

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER / SUPPLIER / CLIA IDENTIFICATION NUMBER 065256	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 05/01/2020
NAME OF PROVIDER OF SUPPLIER HIGHLINE REHABILITATION AND CARE COMMUNITY		STREET ADDRESS, CITY, STATE, ZIP 6060 E ILIFF AVE DENVER, CO 80222	
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 - Minimal harm or potential for actual harm</p> <p>Residents Affected - Many</p>	<p>Provide and implement an infection prevention and control program. **NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY**</p> <p>Based on observations and interviews, the facility failed to properly maintain an infection control program designed to prevent the spread of COVID-19. Specifically, the facility failed to: -Properly clean and disinfect one (#84) of 16 rooms on the West hallway; and, -Adhere to the appropriate wet/contact/dwell time (the time a chemical must remain in contact on a surface in order to eradicate organisms) for disinfection of a resident's room/bathroom. Findings include: I. Facility policies The COVID-19 policy, effective [DATE]20, was provided by the Nursing Home Administrator (NHA) on 4/28/2020 at 12:00 noon. The policy revealed that COVID-19 had emerged as a potentially significant pandemic organism threatening to cause significant morbidity and death, particularly among the elderly and those with significant comorbidities. This evolving policy had been established to supplement the standard infection prevention protocols. -Although COVID-19 appeared to be transmitted from person-to-person only by aerosolized transmission, it was theoretically possible that hand-to-mouth transmission may occur. Effective immediately, all staff would be re-educated in regard to standard infection prevention policies. -The nature of this pandemic was such that policies and recommendations continue to evolve. The primary policy in regards to COVID-19 for facilities, would therefore be to remain in substantial compliance with ongoing recommendations by the Centers for Medicare & Medicaid Services (C[CONDITION]), the Centers for Disease Control and Prevention (CDC) and the [ORG] (CDPHE). The Infection Prevention and Control Program (IPCP) policy, revised October 2018, was provided by the NHA on 4/28/2020 at 12:00 noon. The policy revealed an infection control prevention and control program (IPCP) was established and maintained to provide a safe, sanitary, comfortable environment and to help prevent the development/transmission of communicable diseases and infections. -The IPCP was based on accepted national infection prevention and control standards. -11.A.3: prevention of infection through education of staff and ensuring they adhere to proper techniques and procedures. The Cleaning and Disinfecting Resident's Rooms policy, revised August 2013, was provided by the NHA on 4/28/2020 at 12:00 noon. The policy revealed the purpose of this procedure was to provide guidelines for cleaning and disinfecting resident's rooms. -The steps in the procedure for resident room cleaning revealed to prepare disinfectant according to manufacturer's recommendations, change cleaning cloths when they become soiled, and utilize disinfectant solution based on the type of precaution. II. References The Centers for Disease Control (CDC) guidelines for Cleaning and Disinfection for Households: Interim Recommendations for U.S. Households with Suspected or Confirmed Coronavirus Disease 2019 (COVID-19), dated March 2020, revealed the purpose was to provide recommendations on the cleaning and disinfection of households where persons under investigation or those with confirmed COVID-19 resident or may be in self-isolation. It was aimed at limiting the survival of [MEDICAL CONDITION] in the environment. -Cleaning referred to the removal of germs, dirt and impurities from surfaces. Cleaning did not kill germs, however by removing the germs, the number of germs and the risk of spreading infection was lowered. -Disinfecting referred to using chemicals such as EPA-registered disinfectants to kill germs on surfaces. This process did not typically clean dirty surfaces but it did remove germs. By using a disinfectant after cleaning could further lower the risk of the spread of infection. -Surfaces that were dirty, should be cleaned using a detergent or soap with water prior to disinfection. -Most common EPA-registered household disinfectants should be effective in the removal of germs. Follow the manufacturer's specifications/instructions for cleaning/disinfection for the appropriate concentration, method of application and the contact time. -Utilization of diluted household bleach solutions (at least 1,000 parts per million) of sodium hypochlorite) could be used on the appropriate surface. Follow the manufacturer's application instructions and ensure a contact time of at least one minute. III. Observations On 4/28/2020 at 10:46 a.m., a housekeeper (HSK) was observed cleaning resident room [ROOM NUMBER]. There were two residents residing in this room. She put on a set of clean gloves and sprayed a named disinfectant, with a dwell time of three minutes, on the sink and countertop area. She then sprayed the disinfectant on the folding commode toilet riser (positioned over the toilet) and the entire toilet, including inside of the bowl. -At 10:47 a.m., she used a dry clean rag to wipe the sink and countertop area. She wiped from the counter top to the sink and back out onto the counter top. -At 10:48 a.m., she used a toilet brush and wiped the inside of the toilet bowl. She then used the same brush to wipe the toilet rim, toilet seat both sides, and the toilet pedestal. She used a clean dry rag and wiped down the toilet rim, toilet seat both sides, metal handle and the toilet pedestal. -At 10:49 a.m., she used the same rag used on the toilet, to wipe off the folding commode toilet riser entirely. She took off her gloves and placed them in the trash bag located on the service cart. -At 10:51 a.m., she filled up the mop handle with a named liquid floor cleaning solution from a large container on the service cart. A button on the handle could be used to administer the solution as needed to the floor. -At 10:54 a.m., she put on a new set of gloves and sprayed some named disinfectant on the floor in spots. She applied a mop strip and mopped the floor area around the first bed at the entrance of the room. She mopped the debris from this area toward the entrance of the room. She used the same mop strip and mopped the floor area around the second bed by the window. She mopped the debris from this area toward the entrance of the room. She used the same mop strip to mop the bathroom floor. She placed the mop onto the service cart, removed her gloves and sanitized her hands. She took a broom/dustpan and swept up the debris at the entrance door. IV. Staff interview On 4/28/2020 at 11:17 a.m., an interview was conducted with the housekeeping supervisor (HSKS). She said the HSK should put new gloves on and spray the sink, countertop, grab bars and the toilet seat with the disinfectant. She said the dwell time for the spray disinfectant was two to three minutes. The HSKS said the HSK should use an orange rag to wipe off the toilet and a blue rag to wipe off the sink. She said the bathroom countertop should be wiped off first and then the sink. The HSK should then change gloves and put on a new set. -The HSKS said the toilet brush should only be used in the toilet bowl. She said the toilet brush should not be used on outside surfaces of the toilet such as the seat, rim, metal flush handle or the pedestal. -She said the folding commode toilet would also be sprayed with the disinfectant and wiped off with the orange rag. She said the HSK would use the same orange rag to wipe off the commode if the rag was not soiled. -She said the room would be mopped first, before the bathroom with the floor cleaner. She said sometimes they spray some disinfectant on spot areas on the floor. She said they could use one, two or three mop strips, depending on how dirty the floor was. She said the same mop strip could be used on the room and the bathroom floors. -The HSKS said the HSK should have waited 2-3 minutes before she started cleaning the bathroom surfaces.</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.