

DEPARTMENT OF HEALTH AND HUMAN SERVICES  
CENTERS FOR MEDICARE & MEDICAID SERVICES

PRINTED: 10/07/2020  
FORM APPROVED  
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>345177</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____  B. WING _____		(X3) DATE SURVEY COMPLETED  <b>C</b> <b>09/04/2020</b>
NAME OF PROVIDER OR SUPPLIER  <b>THE GREENS AT PINEHURST REHAB &amp; LIVING CENTER</b>			STREET ADDRESS, CITY, STATE, ZIP CODE <b>205 RATTLESNAKE TRAIL PINEHURST, NC 28374</b>		
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F 000	INITIAL COMMENTS  On 9/1/2020 through 9/4/2020 an unannounced complaint investigation was conducted. There were 3 intakes and 8 allegations. Two of the allegations were substantiated. One substantiated allegation did not result in a citation. See Event ID #1GDZ11.	F 000			
F 880 SS=E	Infection Prevention & Control CFR(s): 483.80(a)(1)(2)(4)(e)(f)  §483.80 Infection Control The facility must establish and maintain an infection prevention and control program designed to provide a safe, sanitary and comfortable environment and to help prevent the development and transmission of communicable diseases and infections.  §483.80(a) Infection prevention and control program. The facility must establish an infection prevention and control program (IPCP) that must include, at a minimum, the following elements:  §483.80(a)(1) A system for preventing, identifying, reporting, investigating, and controlling infections and communicable diseases for all residents, staff, volunteers, visitors, and other individuals providing services under a contractual arrangement based upon the facility assessment conducted according to §483.70(e) and following accepted national standards;  §483.80(a)(2) Written standards, policies, and procedures for the program, which must include, but are not limited to: (i) A system of surveillance designed to identify possible communicable diseases or	F 880		10/2/20	

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

Electronically Signed

09/23/2020

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 880	<p>Continued From page 1</p> <p>infections before they can spread to other persons in the facility;</p> <p>(ii) When and to whom possible incidents of communicable disease or infections should be reported;</p> <p>(iii) Standard and transmission-based precautions to be followed to prevent spread of infections;</p> <p>(iv) When and how isolation should be used for a resident; including but not limited to:</p> <p>(A) The type and duration of the isolation, depending upon the infectious agent or organism involved, and</p> <p>(B) A requirement that the isolation should be the least restrictive possible for the resident under the circumstances.</p> <p>(v) The circumstances under which the facility must prohibit employees with a communicable disease or infected skin lesions from direct contact with residents or their food, if direct contact will transmit the disease; and</p> <p>(vi) The hand hygiene procedures to be followed by staff involved in direct resident contact.</p> <p>§483.80(a)(4) A system for recording incidents identified under the facility's IPCP and the corrective actions taken by the facility.</p> <p>§483.80(e) Linens. Personnel must handle, store, process, and transport linens so as to prevent the spread of infection.</p> <p>§483.80(f) Annual review. The facility will conduct an annual review of its IPCP and update their program, as necessary. This REQUIREMENT is not met as evidenced by: Based on observations, staff and Medical Director (MD) interviews and record review, the</p>	F 880			
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F 880	<p>Continued From page 2</p> <p>facility failed to reinforce alert and oriented (A&amp;O) residents to wear face mask while out of their rooms in the hallways and failed to implement additional infection control (IFC) measures such as encouraging and enforcing social distancing, and hand hygiene for 5 (Resident #3, #7, #12, #18 and #19) of 15 reviewed for IFC. The findings included:</p> <p>Review of the facility COVID-19 policy updated 7/9/20 read in part as follows: Residents are asked to wear face mask when not in their rooms (leaving the room only when emergency situation), remind residents to participate in social distancing and assist with frequent hand washing.</p> <p>1. Resident #3 was admitted on 3/24/20 with cumulative diagnoses of panic disorder and Congestive Heart Disease (CHF).</p> <p>His quarterly Minimum Data Set (MDS) dated 7/2/20 indicated his Brief Interview for Mental Status (BIMS) score was 15 meaning no cognitive impairment. He was not coded for any behaviors and coded for supervision for hygiene.</p> <p>Resident #3's care plan dated 3/12/20 read there were changes in socialization due to facility wide restriction of visitation due to community health advisory. Interventions read that Resident #3 was non-compliant with wearing a face mask while in the hallways and to ensure he was aware of the approved IFC facility practices.</p> <p>Resident #3's September 2020 Physician orders did not include any orders regarding face mask contraindication.</p>	F 880	<p>Address how corrective action will be accomplished for those residents found to have been affected by the deficient practice;</p> <p>1)Resident #3 has severe anxiety when wearing face covering long period of times. He has a care plan that supports his refusal to wear a face covering. The Infection Preventionist (IP) and the Director of Nursing (DON) educated Resident #3 on 9/24/20, regarding wearing face covering when out of room and/ or maintaining social distancing of at least 6ft. Resident is independent with hand hygiene, but staff will encourage hand hygiene before and after meals and after toileting. Soap and water and hand sanitizer is available for use by the resident. Staff will monitor and enforce use of face covering when out of room.</p> <p>2)Resident #7 was discharged on 9/15/20, to another skilled facility closer to her daughter.</p> <p>3)Resident #12 is alert and oriented and is non-compliant wearing a face covering when out of room. She has a care plan that supports her non -compliance. The IP and DON educated Resident #12 on 9/24/20, regarding wearing a face covering when out of room and/or maintaining social distancing of at least 6ft.</p> <p>Staff will assist with hand hygiene before and after meals and after toileting and as needed. Staff will monitor and enforce use of face covering when out of room.</p>		

