

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER / SUPPLIER / CLIA IDENTIFICATION NUMBER <b>105428</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED <b>05/05/2020</b>
NAME OF PROVIDER OF SUPPLIER <b>BRANDYWYNE HEALTH CARE CENTER</b>		STREET ADDRESS, CITY, STATE, ZIP <b>1801 N LAKE MARIAM DR WINTER HAVEN, FL 33884</b>	
For information on the nursing home's plan to correct this deficiency, please contact the nursing home or the state survey agency.			
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F 0880  <b>Level of harm - Minimal harm or potential for actual harm</b>  <b>Residents Affected - Many</b>	<p><b>Provide and implement an infection prevention and control program.</b></p> <p><b>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY**</b></p> <p>Based on observations, interviews and record review the facility did not follow recommended guidelines from the County Department of Health, Centers for Disease Control and Prevention (CDC) and Centers for Medicare and Medicaid Services (CMS) related to infection control for the COVID 19 pandemic. The facility failed to ensure adherence to infection control practices as evidenced by: 1) housekeeping personnel not wearing gowns; 2) not maintaining resident room door closures for residents suspected of having COVID 19 infections and 3) housekeeping personnel not wearing eye protection on the COVID 19 unit. This deficient practice had the potential to affect all residents in the facility. Census of 90. Findings included: On 5/5/20 at 9:35 a.m. an interview was conducted with the Administrator, the Director of Nursing (DON) and the Infection Control Nurse (IFCN) for the facility. The IFCN stated they are taking precautions in the entire facility with personal protective equipment (PPE) usage mandated throughout the facility. The IFCN stated the following PPE precautions are in use at the facility for all staff: - 2nd floor East/West unit precautions include the use of gown, gloves and surgical masks for all staff working on the unit. - 1st floor East/West unit precautions include the use of gown, gloves, N95 masks and eye protection for all staff working on the unit. All residents on the unit are considered to be COVID despite testing results at this point and all COVID precautions should be followed by all staff on the unit at all times. On 5/5/20 at 10:45 a.m. a tour of the 2nd floor East/West unit was conducted with the IFCN and the DON. At 10:55 a.m. an interview was conducted with Staff A, a housekeeper working on the unit. She was observed to have a surgical mask and gloves on as she was preparing to clean a resident room. Staff A was asked if she had a gown to use while working on the unit. She stated she had not been told that she had to use a gown on the unit that she only had to wear a mask and gloves while cleaning. She stated she only works on the second floor and cleans the resident rooms every day and wipes down all of the handrails and common areas of the unit as well, during her shift. The IFCN indicated the housekeeping staff should also have on gowns while working on the unit and she stated she would make sure the housekeeper was properly dressed in PPE required to work on the unit. During the tour, room [ROOM NUMBER] was noted to have a droplet isolation sign on the door with a PPE bin hanging on the door. The sign indicated use of PPE was required to enter the room. The door was observed to be wide open to the hallway and the IFCN reached in and closed the door. The IFCN indicated the door should remain closed as the resident was being monitored for exposure and was currently under droplet isolation precautions. On 5/5/20 at 11:00 a.m. an interview was conducted with Staff B, a housekeeper, working on the 2nd floor East/West unit. She was observed to have a surgical mask and gloves on as she was cleaning in a resident room. Staff B was asked if she had a gown to use while working on the unit. She stated she had not been told that she required a gown to work on the unit and had only been told to wear a mask and gloves while cleaning. The IFCN verified she should have on a gown while working on the unit. On 5/5/20 at 11:03 a.m. an interview was conducted with Staff C, a housekeeper working on the 2nd floor East/West unit. She was observed to have a surgical mask and gloves on as she was cleaning a resident room. Staff C was asked if she had a gown to use while working on the unit. She stated she had not been told that she required a gown and has only worn a mask and gloves while working on the unit. She stated she had been an employee at the facility for [AGE] years. The IFCN verified she should have a gown on while working on the unit. On 5/5/20 at 11:15 a.m. during a tour of the 1st floor East/West unit the following room doors were noted to be open to the hallway: 134, 133, 130, 129, 127, 125, 122, 121, 113, 112, 109, 108, 107, 105, 104 and 103. The IFCN indicated that all of the residents on the unit were on droplet precautions and the doors should remain closed as often as possible. She stated the staff should make rounds and close the doors. She verified that keeping doors closed for droplet isolation was an expectation for proper infection control practices. During the tour, it was noted that no signage indicating the type of isolation and the required PPE to enter the rooms was posted on any of the doors on the units. The only signage was a handwritten note indicating, see nurse before entering. No unit signage was noted throughout the tour indicating type of isolation and required PPE was observed during the tour. The IFCN stated the whole unit was an isolation unit so they did not put up the signs on the individual doors. She stated the staff were all aware of what they needed for PPE while on the unit. On 5/5/20 at 11:15 a.m. an interview was conducted with