

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER / SUPPLIER / CLIA IDENTIFICATION NUMBER 125040	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 10/16/2020
NAME OF PROVIDER OF SUPPLIER LIFE CARE CENTER OF HILO		STREET ADDRESS, CITY, STATE, ZIP 944 WEST KAWAILANI STREET HILO, HI 96720	
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>Based on observations and interviews with staff members, the facility failed to maintain an infection prevention and control program designed to provide a safe and sanitary environment to help prevent the development and transmission of communicable diseases and infections. The facility did not ensure practices to contain infections amongst staff members. Staff member observed handling biohazard waste without a clothing protector, resulting in possible exposure to colleagues. Also, the facility did not ensure staff members sanitized their tables after use resulting in potential spread of COVID-19 through contact transmission. Findings include: On 10/16/20, the facility has reported 16 (sixteen) staff members tested positive for COVID-19. The facility identified two clusters, the dietary department (three employees) and housekeeping department (three employees). On 10/09/20, the facility closed break rooms and have created individual dining spaces for their employees. Dining spaces are located outside (i.e. balcony) and in various areas of the facility. 1) On 10/16/20 at 08:06 AM observed staff member (SM1) from the conference room window in the parking lot located behind the facility loading bags (clear plastic containing red plastic bags) onto the bed of a truck. SM1 was wearing gloves, face mask and face shield. When the truck was loaded, SM1 brought a strapping device to tether the bags down. The staff member was observed to put his arm atop the bags to affix the strapping device. Also, observed the remainder of the bags were stored in an area that was encased by chain-linked fencing and a tarp roof. The fencing was high enough for SM1 to walk into the area. The Administrator entered the conference room and made concurrent observation. Inquired whether SM1 needed to wear a clothing protector while handling the bags containing red bags. Administrator confirmed the red bags contained biohazard waste. The Administrator explained the facility's biohazard waste is loaded on the facility's truck and taken to an acute hospital for disposal. The Administrator excused himself, went downstairs and was observed speaking to SM1. They both re-entered the facility from the parking lot. Shortly thereafter, a staff member was observed throwing rubbish away in the large waste bin (no biohazard waste material). The staff member wore gown, gloves, mask and face shield. At 08:22 AM, the Administrator confirmed SM1 needed to wear a gown. Subsequently, the Administrator reported SM1 usually doesn't perform tasks on the units; however, works with three other staff members. The Administrator also reported an in-service for the maintenance department was going to be conducted at noon by the infection preventionist (IP). Subsequently, the IP provided a copy of the in-service content for protecting associate from cross contamination while transferring and transporting biohazard waste to acute facility for disposal. The procedure includes donning full personal protective equipment (PPE) which includes gown, mask, face-shield and gloves prior to task; load the disinfection back-pack and biohazard bags onto the company truck using full PPE; remove PPE and dispose into a red biohazard bag; and wash hands. The procedure also includes unloading and cleaning of the facility's truck upon return. 2) Observation on 10/16/20 at 11:51 AM found staff members were not observed to wipe/sanitize their tables at the end of their lunch break. Observed staff members sitting alone in the facility's designated break area. The tables were set up for one staff member (only one chair). There were two staff members working in the break area, wearing face masks and shields. There were four staff members at the other tables, some were eating their lunch (unmasked) and one staff member was talking on the phone (unmasked). Observed two staff members gather their belongings (lunch bags, bags, etc.) which were atop the table and walk away. The table surface was not wet. Then observed one staff member place his/her belongings on the chair and walk over to a table to get a disposable cloth from a plastic container. The staff member wiped down the table. The staff member was asked whether they are expected to wipe down the table, he/she replied yes and referred to the disposable sanitizing wipes on a table. There was also a clear container containing cloth soaked in a peroxide solution. A brief interview with the IP confirmed staff members eating at the tables are to wipe their area with the disinfecting disposable clothes or the clothes soaked in the peroxide solution after sitting at the table.</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.