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F 880	<p>Continued From page 3</p> <p>Resident #3's nursing note dated 6/9/20 at 10:10 AM read he was asked to wear face mask while in the hallway. Resident #3 refused.</p> <p>Resident #3's nursing note dated 6/9/20 at 11:52 AM read he was stopped in the hallway due to not wearing a face mask. Resident #3 stated he did not like being stopped and felt he was being singled out. The nurse explained that all residents were to wear a face mask when out of their rooms unless the residents refused, they were care planned or there was a MD order stating otherwise. Resident #3 stated the MD told him that he didn't have to wear a face mask. Resident #3 was told he would be care planned for refusing to wear a face mask.</p> <p>Resident #3's nursing note dated 6/9/20 at 8:06 PM read he was in the hallway without a face mask. The nurse explained the reason for the face mask use. Resident #3 verbalized understanding but continued to be non-complaint.</p> <p>Resident #3's nursing note dated 6 /10/20 at 2:51 PM read he was noted in the hallway without a face mask. Resident #3 was care planned to not wear one. Another resident approached him attempting to tell him that he needed to put on a mask. Resident #3 told the other resident he did not have to wear one.</p> <p>Review of an MD progress note dated 8/10/20 read Resident #3 was extremely claustrophobic and expressed strong objections to wearing a face mask due to anxiety. It was recommended that Resident #3 be exempt from wearing a face mask while in public spaces. The progress note did not include any other IFC measures to be practiced for Resident #3.</p>	F 880	<p>4)Resident #18 is alert and oriented and is non-compliant wearing a face covering when out of room. He has a care plan that supports his non-compliance. The IP and DON educated Resident #18 on 9/24/20, regarding wearing face covering when out of room and/or maintaining social distancing of at least 6ft. Resident is independent with hand hygiene but, staff will encourage hand hygiene before and after meals and after toileting. Soap and water and hand sanitizer is available for use by the resident. Staff will monitor and enforce use of a face covering when out of room.</p> <p>5)Resident #19 is alert and oriented but will forget to put on the face covering when out of room. She has a care plan that supports her non-compliance. The IP and DON educated Resident #19 on 9/24/20, regarding wearing a face covering when out of room and maintaining social distancing of at least 6ft. Staff will assure that the face covering is in place when she is in the hallway. Resident is independent with hand hygiene, but staff will encourage hand hygiene before and after meals and after toileting. Soap and water and hand sanitizer is available for use by the resident.</p> <p>Address how the facility will identify other residents having the potential to be affected by the same deficient practice;</p> <p>Current facility residents that are</p>		

