

Sent via email 02/11/22

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL001023	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED R 11/03/2021
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NAME OF PROVIDER OR SUPPLIER BLAKEY HALL	STREET ADDRESS, CITY, STATE, ZIP CODE 501 NORTH MANNING AVENUE ELON, NC 27244
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D 000	Initial Comments The Adult Care Licensure Section conducted an annual and follow-up survey on 11/02/21 to 11/03/21.	D 000		
D 612	10A NCAC 13F .1801 (c) Infection Prevention & Control Program (temp) 10A NCAC 13F .1801 INFECTION PREVENTION AND CONTROL PROGRAM (c) When a communicable disease outbreak has been identified at the facility or there is an emerging infectious disease threat, the facility shall ensure implementation of the facility's IPCP, related policies and procedures, and published guidance issued by the CDC; however, if guidance or directives specific to the communicable disease outbreak or emerging infectious disease threat have been issued in writing by the NCDHHS or local health department, the specific guidance or directives shall be implemented by the facility. This Rule is not met as evidenced by: Based on observations, record reviews, and interviews, the facility failed to ensure recommendations and guidance established by the Centers for Disease Control (CDC), and the North Carolina Department of Health and Human Services (NC DHHS) were implemented and maintained to provide protection of the residents during the global coronavirus (COVID-19) pandemic as related to use of personal protective equipment (PPE) face masks by staff to reduce the risk of transmission and infection and screening all visitors. The findings are:	D 612	Following state survey facility immediately implemented screening tool for all who enter and visit. These tools were put in both Assisted Living as well as ^{as well} as as well as ^{as well} dementia building. Mask notices have been put up and all management has been instructed to ensure staff wear masks in accordance to CDC & DHHS regulations. All staff received a training memo to ensure all staff are aware	

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE: *[Signature]* TITLE: *Exec Director* (X6) DATE: *11-18-21*

Acknowledged and accepted with addendum on 02/11/22 KHH

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D 612	<p>Continued From page 1</p> <p>Review of the NC DHHS infection Prevention Guidance dated 10/14/21 revealed NC DHHS continues to recommend facilities, residents, and families adhere to the core principles of COVID-19 infection prevention, including staff wearing surgical face masks when providing care services to the residents and screening outside visitors.</p> <p>1. Review of the NC DHHS guidelines dated 05/06/21 revealed: -Everyone who enters a healthcare facility shall be screened for signs and symptoms of COVID-19 by temperature checks, screening questions and observations of signs and symptoms. -Establish a process to ensure visitors entering the facility were assessed for symptoms of COVID-19 and temperatures were checked.</p> <p>Review of the facility's infection control policy revealed: -Restrictions required facility staff to self-screen and report signs and symptoms to the supervisor. -The policy did not address a screening process related to COVID-19 and visitors. -There was no policy regarding the process to screen visitors.</p> <p>Observation on 11/02/21 at 8:55am revealed: -There was an 8.5 x 11 inch sign posted on the front door of the facility. -The sign read "If fully vaccinated, face mask was not required." -Upon entering the main door to the facility there was a foyer area. -There were no screening stations or COVID-19 questionnaires set-up in the foyer area. -There was a second door in the foyer area that</p>	D 612	<p><i>of the expectation and regulation.</i></p> <p><i>Ed Weeks</i> <i>Exec. Director</i></p> <p>Addendum 02/11/22 at 4:52pm: The ED and the Resident Care Director (RCD) will monitor daily to ensure everyone entering the facility is screened and ensure staff are wearing the required PPE. Per telephone conversation with ED-Edward Weeks. KHH</p>	11-15-21

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D 612	<p>Continued From page 2</p> <p>was the main entrance to the facility.</p> <ul style="list-style-type: none"> -Upon entering the facility immediately attached to the left side of the wall, there was an electronic thermometer. -The business office staff was wearing a face mask. -The business office staff asked the surveyors to check their temperatures. -There was no place to log the temperature. -Surveyors were not screened or asked any questions regarding COVID-19 symptoms, contact with COVID-19 or COVID-19 testing. <p>Interview with the business office staff on 11/02/21 at 8:59am revealed:</p> <ul style="list-style-type: none"> -The facility required visitors to check their temperatures. -Temperatures were not documented. -Visitors were not screened, just their temperature checked. <p>Interview with the Administrator on 11/02/21 at 10:23am revealed:</p> <ul style="list-style-type: none"> -He was not aware of the NC DHHS guidelines. -There were so many guidelines, he was not sure which was accurate. -He would immediately put a system in place to screen all visitors according to NC DHHS guidelines. <p>2. Review of CDC revised guidelines dated 06/03/21 revealed:</p> <ul style="list-style-type: none"> -All staff regardless of their vaccination status should wear a face mask. -Universal PPE should still be worn by staff when doing resident care activities, essentially any time staff is with a resident. <p>Review of the NC DHHS guidelines dated 05/06/21 revealed:</p>	D 612		

