

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER / SUPPLIER / CLIA IDENTIFICATION NUMBER 135060	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 10/22/2020
NAME OF PROVIDER OF SUPPLIER CARIBOU MEMORIAL LIVING CENTER		STREET ADDRESS, CITY, STATE, ZIP 300 SOUTH THIRD WEST SODA SPRINGS, ID 83276	
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.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY**</p> <p>Based on observation, interview, and record review, the facility failed to ensure infection control policies and procedures were followed to prevent the transmission of communicable diseases, including COVID-19 (an infectious disease by a new virus causing respiratory illness, which can spread from person-to-person) when: 1) staff did not store masks properly between uses in the COVID-19 unit, and 2) staff failed to properly handle goggles after use in the COVID-19 unit. These failures increased the risk for spreading infection/s in the facility. Findings include: The facility policy entitled Universal COVID-19 PPE (personal protective equipment) Policy, dated 6/5/2020 indicated the purpose of the policy was to protect healthcare workers should they come in close contact with an individual with either pre-symptomatic or mild COVID-19 infection or who has that have not been recognized and/or provide for sustainability of PPE supply through appropriate donning (putting on) and doffing (taking off) protocols and storage practices for extended use and reuse. The policy also included the following, Extended use/reuse of masks for sustainability of supply .A mask needs to be in place at all times while in the facility. Masks that are worn while in the facility will remain in the facility and be stored in designated brown paper bag .Doffing Mask/N95 Respirator with Intent to Reuse .4. If the face mask/N95 respirator is NOT visibly soiled, torn, or saturated, carefully store in a supplied brown paper bag. Regarding goggles, the policy indicated under the section Donning PPE Following Care of Patients with Suspected or Confirmed COVID-19 that staff should Doff face shield/goggles. Carefully remove face shield/goggles by grabbing the strap and pulling upwards and away from the head. Do not touch the front of face shield/goggles . The policy did not address the disposal and/or disinfecting of goggles. The Centers for Disease Control and Prevention (CDC) recommendations for the storage of masks included, keep them in a clean, breathable container such as a paper bag between uses. To minimize potential cross-contamination, store respirators so that they do not touch each other and the person using the respirator is clearly identified. Storage containers should be disposed of or cleaned regularly. https://www.cdc.gov/niosh/topics/hwccontrols/recommendedguidanceextuse.html The CDC's recommendations for eye protection included, .Extended use of eye protection can be applied to disposable and reusable devices .Eye protection should be removed and reprocessed if it becomes visibly soiled or difficult to see through. If a disposable face shield is reprocessed, it should be dedicated to one HCP and reprocessed whenever it is visibly soiled or removed (e.g., when leaving the isolation area) prior to putting it back on. https://www.cdc.gov/coronavirus/2019-ncov/hcp/ppe-strategy/eye-protection.html The facility had a COVID-19 unit that had three residents who had tested positive for COVID-19. On 10/20/2020, observations were made in the COVID-19 unit. At approximately 11:00 AM, a nursing staff (NS2) was observed donning PPE and entered a resident room, while in the room a resident asked for a snack. NS1 brought a package of cookies to the door and dropped them into NS2's hand. NS2 continued to assist the resident before leaving the resident room. After removing a gown and gloves, NS2 stepped into the hallway and completed hand hygiene. NS2 then removed a pair of goggles (gel form padding around the outside) and set them on the table that was located in the hallway. NS2 then removed her ENVO mask and placed it on the table. NS2 picked up the surgical mask that was on the table and put the mask on. A few minutes later, NS2 sprayed the goggles with a disinfectant and then wiped them off. The goggles and the ENVO mask remained on the table. At 12:10 PM, NS2 picked up her ENVO mask and goggles and walked to the table next to the entrance of resident room [ROOM NUMBER]. NS2 removed her surgical mask and donned the ENVO mask and goggles. NS2 continued to don PPE and entered the room. After assisting the resident, NS2 removed her gown and gloves and then stepped into the hallway. After completing hand hygiene, NS2 removed the goggles and ENVO mask placing them on the table. NS2 then donned the surgical mask she