

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER / SUPPLIER / CLIA IDENTIFICATION NUMBER <b>396133</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED <b>08/14/2020</b>
NAME OF PROVIDER OF SUPPLIER <b>VIBRA REHABILITATION CENTER</b>		STREET ADDRESS, CITY, STATE, ZIP <b>707 SHEPERDSTOWN RD MECHANICSBURG, PA 17055</b>	
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  <b>Level of harm - Minimal harm or potential for actual harm</b>  <b>Residents Affected - Some</b>	<p><b>Provide and implement an infection prevention and control program.</b></p> <p><b>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY**</b></p> <p>Based on observation, staff interviews, record reviews, and review of facility documents, the facility failed to follow the Centers for Disease Control and Prevention (CDC) recommended practices regarding universal masking of healthcare professionals in a healthcare setting on 1 of four units (400 unit), and use of appropriate personal protective equipment when caring for residents under observation during the 14 day period following admission on 3 of four units (200, 300 and 400 units). The findings include: According to CDC guidelines for Preparing for COVID-19 in Nursing Homes at cdc.gov, Implement Source Control Measures. HCP (Health Care Personnel) should wear a facemask at all times while they are in the facility. Review of facility policy COVID-19 Policy and Personal Protective Equipment (PPE) Requirements (undated), revealed, All staff in clinical facilities are required to wear a mask. Observation on August 11, 2020, at approximately 11:30 AM revealed NA 1 (Nurse Aide) present with Resident 14 and Resident 20 in residents' room with her face mask pulled down so that it was not covering her nose and mouth. During an interview with NA 1 on August 11, 2020, at approximately 11:35 AM, she revealed that she sometimes pulls her face mask down for a minute to breathe. During an interview with the Director of Nursing on August 11, 2020, at approximately 11:45 AM, she revealed that staff are required to wear masks in resident rooms. According to CDC guidelines for Responding to Coronavirus (COVID-19) in Nursing Homes at cdc.gov, Create a plan for managing new admissions and readmissions whose COVID-19 status is unknown. Options include placement in a single room or in a separate observation area so the resident can be monitored for evidence of COVID-19. All recommended COVID-19 PPE (Personal Protective Equipment) 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. Testing residents upon admission could identify those who are infected but otherwise without symptoms and might help direct placement of asymptomatic [DIAGNOSES REDACTED]-CoV-2-infected residents into the COVID-19 care unit. However, 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. A review of facility's policy failed to reveal information regarding use of CDC recommended COVID-19 PPE when caring for new admissions during the 14 days following the date of admission. Observation on August 11, 2020, between 10:55 AM and 11:30 AM on the 200, 300 and 400 units revealed the presence of twenty residents with admitted s within the prior 14 days (Residents 4 and 5 with an admitted [DATE]; Residents 10, 12 and 20 with an admitted [DATE]; Residents 11 and 16 with an admitted [DATE]; Resident 8 with an admitted [DATE]; Residents 15 and 17 with an admitted [DATE]; Residents 13, 14, 22 and 23 with an admitted [DATE]; Residents 7 and 19 with an admitted [DATE]; Residents 9, 18 and 21 with an admitted [DATE]; and Resident 6 with an admitted [DATE]). Observation also revealed staff providing care to these residents without the use of all CDC recommended COVID PPE. During a telephone interview with the Nursing Home Administrator on August 12, 2020, at approximately 3:00 PM, she revealed that all residents have tested negative for COVID-19 within a day of admission, and that there is no reason for full PPE for low risk residents such as an individual who was only admitted for rehabilitation for a hip replacement. 28 Pa. Code 201.18(b)(1)(e)(1) Management. 28 Pa. Code 211.10(d) Resident care policies. 28 Pa. Code 211.12 (d)(1)(3)(5) Nursing services.</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.