

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

PRINTED: 06/10/2020
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 345173	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 05/27/2020
NAME OF PROVIDER OR SUPPLIER EMERALD HEALTH & REHAB CENTER			STREET ADDRESS, CITY, STATE, ZIP CODE 54 RED MULBERRY WAY LILLINGTON, NC 27546	
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETION DATE
E 000	Initial Comments	E 000		
F 880 SS=D	<p>An unannounced COVID-19 Focused Survey was conducted on 5/27/2020. The facility was found in compliance with 42 CFR483.73 related to E-0024 (b)(6), Subpart-B-Requirements for Long Term Care Facilities. Event ID# BLHY11.</p> <p>Infection Prevention & Control CFR(s): 483.80(a)(1)(2)(4)(e)(f)</p> <p>§483.80 Infection Control The facility must establish and maintain an infection prevention and control program designed to provide a safe, sanitary and comfortable environment and to help prevent the development and transmission of communicable diseases and infections.</p> <p>§483.80(a) Infection prevention and control program. The facility must establish an infection prevention and control program (IPCP) that must include, at a minimum, the following elements:</p> <p>§483.80(a)(1) A system for preventing, identifying, reporting, investigating, and controlling infections and communicable diseases for all residents, staff, volunteers, visitors, and other individuals providing services under a contractual arrangement based upon the facility assessment conducted according to §483.70(e) and following accepted national standards;</p> <p>§483.80(a)(2) Written standards, policies, and procedures for the program, which must include, but are not limited to: (i) A system of surveillance designed to identify possible communicable diseases or infections before they can spread to other</p>	F 880		

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

Electronically Signed

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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F 880	<p>Continued From page 1</p> <p>persons in the facility;</p> <p>(ii) When and to whom possible incidents of communicable disease or infections should be reported;</p> <p>(iii) Standard and transmission-based precautions to be followed to prevent spread of infections;</p> <p>(iv) When and how isolation should be used for a resident; including but not limited to:</p> <p>(A) The type and duration of the isolation, depending upon the infectious agent or organism involved, and</p> <p>(B) A requirement that the isolation should be the least restrictive possible for the resident under the circumstances.</p> <p>(v) The circumstances under which the facility must prohibit employees with a communicable disease or infected skin lesions from direct contact with residents or their food, if direct contact will transmit the disease; and</p> <p>(vi) The hand hygiene procedures to be followed by staff involved in direct resident contact.</p> <p>§483.80(a)(4) A system for recording incidents identified under the facility's IPCP and the corrective actions taken by the facility.</p> <p>§483.80(e) Linens. Personnel must handle, store, process, and transport linens so as to prevent the spread of infection.</p> <p>§483.80(f) Annual review. The facility will conduct an annual review of its IPCP and update their program, as necessary. This REQUIREMENT is not met as evidenced by: Based on observation, staff interviews and review of facility guidelines titled "Recommended use of personal protective equipment (PPE) for</p>	F 880			

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F 880	<p>Continued From page 2</p> <p>health care settings", the facility failed to implement infection control measures when three of three dietary workers were observed wearing face masks that did not cover their noses while they were in the kitchen. This failure occurred during the COVID-19 pandemic.</p> <p>The findings included:</p> <p>The facility guideline, received from the corporate office, titled "Recommended use of personal protective equipment (PPE) for health care settings" with an effective date of 04/06/20 specified; "All employees should wear face protection/mask while at work for their entire shift."</p> <p>On a tour of the facility on 5/26/2020 at 8:35 AM, an observation was made of Dietary aide #1 at the door to the kitchen wearing a face mask that was not covering her nose. Upon closer observation, two other dietary workers (Cook #1 and Dietary Aide #2) were observed in the kitchen wearing face masks that did not cover their noses.</p> <p>Upon entrance to the kitchen on 5/26/2020 at 8:40 AM, Cook #1 was observed wearing a face mask that was positioned below her nose. Cook #1 stated she had watched a video on wearing masks and knew she was supposed to wear a mask that covered her mouth and nose. Cook stated, "I get so hot, sometimes I feel like I can't breathe."</p> <p>During an interview with Dietary Aide #1 on 5/26/2020 at 8:50 AM she stated she had watched the video about wearing masks and knew she was supposed to wear her mask over</p>	F 880			

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F 880	<p>Continued From page 3</p> <p>her mouth and nose. Dietary Aide #1 said that it bothered her to wear it over her nose because it was so hot in the kitchen.</p> <p>On 5/26/2020 at 9:15 AM, Dietary Aide #2 was interviewed and stated she had watched the video about wearing masks and knew she was supposed to have the mask covering her mouth and nose. Dietary Aide #2 explained that it was hot and steamy in the kitchen, so she pulled it down below her nose.</p> <p>In an interview at 2:50 PM on 5/26/2020, the Director of Nursing (DON) indicated the facility used a system of education that included staff viewing videos. The DON stated the kitchen staff had watched a video for wearing an N-95 face mask, but that all the facility's trainings on how to properly wear a face mask showed the face mask covering the person's mouth and nose. The DON noted infection control rounds were done daily and staff were monitored for wearing PPE correctly.</p>	F 880			