

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER / SUPPLIER / CLIA IDENTIFICATION NUMBER 205070	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 08/11/2020
NAME OF PROVIDER OF SUPPLIER PINE POINT CENTER		STREET ADDRESS, CITY, STATE, ZIP 67 PINE POINT RD SCARBOROUGH, ME 04074	
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	<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 Interview and Record Review the facility failed to implement the United States Centers for Disease Control's (CDC) and Centers for Medicare and Medicaid Services' (CMS) COVID-19 Long-Term Care (LTC) Facility guidelines related to providing dedicated staff for a COVID-positive house in the LTC unit during 2 of 19 shifts. This could affect all residents on the long-term care unit (32 of 48 residents). Findings Include: On 8/6/2020, the Maine CDC reported an initial outbreak of 2 new cases of COVID-19 at Pine Point Center. During an Interview on 8/11/2020 at 8:00 AM, the Center Nurse Executive (CNE) stated that during universal testing of staff on 7/28/2020, two (2) asymptomatic Certified Nursing Assistants (CNAs) tested positive for COVID-19. On 8/4/2020 during universal testing of all residents, two (2) asymptomatic residents residing on Dunstan House tested positive. Dunstan House (1 of 3 Houses on the LTC unit) then became a quarantined House. The CNE indicated that staff is assigned/dedicated to Dunstan House to prevent re-entry into the LTC once staff has been on Dunstan House. In a follow up interview with the CNE on 8/12/2020 at 9:50 AM, he/she stated that if there isn't a licensed staff to work permanently throughout a shift, a Certified Nursing Assistant - Medications (CNA-M) is assigned to work on Dunstan House and the licensed staff enters the quarantined House near the end of his/her shift to address the residents' needs, then leaves the facility at the end of the shift through the exit door on Dunstan House. The CNE stated the staff do not enter re-enter the LTC unit. During an interview on 8/11/2020 at 9:22 AM, a Licensed Practical Nurse (LPN) stated he/she goes on Dunstan House (the COVID-19 positive house) 2-3 times a shift; it depends on what's going on and covers all 3 Houses on the long-term care (LTC) unit. The LPN stated in a later interview that this practice of covering the entire LTC unit does not happen all the time. At approximately 9:30 AM, a Registered Nurse (RN) began his/her shift on the LTC unit. The LPN then proceeded to Dunstan House and stated he/she would remain there until the end of the shift. The LPN confirmed he/she would not be re-entering to the other 2 houses on the LTC unit. Record Review on 8/11/2020 of the CDC Interim Infection Prevention and Control Recommendations for Healthcare Personnel During the Coronavirus Disease 2019 (COVID-19) Pandemic, dated 7/15/2020, indicated: 2. Recommended infection prevention and control (IPC) practices when caring for a patient with suspected or confirmed [DIAGNOSES REDACTED]-CoV-2 infection: As a measure to limit (Healthcare Personnel) HCP exposure and conserve PPE, facilities could consider designating entire units within the facility, with dedicated HCP, to care for patients with suspected or confirmed [DIAGNOSES REDACTED]-CoV-2 infection. Dedicated means that HCP are assigned to care only for these patients during their shift. Record Review of the Facility's Infection Control Process for Confirmed Cases 6-15-2020 indicated: 2. Unit-specific Transmission-Based Precautions in lieu of Center-wide Precautions may be considered when: . d. Unaffected (COVID nave) and affected units have been effectively isolated from all other units in the Center, including: I. Completely dedicated staff, equipment, work and break spaces, and toilets; . The Facility provided the surveyor with the staffing schedule from 8/4/2020 through 8/10/2020 and indicated if the assigned staff were dedicated to Dunstan House or shared throughout the LTC unit. The Record Review of the Facility's staffing schedule revealed licensed staffing covered all three houses, without a CNA-M, on the LTC unit: on 8/4/2020, the night shift and on 8/10/2020, the evening shift. During an interview with the Center Executive Director (CED) and the CNE on 8/11/2020 at 11:45 AM, the surveyor confirmed the findings.</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.