

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER / SUPPLIER / CLIA IDENTIFICATION NUMBER 315504	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 06/18/2020
NAME OF PROVIDER OF SUPPLIER WEDGWOOD GARDENS CARE CENTER		STREET ADDRESS, CITY, STATE, ZIP 3419 HIGHWAY 9 FREEHOLD, NJ 07728	
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. **NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on observation, interview, record review, and review of pertinent facility documentation, it was determined that the facility failed to a.) appropriately monitor the screening process of visitors into the facility related to their exposure of COVID-19, and b.) monitor the disinfecting and cleaning process of multi-use equipment used by staff and visitors upon entering the facility. This deficient practice was identified when the surveyors entered the facility to conduct a COVID-19 focused infection control survey and was evidenced by the following: On 06/18/2020 at 8:35 AM, surveyor #1 and surveyor #2 approached the entrance door of the facility and observed a sign on the door that revealed the facility had one COVID-19 positive resident. Another posted sign revealed Transporters and Physicians were to have their temperature taken, complete a questionnaire, and always wear a mask while inside the building. The surveyors observed an additional sign posted on the entrance door that indicated that visitor restrictions were in place. The front doors were locked, and a staff member had to let the surveyors enter. Upon entrance to the facility, the surveyors observed a hand sanitizer dispenser attached to the wall frame next to the front desk. A glass partition was observed around the receptionist desk. There were two handheld computer tablets sitting on the counter with an infrared no touch thermometer between them and a container of hand wipes. The surveyors did not observe instructions at the receptionist desk on when or how to wipe down the tablets and infrared thermometer after using them. The surveyors observed a sign posted above the tablet which indicated, To sign in for visitors: 1. Tap the screen If device is offline and a message shows, press confirm to continue. (Information will still be registered) 2. Hit the 'Sign In' button on the screen. 3. Press the button that says 'Visitors'. 4. Please fill out all of the information that is asked. It will not let you continue until you have filled out every piece of information. When you are done, press the green 'Continue' button. 5. Another screen will show up advising you to social distance and other safety precautions during this time. Press the green 'Continue' button. 6. Now it is going to take a picture so we know who you are. Once you get a good picture, press the green 'Continue' button. At this time, you will be signed in. The surveyors observed an additional sign above the tablet that revealed staff was to 1. Tap the screen, 2. Hit the sign in button, 3. Press the button that says staff, 4. Scroll until you find your last name, 5. Press the button with your name and take your temperature and answer questions, 6. Press continue and 7. Another screen will show up advising you to social distance and other safety precautions. Press the continue button. At this time, you will be signed in and can start your shift. The receptionist explained that the surveyors were to sign in on the tablet and take their own temperatures by holding the infrared no touch thermometer close to, but not touching, their foreheads. The receptionist then turned her back to the surveyors as they signed-in and obtained their temperatures. Surveyor #1 observed Surveyor #2 use the tablet. Surveyor #2 entered her name and indicated that she was a visitor from the New Jersey Department of Health. The tablet prompted Surveyor #2 to take her temperature. As Surveyor #2 was taking her temperature with the infrared thermometer, Surveyor #1 observed that the tablet returned to its home screen icon. Surveyor #2 observed that the tablet did not prompt her to answer questions regarding symptoms or exposure to COVID-19. Surveyor #1 pressed the tablet to begin. She entered her name, took her temperature, and then entered the recorded temperature into the tablet. Surveyor #1 was then prompted to answer questions regarding symptoms of COVID-19 and exposure to [MEDICAL CONDITION]. The tablet then took a picture of Surveyor #1 and then returned to the home screen icon. The Director of Nursing (DON) and Director of Administrative Services (DOAS) arrived at the receptionist desk as Surveyor #1 had finished entering her information into the tablet. Surveyor #2 explained to the DON and the DOAS that the tablet did not prompt her to answer questions regarding symptoms or exposure to COVID-19. The DOAS stated the tablets were a new system that were put into place on Tuesday, 06/17/20, two days earlier. Surveyor #2 then re-entered her information into the visitor screen on the tablet, at which time, the tablet prompted to answer questions related to exposure and signs and symptoms of COVID-19. The tablet then took a picture of Surveyor #2 upon completion of the questionnaire. Surveyor #2 asked the DOAS how the facility was monitoring that the staff and visitors were appropriately being screened and filling