

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER / SUPPLIER / CLIA IDENTIFICATION NUMBER <b>235445</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED <b>05/15/2020</b>
NAME OF PROVIDER OF SUPPLIER <b>FAIRLANE SENIOR CARE AND REHAB CENTER</b>		STREET ADDRESS, CITY, STATE, ZIP <b>15750 JOY DETROIT, MI 48228</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 - Immediate jeopardy</b>  <b>Residents Affected - Some</b>	<p><b>Provide and implement an infection prevention and control program.</b> <b>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY**</b> Based on observation, interviews, and record review, the facility failed to ensure two readmitted residents (Resident (R) R4, and R8) from the acute care facility with unknown COVID-19 status were placed in 14-day quarantine. Instead, the two readmitted residents were placed in rooms with residents who had a negative COVID-19 status. In addition, facility staff failed to discard Personal Protective Equipment (PPE) after providing personal care to the two readmitted residents, R4 and R8, before leaving these residents' rooms and providing care to residents with negative COVID-19 status. The facility failed to ensure eight new admission residents (R1, R2, R5, R6, R7, R9, R10, and R11) with negative COVID-19 tests that were completed at the acute care facility, were placed in quarantine isolation for 14-days after admission to the facility. This failure had the potential to affect all 80 residents and staff on the negative COVID-19 Units B and C. On 05/14/20 at 5:35 PM, the Executive Director, the Director of Nursing (DON), and the Regional Clinical Director were notified that the failure to identify two residents, R4 and R8, who were readmitted to the facility with unknown COVID-19 status were placed in quarantine isolation for 14-days constituted an immediate jeopardy at F880. The facility presented an acceptable removal plan for the immediate jeopardy at F880 on 05/15/20 at 3:30 PM. The removal plan indicated that the two readmitted residents, R4 and R8, were placed into private rooms and that droplet isolation precautions were implemented which included droplet isolation signage on the doors and a PPE cart placed outside R4's and R8's rooms. The facility educated staff about the change of these two residents' status and room change and the facility's revised admission policy to implement the 14-day observation droplet isolation for all new and readmitted residents to the facility. The removal plan was validated through observations, interview of staff and record review. Observations verified that the readmitted residents were placed in private rooms, signage was on the doors with a date to end the 14-day quarantine, and PPE carts stocked with supplies outside each of the rooms. Staff was observed to remove their PPE and perform hand hygiene after providing care to residents in the droplet isolation 14-day quarantine rooms and apply new PPE before entering other residents' rooms. Review of the revised admission policy included new and readmitted residents would be placed on 14-day observation droplet isolation. Review of the facility's inservice education indicated that staff would use PPE specific for the observation droplet isolation rooms, remove the PPE after providing care to residents in droplet isolation 14-day quarantine, perform hand hygiene and apply new PPE prior to providing care to a resident with negative COVID-19 status. The surveyor notified the Executive Director that the immediate jeopardy at F880 was removed on 05/15/20 at 5:00 PM. Findings include: On 05/13/20 at 11:15 AM, during the tour of the facility with the DON and Executive Director, the Executive Director stated, the facility was divided into two sections: a COVID-19 positive area (Unit D and E) and a COVID-19 negative area (Unit B and C). During the interview on 05/13/20 at 11:30 AM, the LPN1 confirmed that nursing staff did not remove their PPE, except for the gloves, when they exited the rooms of a readmitted residents with unknown COVID-19 status and then going to provide care to a resident with a negative COVID-19 status. LPN1 stated, On the negative COVID-19 side of the facility, nursing staff do not remove their PPE after performing personal care for the residents who had returned from the acute care setting and their COVID-19 status was unknown. LPN1 verified, Nursing staff would exit these rooms, remove their gloves and perform hand hygiene, however, did not remove their PPE. We used to isolate residents for 14-days, but we do not do that anymore. After the interview on 05/13/20 at 11:35 AM with LPN1, the Executive Director and the DON confirmed that the COVID-19 negative unit (B and C) residents were all on a form of droplet isolation with staff wearing double masks, gowns, goggles and changing gloves between residents. Due to the lack of isolation gown inventory, staff were using patient gowns as isolation gowns, and not changing the gowns between the residents. Review of the facility's list of new admissions or readmission residents from the acute care facilities from 05/01/20 to 05/14/20 identified eight new admissions with documented negative COVID-19 test results from the acute care facility and two residents, R4 and R8, which were readmissions with unknown COVID-19 status. R4 and R8 were placed in rooms with a resident who had a negative COVID-19 test result. Of the eight residents with negative COVID-19 test results from the acute care facility, four residents (R5, R7, R10 and R11) were admitted to private rooms; R9 and