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F 880	Continued From page 4  Resident #3 was observed on 9/1/20 at 9:50 AM sitting at Nursing Station (NS) #1 next to 3 other residents and he was not wearing a face mask or social distancing.  Interview with Nurse #1 on 9/1/20 at 9:50 AM stated Resident #3 refused to wear a face mask and was reminded often. He stated he was unsure if he was exempt from wearing a face mask. Nurse #1 stated Resident #3 was also noncompliant with social distancing and had to be reminded.  Interview with Nurse #5 on 9/1/20 at 9:55 AM stated Resident #3 was very upset about having to wear a face mask when he was out of his room. She stated she thought the MD wrote an order saying he didn't have to wear a face mask. Nurse #5 she was not aware of any additional IFC interventions implemented for Resident #3. She observed Resident #3 sitting with 3 other residents at NS #1 and asked the residents to separate. Resident #3 propelled his wheelchair to his room. Nurse #5 stated Resident #3 was frequently at NS #1 and had to be reminded to socially distance. She stated she thought he was independent with hand hygiene but had not watched him perform hand hygiene.  In another interview with Nurse #1 on 9/1/20 at 11:15 AM, he stated Resident #3 was A&O and he had the right to refuse wearing a face mask when he was out of his room. Nurse #1 stated he occasionally reminded Resident #3 to move away from other residents. Nurse #1 stated he thought Resident #3 was able to wash his own hands but he had not observed Resident #3 perform hand hygiene.	F 880	non-compliant with wearing a face covering, maintaining social distancing and hand hygiene are at risk to be affected by the alleged deficient practice of the facility failing to reinforce alert and oriented residents to wear face mask while out of their rooms in the hallways and failed to implement additional infection control measures such as encouraging and enforcing social distancing and hand hygiene.  Address what measures will be put into place or systemic changes made to ensure that the deficient practice will not recur;  The Infection Control Preventionist nurse and the Director of Nursing completed in service education for facility staff on 9/29/20, regarding reinforcing use of face masks, social distancing and hand hygiene for residents when out of their rooms. The education consisted of videos to include Hand Hygiene, Donning Face covering or face masks for residents, and Social Distancing.  The Quality Assurance and Performance Improvement committee (QAPI), completed a Root cause analysis (RCA) on 9/21/20, to determine causes for non-compliance among residents wearing face coverings, social distancing and hand hygiene.  Root cause identified: availability of face masks in resident rooms (masks not stored or staff not able to find),		

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F 880	Continued From page 5  Interview on 9/1/20 at 11:30 AM, Resident #3 stated was only able to tolerate wearing a face mask for brief periods of time but the mask caused him anxiety. Resident #3 stated it was hard to social distance at NS #1 because so many residents like to sit there. Observed were paper towels and soap available in his room. He stated he was able to wash his hands when dirty. When asked how often he washed his hands, he stated, "a couple times a day" and said sanitizer was available if he needed it. Resident #3 stated he was aware of the interventions the facility put in place for IFC.  Interview with Infection Control Preventionist (ICP) Nurse on 9/2/20 at 1:42 PM stated Resident #3 was exempt from wearing a face mask when out of his room due to panic attacks. He stated the facility could not force residents to stay in their rooms if they were exempt from wearing a face mask. ICP Nurse stated he was not aware that Resident #3 and 3 other residents were all sitting side by side at NS #1 yesterday. He stated residents should remain 6 feet apart when out of their room. He stated he had reinforced with the staff and residents the importance of wearing a face mask, social distancing and hand hygiene on multiple occasions.  Telephone interview with the MD on 9/2/20 at 2:42 PM he stated the standard was for residents to wear a face mask when out of their room. The MD stated Resident #3 had expressed extreme concerns regarding anxiety he experienced if he wore a face mask. He stated he did not write a Physician order exempting him from wearing a face mask but thought he documented it in a progress note. The MD stated his expectation	F 880	Resident□s feel that they do not have to wear mask, resident knowledge of importance of social distancing and use of mask. The facility will provide a bag to store the residents mask in at bedside, so the staff and resident will find the mask more readily available. 1:1 education has been provided to residents that are non-compliant, explaining to them the importance of wearing a face covering and maintaining social distancing and hand hygiene when out of room, to prevent/reduce the risk of contracting and/or spreading the virus. All staff are responsible to reinforce the use of face mask amongst residents and to assure residents are maintaining social distancing of at least 6ft.  Nursing staff will encourage and assist as necessary with hand hygiene before and after meals, after toileting and as needed when hands may become soiled. Nurses will offer hand hygiene before administering medications. Activity director/aide will offer hand hygiene before snacks are provided or before activities begin.  Indicate how the facility plans to monitor its performance to make sure that solutions are sustained;  The IP and or the DON will observe residents in the hallway 2x day 5 days a week (to include evenings and weekends) for 4 weeks then daily 5 days a week for 2 months to validate that residents are wearing face coverings and maintaining		

