

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER / SUPPLIER / CLIA IDENTIFICATION NUMBER 155202	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 10/15/2020
NAME OF PROVIDER OF SUPPLIER WATERS OF GREENCASTLE, THE		STREET ADDRESS, CITY, STATE, ZIP 1601 HOSPITAL DR GREENCASTLE, IN 46135	
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 - Few	<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 observation, interview, and record review, the facility failed to follow Centers for Disease Control (CDC) guidance during a pandemic and ensure infection control practices for COVID-19 were implemented for social distancing between staff and residents for 2 of 5 staff observed for infection control. Findings include: 1. On 10/15/20 at 9:57 a.m., Certified Occupational Therapy Assistant (COTA) 7 was observed hugging Resident D. At this time, Resident D was observed without a mask covering her face. COTA 7 was then observed to go into another resident's room and her clothing had not been changed. During an interview, on 10/15/20 at 12:12 p.m., COTA 7 indicated she had received education on social distancing and knew she should not have hugged the resident, but felt sorry for the resident and hugged her when she had reached her arms out for a hug. She should have changed her clothing after the direct contact with the resident but had not done so at that time. 2. On 10/15/20 at 10:53 a.m., Social Services Director (SSD) 8 was observed hugging Resident E. At this time, Resident E was observed without a mask covering her face. SSD D was observed then observed sitting in an area where another resident was, this resident was observed without a make covering their face. SSD was not observed to have changed her clothing at this time. During an interview, on 10/15/20 at 12:21 p.m., Social Services Director (SSD) 8 indicated staff were supposed to social distance with residents and other staff. When Resident E reached her arms out her hugged the resident. She was concerned she would hurt the resident's feelings if she had not hugged her. She had received education for social distancing between staff and residents. She had not changed her clothing immediately after direct contact with the resident. During an interview, on 10/16/20 at 12:25 p.m., the Executive Director indicated staff should social distance with residents unless providing direct care to the residents. She felt residents on the memory care unit needed the additional emotional support for their overall well-being. The memory care was a green zone (non-isolation) unit and all residents and the two staff members' weekly COVID-19 test results were negative. There were residents on the unit with [DIAGNOSES REDACTED]. On 10/15/20 at 2:10 p.m., the ED provided a document, undated, and titled, Staff Responsibilities to Reduce the Spread of COVID-19, and indicated it was the policy currently being used by the facility. The policy indicated, Staff responsibilities to prevent the spread of COVID-19 including but not limited to: [MEDICATION NAME] social distancing (maintain a 6' distance) at all times including breaks, lunch breaks, smoking, etc On 10/15/20 at 2:10 p.m., the ED provided a document, undated, and titled, Health Recommendations, and indicated it was the policy currently being used by the facility. The policy indicated, .3. 6 ft. social distancing. When you are around people who are not in your household, it is important to practice social distancing. Social distancing means keeping 6 ft. of distance between you and others, which reduces the risk of spreading the disease .Close contact with other people increases the risk. In general, the more closely you interact with others and the longer that interaction, the higher the risk of COVID-19 spread The CDC Guidance. - What you need to know about Coronavirus disease 2020 (COVID-19). Risk of infection with COVID-19 is higher for people who are close contacts with someone known to have COVID-19, for example healthcare workers, or household members .[MEDICAL CONDITION] is thought to spread mainly between people who are in close contact with one another (within about 6 feet) through respiratory droplets produced when an infected person coughs or sneezes. It may also be possible that a person can get COVID-19 by touching a surface or object that has [MEDICAL CONDITION] on it and then touching their own mouth, nose, or possibly their eyes .If you have traveled from an affected area, there may be restrictions on your movements for up to 2 weeks .While sick, avoid contact with people, don't go out and delay any travel to reduce the possibility of spreading illness to others . 3.1-18(b)(1)</p>		

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
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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.