

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER / SUPPLIER / CLIA IDENTIFICATION NUMBER 225273	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 07/15/2020
NAME OF PROVIDER OF SUPPLIER CARLETON-WILLARD VILLAGE RETIREMENT & NURSING CTR		STREET ADDRESS, CITY, STATE, ZIP 100 OLD BILLERICA ROAD BEDFORD, MA 01730	
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 - Few	Provide and implement an infection prevention and control program. Based on observation and interview, the facility failed to maintain an infection prevention and control program relative to the use of personal protective equipment (PPE) and proper hand hygiene, designed to provide a safe, sanitary and comfortable environment and to help prevent the development and transmission of communicable diseases and infections. Findings include: Review of the Centers for Disease Control and Prevention (CDC) website: Interim Infection Prevention and Control Recommendations for Healthcare Personnel (HCP) during Coronavirus Disease 2019 (COVID-19) Pandemic indicated the following: -Put on a clean isolation gown upon entry into the patient room or area. Change the gown if it becomes soiled. Remove and discard the gown in a dedicated container for waste or linen before leaving the patient room or care area. Disposable gowns should be discarded after use. Cloth gowns should be laundered after each use. Review of the CDC website for Standard Precautions indicate the following relative to hand hygiene: Perform hand hygiene in the following clinical situations: -Before having direct contact with patients. -After contact with inanimate objects (including medical equipment) in the immediate vicinity of the patient. -After removing gloves, wash hands with non-antimicrobial soap and water or with antimicrobial soap and water if contact with spores is likely to have occurred. During an observation on the Caswell Unit on 7/15/20 at 8:20 A.M., Certified Nursing Assistant (CNA) #1 was observed providing care of a resident in their room. She was wearing a disposable gown over a reusable gown while providing care. The disposable gown was removed by CNA #1 and placed on hook in the resident room. The CNA left the room wearing the reusable gown. During an interview at this time, CNA #1 said she puts the disposable gown on over the reusable gown when providing direct care to the resident and it remains in the resident's room during her shift. She said the disposable gown would be thrown out if it got dirty during care or it got ripped. She said she wears the same reusable gown for care of all patients on the unit, and takes the reusable gown off before exiting the unit. During an interview on 7/15/20 at 8:30 A.M., Nurse #1 said staff wear the same reusable gown while on the unit and apply a disposable gown when providing care to the residents. He said the disposable gown remains in the resident room and the staff wear the same disposable gown in the resident room throughout their assigned shift. During a tour of the Dementia Care Unit on 7/15/20 at 9:05 A.M., Nurse #2 was observed feeding a resident in their room. She was observed touching and adjusting her N95 facemask with her gloved hand while talking with the surveyor. She did not remove her gloves or mask, perform hand hygiene and obtain a new mask/gloves before continuing to feed the same resident. Nurse #2 said she wears her N95 mask, face shield, gloves and reusable when in a resident's room. She said if she provides direct patient care then she dons a disposable gown over her reusable gown. She said the disposable gown remains in the resident's room and she continues to wear the same reusable gown during her shift while on the unit. During an interview on 7/15/20 at 10:45 A.M., the Director of Nurses said it has been the facility practice to wear a disposable gown over the reusable gown when staff needs to provide direct resident contact and care. She also said Nurse #2 should have performed hand hygiene and donned a new N95 mask after she was adjusting her N95 mask with her gloved hand.		
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.