out the information on the tablet in its entirety. The DOAS stated she would monitor the visitor entries by running a report every two hours. The receptionist stated that she kind of watches visitors checking in on the tablets and can check their answers by pulling the information up on her computer. The receptionist further stated that the process to clean the tablets and infrared thermometer was that the hand wipes were available if someone wanted to wipe them down. The receptionist did not speak to monitoring the cleaning of the equipment in between usage. During an interview with Surveyor #2 on 06/18/2020 at 1:37 PM, the Registered Nurse/Unit Manager (RN/UM) stated that when she entered the building, she would sanitize her hands, wipe down the infrared thermometer with a purple top wipe, take her temperature, wipe down the infrared thermometer again, log-in to the tablet, and then answer a series of questions. The RN/UM stated that the questions that she had to answer were very specific such as if she was dizzy, had shortness of breath, difficulty breathing, and if she had exposure to an individual who was COVID-19 positive. Surveyor #2 asked the RN/UM what kind of wipes she used to wipe down the thermometer. The RN/UM stated that she thought that maybe they were sani-wipes but was unsure. The surveyor asked the RN/UM who monitored her responses and the RN/UM stated, I would imagine the nurse educator. The RN/UM further stated that when she entered the facility there usually wasn't anyone there monitoring her responses, but she knew that if she had a fever or signs and symptoms of [MEDICAL CONDITION], she would not enter the facility. During an interview with Surveyor #1 on 06/18/2020 at 1:38 PM, the Certified Nursing Aide (CNA) stated the process upon entering the building was that she would clean the thermometer, login to the tablet and answer questions. She stated she did not know who monitored the information, but the supervisor was usually there. The CNA stated the staff would use the wipes in the purple top container but could not state what the cleaner was. During an interview with Surveyor #1 on 06/18/2020 at 1:42 PM, the porter staff member stated that the process upon entering the building was that he would sign in on the tablet, take his temperature, enter that information, and then wipe off the tablet and thermometer with the cleaner. During an interview with Surveyor #2 on 06/18/2020 at 1:42 PM, the Rehab Technician (RT) stated that he entered the facility at all different times to work. He stated he would press the staff log-in button and then answer all the questions. The RT stated that he also had to take his temperature and knew that if he had a temperature over 99.0 degrees Fahrenheit or above, he wasn't allowed to enter the facility and work. The RT stated that when he arrived at the facility there was usually a staff member at the front desk, such as human resource personnel, the receptionist or the DON. The RT did not speak to cleaning of the thermometer or tablet after he was done using them. The DOAS provided the surveyors with the facility log of visitor sign-in from the morning of 06/18/2020. The log revealed that Surveyor #2's second entry information was included on the report, but not Surveyor #1's information. The DOAS confirmed that Surveyor #1's information was not recorded on the entry form and there was no record of Surveyor #1 entering the facility. During an interview with the surveyors on 06/18/2020 at 2:20 PM, the Assistant Administrator stated there was a sign at the reception desk that instructed everyone to wipe off the infrared no touch thermometer. Surveyor #1, the Assistant Administrator and DOAS went to the reception desk. The Assistant Administrator and DOAS confirmed that there was no sign that instructed staff or visitors to disinfect the infrared thermometer between uses. During an interview with the surveyors on 06/18/2020</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.

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<p>F 0880</p> <p>Level of harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>(continued... from page 1)</p> <p>at 2:45 PM, the DOAS stated that she would monitor the logs every two hours for high temperature over 99 degrees, cough or symptoms of COVID. The DOAS stated it was important to monitor and capture everyone entering the facility so we don't spread the infection. Review of the undated facility policy titled, Staff & Visitor Sign into the facility during COVID-19, revealed staff and visitors will take their temperatures upon arrival and will be required to answer a series of questions either on paper or electronically. Review of the facility policy titled, Cleaning and Disinfecting Non-Critical Resident-Care Items, dated 06/2020, revealed reusable items are cleaned and disinfected or sterilized between residents; Manufacturers' instructions will be followed for proper use of disinfecting products. Review of an email provided by the Assistant Administrator by the infrared no touch thermometer manufacturer, not dated, revealed a general rule that 70% Ethyl or [MEDICATION NAME] alcohol was best for electronic devices as the corrosive cleaners such as bleach will erode the plastic casing. NJAC 8:39-19.4(a)(1)(l)</p>		