STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER / SUPPLIER / CLIA IDENNTIFICATION NUMBER	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	035173	A. BUILDING _____ B. WING _____	07/07/2020

NAME OF PROVIDER OF SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP
CHRISTIAN CARE NURSING CENTER	11812 NORTH 19TH AVE PHOENIX, AZ 85029

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** - Some	**Provide and implement an infection prevention and control program.** **NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on observation interview and record review the facility failed to assure that staff followed infection control and prevention techniques to prevent the potential spread of infections including [DIAGNOSES REDACTED]-CoV-2 [MEDICAL CONDITION] that causes COVID 19 for residents and staff who are exposed to staff who have not followed infection control and prevention techniques. Findings: The director of nursing (DON) accompanied the surveyor on the tour of the facility. The facility was temporarily without an infection preventionist (IP). The DON was acting IP. 1. On 7/9/2020 at 10:10 AM during observation of the hallway that included room [ROOM NUMBER] and 116, HK Staff 32 did not change her gloves or sanitize her hands between cleaning room [ROOM NUMBER] and room [ROOM NUMBER]. When asked about this, HK Staff 32 stated she was supposed to change gloves and sanitize her hands between each room. 2. On 7/9/2020 at approximately 10:20 AM, Staff 15 put on a gown to enter room [ROOM NUMBER]; however did not tie the waist ties. When asked about this, the DON stated the waist ties were to tie securely to prevent the gown from pulling away from the body exposing the staff to potentially infectious material during resident care. The resident (R4) in that room was on transmission based precaution (TBP) for presumed positive COVID19 infection and was a person under investigation (PUI). 3. On 7/9/2020 at approximately 10:40 AM, observations of the laundry process revealed the following: HK Staff 38 had entered the laundry room to begin sorting soiled laundry. She went to the sink and washed her hands by placing liquid soap on her hands then putting them under the running water for 3 seconds. She then dried her hands and shut off the water with a dry towel. When asked how long they were to wash their hands, HK Staff 38 stated 20 seconds. She again went to the sink and washed her hands by placing liquid soap on her hands placing her hands under water and washed them for 10 seconds. After letting her know she had washed them for less than 10 seconds. She stated she would count to 20 when washing her hands. There was a hand washing poster near the sink. She read the poster and acknowledged that she should wash with the soap for 20 seconds and then rinse her hands. Before beginning to sort the laundry HK Staff 38 placed a thin plastic apron on and attempted to tie the waist ties; however she said she was not able to tie it securely because her gloves were too large. She continued to sort laundry with the gown pulling away from her uniform potentially exposing her uniform to contaminated wet linen. When pointed out, HK Staff 38 tried again to tie the gown; however the ties then broke. She removed her gloves, sanitized her hands and then put on another gown. She again attempted to tie the gown now with bare hands; however she still had difficulty and the ties broke again. She was finally able to get an apron to stay tied at the waist. When asked about the aprons, HK Staff 38 stated the ties come loose or break all the time. After she completed sorting the laundry during the interview she touched her mask several time with soiled gloves. When pointed out she stated she was not aware that she had touched her mask. She stated she would have to throw her mask away, remove her gloves and sanitize her hands again. 4. During a tour of the COVID 19 Unit on 7/9/2020 beginning at 11:20 AM, accompanied by the DON and the ADON was present as well, the DON stated people entering the unit had to wear full PPE, which included mask, eye covering, gloves and gowns. Staff 12 was observed entering R1's room without eye covering other than her glasses. When asked about this, Staff 12 stated the goggles and face shield got fogged up so that she could not see when she took care of the residents. I could see that she was sweating and her glasses were fogged up without any eye covering. Her N95 mask was tightly pinched at the nose. She stated she had informed the ADON however there was nothing they could do. In addition the gown Staff 12 wore was not tied at the waist. When asked about this she said it didn't have any ties. They were short on gowns so reused them. When asked the ADON about Staff 12 not wearing eye covering or not having a gown that tied at the waist. The ADON stated Staff 12 should be wearing eye covering and tie the gown at the waist. However she stated the facility is having a hard time retaining staff who will work this unit. They had many staff who contracted COVID 19 in May and they were afraid to work at this facility. Staff 12 had recently been tested for COVID and tested negative. 5. At approximately 11:30 AM, still in the COVID 19 unit, C-Staff 26 was observed getting ready to go into R1's room to provide therapy services to the resident. C-Staff 26 was wearing a N95 mask with an exhalation valve. When asked if he used that mask while caring for other residents outside the COVID 19 unit, C-Staff 26 stated yes. He stated the therapy company provided the masks. When asked if he got close to the residents during therapy, he stated yes sometimes he did. When asked the DON if staff caring for residents could use the N95 mask with an exhalation valve, she stated yes. She stated she was not aware of any concerns with these types of masks. At 11:55 AM, during an interview with C-Staff 84 when asked about providing the N95 mask with exhalation valve to therapy staff, stated these were the masks the company provided. Provided reference to them for the CDC and NIOSH website for more information: https://www.cdc.gov/coronavirus/2019-ncov/hcp/respirator-use-faq.html. https://www.cdc.gov/niosh/npptl/topics/respirators/factsheets/resp[DIAGNOSES REDACTED].html .The valve opens to release exhaled breath and closes during inhalation so that inhaled air comes through the filter. Health care workers may wear respirators with exhalation valves unless the patient has a medical condition (such as an open wound) for which a health care worker would normally wear a surgical mask to protect the patient. Similarly, respirators with exhalation valves should not be placed on a patient to contain droplets and prevent spread of infectious particles; surgical masks are adequate for this purpose. On 7/10/2020 record review was conducted. The following policy and procedures (P&Ps) read in pertinent part as follows: Preventing Transmission/Novel [MEDICAL CONDITION]-19 revised date 4/15/2020 included directions from the CDC website: https://www.cdc.gov/coronavirus/2019-ncov/hcp/infection-control-recommendations.html. The following is the pertinent part: .Eye Protection . Put on eye protection (i.e., goggles or a disposable face shield that covers the front and sides of the face) upon entry to the patient room or care area .Personal eyeglasses .are NOT considered adequate eye protection . Handwashing/Novel [MEDICAL CONDITION]-19 dated 3/4/2020 read in pertinent part as follows: Policy: All staff will perform proper hand hygiene procedures to prevent the spread of infection to other personnel, residents and visitors. This applies to all staff working in all locations within the facility .15. Hand hygiene technique when using soap and water; A. Wet hand with water .b. Apply to hands the amount of soap recommended .c. Rub hands together vigorously for at least 15 seconds, covering all surfaces of the hands and fingers. D. Rinse hands with water .

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE