

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER / SUPPLIER / CLIA IDENTIFICATION NUMBER <b>025035</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED <b>05/15/2020</b>
NAME OF PROVIDER OF SUPPLIER <b>UTUQQANAAT INAAT</b>		STREET ADDRESS, CITY, STATE, ZIP <b>436 MISSION STREET KOTZEBUE, AK 99752</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 - Minimal harm or potential for actual harm</b>  <b>Residents Affected - Many</b>	<p><b>Provide and implement an infection prevention and control program.</b></p> <p>. Based on interviews, observations, and record review, the facility failed to ensure social distancing of residents 6 feet apart during communal dining. These failed practices had the potential to affect all residents, based on a census of 15, to properly prevent the spread of infection and/or COVID-19. Findings: Communal Dining: During an interview on 5/4/20 from 3:05 pm to 5:00 pm, the Director of Nursing (DON) stated, social distancing had been practiced in the facility. The DON further stated that social distancing had been challenging since residents wanted to be close to one another. During an observation on 5/4/20 at 5:30 pm, in the dining area, revealed rectangular and round tables. Residents #1 and #2 were eating and talking at a rectangular table. The Residents were seated one on each side diagonally of each other approximately 2-3 ft. apart. During the same observation with Residents #3 and #4 at another table. Further observation revealed Resident #5 was seated next to Resident #6 at about 1-2 ft. apart and were talking to each other at another table. During an observation on 5/5/20 at 11:12 am, in front of the nurse's station, revealed Residents #5 and #6, were seated in their respective wheelchairs, talking closed to each other. No masks were observed on either resident. During an observation in the dining area on 5/5/20 at 12:00 pm, revealed Residents were eating and others were waiting for their meal to be served. Some Residents were seated individually at round tables and others were seated with other Residents at the rectangular tables. Particularly, Resident #1 was seated with Resident #2 diagonally at the opposite side of a rectangular table approximately 2-3 ft. apart. Resident #3 was seated with Resident #4 diagonally at the opposite side of a rectangular table approximately 2-3 ft. apart at another table. At another table, Resident #5 and Resident #7 were seated, one at each end of a rectangular table approximately 5 ft. apart. During an interview on 5/5/20 at 5:45pm the Surveyor asked the DON what the measurement of the table was, she gave the measurement as: Length 60 in (5 ft.) W 35 1 (2.95 ft.) (Rectangle) and Dia (diameter) 41 in (3.45 ft.) round. Record review of facility's Temporary No Visiting Policy dated 3/14/20, revealed In the event of a perceived health care risk or an actual health care risk it is Utuqqanaat Inaat's (UI) policy to follow the directions of the Centers for Medicare and Medicaid Services (CMS), the Center for Disease Control (CDC), and the World Health Organization (WHO) to ensure the health of the elders residing at LTC (long term care) . will restrict all visitors . there will be no group activities and communal dining. The residents and staff will practice social distancing by stay (ing) 6 feet apart as space will allow. Review of the Centers for Disease Control and Prevention (CDC), Social Distancing, dated 5/6/20, accessed at <a href="https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/social-distancing.html">https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/social-distancing.html</a> , social distancing . means keeping space between yourself and other people . stay at least 6 feet (about 2 arms' length) from other people . do not gather in groups . . Spread happens when an infected person coughs, sneezes, or talks, and droplets from their mouth or nose are launched into the air and land in the mouths or noses of people nearby. The droplets can also be inhaled into the lungs. Recent studies indicate that people who are infected but do not have symptoms likely also play a role in the spread of COVID-19. Review of the CDC guidance, Preparing for COVID-19: Long-term Care Facilities, Nursing Homes, Interim Additional Guidance for Infection Prevention and Control for Patients with Suspected or Confirmed COVID-19 in Nursing Homes, dated 4/15/20, accessed at <a href="https://www.cdc.gov/coronavirus/2019-ncov/hcp/long-term-care.html">https://www.cdc.gov/coronavirus/2019-ncov/hcp/long-term-care.html</a>, things facilities should do now (is to) educate residents and families including, information about COVID-19; actions the facility is taking to protect them . emphasizing the importance of social distancing . Additional measures (such as) cancel communal dining . (and) remind residents to practice social distancing . .</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.