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| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | (X1) PROVIDER / SUPPLIER / CLIA IDENTIFICATION NUMBER 675485 | (X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____ | (X3) DATE SURVEY COMPLETED 08/20/2020 |
| NAME OF PROVIDER OF SUPPLIER LOCKNEY HEALTH AND REHABILITATION CENTER | | STREET ADDRESS, CITY, STATE, ZIP 401 N MAIN ST LOCKNEY, TX 79241 | |
| 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. **NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY**</p> <p>Based on observation, interview, and record review, the facility failed to maintain an infection prevention and control program designed to provide a safe, sanitary and comfortable environment and to help prevent the development and transmission of communicable diseases and infections for 2 of 11 Employees (AD and HSK B) reviewed for infection control and prevention practices. - AD failed to wear a mask or face covering in the facility during the COVID-19 pandemic despite CDC guidance and state ordinance requirements. - HSK B was not aware of the contact time of the disinfectant used to clean and disinfect resident rooms and facility high-touch surfaces. This failure has the potential to affect residents by placing them at an increased and unnecessary risk of exposure to communicable diseases and infections. Findings include: During an observation on 08/20/2020 at 9:28 AM, AD came to the front door of the facility after the surveyor rang the doorbell to gain entry to the facility. She was observed through the window coming into the lobby from the hallway that leads to the nurse station and was not wearing a mask or face covering of any kind. AD opened the door and allowed the surveyor to enter the facility lobby while asking about his identity and purpose. Just after being informed of the surveyor's identity, AD retrieved a KN-95 mask from her pocket and donned it. During an observation and interview with HSK B on 08/20/2020 at 10:27 AM, the housekeeping cart that HSK B was using to disinfect and clean resident rooms was inspected. The label of the disinfectant spray she was using indicated that it had a contact time of 10 minutes. HSK B reported that it is the disinfectant spray used on high touch surfaces such as handrails. When asked how long she leaves the disinfectant on surfaces before wiping it off to ensure it will kill microorganisms such as viruses; she replied that she will spray it on surfaces in a room, collect the trash bags in that room, and wipe it off after collecting the trash. When asked specifically how long the contact time of the disinfectant is, she reported that she was not aware of the exact time it must be left on before being wiped off. During an interview with AD on 08/20/2020 at 10:33 AM, she reported that everyone is expected to wear a mask before they come in the door to the facility. She admitted that she was not wearing a mask while inside the facility when she came to the front door to let the surveyor in. She claimed that she had removed the mask because she had been recently speaking on the phone when the surveyor came to the door. During an observation on 08/20/2020 at 11:07 AM, there was a sign posted across from the nurse station area that read Attention All Staff; New CDC Rule; You must wear a mask in the building, no exceptions, when you enter the building masks are at hand cleaning station. During an interview with ADM on 08/20/2020 at 3:03 PM, he reported that everybody should be wearing a mask before they come in the door. ADM was asked if there is anywhere in the facility, or any circumstances under which, a staff member can be inside the facility without a mask on. He replied, If they are actively eating or drinking. ADM confirmed that housekeeping staff should know the contact time of disinfectants being used. Record review of facility provided policy titled Limiting the Transmission of COVID-19: Plan and Policy, not dated, revealed in part: The facility will periodically review specific IPC guidance for healthcare facilities caring for residents with suspected or confirmed COVID-19 (available here: https://www.cdc.gov/coronavirus/2019-ncov/infection-control/control-recommendations.html) and additional long-term care guidance (available here: https://www.cdc.gov/coronavirus/2019-ncov/healthcare-facilities/prevent-spread-in-long-term-carefacilities.html) and update the plan as required. Record review of webpage titled Interim Infection Prevention and Control Recommendations for Healthcare Personnel During the Coronavirus Disease 2019 (COVID-19) Pandemic, dated 07/15/2020, as mentioned in the facility policy and accessed at https://www.cdc.gov/coronavirus/2019-ncov/infection-control/control-recommendations.html, revealed in part: 1. Recommended routine infection prevention and control (IPC) practices during the COVID-19 pandemic Implement Universal Source Control Measures HCP should wear a facemask at all times while they are in the healthcare facility, including in breakrooms or other spaces where they might encounter co-workers. Definitions Healthcare Personnel (HCP): HCP refers to all paid and unpaid persons serving in healthcare settings who have the potential for direct or indirect exposure to patients or infectious materials, including body substances (e.g., blood, tissue, and specific body fluids); contaminated medical supplies, devices, and equipment; contaminated environmental surfaces; or contaminated air. HCP include, but are not limited to, emergency medical service personnel, nurses, nursing assistants, physicians, technicians, therapists, phlebotomists, pharmacists, students and trainees, contractual staff not employed by the healthcare facility, and persons not directly involved in patient care, but who could be exposed to infectious agents that can be transmitted in the healthcare setting (e.g., clerical, dietary, environmental services, laundry, security, engineering and facilities management, administrative, billing, and volunteer personnel). Record review of CDC web page titled Preparing for COVID-19 in Nursing Homes, dated 06/25/2020, accessible at https://www.cdc.gov/coronavirus/2019-ncov/hcp/long-term-care.html, revealed in part: Core Practices Implement Source Control Measures HCP should wear a facemask at all times while they are in the facility. Provide supplies necessary to adhere to recommended infection prevention and control practices Environmental cleaning and disinfection: Use and EPA-registered disinfectant from List N on the EPA website to disinfect surfaces that might be contaminated with [DIAGNOSES REDACTED]-CoV02. Ensure HCP are Appropriately trained on its use. Definitions: Healthcare Personnel (HCP): HCP refers to all paid and unpaid persons serving in healthcare settings who have the potential for direct or indirect exposure to patients or infectious materials, including body substances (e.g., blood, tissue, and specific body fluids); contaminated medical supplies, devices, and equipment; contaminated environmental surfaces; or contaminated air. HCP include, but are not limited to, emergency medical service personnel, nurses, nursing assistants, physicians, technicians, therapists, phlebotomists, pharmacists, students and trainees, contractual staff not employed by the healthcare facility, and persons not directly involved in patient care, but who could be exposed to infectious agents that can be transmitted in the healthcare setting (e.g., clerical, dietary, environmental services, laundry, security, engineering and facilities management, administrative, billing, and volunteer personnel). Record review of document titled Executive Order by the Governor of the State of Texas, Executive Order GA 29, dated 07/02/2020, and retrieved from https://open.texas.gov/uploads/files/organization/open-texas/EO-GA-29-use-of-face-coverings-during-COVID-19-IMAGE-07-02-2020.pdf, revealed in part: NOW, THEREFORE, I, {governor} Governor of Texas, by virtue of the power and authority vested in me by the Constitution and laws of the State of Texas, do hereby order the following on a statewide basis effective at 12:01 p.m. on July 3, 2020: Every person in Texas shall wear a face covering over the nose and mouth when inside a commercial entity or other building or space open to the public, or when in an outdoor public space, wherever it is not feasible to maintain six feet of social distancing from another person not in the same household;</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.