

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER / SUPPLIER / CLIA IDENTIFICATION NUMBER <b>225720</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED <b>08/04/2020</b>
NAME OF PROVIDER OF SUPPLIER <b>CARE ONE AT MILLBURY</b>		STREET ADDRESS, CITY, STATE, ZIP <b>312 MILLBURY AVENUE MILLBURY, MA 01527</b>	
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  <b>Level of harm</b> - Minimal harm or potential for actual harm  <b>Residents Affected</b> - Some	<p><b>Provide and implement an infection prevention and control program.</b></p> <p>Based on observation, record review, and interview, the facility failed to implement transmission-based precautions to prevent the transmission of Coronavirus (COVID-19), in relation to proper use of Personal Protective Equipment (PPE), on 2 out of 3 units. Findings include: Review of the Centers for Disease Control and Prevention (CDC) guidance for healthcare workers titled Interim Infection Prevention and Control Recommendations for Healthcare Personnel (HCP) During the Coronavirus Disease 2019 (COVID-19) Pandemic, updated 7/15/20, indicated the following: -HCP should wear a facemask at all times while they are in the healthcare facility, including in breakrooms or other spaces where they might encounter co-workers. Review of the CDC guidance for healthcare workers, titled Using Personal Protective Equipment, updated 7/14/20, indicated the following: -Respirator/facemask should be extended under chin. Both your mouth and nose should be protected. Do not wear respirator/facemask under your chin. Review of the facility policy titled Coronavirus Disease (COVID-19) Infection Prevention and Control Measures, edited 5/19/20, indicated the following: -Staff should wear a facemask at all times when in the facility. 1. On the (NAME)Unit, the facility failed to implement transmission-based precautions on the unit for A. Resident #1 and B. in the rehabilitation gym. A.) Resident #1 was admitted from an acute care hospital to the (NAME)Unit at the facility in July of 2020. During a facility tour on 8/4/20, between 11:30 A.M. and 12:15 P.M., the Infection Preventionist said that the (NAME)Unit was dedicated as a quarantine unit. She said this was the unit where residents were admitted from the hospital and that signage on the resident doors indicated the PPE required for use when staff entered the room. Review of the record and signage on the resident's door indicated he/she was on isolation and full PPE was required for all tasks and anytime the room was entered. The picture image for the facemask indicated proper positioning as over the mouth and nose. During an observation on 8/4/20 at 12:20 P.M., Therapist #1 conversed with Resident #1 in the resident's room. The resident sat in the bedside chair and faced the therapist who stood in front of him/her. The therapist's facemask was positioned around her chin, so that her mouth and nose were exposed while she talked. During an interview at 1:15 P.M., Therapist #1 said that the use of facemasks was required for staff on the unit and when in resident rooms. She also said that her facemask should have been positioned over her mouth and nose when she interacted with Resident #1. B.) During an observation made of the rehabilitation gym by two surveyors on 8/4/20 at 12:38 P.M., one therapist stood at the countertop without a facemask while another therapist sat at the table behind her, without a facemask, and ate lunch. During an interview on 8/4/20 at 1:20 P.M., the acting Director of Rehabilitation said that therapists were required to wear a facemask at all times while in the facility, but that they removed their masks at times when in the rehabilitation gym, when they needed to breathe or take a break. 2. On the Shrewsbury Unit, the facility failed to implement transmission-based precautions in relation to proper facemask use. During the facility tour on 8/4/20 between 11:45 A.M. and 12:15 P.M., two surveyors observed a Certified Nursing Assistant (CNA) who stood at the nurse's station, her facemask positioned with her nose exposed. Two other staff members stood immediately adjacent to the CNA; one to her left, and one to her right side, while another staff member sat at the nurse's station and faced the CNA. The surveyors brought this to the attention of the Infection Preventionist who then counseled the CNA on proper facemask use. During interviews on 8/4/20 at 12:02 P.M. and 2:50 P.M., the Infection Preventionist said that facility staff was always required to wear facemasks. She said that Therapist #1 should have worn her mask over her mouth and nose while she talked to Resident #1, and that the therapist who did not wear a facemask should have worn one while the other therapist ate in the rehabilitation gym. She further said the expectation in a break room was to wear a mask at all times, except when eating. The Infection Preventionist said that the CNA on the Shrewsbury Unit whose nose was exposed should have positioned the facemask over her nose, as required.</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.