

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER / SUPPLIER / CLIA IDENTIFICATION NUMBER 225750	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 08/24/2020
NAME OF PROVIDER OF SUPPLIER MASCONOMET HEALTHCARE CENTER		STREET ADDRESS, CITY, STATE, ZIP 123 HIGH STREET TOPSFIELD, MA 01983	
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** Based on observations, interviews and facility policy review, the facility failed to prevent the possible spread of COVID-19 on 3 of 3 resident care units. Findings include: The facility policy titled Hand Hygiene, revised 01/2020, indicated: * It is the policy of this facility to follow the CDC Guidelines for Hand Hygiene in Healthcare Settings--2002 to promote improved hand-hygiene practices and reduce transmission of pathogenic microorganisms to residents and personnel within the facility, decrease the risk of transmission of anti-microbial resistant organisms and reduce the risk of healthcare associated infections. * Appropriate hand hygiene should be performed: i. Before and after patient/resident contact. ii. After removing gloves. iii. Before insertion of invasive devices, regardless of glove use. iv. After contact with blood, body fluids, mucous membranes, non-intact skin and wound dressings. v. Moving from contaminated patient body site to clean site during patient care. vi. After contact with inanimate objects or medical equipment close to the patient. The facility policy titled Personal Protective Equipment (PPE), revised 01/2020, indicated: 1.) Gloves a. When gloves are indicated, disposable, single use gloves should be worn. b. Used gloves should be discarded into the waste receptacle inside the room. * perform hand hygiene after removing gloves. * gloves do not replace hand hygiene. A. On 8/24/20 at 9:33 A.M., the surveyor arrived on the (NAME) unit and the following observations were made: * At 9:40 A.M., 2 housekeeping staff were observed standing in the hall talking and both were wearing gloves. One of the Housekeepers (HK#1) opened a bathroom door, with her gloved hand, and without performing hand hygiene, entered the bathroom, potentially contaminating the door knob and environment inside the bathroom. A few moments later HK#1 exited the bathroom, removed the gloves and placed the gloves in the trash. Then, without performing hand hygiene, HK#1 picked up a new trash bag, opened the bathroom door, potentially again contaminating the door handle and entered the bathroom. B. On 8/24/20 at 9:47 A.M., the surveyor arrived on the Baker unit and the following observations were made: * At 9:48 A.M., a housekeeper (HK#2) was observed exiting room [ROOM NUMBER] wearing a glove on each hand. A sign on the door indicated that the resident in room [ROOM NUMBER] was negative for COVID-19. Without removing the gloves, and without performing hand hygiene, HK#2 walked to an open-doored clean linen closet, removed a gown and potentially contaminated all items in the closet. HK#2 walked back to her cleaning cart, with the same gloved hands, and without performing hand hygiene, put on the gown and entered room [ROOM NUMBER], potentially contaminating the gown and a resident in the room. A sign on the door indicated that one of the residents in room [ROOM NUMBER] was negative for COVID-19. * At 9:50 A.M., a Diet Aide (DA#1) entered the unit, wearing a glove on each hand, and pushing a cart. DA#1 walked to the nourishment kitchen, retrieved items and then, without removing the gloves and without performing hand hygiene, DA#1 walked back down the corridor, pushed open the threshold door with her gloved hand, potentially contaminating the door and the environment on the other side, and exited the unit. * At 9:51 A.M., HK#2 exited room [ROOM NUMBER], still wearing a glove on each hand and the gown. HK#2 removed the gown and gloves in the hall and placed them into her trash cart. Then, without performing hand hygiene, pushed her cart further up the hall, potentially contaminating the cart and environment. * At 9:52 A.M., a Housekeeper (HK#3) was observed pushing her cleaning cart in the hallway, wearing a glove on each hand. She stopped the cart in front of room [ROOM NUMBER] then, without removing the gloves and without performing hand hygiene, walked back up hallway and picked up several Wet Floor signs with her gloved hands, potentially contaminating the signs. * At 9:54 A.M., HK#2 was observed standing in the hallway, wearing a