

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER / SUPPLIER / CLIA IDENTIFICATION NUMBER 065163	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 04/17/2020
NAME OF PROVIDER OF SUPPLIER EBEN EZER LUTHERAN CARE CENTER		STREET ADDRESS, CITY, STATE, ZIP 122 HOSPITAL RD BRUSH, CO 80723	
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 - Some</p>	<p>Provide and implement an infection prevention and control program.</p> <p>Based on observations, interviews, and record reviews, the facility failed to ensure staff were following the precautions to prohibit the transmission of communicable diseases. Specifically, staff were not donning PPE (Personal Protective Equipment) in the sequence that prevents the transmission of infectious diseases and signage detailing what PPE to use in isolation rooms was not available for staff in certain rooms. These failures place residents and staff at risk for acquiring infectious diseases. 1. Findings include: Isolation Policy page 43, given by the CEO (Chief Executive Officer), on the third paragraph reads in pertinent part, The facility will utilize procedures recommended by the Centers for Disease Control and Prevention (CDC) if isolation is needed;. The sequence for putting on PPE by the CDC lists donning gown first, followed by mask or respirator, then goggles, and then gloves. This sign was present on the doors of the isolation rooms in Immanuel hall. An observation on 4/15/20 at 11:50 AM revealed Nursing Student 1 (NS1) in the Immanuel hall prior to going into a room where a droplet precaution sign was on the door. NS1 donned gloves without performing hand hygiene, then donned shoe coverings, followed by a gown. NS1 was wearing the mask prior to donning the gloves. When NS1 was asked about the lack of hand hygiene prior to donning gloves, NS1 replied Oh I forgot. When asked about the sequence she used for donning PPE, NS1 looked at the sign posted on the door and acknowledged she should have donned the gown before the gloves. An observation on 4/15/20 at 12:00 PM evidenced Certified Nurse Aide 1 (CNA1) donning gloves followed by donning a gown prior to going into an isolation room with a droplet precaution sign on the door. When CNA1 was asked why she donned the gown after the gloves, CNA1 replied I forgot. Then CNA1 removed the gown and gloves, and donned the gown before donning the gloves. On 4/17/20 at 3:13 PM during an interview via conference call with the Administrator, the CEO, and the Infection Prevention and Control (IPC) - Nurse (RN), the above observations were mentioned. The CEO replied NS1 has had training on the proper sequence of PPE and sent the documentation via email from NS1's school of nursing, and CNA1 said she was nervous. When the signs illustrating the sequence on the doors were mentioned, the IPC-RN reported yes that is why we have them, and it is our expectation that they follow the sequence, since then they have been educated on donning (PPE) and hand hygiene. 2. Findings include: Isolation policy page 43, given by the CEO, on the third paragraph reads in pertinent part, In the event that isolation precautions are necessary, a sign requesting that visitors check with the nurses station prior to entering the resident's room will be posted on the resident's door. An observation on 4/15/20 at 12:10 PM in the Elim hall revealed a couple of rooms that had signage stating, Droplet Precautions to prevent the spread of infections, anyone entering this room must wear: surgical mask. Below the first sign, a CDC postage title How to safely remove personal protective equipment (PPE) Example 2. No gloves or gowns are listed as a precaution to prevent the spread of infection on the sign on the resident's door. On 4/15/20 at 12:40 PM in an interview with the CEO and the Environmental Services Supervisor, when shown a picture of the signs in Elim hall, the CEO replied, I was unaware of inconsistency of the signage. The CEO further stated droplet precautions should include mask, gloves, and gowns. On 4/17/20 at 3:17 PM in an interview via conference call with the Administrator, the CEO, and the IPC-RN, when the observation of the inconsistency of the signage was mentioned, the IPC-RN, replied yes, we fixed that.</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.