

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER / SUPPLIER / CLIA IDENTIFICATION NUMBER 245524	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 08/26/2020
NAME OF PROVIDER OF SUPPLIER LITTLE SISTERS OF THE POOR		STREET ADDRESS, CITY, STATE, ZIP 330 EXCHANGE STREET SOUTH SAINT PAUL, MN 55102	
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)		
E 0024 Level of harm - Potential for minimal harm Residents Affected - Many	Establish policies and procedures for volunteers. Based on interview and document review, the facility failed to ensure their emergency preparedness policies and procedures addressed the use of volunteers in an emergency, or other emergency staffing strategies, including the process and role for integration of State and Federal designated health care professionals to address surge needs during an emergency. This had the potential to affect all 59 residents currently at the facility. Findings include: When interviewed on 8/25/20, at 3:50 p.m. the director of nursing (DON) and the registered nurse RN-A responsible for infection control at the facility did not know where the emergency preparedness (EP) policy for staffing and volunteers was located, and both indicated that the human resource (HR)-A person had that policy but was currently not at the facility but they would check for the policy. When interviewed on 8/26/20, at 10:59 a.m. the HR-A indicated there was a one page policy for EP staffing but lacked documentation of how to incorporate volunteer support for individuals with varying levels of skills and training, and the use of volunteers and other staffing strategies in the facility emergency plan. Furthermore the HR-A verified the facility did not have a plan for contacting off-duty staff or for utilizing staff from other facilities and state or federally-designated health professionals. An undated Emergency Staffing Policy and Procedure for Little Sisters of the Poor Holy Family Residence, included, In an infection disease pandemic, the facility will hire on-call staff and augment staff with temp agencies and/or nursing pools, qualified volunteers and new employees as it is able. However, the policy failed to include how this would be accomplished or put into practice. When interviewed on 8/26/20, at 12:28 p.m. the administrator verified the facility expectation was to have EP plans to cover volunteers and other staffing strategies and would initiate a plan for volunteers and staff contingencies immediately.		

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.