glove on each hand. She removed the gloves and placed them in the trash, then without performing hand hygiene, went to the clean linen closet and removed two gowns, potentially contaminating the clean linen and the two gowns she removed. She handed one of the gowns to HK#3, potentially handing her a contaminated gown. * At 9:56 A.M., HK#2 and HK#3 put on the potentially contaminated gowns and they both entered room [ROOM NUMBER], potentially contaminating the room and the resident in the room. A sign on the door indicated a resident in room [ROOM NUMBER] was negative for COVID-19. * At 10:00 A.M., HK#3 exited room [ROOM NUMBER], still wearing a glove on each hand. Without removing the gloves and without performing hand hygiene, HK#3 began wiping the railing on the wall, potentially contaminating the railing. * At 10:54 A.M., the Surveyor observed HK#3, pushing her cart in the corridor, wearing a glove on each hand. She placed her cart in front of room [ROOM NUMBER], then without removing the gloves and without performing hand hygiene, HK#3 walked over to the clean linen closet and removed a gown, potentially contaminating the linen in the closet and the gown and returned to room [ROOM NUMBER]. With the same gloved hands, HK#3 put on the gown and entered room [ROOM NUMBER]. * At 10:57 A.M., HK#3 stepped into the threshold of the doorway of room [ROOM NUMBER], wearing a glove on each hand. Without removing the gloves and without performing hand hygiene, HK#3 placed her left gloved hand on the top of a chair to steady herself, potentially contaminating the chair's surface, and used her right gloved hand to place her mop in a bucket of water. HK#3 then re-entered room [ROOM NUMBER] wearing the same gloves and without performing hand hygiene. * At 10:59 A.M., HK#3 exited room [ROOM NUMBER] wearing the gloves and gown. She removed the gown, with the gloved hands, rolled the gown into a ball and placed the gown on a railing in the hallway. She then pushed her cart down the hallway, wearing the same gloves and without performing hand hygiene. * At 11:01 A.M., wearing the same gloves and without performing hand hygiene, HK#3 entered room [ROOM NUMBER], potentially contaminating the room environment and the resident in the room. A sign on the door of room [ROOM NUMBER] indicated that the resident was COVID-19 recovered. * At 11:07 A.M., HK#3 exited room [ROOM NUMBER], wearing the same gloves on each hand and without performing hand hygiene, and pushed her cart further up the hallway to room [ROOM NUMBER]. At a table across from room [ROOM NUMBER], HK#3 retrieved a pair of gloves from a box, potentially contaminating the box. Then without removing her first pair of gloves, and without performing hand hygiene, HK#3 placed another glove on each already gloved hands, potentially contaminating the gloves. She then entered room [ROOM NUMBER], with two gloves on each hand, potentially contaminating the room environment and resident. A sign on the door indicated that the resident in the room was COVID-19 negative. C. On 8/24/20 at 11:10 A.M., the surveyor arrived on the Capen unit and the following observations were made: * At 11:12 A.M., a housekeeper (HK#4) exited room [ROOM NUMBER], wearing a glove on each hand and carrying a bag of trash. She stopped just outside room [ROOM NUMBER] and instructed a resident, who was sitting in the hall, give me the trash. The resident placed her palm into the extended gloved hand of HK#4 and placed the tissue into HK#4's hand, potentially contaminating the hand of the resident. HK#4 then placed the bag of trash and tissue into her cart, removed her gloves and performed hand hygiene. She did not return to perform hand hygiene for the resident whose hand she had touched. During an interview with the Director of Nursing on 8/24/20 at 11:30 A.M., the surveyor shared the observations that had been made on each unit. The Director of Nursing said that all staff should be removing gloves before exiting a room and performing hand hygiene. Further the Director of Nursing said that it was never okay for housekeeping staff to go room to room wearing the same gloves, due to the risk of spreading pathogens. During an interview with the Infection Control Nurse on 8/24/20 at 11:35 A.M., she said that staff should never wear gloves on top of gloves and should never roll up a gown and place it on the corridor railing.</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.