| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | (X1) PROVIDER / SUPPLIER / CLIA IDENNTIFICATION NUMBER | (X2) MULTIPLE CONSTRUCTION | (X3) DATE SURVEY COMPLETED |
|---|---|---|---|
| | 065322 | A. BUILDING _____ B. WING _____ | 04/30/2020 |

| NAME OF PROVIDER OF SUPPLIER | STREET ADDRESS, CITY, STATE, ZIP |
|---|---|
| JULIA TEMPLE HEALTHCARE CENTER | 3401 S LAFAYETTE ST ENGLEWOOD, CO 80113 |

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) |
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| F 0880<br><br>**Level of harm** - Minimal harm or potential for actual harm<br><br>**Residents Affected** - Many | **Provide and implement an infection prevention and control program.**<br>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY**<br>Based on observations, record review, and interviews, the facility failed to properly maintain an infection control program designed to prevent the spread of COVID-19 in four of four neighborhoods. Specifically, the facility failed to: -Utilize the proper PPE in three out of four resident isolation units, -Properly clean and disinfect one (#28) of 14 rooms located on the [MEDICATION NAME] secure unit; -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; and, -Implement a system to track and ensure proper cleaning of reusable gowns used for PPE by staff. Findings include: I. Utilize proper PPE A. Facility policy The Infection Control and Prevention Policy revised on 4/8/2020 was provided by the Nursing home administrator (NHA) on 4/29/2020 at 12:30 p.m. It read in pertinent part; It is the policy of this facility to include preparatory plans and actions to respond to the threat of the COVID-19, including but not limited to infection prevention and control practices in order to prevent transmission. Increase transmission-based precautions by implementing universal use of facemasks for healthcare (HCP) while in the facility at all times. Consider having HCP wear all recommended PPE (gowns, gloves, eye protection, face mask that blocks 95 percent of particles (N-95) respirator or, if not available a facemask) for the care of all residents. B. References The CDC Key Strategies to Prepare for Coronavirus COVID-19 in Long Term care facilities dated April 2020, the facility failed to ensure appropriate use of PPE. It read in pertinent part; If COVID-19 was identified in the facility, have health care providers (HCP) wear all recommended PPE for care of all residents (regardless of symptoms) on the affected unit (or facility-wide depending on the situation). This includes: an N95 or higher-level respirator (or facemask if a respirator is not available), eye protection, gloves, and gown. HCP should be trained on PPE use including putting it on and taking it off. This approach is recommended because of the high risk of unrecognized infection among residents. Recent experience suggests that a substantial proportion of residents could have COVID-19 without reporting symptoms or before symptoms develop. C. Observations and Interviews Certified Medication Tech (CMT) was observed on 4/29/2020 at 10:35 a.m. to be in an isolated unit. She stood in the hallway near residents and she did not have on gloves. She said gloves, gowns, eye protection and a mask were to be worn at all times in an isolated area. Licensed practical nurse (LPN) #1was observed on 4/29/2020 at 11:05 a.m. in an isolated unit. She did not have on gloves and had no eye protection on. She said all PPE gear to include gown, gloves, mask and eye protection were to be worn in an isolated area. Activity assistant (AA) #1 was observed on 4/29/2020 at 11:25 a.m. to pull down her mask from her nose and mouth to talk to a positive COVID resident. She did that two times. She said the resident did not recognize her so she pulled the mask down so the resident could see who she was. She said the mask was worn to not spread the [MEDICAL CONDITION] from one person to another. Activity assistant (AA) #2 was observed on 4/29/2020 at 11:34 a.m. in an isolated unit. Her eye protection sat on top of her head, her eyes were exposed and she did not have on gloves. She said she wore her eye protection when she was with residents. She said all PPE (gloves, gown, eye protection, and mask) should be worn at all times in the isolated areas. LPN #2 was observed on 4/29/2020 at 12:25 p.m. to assist a resident to put on a mask in an isolated unit. She did not have gloves on when assisted with personal care. The director of nurses (DON) was interviewed on 4/29/2020 at 1:00 p.m. She