

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER / SUPPLIER / CLIA IDENTIFICATION NUMBER 195592	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 08/03/2020
NAME OF PROVIDER OF SUPPLIER CAMELOT OF BROUSSARD		STREET ADDRESS, CITY, STATE, ZIP 418 ALBERTSON PARKWAY BROUSSARD, LA 70518	
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	<p>Provide and implement an infection prevention and control program.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY**</p> <p>Based on record reviews, observations and interviews, the facility failed to implement accepted infection control practices and transmission-based precautions to help to prevent and control the spread of an infectious communicable disease (Coronavirus 2019). The facility failed to ensure staff wore a gown and eye protection when providing care for 27 out of 27 quarantined residents who were on observation. This deficient practice placed 99 residents, who had not tested positive for COVID-19, at risk. Findings: A review of facility policy titled, COVID-19 Guidelines for Infection Control and Prevention read in part, .the isolation area may be used (partial or completely) by the facility to house new admissions during the first 14 days .staff will use proper PPE (Personal Protective Equipment) when providing care .new admissions along with residents that require services outside of the facility be placed in one area of the building. This may include but not limited to residents receiving [MEDICAL TREATMENT], [MEDICAL CONDITION], etc .new admissions and residents requiring outside services should be monitored closely for any signs and symptoms of infection .proper PPE will be utilized when caring for these residents. This will be determined by the medical and administrative staff of each facility. A review of a document titled, Responding to Coronavirus (COVID-19) in Nursing Homes dated read in part, Considerations for new admissions or readmissions to the facility .All recommended COVID-19 PPE should be worn during care of residents under observation, which includes use of an N95 or higher-level respirator (or facemask if a respirator is not available), eye protection (i.e., goggles or a disposable face shield that covers the front and sides of the face), gloves, and gown .Newly admitted or readmitted residents should still be monitored for evidence of COVID-19 for 14 days after admission and cared for using all recommended COVID-19 PPE. On 7/31/2020 at 9:00 am, S1DON stated there are no residents in isolation in the facility. New admits, [MEDICAL TREATMENT] residents and readmitted residents are quarantined in their room for 14 days for observation. Review of a list provided by the facility revealed a total of 27 residents on observation. Three residents were on observation on Hall 1; four residents on Hall 2, three residents on Hall 4, thirteen residents on Hall 5, and four residents on Hall B. Resident #1 was readmitted from the hospital, Resident #2 went out for an appointment and Resident #3 was newly admitted to the facility; and were on observation until 8/13/2020. Resident #4 and Resident #7 went out for an appointment and were on observation until 8/10/2020. Resident #5 left the facility for [MEDICAL TREATMENT] treatment and was on observation until 8/30/2020. Resident #6 went out for an appointment & left the facility for [MEDICAL TREATMENT] treatment and was on observation until 8/15/2020. On 7/31/2020 at 10:15 am, an observation of Hall 5 revealed no PPE supply carts on the hall or near resident doors who were on observation. An 8x10 sheet of paper with printed dates were posted near the doors of some of the resident rooms. On 7/31/2020 at 10:20 am, an observation of Hall 4 revealed no PPE supply carts on the hall or near resident doors who were on observation. An 8x10 sheet of paper with printed dates were posted near the doors of some of the resident rooms. On 7/31/2020 at 10:24 am, an observation of Hall 1 & Hall 2 revealed no PPE supply carts on the hall or near resident doors who were on observation. An 8x10 sheet of paper with printed dates were posted near the doors of some of the resident rooms. On 7/31/2020 at 11:42 am, an interview was conducted with S2LPN who stated residents on observation are identified by the posted date on their door indicating the end of their 14 day quarantine. She stated she wears a surgical mask over her KN95 mask and gloves when indicated. S2LPN stated she does not put on any other PPE including a gown or eye shield/goggles to enter the rooms of residents on observation. On 7/31/2020 at 11:46 am, an observation was made of Resident #5's room door. An 8x10 sheet of paper with a printed date of 8/5/20 was posted near the resident's door. There was no PPE supply cart on the hall or near the resident's door. On 7/31/2020 at 11:54 am, an observation Hall B revealed Resident # 6, Resident #7, Resident #1 and Resident #4 with posted dates of 8/15/2020, 8/10/2020, 8/13/2020 and 8/10/2020 respectively, near their room doors. On 7/31/2020 at 12:02 pm, an interview was conducted with Resident #1 who stated she went out to the hospital a few days ago and is in quarantine for 14 days. She stated that staff posted a sheet of paper near her door of the date she gets off quarantine. Resident #1 stated staff do not wear a gown or eye protection when providing care in her room. A review of Section C - Cognitive Status of Resident #s Quarterly MDS (Minimum Data Set) dated 06/01/2020 revealed the resident had a BIMS (Brief Interview for Mental Status) score of 13 indicating the resident is cognitively intact. On 7/31/2020 at 12:05 pm, an interview was conducted with S3HSK who stated she is assigned Hall 1 and Hall B. She stated does not put on a gown or face shield/goggles before entering Resident #1's room. She further denied putting on a gown and eye protection when entering any resident rooms of which she is assigned. On 7/31/2020 at 2:47 pm, an interview was conducted with S1DON who stated staff wear their KN95 mask under a surgical mask when caring for all residents and that staff are not required to put on a gown and eye protection when caring for residents on observation. On 8/3/2020 at 10:05 am, an observation was made of S4HSK entering Resident #2's room without wearing a gown or eye protection. An interview was conducted with S4HSK at this time who stated Resident #2 is in quarantine until 8/13/2020 because he went out to the hospital. S4HSK stated housekeeping staff are not required to put on a gown and eye protection before entering the rooms of residents on observation and that staff only wear their masks. On 8/3/2020 at 10:08 am, an interview was conducted with S5LPN who stated she is only required to wear her masks and no other PPE including a gown and eye protection when entering rooms of residents on observation. S5LPN stated that Resident #3 was a new admit to the facility and is currently in quarantine for 14 days. A posted date of 8/13/2020 was posted near the resident's door. On 8/3/2020 at 10:10 am, S5LPN was observed entering Resident #3's without a gown or eye protection. After exiting Resident #3 room, SLPN was observed entering Resident #8's room. Resident #8 was not on observation and was not listed on the facility's resident observation list. On 8/3/2020 at 10:24 am, an interview was conducted with S7ADON who stated residents are quarantined for 14 days if they leave the facility as a precaution because staff are not sure what the resident was exposed to while out. S7ADON stated staff do not wear gowns and eye protection when caring for residents on observation. On 8/3/2020 at 10:32 am, an interview was conducted with S8CNA who stated she is assigned to provide care to Resident #1 and Resident #4 who are in quarantine for 14 days due to leaving the facility. S8CNA stated that she does not don a gown or eye protection when providing care to both residents. On 8/3/2020 at 11:30 am, CDC recommendations for PPE requirements for residents in observation and the facility's isolation policy were reviewed with S1DON. S1DON stated she was not aware that gowns and eye protection were to be worn when caring for residents on observation. S1DON confirmed staff were not wearing a gown and eye protection per CDC recommendations to prevent the spread of COVID-19.</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.