

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER / SUPPLIER / CLIA IDENTIFICATION NUMBER 335160	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 04/29/2020
NAME OF PROVIDER OF SUPPLIER LYNBROOK RESTORATIVE THERAPY AND NURSING		STREET ADDRESS, CITY, STATE, ZIP 243 ATLANTIC AVENUE LYNBROOK, NY 11563	
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 F 0880	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)		
<p>Level of harm - Immediate jeopardy</p> <p>Residents Affected - Few</p>	<p>Provide and implement an infection prevention and control program. **NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** F880 J Based on observation, record review and interview during a COVID-19 Focused Infection Control Survey (Complaint # NY 772) the facility failed to maintain an Infection Control program to prevent the development and transmission of communicable disease and infection. The staff did not consistently follow the recommended Centers for Disease Control (CDC) Infection Control transmission-based procedure for residents on precautions leading to potential cross-contamination for 29 of 43 negative COVID-19 residents. Specifically, during an observation on 4/29/20 at 10:00 AM, Housekeeper #1 was observed mopping in room [ROOM NUMBER], that was identified as positive COVID-19, wearing a disposable jumpsuit, gloves and N95 mask with a surgical mask over the N95. The housekeeper then exited the positive COVID-19 room without removing his jumpsuit, gloves, and surgical mask and fully entered a negative COVID-19 resident's room [ROOM NUMBER]. This resulted in potential for serious harm for negative COVID-19 residents that is an Immediate Jeopardy. The Immediate Jeopardy was lifted on 4/30/20. Additionally, Housekeepers (#2 and #3) were not knowledgeable of the cleaning procedures as outlined by the facility policies and procedures. The findings are: The Daily Cleaning of Resident Rooms on Contact Precautions Policy and Procedure dated February 2020 documented staff must first put on appropriate PPE as indicated by Infection Control nurse. The policy did not address the procedure of removing PPE after completing a room cleaning. The Transmission-based Precautions including positive COVID-19 infection Policy and Procedure dated March 2020 documented the Housekeeping staff should put on appropriate PPE when entering the resident's room and remove all PPE before exiting the resident's room. Hand hygiene is the most important practice for preventing the transmission of potentially infectious microorganisms from one person to another. Hand hygiene reduces the incidence of healthcare-associated infections. Hands should be washed with soap and water after contact with resident's belongings, environmental surfaces, and resident care equipment. The policy further documented that Airborne Precautions are initiated when pathogenic organisms can be suspended in the air and be widely dispersed by air currents within a room or over a long distance. Examples of infectious diseases that require Airborne Precautions include positive COVID-19. The door of a room with Airborne Precautions should be closed at all times. Resident #1 was admitted to the facility with the [DIAGNOSES REDACTED]. Resident #1 has a Brief Interview for Mental Status (BIMS) Score of 15 indicating intact cognition. The physician's orders [REDACTED]. Resident #2 was admitted to the facility with [DIAGNOSES REDACTED]. Resident #2 had a BIMS Score of 14 indicating intact cognition. Resident #3 was admitted to the facility with the [DIAGNOSES REDACTED]. Resident #3 had a BIMS Score of 13 indicating intact cognition. The current physician's orders [REDACTED]. #3 did not indicate isolation precaution. On 4/29/20 at 10:00 AM, Housekeeper #1 was observed in Resident #1's room mopping the floor. Resident #1 was in the room. A red droplet precaution sign for the [DIAGNOSES REDACTED]. #1's room. Housekeeper #1 was observed wearing an N95 mask with a blue surgical mask on top of the N95 mask, gloves, and a disposable jumpsuit. The door was completely open while the housekeeper was mopping. On 4/29/20 at 10:10 AM, Housekeeper #1 was observed exiting positive COVID-19 room [ROOM NUMBER] wearing the same jumpsuit, gloves, mask and crossed the hallway, entered the negative COVID-19 Room #110 (where resident #2 and resident #3 resides) to retrieve a wet floor sign. Housekeeper #1 then brought the wet floor sign to the positive COVID-19 room [ROOM NUMBER] Housekeeper #1 was interviewed on 4/29/20 at 10:10 AM in the hallway between room [ROOM NUMBER] and 113 after he exited room [ROOM NUMBER]. Housekeeper #1 stated that he was going to remove his gloves and blue surgical mask now. On 4/29/20 at 10:15 