevention and control program. Based on observation and interview, the facility failed to socially distance residents during a group activity with the potential to affect 19 residents on the memory care unit. Findings include: On 10/15/2020 at 10:58 a.m., the dementia care unit was randomly observed. There was a group activity being conducted in the television room, adjacent to the activity room on the unit. There were 12 residents present in the room. The residents were positioned looking at the television in rows. The residents were sitting approximately 2 to 3 feet apart. One of the residents was standing in the back of the room, with his mask in his hand. The door of the room, leading to the hallway, was closed. The door leading to the activity room was open. During an interview on 10/15/20 at 11:30 a.m., AA (Activities Assistant) 1 indicated the residents were attending a sing in church activity and that they were positioned closer to each other than they should have been. During an interview on 10/15/2020 at 12:55 p.m., the DNS (Director of Nursing Services) indicated that small group activities were occurring in the facility and that during group activities the residents should be socially distanced. On 10/15/2020 at 2:10 p.m., the Preparing for COVID-19 in Nursing Homes Guidance, updated June 25, 2020, was retrieved from the CDC (Center for Disease Prevention and Control) website. The guidance read . Background .Given their congregate nature and resident population served (e.g., older adults often with underlying chronic medical conditions), nursing home populations are at high risk of being affected by respiratory pathogens like COVID-19 .Additional Strategies Depending on the Facility ' s Reopening Status .Implement aggressive social distancing measures (remaining at least 6 feet apart from others) .Considerations when restrictions are being relaxed include .Allowing . group activities for residents without COVID-19, including those who have fully recovered while maintaining social distancing, source control measures, and limiting the numbers of residents who participate . 3.1-18(a)		
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.