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F 880	<p>Continued From page 6</p> <p>would be the facility ensure Resident #3 was socially distanced when out of his room and hand hygiene be done frequently.</p> <p>Interview on 9/2/20 at 4:00 PM, the Director of Nursing (DON) stated her expectation was that residents wear a face mask when out of their rooms but Resident #3 was exempt. She stated it was challenging to get some of the A&amp;O residents to be compliant with IFC practices. She stated she was not aware that residents including Resident #3 were gathered at NS #1 and not social distancing yesterday. The DON stated she felt Resident #3 was washing his hands frequently and hand sanitizer was readily available. The DON stated it was her expectation that A&amp;O residents who refuse to wear a face mask consistently when out of their room that other interventions be implemented to ensure IFC.</p> <p>2. Resident #7 was admitted on 7/20/19 with cumulative diagnoses of Chronic Obstructive Pulmonary Disease (COPD), diabetes and Chronic Kidney Disease.</p> <p>Her quarterly Minimum Data Set (MDS) dated 8/1/20 read her Brief Interview for Mental Status (BIMS) score was 15 meaning no cognitive impairment. She was not coded for any behaviors and coded independent for hygiene.</p> <p>Resident #7's care plan dated 3/12/20 read she was at risk for ill effects related to a change in socialization, access to external influencers and visitation due to the facility wide restriction of visitation due to the community health advisory. Interventions read Resident #7 prefers to not wear her face mask secondary to difficulty</p>	F 880	<p>social distancing.</p> <p>The IP and or the DON will observe 10 residents weekly for 4 weeks, then 20 residents monthly for 2 months to validate that hand hygiene occurred before and after meals and after toileting, before activities and during med pass.</p> <p>The IP and or the DON will review the audits to identify patterns/trends and will adjust the plan to maintain compliance. The IP and or the DON will review the plan during the monthly QAPI and the audits will continue at the discretion of the QAPI committee.</p> <p>Indicate dates when corrective action will be completed; 10/02/20</p>		

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F 880	<p>Continued From page 7</p> <p>wearing it with her oxygen and to ensure she was aware of the approved IFC facility practices.</p> <p>Resident #7's September 2020 Physician orders did not include any orders regarding face mask contraindication and an order for Oxygen continuously at 2 liters per minute via nasal cannula (NC).</p> <p>Review of Resident #7's nursing notes from 3/1/20 to present did not included any documentation that a face mask was contraindicated or that she was noncompliant with wearing her face mask.</p> <p>Resident #7 was observed on 9/1/20 at 1:42 PM at Nursing Station (NS) #2 without a face mask. There were 2 other residents within 6 feet distance to Resident #7. She stated she did not have to wear a face mask because she was on oxygen. Her oxygen was not in use at this time. Resident #7 stated she was aware of social distancing. She stated she doesn't stay at NS #2 long but only to ask for assistance when needed then returned to her room. Resident #7 stated she had soap and paper towels in her room and hand sanitizer was available. She stated she was able to perform her own hand hygiene.</p> <p>Resident #7 was observed on 9/2/20 at 2:58 PM driving her motorized wheelchair down the skilled hallway. She was not wearing a face mask and not wearing her oxygen.</p> <p>Interview with Infection Control Preventionist (ICP) Nurse on 9/2/20 at 1:42 PM stated if a resident could refuse a COVID-19 test, they could refuse to wear a face mask when out of their room. He stated Resident #7 did not wear a face</p>	F 880			



