

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER / SUPPLIER / CLIA IDENTIFICATION NUMBER <b>045432</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED <b>04/03/2020</b>
NAME OF PROVIDER OF SUPPLIER <b>BARROW CREEK HEALTH AND REHAB</b>		STREET ADDRESS, CITY, STATE, ZIP <b>2600 BARROW ROAD LITTLE ROCK, AR 72204</b>	
For information on the nursing home's plan to correct this deficiency, please contact the nursing home or the state survey agency.			
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F 0880  <b>Level of harm - Minimal harm or potential for actual harm</b>  <b>Residents Affected - Some</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> Complaint # (AR 443) was substantiated, all or in part, with these findings. Based on record review and interview, the facility failed to ensure the thermometer was properly cleaned after each use during mandatory screenings for COVID-19 and failed to ensure proper Personal Protective Equipment (PPE) was available and accessible to staff during care provision to prevent potential transmission of infection for 1 (Resident #1) of 1 resident who was on Contact Isolation. The findings are: 1. On 03/31/2020 at 9:30 AM, the Administrator was asked via telephone interview, Do you have any active cases of COVID-19? She stated, No. She was asked, Do you have anyone on Isolation? She stated, Yes, we had one admitted from the hospital on March 20 (2020) on Contact Isolation [MEDICAL CONDITIONS] in the Sputum. Actually, she was just extended her for about another week. She was asked, How are screenings done at the entrance door of the facility to prevent the spread of the Coronavirus? She stated, We are taking temps (temperature) and having them complete a questionnaire. She was asked, How many hours is the station manned by staff? She stated, Around the clock, I'm there a lot myself because of the location of my office to the door, the door is kept locked. She was asked, How are you cleaning the thermometer between each use? She stated, We use alcohol wipes. a. On 03/31/2020 at 10:19 AM, the Director of Nursing (DON) was asked, Is the facility doing COVID-19 Screenings? She stated, Yes we are. Right now, visitors are not allowed to come in. Only staff. She was asked, Can you describe the screening process? She stated, Somebody sits out front and take their temps and have them fill out the form. She was asked, What type of thermometer do you use? She stated, The one where you just touch the forehead. She was asked, How do you clean the thermometer between each use? She stated, We use alcohol wipes. She was asked, Have you ever seen, or do you have knowledge of an alcohol-soaked sponge being used to clean the thermometer? She stated, No. b. On 03/31/2020 at 2:26 PM, Registered Nurse (RN) #1 was asked (via telephone interview), Were you screened at the entrance when you arrived for work? He stated, Yes. He was asked, Was your temperature (temp) checked? He stated, Yes. He was asked, Did you notice how the thermometer was cleaned after each use? He stated, Yes, with that nasty sponge. The DON even had an issue with that. He was asked, Can you describe what the sponge looks like? He stated, Yes it's a yellow sponge soaked in alcohol sitting in a plastic bowl-like container. They sit at the door, check your temp and wipe the thermometer off with the sponge. I never saw them change it. To me that's cross-contamination. c. On 03/31/2020 at 2:51 PM, Certified Nursing Assistant (CNA) #1 was asked via telephone interview, Were you screened at the entrance when you came to work? She stated, Yes. She was asked, Tell me how you were screened. She stated, When you walk up to the desk, they put the thermometer on your forehead and take your temp, then they have you fill out a paper. She was asked, Did you see how the thermometer was cleaned after each use? She stated, There's a clear bowl on the table with a yellow square sponge that they pour alcohol over, they use that to clean it off. d. On 03/31/20 at 3:15 PM, CNA #2 was asked via telephone interview, Were you screened at the entrance when you came to work? She stated, Yes ma'am. She was asked, Tell me how you were screened. She stated, When you come in, they take your temp and you have to fill out a form. She was asked, Did you see how the thermometer was cleaned after each use? She stated, With a little sponge in a plastic bowl with alcohol in it. It's out there now. I can go get a picture and send it to you. On 3/31/20 surveyor received a photograph from CNA #2 via email of a sponge in a plastic container. e. On [DATE] at 9:21 AM, CNA #3 was asked via telephone interview, Are you screened at the entrance when you come to work? She stated, Yes. She was asked, Can you tell me how you are screened? She stated, They hold the thermometer up to your head and rub it across. She was asked, Did you see how they cleaned it? She stated, Up until today they cleaned it with a yellow sponge that was in a clear plastic container. She