

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER / SUPPLIER / CLIA IDENTIFICATION NUMBER 365740	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 07/21/2020
NAME OF PROVIDER OF SUPPLIER ASTORIA PLACE OF CLYDE, LLC		STREET ADDRESS, CITY, STATE, ZIP 700 HELEN STREET CLYDE, OH 43410	
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 review of the nursing and nursing assistant schedules, staff interviews, review of the facility policy and the Centers for Disease Control (CDC) guidelines, the facility failed to ensure there was dedicated nursing staff working on the Coronavirus Disease 2019 (COVID-19) unit. This had the potential to affect 22 (#4, #5, #6, #7, #8, #9, #10, #11, #12, #13, #14, #15, #16, #17, #18, #19, #20, #21, #22, #23, #24, and #25) residents who reside on the west side of the facility. The facility census was 43. Findings include: Review of the licensed nursing and nursing assistant staffing schedules from 07/06/20 through 07/21/20, revealed there was no dedicated staff assigned to the COVID-19 unit. Staff assigned to the west side of the facility provided care for residents on the COVID-19 hall (Rooms #210 to #215, and room [ROOM NUMBER]) and the non-COVID-19 hall (Rooms #202 to #209 and Rooms #216 to #226). Further review of the staffing schedules revealed from 07/06/20 through 07/21/20, nine nurses (Registered Nurse (RN) #300, RN #304, and RN #305, Licensed Practical Nurse (LPN) #204, LPN #205, LPN #206, LPN #207, and LPN #208) and six nursing assistants (Stated tested Nursing Assistant) STNA #100, STNA #102, STNA #104, STNA #105, STNA #106, and STNA #107) worked on both the COVID-19 hall and the non-COVID-19 halls during their shift. Telephone interview on 07/20/20 at 7:33 A.M. with the Director of Nursing (DON), stated there were not enough residents in the COVID-19 unit to have a dedicated nurse. Telephone interview on 07/20/20 at 3:22 P.M. with STNA #100, revealed there were three residents on the COVID-19 unit. STNA #100 revealed during her shift, she provided care for residents on the west end including the residents in the COVID-19 unit. STNA #100 revealed she went back to the COVID-19 unit every two hours. Telephone interview on 07/20/20 at 3:36 P.M. with Registered Nurse (RN) #300, revealed there were three residents on the COVID-19 unit. RN #300 stated she went between the COVID-19 unit and the non-COVID-19 halls approximately six to eight times per day, depending on the call lights. Telephone interview on 07/20/20 at 6:45 P.M. with Licensed Practical Nurse (LPN) #200, revealed she worked on the COVID-19 unit and the non-COVID-19 halls during her shift. Telephone interview on 07/20/20 at 6:54 P.M. with STNA #102, stated she provided care for residents on the COVID-19 hall and the non-COVID-19 halls. STNA #102 stated she was in and out of the COVID-19 unit approximately six times per shift. Telephone interview on 07/20/20 at 7:03 P.M. with STNA #103, revealed she went back and forth between the COVID-19 hall and non COVID-19 halls approximately six times per shift. STNA #103 revealed she worked on the COVID-19 hall approximately eight times but had not worked on the hall recently. Telephone interview on 07/21/20 at 10:59 A.M. with the Administrator and Director of Nursing (DON), revealed their corporate staff reviewed the CDC guidelines and instructed them. The DON confirmed there was no dedicated staff assigned to work the COVID-19 unit. Telephone interview on 07/21/20 at 5:56 P.M. with the Administrator, confirmed nine nurses and six nursing assistants worked the COVID-19 unit and non-COVID-19 halls during their assigned shift from 07/06/20 through 07/21/20. Review of the facility policy titled, Staffing Strategies During Pandemic, dated 03/2020, revealed when possible, dedicated staff will be assigned to the observation unit. Review of the facility policy titled, COVID-19 Protocol, dated 03/02/20, revealed prevention efforts included to identify dedicated employees to care for COVID-19 residents and provide infection control training. Further review of the policy revealed the facility would follow local or state health department and/or CDC recommendations as directed. Review of the Centers for Disease Control and Prevention (CDC) website (https://www.cdc.gov/coronavirus/2019-ncov/hcp/long-term-care.html) updated 04/15/20, revealed per CDC information and guidelines: Given the high risk of spread once COVID-19 enters a nursing home, facilities must take immediate action to prevent residents, families and healthcare personnel (HCP) from severe infections, hospitalization s and death .Dedicate Space in the Facility to Monitor and Care for Resident with COVID-19. This could be a dedicated floor, unit, or wing in the facility or a group of rooms at the end of the unit that will be used to cohort residents with COVID-19. Assign dedicated HCP to work only in this area of the facility.</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.