R8 were roomed together and three residents (R1, R2, and R6) were roomed with other residents who had a negative COVID-19 test result. During an interview on 05/14/20 at 1:30 PM, the Executive Director stated, It made sense, although the facility was not doing it, to isolate for observation of new admission or readmission residents for 14-days after admission in order to monitor for symptoms prior to these residents being placed on the units with negative COVID-19 residents. During the interview on 05/14/20 at 2:05 PM, the Executive Director stated, The facility does not accept a resident for admission from an acute care facility without a COVID-19 test result. If the resident was a readmission and had a previous negative COVID-19 test prior to their admission to the acute care facility and readmission to the facility, the readmission resident would be accepted back to the COVID-19 negative unit B or C. New admissions or readmission residents were not placed on 14-day observation isolation. Only new admissions or readmission with a positive COVID-19 status are placed on the positive COVID-19 units of the facility. Record review revealed that R2 was a new admission to the facility on [DATE]. The acute care facility provided a negative COVID-19 test dated 04/21/20, which was 23 days prior to discharge from the acute care facility and admission to this facility. R2 was admitted to the same room with R13 who had documented evidence in the clinical record of a negative COVID-19 test. Record review revealed that R5 was a new admission to the facility on [DATE]. The acute care facility provided a negative COVID-19 test dated 04/13/20, which was 21 days prior to discharge from the acute care facility and admission to this facility. R5 was admitted to a private room. Record review revealed that R6 was a new admission to the facility on [DATE]. The acute care facility provided a negative COVID-19 test dated 04/21/20, which was 18 days prior to discharge from the acute care facility and admission to this facility. R6 was admitted to the same room with R16 who had documented evidence in the clinical record of a negative COVID-19 test. Record review revealed that R9 was a new admission to the facility on [DATE]. The acute care facility provided a negative COVID-19 test dated 04/27/20, which was 16 days prior to discharge from the acute care facility and admission to this facility. R9 was admitted to a room with R8, a readmission resident with unknown COVID-19 status. R9 and R8 were both placed in a room on the negative COVID-19 unit of the facility on the same day. Record review revealed that R8 was admitted to the acute care facility on 05/07/20 and readmitted to the facility on [DATE]. R8 was originally a resident of this facility and had a negative COVID-19 test result. Due to a change in mental status, R8 was transferred to an acute care facility. R8 was not tested for COVID-19 status by the acute care facility before admission the facility on 05/13/20. R8 was admitted to a room with R9, who was a new admission to the facility and had documented evidence of a negative COVID-19 status. R8 and R9 were both placed in a room on the negative COVID-19 unit of the facility on the same day Record review revealed that R11 was a new admission to the facility on [DATE]. The acute care facility provided a negative COVID-19 test dated 05/04/20, eight days prior to discharge from the acute care facility and admission to this facility. R11 was admitted to a private room. Record review revealed that R1 was a new admission to the facility on [DATE]. The acute care facility provided a negative COVID-19 test dated 04/27/20, seven days prior to discharge from the acute care facility and admission to this facility. R1</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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F 0880  <b>Level of harm - Immediate jeopardy</b>  <b>Residents Affected - Some</b>	<p>(continued... from page 1)</p> <p>was admitted to the same room with R12 who had documented evidence in the clinical record of a negative COVID-19 test. Record review revealed that R10 was a new admission to the facility on [DATE]. The acute care facility provided a negative COVID-19 test dated 04/25/20, six days prior to discharge from the acute care facility and admission to this facility. R10 was admitted to a private room. Record review revealed that R7 was a new admission to the facility on [DATE]. The acute care facility provided a negative COVID-19 test dated 04/28/20, three days prior to discharge from the acute care facility and admission to this facility. R7 was admitted to a private room. Record review revealed that R4 was admitted to the acute care facility due to a swollen right eye on 04/28/20 and readmitted to the facility on [DATE]. R4 was not tested for COVID-19 status by the acute care facility before readmission to the facility. R4 was admitted into the same room with R15 who had documented evidence in the clinical record of a negative COVID-19 test. Review of the facility's policy titled, Fairlane Pandemic Plan, updated on 04/21/20, under the section Evaluate and Manage residents with symptoms of COVID-19 revealed, as roommates of residents with COVID-19 might already be exposed it is generally not recommended to place them with another roommate until 14-days after their exposure, assuming they have not developed symptoms or had a positive test. The facility did not provide a policy to isolate new admission or readmission residents for 14-days after their admission to the facility.</p>		