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D 612	<p>Continued From page 3</p> <ul style="list-style-type: none"> -All facility staff, unvaccinated and fully vaccinated, still need to wear appropriate PPE when providing patient care. -Facility staff should wear source control (surgical face mask) while at work. <p>Review of the facility's infection control policy revealed:</p> <ul style="list-style-type: none"> -Restrictions required facility staff to self-screen and report signs and symptoms to the supervisor. -If staff had a fever, respiratory symptoms, or other symptoms they would be instructed to put on a face mask. -Staff were always to wear face masks for source control while in the facility until all symptoms were completely resolved or at baseline. -Based on the policy staff were not required to wear a face mask at all times when providing care for residents, which was in accordance with NC DHHS guidelines. <p>a. Observation upon entrance to the facility on 11/02/21 at 8:55am revealed:</p> <ul style="list-style-type: none"> -There were two staff (medication aide (MA) and Resident Care Coordinator (RCC)) standing near the reception desk. -Neither of the staff were wearing face masks. -The RCC was informed that according to NC DHHS and CDC guidelines all staff had to wear a face mask regardless of vaccination status. <p>Observation of the facility's storage area on 11/03/21 at 1:40pm revealed there were 18 cases of surgical masks with 2000 masks per case.</p> <p>Interview with the RCC on 11/02/21 at 9:04am revealed:</p> <ul style="list-style-type: none"> -Staff had been instructed if they were fully vaccinated, they(staff) did not have to wear face mask. 	D 612		
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D 612	<p>Continued From page 4</p> <ul style="list-style-type: none"> -Her instructions came from the Administrator. -Staff had to wear a face mask if they were not fully vaccinated. -Once staff were vaccinated, they were not required to wear a face mask. <p>Interview with a personal care aide (PCA) on 11/03/21 at 12:30pm revealed:</p> <ul style="list-style-type: none"> -She had worked at the facility since March 2021 and had never put on a face mask. -No one at the facility told her to wear a face mask until yesterday after the surveyors arrived. -She did not wear a face mask because the sign posted on the front door of the facility read, "If you are fully-vaccinated a face mask was not needed." <p>Interview with the RCC on 11/03/21 at 12:43pm revealed:</p> <ul style="list-style-type: none"> -It was her understanding if a staff person was fully vaccinated, then staff did not have to wear a face mask. -She got her directions from the Administrator. -Staff did put on full PPE when entering a resident's room who had tested positive for COVID-19. -As of 02/17/21, all residents and most staff had received their second vaccine. -Two weeks after the last vaccine, staff were informed they did not have to wear a face mask. <p>Interview with a PCA on 11/03/21 at 2:00pm revealed:</p> <ul style="list-style-type: none"> -She had worked at the facility for almost 90 days. -When she first started working at the facility, she was told to wear a face mask because she was not fully vaccinated. -After she received her second vaccine, she was told that she did not have to wear a face mask. 	D 612		

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D 612	<p>Continued From page 5</p> <p>-Also, she stopped wearing a face mask because there was a sign posted on the front door which read, "if you were fully vaccinated, then you did not have to wear a face mask." -Yesterday (11/02/21), after the surveyors arrived, she was told to put on a face mask. -Prior to 11/02/21, no one had told her to wear a face mask.</p> <p>Interview with the Administrator on 11/03/21 at 1:20pm revealed: -Prior to being tested staff wore full PPE. -Most and all residents had received their second vaccine in February 2021. -Two weeks after the second vaccine, he informed staff they no longer had to wear full PPE. -He thought there was some confusion with staff thinking not wearing full PPE included a face mask. -Staff were still required to wear a face mask. -If he saw a staff without a face mask, then he instructed them to put a face mask on. -He did not know who posted the sign on the front door of the facility.</p> <p>b. Observations throughout the facility on 11/02/21 at various times revealed: -At 9:05am staff in the dining room was not wearing a face mask. -At 9:06am the Maintenance Director was not wearing a face mask while inside the facility. -At 9:19am the MA in the Special Care Unit (SCU) was not wearing a face mask. -At 9:32am the PCA in the SCU was not wearing a face mask. -At 11:50am the same PCA in the SCU was assisting a resident in the bathroom and was wearing a face mask below her chin. -At 12:38pm a MA in the Assisted Living (AL) Unit</p>	D 612		

