

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER / SUPPLIER / CLIA IDENTIFICATION NUMBER 115463	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 08/14/2020
NAME OF PROVIDER OF SUPPLIER WESTBURY MCDONOUGH, LLC		STREET ADDRESS, CITY, STATE, ZIP 198 HAMPTON STREET MCDONOUGH, GA 30253	
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, review of training records and review of facility policies, the facility failed to ensure required transmission-based precautions were implemented to prevent the spread of Coronavirus (COVID)-19 on two of four halls. Two of seven housekeeping (HK) staff (HK AA and HK BB) failed to adhere to the Environmental Protection Agency (EPA)-registered disinfectant contact-time (kill time) instructions when cleaning residents' rooms. The contact-time was the amount of time required for the chemical to remain on the environmental surface being cleaned, in order to breakdown all membranes that surround bacteria [MEDICAL CONDITION]. This failure affected 43 resident rooms, which housed 51 residents on (NAME) and McDonough Halls. Findings include: Review of the facility's Coronavirus Surveillance policy revised 4/28/2020 noted, 8. The infection Preventionist, or designee, will track the following information: . f. Employee compliance with cleaning and disinfecting policies and procedures. Review of the facility's Novel Coronavirus Prevention and Response plan revised 5/1/2020 noted for Environmental infection control: c. Perform routine and terminal cleaning using disinfectants known to be effective against emerging [MEDICAL CONDITION] pathogens or novel coronavirus [DIAGNOSES REDACTED]-CoV-2 (EPA List N agent). Review of the facility's untitled policy dated 3/10/2020 noted: Policy Statement: It is the policy of (the facility's) Administrative Services to initiate the appropriate measures to protect our patients/residents, employees and families from risks associated with the Coronavirus (COVID-19) through mitigation and educational tools, utilizing resources as provided by the Department of Public Health and the Centers for Disease Control . Designated Environmental Services staff will complete daily room and bathroom cleaning of frequently touched items. Cleaning solutions are discarded after use. Terminal room cleaning is done routinely by trained and supervised staff. Review of information obtained on 8/17/2020 from www.epa.gov (Environmental Protection Agency (EPA) website) noted when disinfecting surfaces, staff must follow the contact time listed on the product's label. The contact time is, the amount of time the surface should be visibly wet in order to breakdown all membranes that surround bacteria [MEDICAL CONDITION]. According to the EPA's website, Lysol Disinfectant Spray (EPA Reg No. 777-99) has a contact time of three minutes. Observation on the (NAME) Hall with the Administrator present on 8/13/2020 at 11:07 a.m. revealed the door to Resident (R) #1's room was closed and a cart with personal protective equipment (PPE) was set up outside of the room. There was signage on R#1's door that noted contact and droplet precautions were necessary for entering this room. Interview with the Administrator at this time, confirmed R#1 was positive for COVID-19. Continued observation revealed there were eight COVID-19 positive residents who resided on (NAME) Hall. Observation on 8/13/2020 at 11:20 a.m. on McDonough Hall revealed there were three COVID-19 positive residents who resided on the hall. During an interview on 8/13/2020 at 10:19 a.m., the Administrator indicated not being sure which disinfectant housekeeping staff used to clean environmental surfaces in residents' rooms; however, stated the information could be pulled. The Administrator said there were four halls in the facility: 1) Heritage Hall (Secured Unit which had no resident cases of confirmed or suspected COVID-19); 2) McDonough Hall; (which housed three residents positive for COVID-19); 3) (NAME) Hall (which housed five residents positive for COVID-19); and 4) Westbury Hall (which housed eight confirmed resident cases of COVID-19 and two suspected cases). Interview on 8/13/2020 at 11:10 a.m. with HK AA revealed the housekeeper was responsible for cleaning resident rooms on (NAME) Hall. When asked about the disinfectant cleaner used to clean the environmental surfaces in residents' rooms, HK AA said housekeeping staff had recently started using new disinfectants. HK AA said she now used Lysol Foaming Spray which had a kill time of ten minutes and Lysol Disinfectant Spray which had a kill time of five (5) seconds. When asked for clarification about the five second kill time, HK AA said housekeeping staff were trained to do (five) 5 seconds (for the Lysol Disinfectant Spray) and ten minutes for the Lysol Foam cleaner. When the Surveyor asked to take a look at the instructions on the foam cleaner and disinfectant spray bottles, the Surveyor confirmed with HK AA the kill time for the Lysol Foam Spray was ten minutes and the kill time for the Lysol Disinfectant Spray was three minutes. HK AA stated that the previous disinfectant used by housekeeping staff was also five seconds and informed the Surveyor that disinfectant spray was still on her cart. The Surveyor asked to take a look at the instructions listed on the previously used disinfectant and noted [MEDICATION NAME] Disinfectant Spray was the chemical previously used. HK AA and Surveyor read the instruction on the [MEDICATION NAME] Disinfectant Spray bottle which noted a ten-minute kill time. HK AA confirmed that when she used the [MEDICATION NAME] Disinfectant Spray, the housekeeper left the chemical on environmental surfaces for five seconds before wiping the surface off. During an interview on 8/13/2020 at 11:29 a.m. the Environmental Service Director (ESD) confirmed that staff were to use Lysol products for the disinfecting of residents' rooms. The ESD said the kill time for the Lysol Foam Spray was ten minutes and the kill time for the Lysol Disinfectant Spray was three minutes. Interview on 8/13/2020 at 11:35 a.m. with HK BB with the ESD present revealed that this housekeeper used the disinfectant spray products to clean residents' room on McDonough Hall. HK BB said the kill time for the Lysol Disinfectant Spray was one minute and the kill time for the Lysol Foam Spray was ten minutes. HK BB said that when cleaning residents' rooms who had confirmed cases of COVID-19, she sprayed the rag first and then wiped down the environmental surfaces in the room. HK BB said /she did it this way in COVID-19 positive rooms so that the spray did not affect the residents' breathing. HK BB said there were three (3) rooms on McDonough Hall that housed residents confirmed positive for COVID-19. HK BB said those rooms were cleaned last. During a follow-up interview on 8/13/2020 at 11:40 a.m. the ESD said that housekeeping staff required more education regarding the proper use of disinfectant sprays and cleaning environmental surfaces in residents' rooms. The ESD confirmed that housekeeping staff should not be spraying a rag, but should be spraying the actual surface and then waiting the kill time before wiping down the surface. The ESD confirmed that the previous disinfectant used by housekeeping staff, [MEDICATION NAME], also had a ten minute kill time. Review of Education In-services revealed HK AA and HK BB received training as follows: 3/14/2020 - Disinfecting Areas and Contact (Kill) Time 6/29/2020 - Contact (Kill) Time 8/4/2020 - Decontamination Procedures</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.