had left on the table prior to entering the resident room. NS2 reported to NS1 that the resident appeared to be having pain. At approximately 12:25 PM, NS1 prepared to enter the resident's room with medication. NS1 removed her surgical mask and donned an ENVO mask. NS1 got a pair of goggles from the PPE kiosk and donned the goggles before continuing to don other PPE. After assisting the resident, NS1 exited the resident room and performed hand hygiene then removed the goggles and ENVO mask placing them on the table. NS1 re-donned the surgical mask. In the meantime, the Noon meal was delivered to the unit. NS2 removed her surgical mask and donned her ENVO mask and goggles that were on the table near resident room [ROOM NUMBER]. NS2 continued to don other PPE then she assisted both residents with their meal. At approximately 1:10 PM, NS1 was asked about the paper bags that were on a table in an alcove area. NS1 stated that was where staff stored their masks. NS1 explained that staff would put on a surgical mask when entering the facility and then once they got to the COVID unit they would don another surgical mask after placing the removed surgical mask in a paper bag. At the end of their shift staff would don the surgical mask they entered the building with. At the beginning of their shift staff would also get an ENVO mask, which they would wear into the isolation rooms. At 1:20 PM, NS1 approached resident room [ROOM NUMBER] indicating she was going to reposition a resident. NS1 removed her surgical mask, which she placed on the table. NS1 then donned an ENVO mask which was on the table. NS1 then donned a pair of disposable goggles that were also on the table. NS1 continue to don other PPE before entering the resident room. NS1 asked NS2 to help her assist a resident to the bathroom. NS2 approached room [ROOM NUMBER] with her ENVO mask and a pair of disposable goggles, which she placed on the table then removed her surgical mask and donned the ENVO mask and the goggles. At approximately 1:28 PM, after removing her gown, gloves and doing hand hygiene, NS1 removed the ENVO mask and disposable goggles placing them on the table. NS1 donned the surgical mask that had been left on the table previous to entering the resident room. At 2:30 PM, NS2 was asked about the cleaning of the ENVO masks. NS2 stated that the ENVO masks were cleaned at the end of each shift. NS2 demonstrated the way the filter can be removed from the mask, indicating that the filter was thrown away at the end of the shift then the mask was disinfected and placed in a case. NS2 stated that each staff member was given their own head piece (straps that hold the mask in place), which was to be stored in a paper bag at the end of the shift. Review of the Nursing Competency: Donning/Doffing for Reusable PPE sheet revealed under the Demonstrates appropriate doffing of PPE section the following was evaluated during the nurse competency: Goggles/face shield-Outside of goggles/face shield is contaminated>>handle by head band or ear pieces; place in appropriate waste container. Mask-Front of mask is contaminated>>do not touch!; Grasp bottom, then top ties/elastic & remove; Dispose of in appropriate waste container. Review of the Nursing Competency for the ENVO mask under section 6. Cleaning, Disinfecting, and Storing the Mask the following was to be evaluated during the competency check: Performs hand hygiene and demonstrates use of standard precautions; Disassembles mask per manufacturer's guidelines; Disposes of filter appropriately; Cleans and disinfects mask storage case using CMH-approved cleaning products per manufacturer's guidelines; Allow time for all parts to air dry per manufacturer's guidelines; Reassembles mask per manufacturer's guidelines including the placement of a new filter; Stores mask in clean storage case; and Performs hand hygiene and demonstrates use of standard precautions. During a phone interview with the Infection Preventionist (IP) on 10/21/2020 at 1:15 PM, the IP was asked about the ENVO masks competency and there being nothing regarding the cleaning of the ENVO mask. The IP stated that the cleaning of the mask was accidentally overlooked when the sheets were created. The observations of the nursing staff placing the masks on the tables between uses were explained and the IP was asked if that was the facility practice. The IP stated that she expects staff to</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>Level of harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>(continued... from page 1)</p> <p>store the mask in the paper bags between use. As for the goggles, the IP explained that the facility is getting low on their supply of disposable goggles so the staff need to disinfect the goggles for reuse.</p>		