STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER / SUPPLIER / CLIA IDENNTIFICATION NUMBER	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	115631	A. BUILDING _____ B. WING _____	06/19/2020

NAME OF PROVIDER OF SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP
PRUITTHEALTH - GRANDVIEW	165 WINSTON DRIVE ATHENS, GA 30607

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, staff interview, review of the facility policy entitled, COVID-19 Pandemic New Admission and Readmission Process for Healthcare Centers, and Centers for Disease Control and Prevention (CDC) guidelines, the facility failed to ensure facility and contract staff wore eye protection while in close contact with a resident who was COVID-19 positive for one (1) of one (1) random observations. The facility also failed to ensure staff followed facility policy to wear personal protective equipment (PPE) including gown, gloves, N95 mask and eye protection while on the Level I unit (COVID-19 positive care unit) for two (2) of two (2) random observations. In addition the facility failed to ensure their facility policy regarding the PPE that should be worn when caring for residents on the Level II unit (newly admitted residents, readmitted residents and persons under investigation for COVID-19) was consistent with CDC guidelines. These failures occurred during a COVID-19 pandemic. The findings include: 1. On 6/17/20 at 3:03 p.m. Certified Nursing Assistant #1 (CNA #1) was observed walking through the door to the anteroom between the facility's Level II Unit (new admissions, readmissions and persons under investigation for COVID-19) and the Level I unit (COVID-19 positive unit). On 6/17/20 at 3:05 p.m. CNA #1 was observed in the hallway of the Level I unit. She was wearing an N95 mask but was not wearing a gown, gloves or eye protection. Upon inquiry she stated she did not need to wear a gown on that unit as she had not gone into any of the resident rooms. CNA #1 then exited the unit through the door to the anteroom. On 6/17/20 at 3:15p.m. Registered Nurse #1 (RN #1) and RN #2 were observed in the anteroom donning gown and gloves; they were already wearing an N95 mask. An Ultrasound Technician then opened the door from the COVID-19 care unit and requested assistance transferring one of the residents. The Ultrasound Technician was wearing an N95 mask, gown and gloves. RN #1 entered the COVID-19 unit to provide assistance. On 6/17/20 at 3:20 p.m. RN #1 and the Ultrasound Technician were observed exiting a resident's room; neither were wearing eye protection although RN #1 wore eyeglasses. The Ultrasound Technician indicated she was thankful for the assistance to transfer the resident as she had been difficult to transfer. RN #2 was present during this observation but did not enter the resident room; she waited on the COVID-19 care unit hallway. Upon inquiry RN #2 indicated she was being oriented and didn't yet know if or when eye protection was required. During an interview with RN #1 and RN #2 on 6/17/20 at 3:22 p.m., RN #1 indicated she was not aware eye protection should be worn when in close contact with residents who were COVID-19 positive. On 6/17/20 at 3:24 p.m. CNA #1 was observed entering the anteroom and proceeding towards the door to the COVID-19 care unit. She was wearing a surgical mask and did not put on any additional PPE or perform hand hygiene. RN #1and RN #2 were present in the anteroom during this observation. They were both wearing an N95 mask and gown. Nurse #1 told CNA #1 that she needed to put on a gown before entering the COVID-19 unit. CNA #1 then said she didn't need to wear the gown because she wasn't going to go in any of the resident rooms. CNA #1 then entered the COVID-19 unit. Upon inquiry RN #1 indicated she just realized CNA #1 had not been wearing an N95 mask. She then opened the door to the COVID-19 care unit and asked CNA #1 to return to the anteroom. RN #1 then gave CNA #1 an N95 mask and both RN #1 and RN #2 assisted CNA #2 with putting on a gown. The CNA then picked up a pair of gloves and reentered the COVID-19 care unit. During an interview with the Infection Preventionist (IP) on 6/18/20 at 1:40 p.m., she stated that staff should wear goggles when in close contact with residents on the Level 1 unit (COVID-19 care unit). She also acknowledged staff entering the Level 1 COVID-19 positive unit should wear a gown gloves and N95 mask. The IP said that CNA #1 had received re-education regarding the appropriate PPE for the Level I unit previously and every time she had been monitored she had been wearing the correct PPE. Review of the facility policy entitled, COVID-19 Pandemic New Admission and Readmission Process for Healthcare Centers' dated 4/10/20 revealed, the following requirements for staff caring for residents on the Level I (COVID-19 positive and presumptive positive care unit): PPE will follow CDC guidelines for droplet precautions to include: gloves, gowns (disposal or reusable), N95 mask, face shield (and) mask (surgical or cloth) worn over the N95 (only if face shield not available). 2. Review of the CDC document entitled, Responding to COVID-19 in Nursing Homes dated 4/20/20 revealed, a single negative test upon admission does not mean that the resident was not exposed or will not become infected in the future. 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 (Personal Protective Equipment). The PPE recommended was: gown, gloves, N95 respirator, or facemask and eye protection. Review of the facility policy entitled, COVID-19 Pandemic New Admission and Readmission Process for Healthcare Centers dated 4/10/20 revealed, the Level II unit was for the following residents: o Patients in-house with COVID-19 tests pending. o New admissions/transfers from hospital and community with tests pending. o New admissions/transfers from hospital and community with no test pending and asymptomatic. o New admissions/transfers from hospital and cmmnunity (sic) with negative test greater than 24 hours from date of admission to the healthcare center. Further review revealed the following requirements for staff working on the Level II unit: PPE to follow CDC guidelines for droplet precautions to include: gloves, gowns (disposal or reusable) (and) Mask (surgical mask with a cloth covering). The facility policy did not indicate eye protection should be worn when caring for the residents on the Level II unit, which was inconsistent with the CDC guidance. During an interview with the Administrator on 6/20/20 at 11:00 a.m., she indicated she did not know why the facility policy and practice did not include the use of eye protection for staff working with residents on the Level II unit. She added that if the Corporate Office had updated the policy since 4/6/20 it had not been provided to her.

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