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D 612	<p>Continued From page 6</p> <p>was wearing a face mask below her nose.</p> <p>Observations throughout the facility on 11/03/21 at various times revealed:</p> <ul style="list-style-type: none"> -At 7:06am a MA in the AL area was not wearing a face mask. -At 7:41am a second MA in the AL area (the same MA who was observed on 11/02/21) was wearing a face mask below her chin. -At 8:37am the MA in the SCU (who was observed on 11/02/21) was not wearing a face mask. -At 9:01am the assistant Activity Director (AD) in the SCU was wearing a facemask below her chin. -At 10:47am the PCA in the SCU (who was observed on 11/02/21) was wearing a face mask below her chin. -At 12:30pm the RCC was wearing a face mask below her chin. -At 1:44pm the second MA in the AL unit was wearing a face mask below her nose. <p>Interview with a resident in the SCU on 11/02/21 at 9:42am revealed staff did not wear face masks at all times when they were inside the facility</p> <p>Interview with the Special Care Coordinator (SCC) on 11/02/21 at 10:12am revealed:</p> <ul style="list-style-type: none"> -She was wearing a cloth face mask. -The Administrator said staff were allowed to wear cloth face masks. -Surgical face masks were available for staff use. <p>Interview with the SCC on 11/03/21 at 9:48am revealed:</p> <ul style="list-style-type: none"> -The SCU experienced a COVID-19 outbreak in September 2020. -Sixteen residents and multiple staff tested positive for COVID-19. -Staff "never stopped" wearing face masks in the 	D 612		

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D 612	<p>Continued From page 7</p> <p>SCU.</p> <p>Interview with the MA in the SCU on 11/03/21 at 10:00am revealed:</p> <ul style="list-style-type: none"> -Staff were supposed to wear face masks whenever they were within six feet of a resident. -Staff were supposed to wear face masks whenever "anyone who's not an employee" came into the building. -She "just forgot" to put on a face mask when the surveyor entered the SCU. -The SCC told staff they did not need to wear a face mask in the facility if they were fully vaccinated. -After she was fully vaccinated in April 2021, she stopped wearing a face mask in the facility. <p>Interview with the PCA in the SCU on 11/03/21 at 1:24pm revealed:</p> <ul style="list-style-type: none"> -She started working at the facility in June 2021. -In June 2021, the SCC told her staff were supposed to wear face masks whenever "outsiders" came into the facility. -She wore the face mask below her chin when she was taking a "breathing break." <p>Interview with the assistant AD on 11/03/21 at 1:28pm revealed:</p> <ul style="list-style-type: none"> -Staff were not instructed to wear face masks at all times. -Staff were required to wear face masks when non-employees came into the facility. -The Administrator provided the instruction on face mask use a while ago after "things were calming down" following the outbreak. -All the residents and staff were vaccinated. -She was informed "maybe in late spring 2021 by word of mouth" that fully vaccinated staff were not required to wear face masks in the facility. 	D 612		

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D 612	<p>Continued From page 8</p> <p>Interview with a MA in the AL on 11/03/21 at 1:44pm revealed:</p> <ul style="list-style-type: none"> -There was a sign on the entry door of the facility indicating face masks were not required if an individual was fully vaccinated. -The sign was intended for both staff and visitors. -She did not know when the sign was initially posted at the entrance to the facility. -She had worn a face mask since the COVID-19 pandemic had begun. -Face masks were supposed to cover the nose, mouth, and chin. -She wore her face mask in the appropriate way whenever she was in a resident's room or around the residents. -She pulled her face mask down when she was not around anyone. -When the COVID-19 pandemic began, staff received training on the proper use of PPE. -In 2020, staff were provided with written information on face mask use. -Signs about using PPE were posted in the facility in 2020. -She preferred to wear a face mask when she was in the facility. 	D 612		
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