Staff D, a housekeeper, who was observed in room [ROOM NUMBER] talking with a resident at the bedside, within six feet of the resident, explaining to the resident that she was going to be cleaning the room. Staff D was observed with a gown, N95 mask and a pair of gloves on for protective equipment. Staff D was asked if she had any eye protection to use while cleaning in the resident room. Staff D stated she did not have any eye protection and was not aware that she needed it while in the resident rooms. Staff D stated she does not have any resident contact and she thought only nursing needed the eye protection. The IFCN indicated the housekeeper should have on eye protection while working on the unit. The DON went to get a face shield for the housekeeper and the housekeeper donned the face shield. On 5/5/20 at 11:50 a.m. an interview was conducted with the Housekeeping Director in the conference room of the facility. She stated that all housekeeping personnel had in-service training on hand hygiene, COVID precautions, disinfectants, personal protective equipment and high touch area cleaning. She stated the IFCN provided the education and training. She stated the instructions she recalled for working on the 2nd floor East/West unit were to wear a surgical mask and to only wear a gown if they enter an isolation room for cleaning. She stated the instructions she recalled for working on the 1st floor East/West unit were to wear a N95 mask, a gown and gloves as needed. She stated she was not aware that eye protection was required to work on the unit. The IFCN was present during the interview and she indicated that all staff including housekeeping were educated to use a face shield for care of the residents, while in the rooms, and eye protection was needed at all times while on the unit. A review of the facility policy titled, Infection Control, (Revised April 2012) indicated the following: Policy Statement: This facility's infection control policies and practices are intended to facilitate maintaining a safe, sanitary and comfortable environment and to help prevent and manage transmission of diseases and infections. Policy Interpretation and Implementation: 1. This facility's infection control policies and practices apply equally to all personnel, consultants, contractor, residents, visitors, volunteer workers, and the general public alike, regardless of race, color, creed, national origin, religion, age, sex, handicap, marital or veteran status, or payor source . 4. All personnel will be trained on our infection control policies and practices upon hire and periodically thereafter, including where and how to find and use pertinent procedures and equipment related to infection control. A review of the Center for Clinical Standards and Quality/Quality, Safety &amp; Oversight Group Ref: QSO-20-20-ALL Memorandum dated 3/20/20 revealed a tool for COVID-19 Focused Survey for Nursing Homes. The tool indicated for PPE for a resident with known or suspected COVID-19, staff wear gloves, isolation gown, eye protection and an N95 or higher-level respirator if available . When COVID-19 is identified in the facility, staff wear all recommended PPE (i.e., gloves, gown, eye protection and a respirator or facemask) for the care of all residents on the unit (or facility-wide based on the location of affected residents), regardless of symptoms (based on availability). Is signage on the use of specific PPE (for staff) posted in appropriate locations in the facility (e.g., outside of a resident's room, wing or facility-wide)? A review of the CDC Coronavirus Disease 2019 (COVID-19) Preparedness Checklist for Nursing Homes and other Long-Term Care Settings revealed guidance for infection prevention and control</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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F 0880  <b>Level of harm - Minimal harm or potential for actual harm</b>  <b>Residents Affected - Many</b>	<p>(continued... from page 1)</p> <p>recommendations, and strategies to prevent the spread of COVID-19. The section for Supplies and Resources documented that the facility provides supplies necessary to adhere to recommended IPC (infection prevention and control) practices including: .signs are posted immediately outside of resident rooms indicating appropriate IPC precautions and required personal protective equipment (PPE), necessary PPE is available immediately outside of the resident room and in other areas where resident care is provided. (<a href="https://www.cdc.gov/coronavirus/2019-ncov/infection-control/control-recommendations.html">https://www.cdc.gov/coronavirus/2019-ncov/infection-control/control-recommendations.html</a> and <a href="https://www.cdc.gov/coronavirus/2019-ncov/healthcare-facilities/prevent-spread-in-long-term-care-facilities.html">https://www.cdc.gov/coronavirus/2019-ncov/healthcare-facilities/prevent-spread-in-long-term-care-facilities.html</a>) A review of the CDC Coronavirus Disease 2019 (COVID-19) Interim Infection Prevention and Control Recommendations for Patients with Suspected or Confirmed Coronavirus Disease 2019 (COVID-19) in Healthcare Settings Summary of Changes to the Guidance, dated 4/13/20, revealed the definition of Healthcare Personnel (HCP) as, HCP include, but are not limited to .persons not directly involved in patient care, but who could be exposed to infectious agents that can be transmitted in the healthcare setting (e.g. clerical, dietary, environmental services .). Recommendations included, 2. Adhere to Standard and Transmission - Based Precautions, HCP (see Section 5 for measures for non-HCP visitors) who enter the room of a patient with known or suspected COVID-19 should adhere to Standard Precautions and use a respirator (or facemask if a respirator is not available), gown, gloves, and eye protection .</p>		