

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER / SUPPLIER / CLIA IDENTIFICATION NUMBER 366182	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 08/06/2020
NAME OF PROVIDER OF SUPPLIER BUTLER COUNTY CARE FACILITY		STREET ADDRESS, CITY, STATE, ZIP 1800 PRINCETON ROAD HAMILTON, OH 45011	
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, staff interview, review of facility educational documents, review of facility policy, review of online resources from Centers for Disease Control (CDC), review of a Centers for Medicare and Medicaid Services (CMS) memo and review of the Ohio Department of Health (ODH) Director's Order, the facility failed to properly utilize facemask's to potentially prevent the spread of Coronavirus Disease 2019 (COVID-19) which had the potential to affect all residents residing in the facility. In addition, the facility failed to ensure social distancing was maintained between residents and staff during a group activity to potentially prevent the spread of COVID 19. This had the potential to affect all 61 residents residing in the facility. The census was 61. Findings include: 1. Observation on 08/03/20 at 12:00 P.M. revealed Residents #2, #3, and #4 were seated a square table in the main dining room with Activity Assistant (AA) #200 engaged in a small group activity. Further observation revealed residents were wearing medical grade facemask's, but Resident #2's mask was pulled below her chin. AA #200 was also wearing a medical facemask which was pulled below her chin while she led the small group activity. Interview on 08/03/20 at 12:02 P.M. with the Administrator confirmed all staff were required to wear face coverings at all times in the facility and social distancing was to be maintained between residents engaged in communal dining or small group activities. Interview on 08/03/20 at 12:05 P.M. with AA #200 confirmed Residents #2, #3, and #4 were seated closer than six feet apart from one another but she thought this was acceptable as all were wearing masks. AA #200 further confirmed her mask was positioned below her chin while interacting with the residents and she knew her mask was supposed to cover her mouth, nose and chin. Interview with the Administrator 08/03/20 at 3:34 P.M. confirmed the square table at which Residents #2, #3, #4, and AA #200 were seated was 42 inches in diameter and the distance from chair to chair was 66 inches. Review of the undated facility policy titled COVID 19 Infection Control Policy revealed the facility would encourage and instruct visitors and staff on the need to practice social distancing while in the facility and the facility would manage information from public health agencies including local health departments, the CDC and would utilize guidance from the CMS. Review of facility educational infographic undated titled Putting on PPE revealed the mask should be fitted to the nose and the diagram showed a person wearing a mask covering the nose, mouth, and chin. Review of an online resource from the CDC (https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/how-to-wear-cloth-face-coverings.html) revealed the following guidance regarding proper wearing of face coverings: put it over your nose and mouth and secure it under your chin. Review of the CMS memo titled QSO-20-28-NH revealed the following: Residents are not forced to eat in their rooms. Residents may still eat in dining rooms, however, nursing homes should adhere to social distancing, such as being seated at separate tables at least six feet apart. We note that social distancing should be practiced at all times (not just while dining). We further note that eating in dining areas with appropriate social distancing only applies to residents without signs or symptoms of a respiratory infection, and without a confirmed [DIAGNOSES REDACTED]. Review of the ODH Director's Order dated 07/08/20 revealed Butler County, the county in which the facility was situated, was experiencing an increased exposure and spread of COVID 19 and residents of the county should exercise a high degree of caution and follow all current health orders to prevent the spread of COVID 19. Review of the ODH Director's Order dated 07/23/20 revealed all individuals residing in the State of Ohio should comply with social distancing requirements which included maintaining a distance of at least six feet from other individuals. 2. Observation on 08/03/20 at 12:03 P.M. of AA #300 revealed she was wearing a cloth face covering. Interview on 08/03/20 at 12:03 P.M. with AA #300 confirmed she was offered a medical facemask, but she declined because the cloth face covering was more comfortable. Interview on 08/03/20 at 12:06 P.M. with the Administrator confirmed facility had an adequate supply of personal protective equipment (PPE) and all staff had been provided with medical facemask's but were permitted to wear cloth face coverings if they preferred them. Observation on 08/03/20 at 12:25 P.M. of Housekeeper #500 confirmed she was wearing a cloth face covering. Interview on 08/03/20 at 12:25 P.M. with Housekeeper #500 confirmed she was wearing a cloth face covering for her shift at work. Observation on 08/03/20 at 12:30 P.M. of Nurse Practitioner (NP) #600 who was an outside provider was wearing a cloth face covering while in the facility seeing residents. Interview on 08/03/20 at 12:35 P.M. with the Administrator confirmed NP #600 was wearing a cloth face covering and confirmed outside providers were permitted to provide their own facemask's to wear in the facility. The facility confirmed the use of cloth face coverings versus the use of facemask's has the potential to affect all residents in the facility. Review of the undated facility policy titled COVID 19 Infection Control Policy revealed the facility would offer PPE to all visitors and staff upon entrance to the facility and would manage information from public health agencies including local health departments, the CDC) and would utilize guidance from the CMS. Review of an online resource from the CDC (https://www.cdc.gov/Coronavirus/2019-ncov/hcp/long-term-care-strategies.html) revealed the following guidance regarding facemask's: ensure all healthcare care personnel (HCP) wear a facemask or cloth face covering for source control while in the facility. Cloth face coverings are not considered personal protective equipment (PPE) because their capability to protect HCP is unknown. Cloth face coverings should not be worn instead of a respirator or facemask if more than source control is required.</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.