

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER / SUPPLIER / CLIA IDENTIFICATION NUMBER 525683	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 07/16/2020
NAME OF PROVIDER OF SUPPLIER WOODS CROSSING AT WOODS POINT		STREET ADDRESS, CITY, STATE, ZIP E401 23RD ST BRODHEAD, WI 53520	
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 - Many	<p>Provide and implement an infection prevention and control program.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY**</p> <p>Based on interview, observation and record review, the facility failed to prevent potential infection and transmission of COVID-19 by failing to ensure adherence to infection control practices to prevent the transmission of the Coronavirus (COVID-19) as evidenced by failures on: proper disinfection of goggles after use for one (R1) resident; follow infection control practices related to the use of disinfecting wipes for equipment for one (R1) resident; and follow isolation precautions including proper donning and doffing of personal protective equipment (PPE) when entering the room of one (R2) resident. This could affect all 12 residents in the SNF (skilled nursing facility) Unit. Findings include: 1. Review of R1's medical record revealed that R1 was admitted on [DATE]. R1 was placed on isolation. Further review of R1's admission notes revealed Cough: hacking, nonproductive. Under Lung sounds, it revealed, Wheezing heard, upon auscultation lower left right lobes anterior and posterior. Review of facility's policy titled COVID-19 Exposure Control Plan dated 6/19/20 revealed, New admissions will be allowed. Upon admission, a respiratory screening tool will be used to assess for any of the COVID-19 symptoms. All new admissions will be placed in isolation as a precautionary measure for a minimum of 14 day, even in the case of a negative COVID-19 test. Standard, Contact and Droplet isolation will be implemented. Full PPE will be used including goggles or a face shield. A. Observation on 6/30/20 at 2:00pm revealed that Licensed Practical Nurse (LPN1) checked R1's blood pressure and oxygen saturation level (oxygen level in the blood). LPN1 was wearing an isolation gown, goggles, face mask and gloves. After the procedure, LPN1 wiped the goggles with an Optim 33TB wipe (disinfecting wipe) for 23 seconds and sat the goggles on top of the counter. LPN1 walked back to the front of the nurse's station. LPN1 failed to observe and ensure that the goggles remained wet for the required contact time. When asked how long it should remain wet, LPN1 stated, One minute. In an interview with the MDS (Minimum Data Set) Coordinator (E1) on 7/14/20 at 9:58am, when asked if she expected staff to make sure that contact or wet time was followed during disinfection, E1 stated, Yes. E1 further stated, They have their own space or basin to put their own goggles. Review of facility's policy titled Frequent cleaning of high-touch surfaces and shared resident equipment dated 6/19/20, revealed, Highly touched surfaces will be cleaned frequently to prevent the transmission of COVID-19. Manufacturer instructions will be followed regarding the disinfection of the product. Cleaning product label instructions must be followed regarding directions for use, dilution ratio and contact time. Optim 33TB Wipes - EPA (Environmental Protection Agency) Reg No. -3- Contact time 1 minute. Use for goggles and face masks after each use. Review of Optim 33TB under Broad Spectrum Disinfectant revealed, Patented Technology to deliver faster disinfection results .1 minute bactericidal and virucidal contact time. 5-min (minute) tuberculocidal contact time. 30-second sanitizer for your environmental surfaces. https://www.scican.com/us/products/cleaners-disinfectants/optim-33-tb/ Review of Optim 33 TB wipes under Disinfect after Cleaning revealed, 1. Pull out Optim 33 TB towelette from the canister. 2. Disinfect surface with towelette. 3. Allow surface to remain wet for the recommended contact time. 4. Discard used towelette. https://statim.us/cleaning/optim/optim-protocol/Disinfectant-c-0 Review of undated EPA article titled List N: Disinfectants for Use Against [DIAGNOSES REDACTED]-CoV-2 (COVID-19) under Follow the label revealed, When using an EPA-registered disinfectant, follow the label directions for safe, effective use. Make sure to follow the contact time, which is the amount of time the surface should be visibly wet. https://www.epa.gov/pesticide-registration/list-n-disinfectants-use-against-[DIAGNOSES REDACTED]-cov-2-covid-19 In a CDC article titled Strategies for Optimizing the Supply of Eye Protection updated July 15, 2020 under Implement extended use of eye protection revealed, Eye protection should be removed and reprocessed if it becomes visibly soiled or difficult to see through. If a disposable face shield is reprocessed, it should be dedicated to one HCP and reprocessed whenever it is visibly soiled or removed (e.g., when leaving the isolation area) prior to putting it back on. https://www.cdc.gov/coronavirus/2019-ncov/hcp/ppe-strategy/eye-protection.html B. Observation on 6/30/20 at 4:38pm revealed that the Occupational Therapist (E2) was wearing gloves, gown, mask and goggles while in R1's room. E2 brought a container of Dispatch disinfecting wipes inside R1's room. Without using any barrier to protect from contamination, E2 let the Dispatch container sit on the floor. E2 took a wipe and started wiping the arms and handles of the wheelchair. E1 took more wipes from the Dispatch container and wiped the seat and back of the wheelchair. After the procedure, E2 picked up the Dispatch container from the floor and brought it to the nurse's station. E2 proceeded to place the Dispatch container inside the cabinet. E2 failed to use a barrier and failed to disinfect the Dispatch container before leaving the isolation room. In an interview with E1 on 7/14/20 at 9:58am, when asked about staff bringing the Optim 33TB wipes in the resident's room, E1 stated, They (staff) are expected to bring