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F 880	<p>Continued From page 8</p> <p>mask due to her oxygen. He stated the facility could not force residents to stay in their rooms if there was a valid reason for not wearing a face mask when out of their room. ICP Nurse stated he was not aware that Resident #7 was at NS #2 yesterday and not socially distancing. He stated she was A&amp;O and she should remain 6 feet apart when out of her room. The ICP Nurse stated Resident #7 performed her own hand hygiene and she had hand sanitizer available. He stated he had reinforced with the staff and residents the importance of wearing a face mask, social distancing and hand hygiene on multiple occasions.</p> <p>Interview with Nursing Assistant (NA) #6 on 9/2/20 at 3:00 PM she stated Resident #7 was noncompliant with not wearing her face mask. She stated it did not do any good to remind Resident #7 because she always stated she didn't have to wear a face mask because she was prescribed oxygen. NA #6 stated Resident #7 was noncompliant with wearing her oxygen as well. She stated Resident #7 was frequently out of her room at NS #2. NA #6 stated several residents sat at NS #2 but those residents were confused and had to be separated from each other.</p> <p>Telephone interview with the MD on 9/2/20 at 2:42 PM he stated the standard was for residents to wear a face mask when out of their room. The MD stated he was aware that Resident #7 was noncompliant with wearing a face mask due to her oxygen. The MD stated his expectation would be the facility to implement other measures for IFC, ensure Resident #7 was socially distanced when out of her room and hand hygiene be done frequently.</p>	F 880			

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F 880	<p>Continued From page 9</p> <p>Interview on 9/2/20 at 4:00 PM, the Director of Nursing (DON) stated her expectation was that residents wear a face mask when out of their rooms. She stated it was challenging to get some of the A&amp;O residents to be compliant with IFC practices. She stated she was not aware that residents including Resident #7 were gathered at NS #2 not social distancing yesterday. The DON stated she felt Resident #7 was washing her hands frequently and hand sanitizer was readily available. The DON stated it was her expectation that A&amp;O residents who refuse to wear a face mask when out of their rooms, other interventions be implemented to ensure IFC.</p> <p>3. Resident #12 was admitted on 7/16/08 with a diagnosis of Cerebral Vascular Accident (CVA).</p> <p>Her quarterly Minimum Data Set (MDS) read her Brief Interview for Mental Status (BIMS) score was 15 meaning no cognitive impairment. She was not coded for any behaviors and coded for extensive assistance with hygiene.</p> <p>Resident #12's care plan dated 3/12/20 read she was at risk for ill effects related to a change in socialization, access to external influencers and visitation due to the facility wide restriction of visitation due to the community health advisory. Interventions read to ensure she was aware of the approved IFC facility practices.</p> <p>Resident #12's September 2020 Physician orders did not include any orders regarding face mask contraindication.</p> <p>Review of Resident #12's nursing notes from 3/1/20 to present did not included any documentation that a face mask was</p>	F 880			

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F 880	<p>Continued From page 10</p> <p>contraindicated or that she was noncompliant with wearing her face mask.</p> <p>Resident #12 was observed on 9/1/20 at 11:10 AM sitting in the main hallway near Nursing Station (NS) #1 not wearing a face mask.</p> <p>Resident #12 was observed again on 9/1/20 at 4:00 PM sitting in the main hallway near NS #1 with her face mask pulled down under her chin. She stated she did not like wearing the face mask and she often pulled it down off her nose and mouth when she was out of her room. Resident #12 stated there were other residents that didn't have to wear a face mask while out of their rooms. She stated she chose to sit in the hallway rather than at NS #1 because there were too many residents gathered there. She stated she needed staff assistance with hand hygiene. She stated staff did not assist her in washing or sanitizing her hands throughout the day.</p> <p>Interview with Nurse #5 on 9/2/20 at 9:55 AM, she stated Resident #12 was noncompliant with keeping her face mask over her nose and mouth but she preferred to sit in the hallway away from other residents. She stated she needed frequent reminders to keep her mask on but she still pulled it down. Nurse #5 stated hand sanitizer was readily available.</p> <p>Interview with Infection Control Preventionist (ICP) Nurse on 9/2/20 at 1:42 PM stated if a resident could refuse a COVID-19 test, they could refuse to wear a face mask when out of their room. He stated Resident #12 frequently removed her face mask when she was out of her room. He stated the facility could not force residents to stay in their rooms if they were</p>	F 880			

