

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER / SUPPLIER / CLIA IDENTIFICATION NUMBER 195509	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 06/22/2020
NAME OF PROVIDER OF SUPPLIER OUR LADY OF WISDOM HEALTH CARE CENTER		STREET ADDRESS, CITY, STATE, ZIP 5600 GENERAL DEGAULLE DR NEW ORLEANS, LA 70131	
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, record review, and interviews the facility failed to ensure COVID-19 rooms were cleaned last to prevent the spread of the infection. This deficient practice was identified for 1 resident (Resident #1) during a COVID-19 Focused infection Control Survey and had the potential to affect the 111 residents residing at the facility. The total facility census was 111 Residents. Findings: According to Center of Disease Control Guidelines for Daily Cleaning and Disinfection, follow guidelines for an optimal cleaning path from clean to dirtiest, restrooms should be cleaned last, and to change the mop after cleaning isolation room. Review of the facility's Policy on COVID-19 cleaning of Residents' Rooms, Housekeeping Department, revealed, in part, rooms of residents on isolation for COVID-19 symptoms should be cleaned before cleaning any other resident rooms. In an interview on 06/22/2020 at 9:45am, S2Assistant Director of Nursing stated that there were two residents on isolation for COVID-19 in the facility, and Resident #1 was one of them. In an interview on 06/22/2020 at 10:38am, S3Housekeeping (HSK) stated that she mopped Resident #1's room this morning but should do it last, but she did it first because she liked to get it over with before cleaning the other residents' rooms. Observation on 06/22/2020 at 10:47am revealed on Resident #1's closed door to her room was a sign posted which had on Isolation start date 06/19/2020. In an interview on 06/22/2020 at 11:15am, S3HSK stated she cleaned Resident #1's room this morning, and used the same mop head to clean the other residents' rooms on the unit. In an interview on 06/22/2020 at 11:55am, S4Housekeeping Director stated that they cleaned COVID-19 residents' rooms first if that is where they start cleaning on the unit, he further stated the mop heads should be changed out after cleaning COVID-19 rooms and before mopping another resident's room. He further stated he would clean and mop resident's bathrooms first. In an interview on 06/22/2020 at 2:08pm, S1Administrator stated Covid-19 isolation rooms which housed Covid-19 residents should be cleaned and mopped last. She further stated the water and the mop head should be changed out between cleaning COVID-19 resident's rooms. In an interview on 06/22/2020 at 2:30pm, S2Assistant Director of Nursing stated that she would clean COVID-19 positive rooms which housed residents on isolation last to ensure proper infection control practices and prevent the spread of Covid-19.		
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.