

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER / SUPPLIER / CLIA IDENTIFICATION NUMBER <b>365623</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED <b>10/01/2020</b>
NAME OF PROVIDER OF SUPPLIER <b>LAKE POINTE HEALTH CARE</b>		STREET ADDRESS, CITY, STATE, ZIP <b>3364 KOLBE RD LORAIN, OH 44053</b>	
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  <b>Level of harm - Minimal harm or potential for actual harm</b>  <b>Residents Affected - Some</b>	<b>Provide and implement an infection prevention and control program.</b>  Based on observation, staff interview, and review of the Centers for Disease Control and Prevention (CDC) guidelines, the facility failed to ensure social distancing between residents in the memory care dining room to potentially prevent the spread of Coronavirus Disease 2019 (COVID-19). This affected nine (#11, #23, #36, #38, #56, #59, #69, #74 and #75) of 14 residents residing in the memory care unit. The facility census was 83. Findings include: Observations on 09/30/20 at 12:40 P.M. in the dining room of the memory care unit revealed nine residents and two staff were present in the small dining room. There were three tables, approximately three feet wide, with two residents at each table. There was one table, approximately three feet wide, with three residents at the table. Interview on 09/30/20 at 12:44 P.M., Licensed Practical Nurse (LPN) #201 verified the nine residents (#11, #23, #36, #38, #56, #59, #69, #74 and #75) who were in the dining room were not seated six feet apart. Interview on 10/01/20 at 10:50 A.M., the Director of Nursing (DON) revealed the residents had been encouraged to dine in their rooms. The DON stated four of the residents required assistance with meals. The DON verified staggered dining times had not been attempted. The DON stated there was no facility policy regarding social distancing during dining. Review of the CDC guidelines Preparing for COVID-19 in Nursing Homes, last updated 07/25/20, revealed to implement aggressive social distancing measures (remaining at least six feet apart from others), cancel communal dining and group activities. Considerations when restrictions are being relaxed include to allow communal dining and group activities for residents without COVID-19, including those who have fully recovered while maintaining social distancing, source control measures, and limiting the numbers of residents who participate.		

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.