

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER / SUPPLIER / CLIA IDENTIFICATION NUMBER 235177	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 05/28/2020
NAME OF PROVIDER OF SUPPLIER HARTFORD NURSING & REHABILITATION CENTER		STREET ADDRESS, CITY, STATE, ZIP 6700 W OUTER DR DETROIT, MI 48235	
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 - Many	<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 properly maintain infection control practices during a COVID-19 Infection Control Survey by failing to ensure meal carts were properly sanitized for meal distribution to the residents potentially affecting all residents that receive food from the kitchen. Findings include: On 5/27/2020 at 10:10 AM, a brief tour of the kitchen was conducted as part of the COVID-19 Infection Control Survey. Dietary Aide M was observed in the kitchen. When queried if her job duties included cleaning the meal transportation carts, she said, Yes. When asked to describe how she cleaned the interior of the meal carts, Dietary Aide M listed the following steps: Spray the cart with bleach water; wipe out the cart; spray the cart with a sanitizing solution; wipe out the cart; spray the cart with water and dry it out. On 5/27/2020 at 10:20 AM, Dietary Aide N was observed removing breakfast trays from a meal transportation cart. When queried if her job duties included cleaning the meal carts, she said, Yes. When asked to describe how she cleaned the interior of the meal carts, Dietary Aide N listed the following steps: Spray it with bleach water; wipe it down; spray it with a sanitizing solution. When Dietary Aide N was queried about the type of sanitizing solution used, she produced a spray bottle that contained a yellow liquid. On 5/27/2020 at 10:30 AM, when the Dietary Supervisor (DS) was queried about how she expected meal transportation carts to be cleaned, she said, Use bleach water first; wash with water; use the sanitizing solution; and, let the cart dry. The DS was asked to provide the original containers for the bleach solution and sanitizing solution used on the meal carts in order to review the product information. When the product labels of the cleaning products were reviewed with the DS, the following was noted: --Germicidal Ultra Bleach: Directions for using this product as a sanitizing solution included (mix solution according to directions) allow surface contact with the sanitizer for at least two minutes. Do not rinse equipment with water after treatment. Directions for using this product as a disinfecting solution included (mix solution according to directions) spray, rinse, or wipe surface with bleach solution, let stand for five minutes. Drain or rinse and air dry. When the DS was queried if they were following the bleach product directions for sanitizing and/or disinfecting, she said, No. ----Peroxide Multi Surface Cleaner (a yellow liquid) was not labeled as a sanitizing product. The DS was requested to contact the company that supplied the Peroxide Multi Surface Cleaner to obtain additional information on this product. On 5/27/2020 at 11:50 AM, the DS stated she spoke with the vendor that provided the Peroxide Multi Surface Cleaner. According to the DS, the vendor said, They must have been out of the peroxide disinfectant cleaner and substituted it with the regular cleaner. The DS indicated the vendor should have provided, and staff should have been using, the peroxide multi-surface cleaner and disinfectant. On 5/28/2020 at 11:45 AM, during a telephone interview, when the DS was queried about the importance of sanitizing food carts, she said, It's to ensure all germs [MEDICAL CONDITION] are taken care of. Gotten rid of. The facility policy titled, Dietary Cleaning and Sanitation, dated April 2015, was reviewed and documented in part the following: It is the policy of this facility to maintain the sanitation of the kitchen through proper cleaning and sanitizing stationary food service equipment and food contact surfaces to minimize the growth of microorganisms that may result in food contamination. Food-contact surfaces are washed, rinsed, and sanitized after each use .(and) when the tool or items being used may have been contaminated. --Clean and rinse the equipment or surface. --Sanitize surfaces with clean sanitizing solution and clean cloths. --Staff will be trained to ensure proper technique and chemicals are used for each cleaning assignment.</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.