STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER / SUPPLIER / CLIA IDENNTIFICATION NUMBER	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	065110	A. BUILDING _____ B. WING _____	03/31/2020

NAME OF PROVIDER OF SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP
MESA MANOR CENTER	2901 N 12TH ST GRAND JUNCTION, CO 81506

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.** Based on observation, interviews and record review, the facility failed to ensure infection control procedures were followed to prevent the possible cross-contamination of Coronavirus disease (COVID-19) during resident room cleaning, and proper infection control procedures during resident communication. Specifically, the facility failed to ensure: -Proper infection control procedures were followed to prevent cross-contamination during resident room cleaning by housekeeper (HK) #2, who was responsible for cleaning two of four resident hallways; and -The housekeeping supervisor (HKS) did not lower her mask when talking to residents. Findings include: I. Facility policies and procedures The following policies were provided by the nursing home administrator (NHA) via email on 3/31/2020 at approximately 4:30 p.m. The Infection Control Standard Precautions policy, revised 11/15/19, included: Change gloves: between tasks . and after contact with material that may contain a high concentration of microorganisms. The Cleaning Resident Areas policy, dated 11/1/07, included: Wipe all surfaces . starting with the least soiled and finishing with the most soiled. -Floor mopping was to be done by starting at the farthest corner from the door, moving toward the door, mopping the bathroom floor last. -Be sure to practice proper hand hygiene after leaving room. The cleaning procedures did not include instructions for prevention of cross-contamination, what specific cleaners should be used, or the dwell times needed to ensure disinfection. II. Observations During observations at approximately 11:00 a.m. on 3/31/2020, the housekeeping supervisor (HKS) was observed pulling her mask down, exposing her nose and mouth, when she spoke to residents who resided on the 200 hall. The HKS was within close proximity, less than six feet for social distancing, to the residents when she lowered her mask to speak to them. Observations of resident room cleaning at approximately 11:10 a.m. on 3/31/2020 revealed housekeeper (HK) #2 was cleaning resident rooms on the 200 hall. She entered a double-occupancy resident room, where both residents were lying in their beds. HK #2 had sanitized her hands and was wearing gloves. She wiped down the surfaces on each resident's side of the room using separate cleaning cloths, then retrieved a dust mop from the cleaning cart in the hallway. HK #1 dust mopped the floor, starting in the bathroom, then the bedroom areas, swept the dust and particles from the floor to the doorway, used a dust pan to pick up the debris, emptied the dust pan into the trash on her cart, and returned the dust mop to the cart. HK #2 then retrieved a wet mop with a replaceable cleaning cover from the cart and mopped the residents' bathroom floor. She removed the cover from the mop head that she had just used to mop the bathroom floor, touching the soiled surface with her gloved hands, returned the mop cover to her cart, got a cleaning cloth from a bucket of cleaning solution, and wiped down the bedside table that belonged to the resident in the room nearest to the door. As she wiped down the table, she picked up and replaced the resident's water pitcher, a glass of apple juice and a small carton of supplement with a straw inside. After cleaning and mopping the rest of the residents' room, HK #2 returned to the cleaning cart in the hallway, disposed of her gloves, sanitized her hands and donned new gloves, and moved toward another resident's room. HK #2 had worn the same pair of gloves to clean the entire room, potentially cross-contaminating the residents' room with her soiled gloves after handling the mop cover used on the bathroom floor. By dust-mopping the entire floor starting in the bathroom, she had potentially cross-contaminated the flooring in the residents' bedroom area with whatever might have been on the bathroom floor. III. Staff interviews HK #2 was interviewed at approximately 11:20 a.m. on 3/31/2020, immediately after the observations above. She said she had already cleaned the bathroom, toilet, and sink areas in the residents' room with a bleach solution before the observations began. She said she was unaware of the dwell times needed for the bleach solution to disinfect. She said she had not thought about cross-contamination, and said she had been trained to use one pair of gloves per resident room. She said this was the room cleaning process she used, and how she had been trained. The housekeeping supervisor (HKS) was interviewed at approximately 11:30 a.m. on 3/31/2020, a few minutes after the above observation and interview with HK #2, and was notified of the findings above. She said the room would need to be re-cleaned and she would re-train HK #2. She said there were typically two housekeepers in the facility, and each was responsible for cleaning two resident hallways. The HKS also acknowledged that lowering her mask and exposing her nose and mouth while talking to residents and others in the facility was not proper infection control protocol. At approximately 12:00 p.m., after the HKS spoke with HK #2, she said HK #2 had been trained by someone else, and HK #2 had requested more training when she brought the above concerns to her attention. The HKS said she monitored the housekeeping processes by looking at rooms to ensure they were clean, but not by direct observation of the room cleaning process. She said she would re-train HK #2 and the housekeeping staff on the step-by-step room cleaning protocol and dwell times for the cleaners they used to ensure they were being used properly. The HKS said she would notify her supervisor of the findings above. The nursing home administrator (NHA) and infection control specialist (ICS) were interviewed by phone on 3/31/2020 at approximately 2:00 p.m., and the findings above were discussed. They acknowledged additional training and monitoring were needed to ensure resident room cleaning was properly done, in a manner that prevented cross-contamination. The NHA said he expected random observations of housekeeping/environmental cleaning processes should be done, to ensure proper cleaning methods were used. The NHA said all staff were expected to wear masks, and acknowledged they did not want staff lowering their masks when talking with residents.

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