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F 880	<p>Continued From page 11</p> <p>noncompliant. He stated he had reinforced with the staff and residents the importance of wearing a face mask, social distancing and hand hygiene on multiple occasions.</p> <p>Telephone interview with the MD on 9/2/20 at 2:42 PM he stated the standard was for residents to wear a face mask when out of their room. The MD stated he was aware that Resident #12 was noncompliant with wearing a face mask properly. The MD stated his expectation would be the facility encourage the use of her face mask, implement other measures for IFC and ensure Resident #12 was socially distanced when out of her room and hand hygiene be done frequently.</p> <p>Resident #12 was observed on 9/2/20 at 3:30 PM sitting in the main hallway near NS #1 with her face mask pulled down under her chin.</p> <p>Interview on 9/2/20 at 4:00 PM, the Director of Nursing (DON) stated her expectation was that residents wear a face mask when out of their rooms. She stated it was challenging to get some of the A&amp;O residents to be compliant with IFC practices. She stated Resident #12 preferred to sit in the hallway away from other residents but frequently pulled her mask down exposing her nose and mouth. The DON stated it was her expectation that A&amp;O residents who refuse to wear a face mask consistently when out of their room, other interventions be implemented to ensure IFC.</p> <p>4. Resident #18 was admitted on 10/18/19 a diagnosis of Cerebral Vascular Accident (CVA).</p> <p>His annual Minimum Data Set (MDS) dated 8/31/20, read his Brief Interview for Mental Status</p>	F 880			

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F 880	<p>Continued From page 12</p> <p>(BIMS) score was 15 meaning no cognitive impairment. He was not coded for any behaviors and coded independent with hygiene.</p> <p>Resident #18's care plan dated 3/12/20 read he was at risk for ill effects related to a change in socialization, access to external influencers and visitation due to the facility wide restriction of visitation due to the community health advisory. Interventions read resident was non-compliant with wearing a face mask while in the hallways. Staff were to remind and encourage him to wear a face mask as needed. Interventions also read to ensure he was aware of the approved IFC facility practices.</p> <p>Resident #18's September 2020 Physician orders did not include any orders regarding face mask contraindication.</p> <p>Review of Resident #18's nursing notes from 3/1/20 to present did not include any documentation that a face mask was contraindicated or that he was noncompliant with wearing her face mask.</p> <p>Observation of Resident #18 on 9/1/20 at 1:30 PM was propelling his wheelchair down the skilled hallway while not wearing a face mask. Resident stated he had right to refuse to wear a face mask. He stated "this COVID is a scary thing". He put on his face mask and stated he didn't understand why the face mask was so important if other residents were not wearing face mask. He stated staff had reminded him to put on his face mask occasionally but he was only going out to the smoking area which was not too far.</p> <p>Observation on 9/2/20 at 11:10 AM, Resident #18</p>	F 880			

