

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER / SUPPLIER / CLIA IDENTIFICATION NUMBER 225456	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 07/08/2020
NAME OF PROVIDER OF SUPPLIER DEN-MAR HEALTH AND REHABILITATION CENTER		STREET ADDRESS, CITY, STATE, ZIP 44 SOUTH STREET ROCKPORT, MA 01966	
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 - Some	Provide and implement an infection prevention and control program. Based on observation and interview, the facility failed to follow infection control protocols to prevent the possible spread of COVID-19 by failing to follow the screening protocol for entrance into the facility. Findings include: Review of the Centers for Medicare and Medicaid Services guidance titled, Guidance for Infection Control and Prevention of Coronavirus Disease 2019 (COVID-19) in Nursing Homes (REVISED) dated 3/13/20, indicated the following: *Screen all staff at the beginning of their shift for fever and respiratory symptoms. Actively take their temperature and document absence of shortness of breath, new or change in cough, and sore throat. If they are ill, have them put on a facemask and self-isolate at home. *For individuals allowed in the facility (e.g., in end-of-life situations), provide instruction, before visitors enter the facility and residents' rooms, provide instruction on hand hygiene, limiting surfaces touched, and use of PPE according to current facility policy while in the resident's room. Review of the Massachusetts Department of Public Health memorandum titled, Caring for Long-Term Care Residents during the COVID-19 Emergency, dated 4/6/20, indicated the following: *Long-term care facilities should be screening all individuals entering the facility, including staff, for symptoms on a daily basis. In accordance with previously issued guidance, every individual regardless of reason for entering a long-term care facility should be asked about COVID-19 symptoms and must also have their temperature checked. The surveyor approached the facility on 7/8/20 at 7:10 A.M. A staff member unlocked the door for the surveyor to enter and upon entrance, the area to be screened did not have a staff member present. The surveyor asked the staff member opening the door who would be able to screen her for entrance and the staff member said that the surveyor was able to screen herself and take her own temperature and walked away. During an interview on 7/8/20 at 7:30 A.M., Nurse #1 said that her medication cart is by the front door and is able to see everyone that is coming into the facility. Nurse #1 said that staff can screen themselves when entering the building. When asked how the facility would know if temperatures taken or questionnaires filled out by staff were accurate, Nurse #1 said that she knows everyone that works at the facility and feels comfortable that they were doing it correctly and honestly. During an interview on 7/8/20 at 8:00 A.M., Nurse #2 said that staff are able to screen themselves when entering the building.		

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.