was asked, Have you seen it cleaned with alcohol pads? She stated, Not when they first started, but they have some today. This was the first time they had alcohol pads out there. f. On [DATE] at 1:09 PM, CNA #4 was interviewed via telephone and asked, Are you screened at the entrance when you come to work? She stated, Yes. She was asked, Tell me how you are screened. She stated, You fill out a paper and they take your temperature on your forehead. She was asked, Did you notice how the thermometer was cleaned in between use? She stated, Usually they dab it on a yellow sponge with alcohol on it in a bowl, but this morning they had alcohol pads. She was asked, Do you provide care for Resident #1? She stated, Yes. She was asked, What PPE is provided outside the door? She stated, Nothing but gloves. She was asked, Does the resident have a cough? She stated, Yes, but we don't have anything to put on our face. They took all the hand sanitizer, masks, and gowns and stored them in the Administrator's office. She was asked, How do you sanitize your hands? She stated, I keep my own sanitizer in my pocket. g. On 3/31/2020 at 1:24 PM, a Facility Policy titled Cleaning and Disinfection of Resident-Care Items and Equipment was provided by the Administrator via email and documented, Policy Statement. Resident -care equipment, including reusable items and durable medical equipment will be cleaned and disinfected according to current CDC (Centers for Disease Control) recommendations for disinfection and the OSHA (Occupational Safety and Health Administration) Bloodborne Pathogens Standard. Policy Interpretation and Implementation. (d) Reusable items are cleaned and disinfected or sterilized between residents. h. On [DATE] at 8:17 AM, the Administrator was asked during a telephone interview, Is the facility Policy for cleaning reusable equipment (thermometer) for the residents the same policy used for cleaning equipment during screenings on staff and others? She stated, Yes. It's never been used on residents; it was bought just for screening. She was asked, Have you ever observed or have knowledge of a sponge soaked in alcohol being used for cleaning the thermometer used for screenings? She stated, No. Never. 2. The Order Summary Report for Resident #1 dated [DATE]/2020 documented, Admission [DATE]. Diagnoses: [REDACTED]. [MEDICAL CONDITION]. Pneumonia due to other infectious organisms. Bacteremia. A Nsg (Nursing) Admission Summary dated [DATE]20 at 14:40 (2:40 p.m.) documented, (Resident #1). Rec'd (received) back to facility via van. a. A physician's orders [REDACTED]. Contact Isolation RT (related to) [MEDICAL CONDITION] in Sputum. [MEDICATION NAME] every 4 hours as needed for cough. b. The Comprehensive Care plan dated [DATE] documented, Isolation Precautions R/[MEDICAL CONDITION] of Sputum. Intervention: Wear gowns and masks when changing contaminated linen. c. A Nurse's Note dated 3/21/2020 at 18:02 (6:02 p.m.) documented, Cough present. Contact isolation precautions in place r/[MEDICAL CONDITION] in the sputum. Resident continues to propel self in wheelchair out of room and down hallways. Redirection successful but resident will stay in room for 3-5 minutes and then attempt to exit room again. d. A Nurse's Note dated 3/22/2020 documented, Continues to come out of room, cough present. e. A Nurse's Note dated 3/25/2020 at 22:00 (10:00 p.m.) documented, noted propelling self out of room and into other residents' room down hallways. f. A Nurse's Note dated 3/27/2020 documented, Cough continues. Isolation precautions remain in place r/[MEDICAL CONDITION] in sputum. g. A Nurse's Note dated 3/30/20 documented, Continue Isolation for 5-7 days. h. On 04/02/2020 at 3:18 PM, Licensed Practical Nurse (LPN) #1 was asked, Do you have a resident on isolation? She stated, Yes. She was asked, What type of Isolation? She stated, She [MEDICAL CONDITION] ([MEDICAL CONDITION]-Resistant [CONDITION]) in her sputum. She was asked, What type of PPE is the staff using when they enter her room? She stated, Gowns and gloves. We just started putting masks on. The resident was admitted from the hospital on the [DATE] and there was some confusion as to whether she was on droplet precautions or contact isolation. The hospital said she should be on droplet precautions because it was in her sputum and she had a cough and also when she talks, she spits. We were short of masks and did not have the ability to get them. I looked up the</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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F 0880  <b>Level of harm - Minimal harm or potential for actual harm</b>  <b>Residents Affected - Some</b>	<p>(continued... from page 1)</p> <p>CDC guidelines myself and saw that they recommended you should wear eyewear, mask, gowns and gloves for droplet isolation. She was asked, When did you start wearing masks? She stated, From the minute she was admitted up till yesterday; we were just going in with gowns and