

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER / SUPPLIER / CLIA IDENTIFICATION NUMBER <b>245320</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED <b>05/07/2020</b>
NAME OF PROVIDER OF SUPPLIER <b>WOODLYN HEIGHTS HEALTHCARE CENTER</b>		STREET ADDRESS, CITY, STATE, ZIP <b>2060 UPPER 55TH STREET EAST INVER GROVE HEIGHTS, MN 55077</b>	
For information on the nursing home's plan to correct this deficiency, please contact the nursing home or the state survey agency.			
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F 0880  <b>Level of harm - Minimal harm or potential for actual harm</b>  <b>Residents Affected - Few</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, interview, and document review, the facility failed to ensure proper hand hygiene, infection control procedures, and use of PPE (personal protective equipment) were followed in accordance with Centers for Disease Control (CDC) guidelines, to prevent or mitigate the risk of cross-contamination by staff for 1 of 1 residents (R6) who was on transmission based precautions and reviewed for personal cares. Findings include: R6's admission Minimum Data Set (MDS), dated [DATE], included, cognitively intact and extensive assist for most ADL's (activities of daily living). R6 had [DIAGNOSES REDACTED]. When observed on 5/6/20, at 12:00 p.m. R6 was noted to be on contact precautions. A sign on R6's door directed use of soap and water, gloves, and gown upon entering room. An isolation cart was in the hallway outside of R6's room. At 12:02 p.m. nursing assistant (NA)-A entered room carrying a meal tray. NA-A wore gloves, mask and face shield. NA-A did not don gown before entering room. NA-A set meal tray on bedside table, adjusted R6's wheelchair, removed gloves and threw in trash with no hand hygiene immediately following glove removal. NA-A then moved a bedside table across the room near R6, entered bathroom and washed hands with soap and water for 20 seconds, then donned new gloves. NA-A moved a chair over to R6, adjusted bedside table closer to R6, sat in chair and began to feed R6. At 12:16 p.m. NA-A removed gloves and threw in trash, then washed hands with soap and water for 20 seconds. NA-A exited bathroom and with bare hands, adjusted R6's body in chair, adjusted bedside table, picked up milk carton and gave R6 a drink of milk, no hand hygiene was performed after contact with R6 and environment. NA-A then exited room and walked to nurse's station, spoke with staff members and touched papers at nurse's station without washing hands. When interviewed on 5/6/20, at 12:22 p.m. NA-A stated, R6 [MEDICAL CONDITION] ([MEDICAL CONDITION]-resistant staphylococcus aureus) on her right leg below the knee. I should have gloved up if I was going to be performing more contact, and perform more hand washing afterwards because there is risk of coming into contact with something. When interviewed on 5/6/20, registered nurse (RN)-S 12:24 stated, R6 is on contact precautions [MEDICAL CONDITION] in a leg wound, we are trying to get another lab cleared to remove precautions. We have been just wearing gloves all the time, I believe a gown is only needed if caring for that area, but if someone was touching R6 without gloves, they need to wash their hands. When observed on 5/6/20, at 12:50 p.m. NA-A moved a mechanical body lift from end of the hallway and wheeled into room R6's room. No sanitization of lift before use was noted. NA-A opened drawer of isolation cart, donned a disposable gown, opened another drawer of cart donned gloves with no hand hygiene performed before donning. RN-A approached from nurses station, opened drawer of isolation cart and donned gloves with no hand hygiene performed before donning. RN-A adjusted head of bed, removed soiled linen off bed and placed in plastic bag, placed bag in bathroom, removed soiled gloves and threw away, then donned new gloves with no hand hygiene performed between glove changes. NA-A took soiled linens and placed in plastic bag, tied bag and placed on floor. NA-A moved lift toward R6, RN-A and NA-A secured lift sling around R6 and lifted R6 out of chair and onto bed with NA-A operating lift and RN-A guiding R6 down into bed. RN-A removed gloves and exited room. NA-A took a plastic trash bag and placed on bed, pulled down R6's pants, directed R6 to roll towards door, removed soiled brief and placed in plastic bag, then used wipes and completed peri-care on R6, placed soiled wipes in trash bag, asked R6, how are you doing? R6 replied ok. NA-A continued to wipe peri area, then placed empty wipe container in trash bag, placed a new brief and under R6, removed soiled gloves and placed in trash then donned new gloves with no hand hygiene performed between glove changes, pushed empty wipe container further down into dirty trash bag, picked up dirty trash bag and placed on floor, secured clean brief and redressed R6. NA-A then took trash bag off floor and placed near door. NA-B knocked on door and asked NA-A if help was needed. NA-B opened drawer of isolation cart, donned disposable gown, opened