

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER / SUPPLIER / CLIA IDENTIFICATION NUMBER 165539	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 08/19/2020
NAME OF PROVIDER OF SUPPLIER MARIAN HOME		STREET ADDRESS, CITY, STATE, ZIP 2400 SIXTH AVENUE NORTH FORT DODGE, IA 50501	
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	<p>Provide and implement an infection prevention and control program.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY**</p> <p>Based on observation, Centers for Disease Control (CDC) and Iowa Department of Public Health (IDPH) documents and staff interview, the facility failed to implement adequate infection control interventions during a COVID outbreak to the prevent the spread of Covid-19. The facility reported a census of 67 residents. Findings include: During observation on 8/17/20 at 11:26 a.m. housekeeping staff vacuumed in the 500 hall. The staff member wore goggles on the top of her head. The staff member talked with a resident who wore a mask that did not cover her nose. At 11:37 a.m. the housekeeping staff talked with a resident in their room with the goggles on top of her head. During an observation on 8/17/20 at 3:20 p.m. Staff A Licensed Practical Nurse (LPN) went into Resident #6 and #7's room with a mask on but no goggles. Staff A then went to Resident #8 and #9's room and talked to one of the residents When Staff A came out of the room. she talked to Resident #5 getting down to talk at the resident's level, 1-2 feet from the resident. The resident did not wear a mask. Staff A did not wear goggles for any of the interactions. During an observation on 8/17/20 at 3:26 p.m. Staff B Certified Nursing Assistant (CNA) went to Resident #2's room to get the resident's mask, and then put it on him. Staff B wore a mask, but no goggles. Staff B walked another resident in the hall with no goggles on. During an observation on 8/18/20 at 8:22 a.m. Staff C Registered Nurse (RN) prepped medications at the med cart. She wore glasses and had goggles on the top of her head. A resident sitting in the hall to her right greater than 6 feet away coughed several times. When medications were prepped she walked up to the same resident who talked to her and administered medication. The goggles remained on top of her head. During an observation on 8/18/20 at 8:24 a.m. Staff D Housekeeper readjusted a resident's chair (with the resident in it) so do she could vacuum around it. Staff D's head was within inches of the resident's. Staff D wore glasses but no goggles. The resident did not wear a mask. During an observation on 8/18/20 at 8:32 a.m. Staff E LPN stood at the med cart with goggles on top of her head. She walked over to a resident and put the resident's mask on. She walked over to another resident and bent down close to her face. The goggles remained on top of Staff E's head. During an observation on 8/18/20 at 9:48 a.m. Staff E took Resident #10's vital signs in his room with goggles on top of her head. During an observation and interview on 8/18/20 at 9:20 a.m. Staff D came out of a resident's room with the resident present, and wore only her glasses. When asked she stated she was supposed to wear goggles and retrieved them from the housekeeping cart. During an interview on 8/18/20 at 9:22 a.m. Staff C stated they were required to wear a mask and goggles when in close contact with residents. She stated needing her eyeglasses to read the medications and must have forgotten to put the goggles back down. She stated glasses did not provide the coverage needed. On 8/18/20 at 11:15 a.m. the Administrator and Infection Preventionist stated staff knew of the need to wear goggles within 6 feet of residents. She said they started wearing goggles when recommended by the Center for Disease Control (CDC) and the Iowa Department of Public Health (IDPH). During an interview on 8/18/20 at 11:45 a.m. Staff F CNA stated they were to wear a mask and goggles while working. Per the CDC guidance dated 7/15/20 to Implement Universal Use of Personal Protective Equipment (PPE), Health Care Professionals (HCP) working in facilities located in areas with moderate to substantial community transmission were more likely to encounter asymptomatic or pre-symptomatic patients with [DIAGNOSES REDACTED]-CoV-2 infection. If [DIAGNOSES REDACTED]-CoV-2 infection was not suspected in a patient presenting for care (based on symptom and exposure history), HCP should follow Standard</p> <p>Precautions (and Transmission-Based Precautions if required based on the suspected diagnosis). They should also wear eye protection in addition to their facemask to ensure the eyes, nose, and mouth all protected from exposure to respiratory secretions during patient care encounters. Per the IDPH guidance dated 4/1/20 the Iowa Department of Public Health recommended healthcare workers providing patient care in long term care facilities should use a minimum level of PPE for all patient care activities. The healthcare workers should use a face mask and eye protection for all patient encounters.</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.