gloves. So, from [DATE] till 3/31/20 no masks were available for us. I was surprised when I came in tonight and masks were available. She was asked, Did anyone complain to the Administrator or DON? She stated, All the staff had been complaining. The resident has a cough and she [MEDICAL CONDITION] in her sputum. She was asked, How did the DON respond? She stated, She was actually in agreement with the staff, but it wasn't much she could do. We can't get alcohol wipes. We have to do blood sugar checks using antibacterial gel and gauze. Once the DON overstepped and ordered alcohol pads from pharmacy for us and this upset management, because they wanted us to keep using antibacterial gel and gauze. I don't like using that gel because you get a film buildup on the skin and it takes so long to dry. I believe you end up with a false reading with that gel. She was asked, Are you screened at the entrance when you come to work? She stated, Yes and at night we do the screenings. She was asked, How is the thermometer cleaned? She stated, Before (tonight) we had this dishwashing sponge in a plastic container soaked in alcohol. That's how they were cleaning it, but now it has disappeared since you started asking questions. We didn't feel safe, especially with COVID out now, but tonight alcohol pads have been put out there. She was asked, To your knowledge was the sponge ever changed between uses? She stated, No. It was a problem for us. i. On 04/02/2020 at 3:38 PM, LPN #2 was asked via telephone interview, Do you provide care for the resident on isolation [MEDICAL CONDITION] in Sputum? She stated, Yes. She was asked, What PPE do you use when providing care? She stated, Gown and gloves before, but now we are also provided with the masks we had been asking for. She was asked, Does the resident have a cough? She stated, Yes. She was asked, How long did you provide care without a mask? She stated, Since she was admitted from the hospital on [DATE] until last night. She was asked, When were masks made available? She stated, The first time I saw them was tonight. I was surprised to see them. They were not available before. This resident [MEDICAL CONDITION] in her sputum, and she is coughing. I would say this is a need wouldn't you? She was asked, What type of care does the resident require? She stated, She is totally dependent on staff for care. She is cognitively impaired, obese, is incontinent and has [MEDICAL CONDITION] and gets short of breath. She was asked, Have masks always been available outside the resident's room for the CNAs when they provided care? She stated, No. If I had an extra, I would share with them, but tonight masks are available for them. I am surprised. She was asked, Are you screened at the entrance when you come to work? She stated, Yes. She was asked, How are you screened? She stated, She takes your temperature and you have to fill out a paper. She was asked, Is the thermometer that touches your forehead used? She stated, Yes. That's the kind we use. She was asked, How is it cleaned between each use? She stated, There's a jar with a sponge with alcohol on it, that's what we had been using for disinfecting it. We now have alcohol wipes. j. On 04/02/2020 at 10:23 AM, the DON was interviewed via telephone. She was asked, Has staff received training on infection control? She stated, Yes. She was asked, What PPE is the staff trained to use when providing care for a resident on Contact Precautions [MEDICAL CONDITION] in the Sputum? She stated, They are required to wear gowns and gloves? She was asked, Anything else? She stated, No. She was asked, Has the facility had a shortage of any PPE in the last month? She stated, No. She was asked, Do you have an adequate supply of alcohol wipes? She stated, Yes, fortunately we were able to find some in the stores before they had all run out. She was asked, To your knowledge has the resident on Isolation [MEDICAL CONDITION] in her sputum (Resident #1) had any coughing? She stated, Yes, but she has greatly improved since she was put on [MEDICATION NAME] and she also get [MEDICATION NAME] Pearls. She was asked, Was the staff who took care of the resident provided with masks?</p> <p>She stated, Masks are available to them and they are kept in supply. They know where to find them. One while they were kept on the nurse's med (medication) cart on [LOC] (R #1 resides on [LOC]). She was asked, How do you monitor staff for proper use of PPE? She stated, I observe them when I'm in the hallways to make sure and I check the supply to make sure they have PPE and they also know where to go to get them from supply. k. On [DATE] at 7:17 AM, a facility Policy titled Policies and Practices- Infection Control provided by the Administrator via email documented, . Policy Statement: This facility's infection control policies and practices are intended to facilitate maintaining a safe, sanitary and comfortable environment and to help prevent and manage transmission of diseases and infections.</p>		