AM, Housekeeper #1 was observed sweeping the hallway. The housekeeper was wearing the same jumpsuit he wore while mopping the floor in room [ROOM NUMBER]. On 4/29/20 at 10:50 AM the Director of Environmental Services was interviewed. He stated the housekeepers are supposed to clean the negative COVID-19 rooms first and should not be going from positive COVID-19 to negative COVID-19 rooms. He stated housekeepers are supposed to wear yellow disposable gowns over the jumpsuit when cleaning a positive COVID-19 room because the same jumpsuit is supposed to be worn all day. He stated the housekeepers are supposed to remove their gloves and outer surgical mask before leaving a positive COVID-19 room. If housekeepers move from positive COVID-19 to positive COVID-19, they can keep the outer yellow gown on, but the gloves and surgical mask must be removed before exiting the positive COVID-19 room. On 4/29/20 at 11:15 AM Housekeeper #1 was re-interviewed. He stated he was supposed to wear a yellow gown over his jumpsuit while mopping room [ROOM NUMBER], and he should have removed the gloves and blue surgical mask when he exited room [ROOM NUMBER]. He said he made a mistake and it was bad planning on his part. He also said he should not have gone into room [ROOM NUMBER] (a negative COVID-19 room) while wearing the jumpsuit, gloves and surgical mask he was wearing in room [ROOM NUMBER] (a positive COVID-19 room). He stated the Director of Environmental Services discussed COVID-19 protocols with him. He said he knows that a red sign means that the room is positive COVID-19 and if there is no sign then the room is negative COVID-19. He stated that he should not go from a positive COVID-19 room to a negative COVID-19 room without first removing PPE. The Infection Control RN/In-service Coordinator was interviewed on 4/29/20 at 1:15 PM and at 3:38 PM. She stated the housekeepers are supposed to wear a yellow disposable gown over the jumpsuit, gloves, and a surgical face mask over the N95 mask when cleaning a positive COVID-19 room. She said the housekeepers are supposed to remove their gloves, surgical mask, and gown when exiting a positive COVID-19 room. The PPE should be placed in a bag, sealed and then placed in a red bin. Housekeepers should then wash their hands before leaving a positive COVID-19 room. She stated the housekeepers should not go from a positive COVID-19 room to negative COVID-19 room. She stated there is an infection control policy that documents this practice and she did an in-service for the housekeeping staff on 3/6/20 for COVID-19 preparation. She stated the in-service included terminal cleaning of resident rooms (not daily cleaning), properly putting on and removing PPE, and hand washing. She was unable to provide documented evidence that the housekeeping staff were in-serviced related to PPE use when entering and exiting positive COVID-19 rooms. She stated the Director of Environmental Services in-serviced his staff for daily room cleaning for positive COVID-19 rooms. The Director of Environmental Services was re-interviewed on 4/29/20 at 3:10 PM. He said he did the daily room cleaning in-service dated 3/24/20. He stated the hand-written lesson plan was meant as an addition to the Contact Precautions room cleaning policy. He said the hand-written lesson plan did not include anything about gown use over the jumpsuit when going in a room on precautions for COVID-19, which was an oversight, but he stated he told the housekeepers verbally. He stated he was not sure if there was a policy regarding cleaning positive COVID-19 rooms. The Daily Cleaning of Resident Rooms-Contact Precautions in-service dated 3/24/20 was delivered by the Director of Environmental Services to the housekeeping staff. The in-service documented that positive COVID-19 rooms must be cleaned last. Staff must remove gloves, wash hands, remove the surgical mask, put new gloves on, and a new surgical mask over the N95 mask before entering the next positive COVID-19 room. Staff must remove PPE after the last positive COVID-19 room is done. The in-service did not include putting on or removing of the jumpsuit and or wearing a gown over the jumpsuit. In addition, the in-service did not describe the process for going from positive COVID-19 to a negative COVID-19 rooms. Housekeeper #1 signed and dated the in-service. 2) The Daily Cleaning of Resident Rooms on Contact Precautions Policy and Procedure dated February 2020 documented that Housekeeping staff should change the cleaning solution in mop bucket prior to and immediately after cleaning the room. The Transmission-based Precautions including COVID-19 infection Policy and</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.