them in and in a barrier. Review of facility's policy titled Standard and Transmission Based Precautions for COVID-19 Contact, Droplet and Protective Eyewear dated 4/29/20 revealed, If common use of equipment for multiple patients is unavoidable, clean and disinfect such equipment before use on another patient. Review of facility's policy titled Frequent cleaning of high touch surfaces and shared resident equipment dated 6/19/20 revealed, Highly touched surfaces will be cleaned frequently to prevent the risk of transmission of COVID-19. Dispatch Wipes - EPA Reg No. -8. Contact time 1 minute. Use for the following items .wheelchairs after each use. Review of facility's policy titled Universal Precautions Policy dated 1/20/20 revealed, Common use of items between the colonized or infected resident and others may result in transmission by the indirect route if efforts to decontaminate are not followed. Wiping down with a standard hospital grand disinfectant detergent project is adequate. Under Implementing the Universal Precaution System, it revealed, 1. Each nurse needs to evaluate their own interactions with the resident and use barriers as appropriate, based on anticipated contact with body substances, not the resident's [DIAGNOSES REDACTED]. General Cleaning Strategies for Patient-Care Areas revealed, Strategies for cleaning and disinfecting surfaces in patient-care areas take into account .a. potential for direct patient contact, b. degree and frequency of hand contact, and c. potential contamination of the surface with body substances or environmental sources of microorganisms (e.g., soil, dust, and water). In the absence of manufacturer's instructions, non-critical medical equipment (e.g., stethoscopes, blood pressure cuffs, [MEDICAL TREATMENT] machines, and equipment knobs and controls) usually only require cleansing followed by low to intermediate-level disinfection, depending on the nature and degree of contamination. Barrier protection of surfaces and equipment is useful, especially if these surfaces are a. touched frequently by gloved hands during the delivery of patient care, b. likely to become contaminated with body substances, or [DIAGNOSES REDACTED] difficult to clean. Impervious-backed paper, aluminum foil, and plastic or fluid resistant covers are suitable for use as barrier protection. https://www.cdc.gov/infectioncontrol/guidelines/environmental/background/services.html In a CDC article titled Preparing for COVID-19 in Nursing Homes dated June 25, 2020, under Environmental Cleaning and Disinfection revealed, Ensure EPA-registered, hospital grade disinfectants are available to allow for frequent cleaning of high-touch surfaces and shared resident care equipment. Use an EPA-registered disinfectant from List N on the EPA website to disinfect surfaces that might be contaminated with [DIAGNOSES REDACTED]-CoV-2. Ensure HCP are appropriately trained on it's use. https://www.cdc.gov/coronavirus/2019-ncov/hcp/long-term-care.html 2. Review of June 2020 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.

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER / SUPPLIER / CLIA IDENTIFICATION NUMBER 525683	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 07/16/2020
NAME OF PROVIDER OF SUPPLIER WOODS CROSSING AT WOODS POINT		STREET ADDRESS, CITY, STATE, ZIP E401 23RD ST BRODHEAD, WI 53520	
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 - Many	<p>(continued... from page 1)</p> <p>Surveillance revealed that R2 was readmitted on [DATE]. R2 was placed on isolation. Review of facility's policy titled COVID-19 Exposure Control Plan dated 6/19/20 revealed, All new admissions will be placed in isolation as a precautionary measure for a minimum of 14 days, even in the case of a negative COVID-19 test. Standard, Contact and Droplet isolation will be implemented. Observation on 6/30/20 at 4:23pm revealed that housekeeping staff (E3) entered R2's room. E3 was only wearing a facemask. E3 went inside R2's bathroom and washed her hands. E3 proceeded to put on personal protective equipment (PPE) including gown, gloves and face shield. After cleaning R2's room, E3 removed her PPE in the following order: face shield, gown and gloves. In an interview with E1 on 7/14/20 at 9:58am, E1 confirmed that housekeeping staff should wear the proper PPE before entering an isolation room. Review of facility's policy titled COVID-19 Exposure Control Plan dated 6/19/20 revealed, New admissions will be allowed. Upon admission, a respiratory screening tool will be used to assess for any of the COVID-19 symptoms. All new admissions will be placed in isolation as a precautionary measure for a minimum of 14 day, even in the case of a negative COVID-19 test. Standard, Contact and Droplet isolation will be implemented. Full PPE will be used including goggles or a face shield. Review of facility's policy titled Transmission Based Precautions dated 3/26/20 under Droplet Precautions revealed, Wear PPE at all times when in the resident's room. Put on PPE before room entry and properly discard gown and gloves before exiting the resident's room to contain pathogens. Gloves - put on clean gloves before entry into the room. Remove PPE in the following order: gloves then mask. Wash hands before leaving the room. Review of facility's policy and procedure for Environmental Services titled Occupied Isolation Room dated 3/4/2020, under Procedure revealed, 1. Prepare for Isolation Cleaning. Wash hands with soap and water and put on PPE prior to entering room. In a CDC article titled Using Personal Protective Equipment dated July 14, 2020 under How to Take Off (Doff) PPE Gear revealed, 1. Remove gloves. 2. Remove gown. 3. Healthcare personnel may now exit patient room. 4. Perform hand hygiene. 5. Remove face shield or goggles. Under the Coronavirus 2019 (COVID-19) Factsheet, it revealed, PPE must be donned correctly before entering the patient area (e.g., isolation room, unit if cohorting). https://www.cdc.gov/coronavirus/2019-ncov/hcp/using-ppe.html</p>		