said all PPE gear (gowns, masks, gloves and eye protection) were to be worn at all times in an isolated unit unless they were in the computer room charting. She said gloves did not have to be worn at that time. II. Properly clean and disinfect, adhere to dwell times A. Facility policies The Emerging Infectious Disease (EID): Coronavirus Disease 2019 (COVID-19) policy was revised on 4/8/2020 and was provided by the Nursing Home Administrator (NHA) on 4/30/2020. The policy revealed, to implement recommended appropriate infection control strategies, guidance and standards from the local, state and federal agencies for an EID event. It is the policy of this facility to include preparatory plans and actions to respond to the threat of the COVID-19, including but not limited to infection prevention and control practices in order to prevent transmission. -Provide healthcare personnel with job or task specific education and training on preventing transmission of infectious against, including refresher training. -Ensure that environmental cleaning and disinfection procedures were followed consistently and correctly. Routine cleaning and disinfection procedures (e.g., using cleaners and water to pre-clean surfaces prior to applying an Environmental Protection Agency (EPA) registered, hospital grade disinfectant for frequently touched surfaces or objects for appropriate contact times as indicated on the product's label) were appropriate for [DIAGNOSES REDACTED]-CoV-2 in healthcare settings, including those resident care areas in which aerosol generating procedures were performed. The Infection Control Disinfection of Rooms and Terminal Cleanings policy, dated November 2017, was provided by the Maintenance Supervisor (MS) on 4/29/2020 at 1:12 p.m. The policy revealed the staff were to follow this checklist that was created based on long term care infection control guidelines. Staff were to be educated and evaluated annually and as needed regarding the utilization and understanding of this checklist. -Item 4: Cleaning and disinfecting the resident room. Disinfect all surfaces with a 10:1 bleach solution that has a wet (dwell) time of ten minutes. Then use the named antibacterial all purpose cleaner. Mop the floor using the mopping procedures as stated in the bathroom, except use a new mop strip with a 10:1 bleach solution. -Item #6: Cleaning and disinfecting the resident bathroom. Start with the highest surfaces first using a 10:1 bleach solution that had a wet time of ten minutes. Re-apply if needed to have a full ten minute wet time abn then use the bathroom cleaner. Always use different cleaning cloths for different surfaces such as one for the sink area and one for the toilet. Mop the bathroom floor using a different mop strip than the bedroom. B. Reference 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 latest 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. C. Observations On 4/29/2020 at 11:15 a.m., a housekeeper (HKS) was observed cleaning/disinfecting resident room [ROOM NUMBER]. This room was occupied by two residents. The entire unit was on contact isolation. The HSK was wearing personal protective equipment (PPE) including a set of gloves. The HSK did not pre-spray chemicals onto any object in the room or bathroom prior to starting the cleaning process. The HSK retrieved a fresh rag out of a solution bucket from the service cart, located in the hallway. She said it |

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

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| F 0880<br><br>**Level of harm** - Minimal harm or potential for actual harm<br><br>**Residents Affected** - Many | (continued... from page 1)<br>contained a 10:1 solution of bleach. She immediately wiped off the entrance door handles. She took a set of keys out of her back pocket and unlocked the bathroom door. She used the same rag to wipe off the bathroom door handles. She used the same rag to wipe off three dressers located near the bed by the window. She wiped off the window ledge. She used the same rag to wipe off the headboard on the bed at the entrance of the room and then the headboard of the bed near the window. -At 11:19 a.m., the HSK retrieved a toilet bucket with a brush from the service cart. She said the bucket contained the same solution of 10:1 bleach. She continued to use the same set of gloves. She flushed the toilet and poured some of the liquid from this bucket into the toilet. She immediately took the toilet brush, wiped the inside of the toilet bowl and the