another drawer of cart and donned gloves with no hand hygiene performed before donning. NA-A maneuvered the lift toward R6 and began strapping R6 into lift sling. NA-A picked up facemask off the floor and placed onto room tray. NA-A grabbed oxygen tank and handed it to NA-B across the bed who placed it on the floor. NA-B operated the lift and moved R6 into a recliner chair. NA-A removed a pillow off the chair and set on night stand. NA-B lowered R6 into recliner. NA-A unstrapped R6 from lift sling, NA-B moved lift away. NA-A removed the plastic bag from the bathroom, both leaned R6 forward and removed lift sling from under R6. NA-A placed lift sling onto wheelchair. NA-A removed a straw from R6's milk container and placed in water jug, and gave R6 a drink of water without washing hands. NA-A made the bed, NA-B tucked blankets around R6 in chair and gave call light. NA-A wheeled lift into hallway, removed gloves, removed gown, and threw into trash bag. NA-B placed new trash bag into can, then removed gloves and gown, threw into trash bag. NA-B washed hands in bathroom with soap and water for 20 second. NA-A tied up trash bag and washed hands with soap and water for 20 seconds. NA-B donned new gloves and wiped down lift with sani-wipes after use. When interviewed on 5/6/20, at 1:29 p.m. NA-B stated, We did like audits where we test each other for hand hygiene, we had a form that would tell you like how long to wash your hands, what to do after, that type of stuff. You would wash your hands before like putting on the gloves or after, we did a PPE audit on how to remove, we would wash our hands. When interviewed on 5/6/20, at 1:38 p.m. RN-A stated, I would have used hand sanitizer between glove changes or washed my hands, I simply forgot, with the COVID stuff we have done more audits on it, it was recent because of the COVID stuff. When interviewed on 5/6/20, at 1:34 p.m. NA-A stated, You're supposed to wash your hands before you change your gloves, I was more concerned about her not being able to hold herself up and did not want to contaminate another brief. When interviewed on 5/6/20, at 2:25 p.m. DON stated, I would expect once they take the gloves off to do hand washing, or use alcohol gel, if they do care related to cleaning residents up, they do hand hygiene between glove changes, I would want them to wash between changing gloves. We have the PPE for her, I know we had some challenges at the onset, but we have it there for them to use, they should be using it for direct care provision, and if they are making contact with her. Per facility policy titled, Standards Guideline: Hand Hygiene (Based upon the CDC Guideline Hand Hygiene in Healthcare Settings), last revised 3/17/20, Alcohol Based Hand Sanitizer immediately before touching a patient, before performing aseptic techniques (indwelling device) or handling an invasive medical device, before moving from a soiled body site to a clean body site on the same resident/patient, after touching a resident/patient or the resident's/patient's immediate environment, after contact with blood, bodily fluids, or contaminated surfaces, immediately before putting on gloves and after glove removal. Per facility policy titled, Standards Guideline: Hand Hygiene (Based upon the CDC Guideline Hand Hygiene in Healthcare Settings), last revised 3/17/20, Hand washing and gloves - when conducting a procedure requiring the use of gloves, proper hand washing shall be completed before donning gloves and after removing gloves. Gloves must be changed between different cares along with proper hand hygiene/disinfecting to prevent cross-contamination; this includes changing gloves during cares for the same resident. Per facility policy titled, Practice Guideline and Procedure: Infection Prevention, last revised 11/2016, Staff shall wash their hands with soap and warm, running water for between 20 to 30 seconds (or use of other effective hand sanitization techniques such as alcohol-based hand sanitizers) immediately prior to contact with residents. Per facility policy titled, Practice Guideline and Procedure: Standard Precautions, last revised 9/2017, Remove gloves promptly after use and discard before touching non-contaminated items or environmental surfaces, and before providing care to another patient. Wash hands immediately after removing gloves. Per facility policy titled, Practice Guideline and Procedure: Transmission Based</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.

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<p>F 0880</p> <p><b>Level of harm</b> - Minimal harm or potential for actual harm</p> <p><b>Residents Affected</b> - Few</p>	<p>(continued... from page 1)</p> <p>Precautions, last revised 9/2017, Healthcare workers caring for residents on Contact Precautions wear a gown and gloves for all interactions that may involve contact with the resident or potentially contaminated areas in the resident's room. Per facility document titled, All nursing staff COVID-19 updates, dated 4/6/20, NA-A, NA-B, and RN-A attended this training.</p>		