

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER / SUPPLIER / CLIA IDENTIFICATION NUMBER 106034	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 07/07/2020
NAME OF PROVIDER OF SUPPLIER JACKSON PLAZA NURSING AND REHABILITATION CENTER		STREET ADDRESS, CITY, STATE, ZIP 1861 NW 8TH AVENUE MIAMI, FL 33136	
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 0921 Level of harm - Minimal harm or potential for actual harm Residents Affected - Few	<p>Make sure that the nursing home area is safe, easy to use, clean and comfortable for residents, staff and the public.</p> <p>Based on observations, interviews and record reviews the facility failed to ensure a safe sanitary environment to prevent the spread of infection as evidenced by failure to ensure trash cans used for disposal of used Personnel Protective Equipment (PPE) are closed on a dedicated Coronavirus Disease 2019 (COVID-19) unit and failure to ensure Alcohol Based Hand Rub (ABHR) was available in the dispenser to perform hand hygiene, potentially affecting the 25 residents residing on the dedicated COVID-19 unit located on the facility's second floor. This deficient practice has the potential to increase the risk of cross contamination and spread of infection. There were 85 residents residing in the facility at the time of the survey. The findings included: Observation of the 2nd floor dedicated COVID-19 unit on 7/7/20 at 10:16 AM revealed a room with the door open near the elevator designated for donning and doffing of PPE. There was a sign on the door that read Donning and doffing of PPE in this area please. Observation inside the room revealed an Alcohol Based Hand Rub (ABHR) dispenser mounted on the wall which was empty. There was no ABHR or no hand washing sink located in this designated donning and doffing area. There were two trash cans located in the room, one on each side of a room divider PPE. The lids to both trash cans had the lids propped wide open. One of the trash cans contained soiled PPE, some of the used PPE was not completely in the trash can and hanging over the side. There were used disposable gowns hanging on a hooks and draped across the room divider. The Infection Preventionist stated these gowns were probably left there from the night shift. (photos submitted) Interview with the Infection Preventionist on 7/7/20 at 10:25 AM revealed that when the staff enter the facility they wear a surgical mask. When they enter the 2nd floor COVID-19 unit they go to the office located next to the donning and doffing room to get there PPE for the day. At the start of the shift, staff receive a disposable gown, booties, and an N-95 respirator. The N-95 respirators are issued at the start of the shift and are used for the day. They are issued a new N-95 respirator each day. After getting the PPE, they go to the donning/doffing area. The staff dons and doffs PPE in the same area. Interview with staff A, Certified Nursing Assistant (C N A) on 7/7/20 at 2:16 PM revealed, when I come into the facility I am screened. I wear a surgical mask into the building. When I get upstairs to the COVID unit the Supervisor gives me an N-95 respirator, a disposable plastic gown and boot covers. I go into the donning room to put the PPE on. I change the plastic gown several times a day, usually two to three times. I take the soiled PPE off in the donning and doffing room. We use the same door to enter and exit this area. We do this in the same room. I put the PPE in the trash can in this room and then sanitize my hands. Today there was no sanitizer in the room. I always work on the COVID unit. They give me a new N-95 respirator every day. I dispose of the N-95 respirator in the donning / doffing room and wear a surgical mask out of the building. On 7/7/20 at 4:05 PM, the Infection Preventionist on stated, the staff are currently donning and doffing PPE on the COVID-19 unit in the same area. Today we determined this may be an issue and we need to make to some changes. The trash can for the used PPE should have been closed and there should have been sanitizer in this area. I plan to speak to the administrator about creating a separate area for donning and doffing. The staff should also have sanitizer available for use prior to donning and after doffing. We should have a clean area for donning PPE which is separate from the soiled area used for doffing and disposable of the soiled PPE. We need to fix this procedure. On 7/7/20 at 4:24 PM the Nursing Home Administrator (NHA) stated, 'we conducted an in-service today for the staff on the proper procedure for donning and doffing PPE. We have a room divider in the donning and doffing area and the staff is supposed to don the PPE when they enter the room and doff on the other side of the room divider. The trash cans are always supposed to be closed. The staff is given one gown per shift and they can hang the gown on the soiled side if they have to leave the unit, but it should not be left hanging on the clean side used for donning PPE. At the end of the shift, the PPE should be thrown away on the side of the room designated as dirty for doffing. There should also be sanitizer located on both sides of the room divider. The intent is for the staff to enter the clean side through the dining room door and don their PPE on that side of the room divider. There is a hand washing sink on that side of the room and a hand sanitizer dispenser. They should be entering the other door on the opposite side of the room divider to doff the PPE. There should be sanitizer on this side as well. The used PPE should be placed inside the trash can into a red biohazard waste bag. The NHA stated the trash can should be covered at all times. The NHA stated in-service training was in progress and the staff should not be donning and doffing in the same area and they should also be using separate entrances to don and doff PPE. Review of the facility policy and procedure titled Coronavirus (COVID-19) Outbreak revised 4/22/20 revealed: the facility will emphasize prevention efforts and early recognition of suspected cases or symptomatic residents or staff. The facility will implement control measures to minimize the spread of the COVID-19 in the facility from an outbreak. Procedures included: Ensure staff are educated on and correctly performing hand hygiene, donning and doffing of PPE, and using appropriate products for environmental cleansing/disinfection. Ensure adequate supplies of PPE are easily accessible to staff at designated areas. Review of the CDC (Centers for Disease Control) instructions for Use of Personal Protective Equipment (PPE) when caring for patient with confirmed or suspected COVID-19 revealed: PPE must be donned correctly before entering the patient care area (isolation room or unit). PPE must remain in place and be worn correctly for the duration of work in the potentially contaminated area. The Environmental Protection Agency (EPA) suggests using latching lids to keep open-head containers . hazardous wastes closed and sealed.</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.