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<p>Level of harm - Immediate jeopardy</p> <p>Residents Affected - Few</p>	<p>(continued... from page 1)</p> <p>Procedure dated March 2020 documented Housekeeping will perform appropriate daily and terminal cleaning in the isolation room because it is considered contaminated. The Infection Control RN will follow up with the housekeeping staff to ensure their readiness to work in isolation conditions, compliance with different requirements of Transmission Based Precautions, and disposal of cleaning products and/or supplies to reduce the risk of room to room transmission. The Director of Environmental Services was interviewed on 4/29/20 at 10:50 AM. He stated the housekeepers should be using the germicidal mop pads to clean the floors in the resident rooms and should be using the standard mop with water/bleach solution to clean the hallway floors. He stated every room should be cleaned every day. He stated the housekeeping staff has been in-serviced on this protocol. Housekeeper #2 was interviewed on 4/29/20 at 11:05 AM. He stated that all rooms are supposed to be cleaned every day, but this does not always happen. He said it all depends on how much work has to be done every day. He stated that he uses a standard mop with a germicidal solution to mop the resident room floors and will use the same mop for 3 to 4 rooms. He stated he does not use the germicidal mop pads to mop the resident room floors. He stated the standard mop is more effective. He also said that he changes the water in the mop basin every 3 to 4 rooms when mopping the positive COVID-19 rooms. Housekeeper #3 was interviewed on 4/29/20 at 12:00 PM. Housekeeper #3 stated that his responsibilities included cleaning the resident room floors, the hallway floor, and taking out the garbage. He stated that he should use the flat mop head when cleaning the resident rooms, but he feels that it does not do as good a job as the fluffy mop head. He uses the fluffy mop head for both the resident rooms and hallways. Housekeeper #3 stated that he will use one fluffy mop head to clean 2-3 rooms, with the same water containing the H2O Orange 2 cleaner with a little bleach if the rooms are not dirty. He would only clean rooms with the same precautions with the same mop head. He stated that there are always fluffy mop heads available for him to use. The Infection Control RN was interviewed on 4/29/20 at 1:15 PM. She stated there is a specific mop pad that is supposed to be used for resident rooms and the standard mop with a bucket for the hallways. She said when using the mop pads, the housekeepers should change the pads from room to room. She stated she was not sure if there was a policy for this. The Director of Nursing Services (DNS) was interviewed on 4/29/20 at 2:10 PM. She stated that the in-service for Daily Cleaning of positive COVID-19 rooms that was done by the Director of Environmental Services on 3/24/20 for the housekeeping staff was not appropriate because a hand-written lesson plan was utilized as an addendum to the Contact Precautions room cleaning policy. She stated it was not an appropriate teaching tool because COVID-19 requires droplet precautions. The DNS confirmed that Resident #1 was positive COVID-19 and on Contact and Airborne Precautions for COVID-19. The Director of Environmental Services was interviewed on 4/29/20 at 3:10 PM. He stated he never made a policy on what to use when cleaning the floors of positive COVID-19 rooms. He stated it was a verbal in-service and he had no sign-in sheets. The Infection Control RN was re-interviewed on 4/29/20 at 3:45 PM. She stated that any education that was directly related to COVID-19 cleaning procedures was provided to the housekeepers by the Director of Environmental Services. 415.19(a)(1-3) 415.19(b)(4)</p>		