

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER / SUPPLIER / CLIA IDENTIFICATION NUMBER <b>245346</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED <b>08/24/2020</b>
NAME OF PROVIDER OF SUPPLIER <b>TRUMAN SENIOR LIVING</b>		STREET ADDRESS, CITY, STATE, ZIP <b>400 NORTH 4TH AVENUE EAST TRUMAN, MN 56088</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 document review, the facility failed to follow Centers for Medicare and Medicaid Services (CMS) and Centers for Disease Control (CDC) guidelines by appropriately implementing preventive measures to prevent the spread of COVID-19. This had the potential to affect all 28 residents who resided at the facility. Findings include: During an interview on 8/24/20, at 11:01 a.m. environmental services director (ESD)-A stated a product called Hillyard Vindicator Plus Disinfectant was used by housekeepers to disinfect floors in the facility. During an interview on 8/24/20, at 11:20 a.m., housekeepers (H)-B and H-C stated they used a blue cleaner on the floors. H-B and H-C took surveyor to housekeeping room where cleaning products were stored and pointed out the product they were using to clean floors which was Essential Industries brand, Blue Concentrate cleaner. Upon further inspection, this cleaner was not listed on the environmental protection agency (EPA) List N for disinfectants for use against [DIAGNOSES REDACTED]-CoV-2, [MEDICAL CONDITION] that causes Covid-19. During an interview on 8/24/20, at 1:10 p.m., when informed housekeepers indicated they were not using a disinfectant on floors, ESD-A stated housekeepers were supposed to be alternating use of Vindicator Plus Disinfectant and Blue Concentrate cleaner every other day. ESD-A attempted to locate instructions for housekeepers on the alternating schedule, but did not. ESD-A stated the cleaner and disinfectant were to be alternated each day so the disinfectant solution didn't build up on the floors. ESD-A stated it was important to use a disinfectant on the floors in order to prevent Covid-19. During an interview on 8/24/20, at 1:13 p.m., H-D stated we only use Blue cleaner on floors. H-D further indicated she was unaware of alternating with another floor product. Prior to exiting the facility on 8/24/20, at 1:45 p.m. ESD-A provided a document instructing housekeepers to use Vindicator Plus Disinfectant on Mondays, Wednesdays, Fridays and Sundays and Blue Concentrate cleaner on Tuesdays, Thursdays and Saturdays. During an interview on 8/24/20, at 1:50 p.m., registered nurse (RN)-A, director of nursing and administrator indicated they expected a disinfectant product to be used on floors in order to minimize the risk of [DIAGNOSES REDACTED] CoV-2, Covid19. Facility policy titled Infection Prevention and Control Manual, Interim Policy for Suspected or Confirmed Covid-19, undated, indicated the following: 1. Cleaning and disinfection rooms and equipment will be performed using products that have EPA-approving emerging [MEDICAL CONDITION] pathogens, including [DIAGNOSES REDACTED] CoV-2, Covid19.</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.