

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER / SUPPLIER / CLIA IDENTIFICATION NUMBER 335112	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 08/18/2020
NAME OF PROVIDER OF SUPPLIER BROTHERS OF MERCY NURSING & REHABILITATION CENTER		STREET ADDRESS, CITY, STATE, ZIP 10570 BERGTOLD ROAD CLARENCE, NY 14031	
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.</p> <p>Based on observation, interview, and record review conducted during the Focused Infection Control Survey (Complaint #NY 368) completed on 8/18/20, it was determined the facility did not 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 for the facility for one (Unit 3 East) of six units reviewed. Specifically, the facility did not practice social distancing (at least six feet apart) during a small group activity. This involved Residents #1, 2 and 3. The findings are: Review of a CMS (Centers for Medicare and Medicaid Services) memorandum dated April 24, 2020, with Reference ID QSO-20-28-NH, provided: Residents may still eat in dining rooms, however, nursing homes should adhere to social distancing, such as being seated at separate tables at least six feet apart. We note that social distancing should be practiced at all times not just while dining. Review of the facility policy and procedure (P&P) titled: Activities/Psychosocial Needs dated 8/20 documented social distancing and mask use should be observed when a resident is outside their room for any reason if they can tolerate mask use. During an observation on 8/18/20 at 9:35 AM Resident #1 and #3 were sitting next to one another at a 2.5 foot by 6-foot table in the Unit 3 East alcove, 3 feet apart. Resident #1 was working on a puzzle which was initiated by the Activity Aide #1. Activity Aide #1 transported Resident #2 and positioned them across from Resident #1, next to Resident #3, which was 3 feet away from both residents. Resident #2 was 3 feet from both Resident #1 and Resident #3. Resident #2 actively engaged working on the same puzzle with Resident #1, who was observed multiple times raising their left hand, touching their fingers to their lips, then touching the pieces of the puzzle. Residents #1, 2 and 3 were not wearing face masks while sitting at the table while engaged in the puzzle activity. The Activity Aide did not provide or encourage the residents to wear a mask or attempt social distancing. During interview on 8/18/20 at 9:42 AM, Activity Aide #1 stated they try to keep everyone separated six feet apart most of the time. Activity Aide #1 stated they seated Resident #2 at the table across from Resident #1 and next to Resident #3. Residents should be encouraged to wear a face mask and socially distance. Activity Aide #1 stated the nursing staff were responsible to provide residents with masks, and anyone can encourage them to wear a face mask. Activity Aide #1 stated they did not encourage Residents #1, 2, and 3 to wear a face mask and did not keep them socially distant. During an observation on 8/18/20 at 10:33 AM Residents #1, 2 and 3 were still positioned at the table in the Unit 3 East alcove. Residents #1 and 2 were actively working on a puzzle. Resident #2 raised their fingers on left hand to their lips multiple times and then resumed touching the pieces of the puzzle. Resident's #1, 2 and 3 were not wearing face masks and were not six feet apart. During interview on 8/18/20 at 11:25 AM, the Director of Activities stated residents were expected to be socially distanced six feet apart when unable to tolerate wearing masks. The residents should have been placed at separate tables six feet apart with their own puzzle. During interview on 8/18/20 at 12:29 PM, the Assistant Director of Nursing (ADON) stated maintaining social distancing of six feet apart was expected during small group activities. Staff are expected to provide frequent hand hygiene for dementia residents and should encourage residents to wear masks. The puzzle pieces should have been sanitized to reduce the potential spread of infection. During interview on 8/18/20 at 2:02 PM, the Administrator stated dementia residents do not understand when to wear masks or the need to be socially distanced. Staff are expected to socially distance residents six feet apart during activities. Hand hygiene with alcohol-based hand rub or hand wipes should be provided more frequently for our dementia residents to reduce the potential risk of infection. The staff must redirect dementia residents constantly. 415.19(a)(1)</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.