

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER / SUPPLIER / CLIA IDENTIFICATION NUMBER 365772	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 08/25/2020
NAME OF PROVIDER OF SUPPLIER EASTGATE HEALTH CARE CENTER		STREET ADDRESS, CITY, STATE, ZIP 4400 GLEN ESTE WITHAMSVILLE ROAD CINCINNATI, OH 45245	
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>Based on observations, staff interview, review of facility policy, review of online resources from the Centers for Disease Control (CDC) and the Ohio Department of Health (ODH), and review of a Director's Order from ODH, revealed three randomly observed facility staff (Dietary Aide (DA) #100, Registered Dietician (RD) #200 and Registered Nurse (RN) #300) failed to appropriately wear/utilize facemask's to potentially prevent the spread of Coronavirus Disease 2019 (COVID-19). Facility census was 151. Findings include: 1. Observation on 08/24/20 at 8:42 A.M. revealed DA #100 walked through the front lobby and entered the administration area and was not wearing a mask. Further observation revealed DA #100 exited the administration area at approximately 8:43 A.M. carrying an N-95 mask in a plastic wrapper. DA #100 walked through the front lobby and the first-floor hallway and got on the elevator. DA #100 was still carrying the N-95 mask in a plastic wrapper as he got on the elevator and he had not donned or unwrapped the N-95 during the elevator ride to the second floor. Interview on 08/24/20 at 8:45 A.M. with DA #100 confirmed he had obtained an N-95 mask from the administrator before getting on the elevator but had not donned or unwrapped the N-95 mask yet. DA #100 further confirmed he would don the mask prior to entering the kitchen. 2. Observation on 08/24/20 at 8:46 A.M. revealed RD #200, RN #300, and Therapy Director (TD) #250 were meeting in a closed conference room. RD #200 was not wearing a mask. RN #300 and TD #250 were wearing facemask's. Further observation revealed RD #200 held a mask up over her face as she walked past the surveyor and the administrator and exited the conference room at approximately 8:46 A.M. Once RD #200 was in the hallway she dropped the mask from her face and carried it with her down the hallway. Observation on 08/24/20 at 8:52 A.M. revealed RD #200 and RN #300 were meeting in a closed office and neither were wearing masks. Interview on 08/24/20 at 8:52 A.M. with RN #300 confirmed she was not wearing a facemask during the meeting with RD #200 on 08/24/20 at approximately 8:52 A.M. Interview on 08/24/20 at 8:53 A.M. with RD #200 confirmed she was not wearing a facemask during the meeting in the conference room with RN #300 and TD #250 on 08/24/20 at approximately 8:46 A.M. nor was she wearing a facemask during the meeting with RN #300 on 08/24/20 at approximately 8:52 A.M. Interview on 08/25/20 at 9:02 A.M. with RN #900, the facility's infection preventionist, confirmed all staff had been educated to wear facemask's anywhere inside the facility to prevent the spread of COVID-19. RN #900 further confirmed the only exception to wearing a facemask inside the facility would be for an individual working alone in an enclosed office. Review of the undated facility policy titled Protocol for COVID 19 dated revealed the facility would follow the guidance and information published by the CDC and state health departments regarding management of the COVID-19. Review of online resource from the CDC regarding preventing the spread of COVID-19 (https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/prevention.html) revealed the following guidance: COVID-19 can be spread to others even if you do not feel sick, everyone should wear a mask in public settings and when around people who don't live in the same household to prevent infecting others, continue to maintain a distance of about six feet between yourself and others, a mask is not a substitute for social distancing. Review of an online resource from ODH (https://coronavirus.ohio.gov/wps/portal/gov/covid-19/public-health-advisory-system/) on 08/25/20 revealed Clermont County, the county in which the facility was situated, was experiencing a very high exposure and spread of COVID 19 at the time of the survey. Review of ODH Director of Health order dated 07/23/20 revealed facial coverings were required at all times in the state of Ohio in any indoor space that was not a private residence.</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.