

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER / SUPPLIER / CLIA IDENTIFICATION NUMBER 285164	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 09/08/2020
NAME OF PROVIDER OF SUPPLIER HOLMES LAKE REHABILITATION & CARE CENTER		STREET ADDRESS, CITY, STATE, ZIP 6101 NORMAL BLVD LINCOLN, NE 68506	
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 - Many	<p>Provide and implement an infection prevention and control program.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY**</p> <p>Licensure Reference Number 175 NAC 12-006.17 A Based on observations, interviews and record reviews, A) the facility failed to properly prevent spread and cross - contamination of Covid -19 ([MEDICAL CONDITION] that affects the respiratory system) related to staff removing gowns before exiting yellow and red zoned rooms; B) to follow CDC recommendations related to N95 (a type of facial mask) use by covering with a surgical mask or face shield when working in yellow, gray or red zones; C) wearing appropriate PPE (personal protective equipment) when working in yellow zone. This had the potential to affect all residents in the facility. The facility census was 48. Record review of Facility document titled Cohorting residents in the long term care facilities: A Red Zone = Resident with positive COVID-19 test or symptomatic residents suspected of having Covid -19. A Yellow Zone= Asymptomatic (no symptoms) residents who may have been exposed to COVID-19. A Gray zone = Residents that are new admissions or readmissions that are placed in isolation for 14 days due to the unknown exposure to Covid-19. Findings are: A) An observation on 9/8/20 at 1:00 PM revealed Activity Director exited room [ROOM NUMBER] carrying a yellow gown, disposed of gown in hallway in large white barrel with clear trash can liner. An interview on 9/8/20 at 1:00 PM with Activity Director revealed gowns are to be taken off inside the resident's room and disposed of in resident's room. Record review of large yellow sign hanging out side of room [ROOM NUMBER] revealed the following Removing PPE (in Resident Room) Remove gloves Hand hygiene Eye protection Hand Hygiene Gown Hand Hygiene Apply clean gloves Clean eye protection with Sani wipe Discard gloves Remove mask outside of room. An observation on 9/8/20 at 1:15 PM revealed Activity Director exiting room [ROOM NUMBER] with yellow gown rolled up carrying in one hand, walked down hallway with gown to large white barrel with clear trash can liner and disposed of gown. Activity Director verbalized someone moved my linen barrel? An observation on 9/8/20 at 1:20 PM revealed MA-B exiting room [ROOM NUMBER] with yellow gown on and removing it in the hallway and disposing of gown into in a large white barrel with clear trash can liner. An observation on 9/8/20 at 1:00 PM revealed no linen containers were in rooms in the Red Zone to dispose of gowns. Record review of COVID-19 Personal Protective Equipment doffing(removal) step by Step procedure dated 4/10/2020 revealed staff are to removed gown and gloves prior to exiting a resident's room. Record review of facility policy titled Infection Control dated 3/3/2020 revealed under section General Guidelines 2. All staff members entering the room will wear PPE, according to the type of isolation needed. 3. Gloves, masks and gowns will be discarded before leaving the room. Red bags for laundry and trash will be available in the rooms. An interview on 9/8/20 at 7:10 PM with DON (Director of Nursing) and ADON (Assistant Director of Nursing) confirmed staff should be removing gowns and discarding them in residents rooms before exiting room and not removing gown in hallway and/ or discard gowns in linen barrels in hallway. B. An observation on 9/8/20 at 1:30 PM revealed MA-B, Activity Director and LPN-C were working in the Red zone (Residents in this area have had a positive Covid-19 test and Residents that were close contacts to positive Residents - but have had a negative test result) wearing N95 masks and goggles. According to CDC (Center for Disease Control and Prevention) (An organization that provides guidance on infection control practices) and recommendations by ICAP (Infection Control Assessment and Promotion Program) (An organization that provides education and guidance on infection control and prevention) gray zones (isolation rooms) require the following PPE (Personal Protective Equipment) N95 mask, gown, gloves and eye protection. A surgical mask can be used with face shield if N95 are not available. The preferred is N95 mask, face shield, gown and gloves. To reuse N95 masks and wear N95 masks from a gray to green zone the following must occur the use of face shields covering N95 mask or applying a new surgical mask over N95 in each gray room and discarding surgical mask in gray room before exiting it. An interview on 9/8/20 at 7:10 PM with DON and ADON confirmed the facility follows ICAP recommendations and was unaware of needing to cover N95 masks with surgical mask or face shield to extend the use of N95 masks. C. An observation on 9/8/20 at 2:00PM revealed MA-A was wearing a surgical mask and a face shield working a yellow zoned hallway. An interview on 9/8/20 at 2:00PM with MA-A revealed (gender) was not wearing an N95 mask as it was too hard to breathe; during interview MA-A lifted surgical mask off of nose and stated I can barely breathe with this on! MA-A explained (gender) does have a N95 mask. MA-A stated (gender) was working in Yellow Zone today and would wear surgical mask and face shield in every room and would also wear a new gown and gloves when entering each room. According to CDC Responding to Coronavirus (COVID-19) in Nursing Homes - Considerations for the Public Health Response to COVID-19 in Nursing Homes dated April 30, 2020 revealed the following information under section Considerations for new admission or readmission to the facility All recommended COVID-19 PPE (Personal Protective Equipment) should be worn during care of resident under observation, which includes use of an N95 mask or higher respirator, eye protection, gloves and gown. An interview on 9/8/20 at 7:10 PM with DON (Director of Nursing) and ADON (Assistant Director of Nursing) confirmed all staff are to wear an N95 mask in the facility.</p>		

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