underneath surface of the toilet seat. She proceeded to use the same rag, previously used in the room, to wipe off the bathroom sink and countertop. She used the same rag to wipe off the hand soap dispenser and the paper towel dispenser. She used the same rag to wipe the underside of the toilet seat, top of the toilet seat, and the toilet lid on both sides. She used the same rag to wipe off the toilet tank and the toilet pedestal. She then placed this rag in a plastic bag on the service cart in the hallway. -At 11:23 a.m., she kept the same gloves on and retrieved a mop from the service cart. She placed a mop strip from a bucket located on the front of the service cart. She said it contained the same solution of 10:1 bleach. She mopped around and under the first bed by the entrance door. At 11:26 a.m., she mopped around and under the bed by the window. At 11:28 a.m., she mopped the middle of the room toward the entrance of the room. -At 11:29 a.m., she kept the same gloves on and retrieved a set of keys from her back pocket and unlocked the bathroom door. She changed out the trash bag in the bathroom. She mopped the bathroom floor with the same mop strip. She used the same mop strip and mopped all floor debris toward the entrance door area. She then took a broom/dustpan and removed the moped debris at the entrance of the room. She finished cleaning the room at 11:32 a.m. D. Staff interviews On 4/29/2020 at 11:30 a.m., the HSK said she had worked at the facility for about six weeks. She said she had been trained at the facility, on the proper methodology for cleaning and disinfecting resident rooms/bathrooms. She said she only used one set of gloves, one rag and one mop strip for each room/bathroom. On 4/29/2020 at 12:50 p.m., the Maintenance Supervisor (MS) was interviewed. He said the HSK had received training from the lead housekeeper on how to clean and disinfect a resident room/bathroom.The MS said the facility did have EPA approved chemicals. He said the rag solution and the toilet bowl solution on the service cart was a 10:1 ratio solution of bleach. He said the bucket for the mop strips, located on the front of the service cart, continued as a named cleaner and not a disinfectant. -He said the HSK should have put on a set of gloves, went into the bathroom and sprayed the sink, countertop, grab bar and toilet with the appropriate chemical solution and let it soak (dwell) for ten minutes while she cleaned the room. -He said the toilet bowl cleaner was a named disinfectant solution and the HSK should have waited ten minutes before cleaning the toilet bowl. -The MS said the HSK should have used six rags to clean/disinfect a two person room. He said she should have used two rags in the bathroom. One rag for the sink/countertop area and a second rag to wipe off the toilet. He said she should have used four rags in the residents room. Two rags would be used on each side of the room. -The MS said the HSK should have used one mop strip for each side of the residents portion of the room and one for the bathroom. He said she should have mopped the floor starting at the window bed area with one mop strip. She should have gotten a fresh mop strip out of the solution bucket and mopped the floor area around the bed near the entrance to the room. She should have gotten a third fresh mop strip from the solution and mopped the bathroom floor itself. He said the HSK did not use enough mop strips and she should have used three strips for a two person room. -The MS said the HSK should have used four sets of gloves to clean/disinfect a two person room. He said the methods the HSK used to clean/sanitize this room resulted in a cross contamination of the room. He said the HSK should have followed the facility policies and procedures for cleaning and disinfecting a resident room/bathroom. III. PPE gowns Observations and interview Certified nurse aide (CNA) #2 was interviewed on 4/29/2020 at 12:10 p.m. She said she took off her PPE gown in the designated area of the facility, and wiped her gown off with bleach wipes and took the gown home with her to wash after each shift. The director of nurses (DON) was interviewed on 4/29/2020 at 1:00 p.m. she said the facility staff took the used PPE gowns that were worn in an isolated unit to their own homes to wash them in their washing machines. She said the facility laundry machines were too hot and melted the PPE gowns. She said she could not assure the gowns were washed by staff members before beginning them back into the facility. |