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F 880	<p>Continued From page 13</p> <p>was propelling his wheelchair down the main hallway without a face mask.</p> <p>Interview with Infection Control Preventionist (ICP) Nurse on 9/2/20 at 1:42 PM stated if a resident could refuse a COVID-19 test, they could refuse to wear a face mask when out of their room. He stated Resident #18 was frequently reminded to put on his face mask but he ignored staff. He stated the facility could not force residents to stay in their rooms if they were noncompliant. He stated he had reinforced with the staff and residents the importance of wearing a face mask, social distancing and hand hygiene on multiple occasions.</p> <p>Interview with Nursing Assistant (NA) #6 on 9/2/20 at 3:00 PM stated Resident #18 was noncompliant with wearing his face mask when he was out of his room and he was reminded frequently but he dismissed staff. She stated Resident #18 mostly stayed in his room only leaving to go outside to smoke. She stated there was soap and paper towels in his room and he also had hand sanitizer. NA #6 stated she was not certain that Resident #18 was practicing hand hygiene as recommended.</p> <p>Telephone interview with the MD on 9/2/20 at 2:42 PM he stated the standard was for residents to wear a face mask when a they were out of their room. He stated it was his expectation was that all residents wear a face mask when out of their rooms unless a face mask was contraindication. He stated Resident #18 was noncompliant with wearing his face mask when he was out of his room. The MD stated his expectation would be the facility encourage the use of his face mask, implement other measures for IFC and ensure</p>	F 880			

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F 880	<p>Continued From page 14</p> <p>Resident #18 was socially distanced when out of his room and hand hygiene be done frequently.</p> <p>Interview on 9/2/20 at 4:00 PM, the Director of Nursing (DON) stated her expectation was that residents wear a face mask when out of their rooms. She stated it was challenging to get some of the A&amp;O residents to be compliant with IFC practices. She stated Resident #18 was only out of his room to go smoke but should still wear a mask to go out to the smoking area. She stated he was reminded frequently. The DON stated she felt he was washing his hands frequently and hand sanitizer was readily available. The DON stated it was her expectation that A&amp;O residents who refuse to wear a face mask consistently when out of their room, other interventions be implemented to ensure IFC.</p> <p>5. Resident #19 was admitted on 3/6/20 with a diagnosis of Chronic Obstructive Pulmonary Disease (COPD).</p> <p>Her annual Minimum Data Set (MDS) dated 7/2/20 her Brief Interview for Mental Status (BIMS) score was 15 meaning no cognitive impairment. She was not coded for any behaviors and coded for extensive assistance with hygiene.</p> <p>Resident #19's revised care plan dated on 3/31/20 read she was at risk for ill effects related to a change in socialization, access to external influencers and visitation due to the facility wide restriction of visitation due to the community health advisory. Interventions read to ensure he was aware of the approved IFC facility practices.</p> <p>Resident #19's September 2020 Physician orders</p>	F 880			

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F 880	<p>Continued From page 15</p> <p>did not include any orders regarding face mask contraindication.</p> <p>Review of Resident #19's nursing notes from 3/1/20 to present did not included any documentation that a face mask was contraindicated or that she was noncompliant with wearing her face mask.</p> <p>Observation of Resident #19 on 9/2/20 at 11:15 AM sitting at Nursing Station (NS) #2 without a face mask. There was no other residents observed near her. Resident #19 stated her mask was on the back of her wheelchair and she couldn't reach it. The Infection Control Preventionist (ICP) Nurse assisted with getting her the face mask. She stated she sometimes forgot to put on her face mask until staff reminded her.</p> <p>Interview with ICP Nurse on 9/2/20 at 1:42 PM stated if a resident could refuse a COVID-19 test, they could refuse to wear a face mask when out of their room. The ICP Nurse stated staff must have forgotten to put on her face mask when she was coming out of room to sit at NS #2. He stated he had reinforced with the staff and residents the importance of wearing a face mask, social distancing and hand hygiene on multiple occasions.</p> <p>Telephone interview with the MD on 9/2/20 at 2:42 PM stated the standard was for residents to wear a face mask when a they were out of their room. He stated it was his expectation was that all residents wear a face mask when out of their rooms unless a face mask was contraindication. The MD stated his expectation would be the facility staff assist Resident #19 with donning her</p>	F 880			



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F 880	<p>Continued From page 16</p> <p>face mask when she was out of her room.</p> <p>Interview with Nursing Assistant (NA) #6 on 9/2/20 at 3:00 PM she stated Resident #19 was usually compliant with wearing her face mask when she was out of her room but she needed frequent reminders to keep it pulled up over her nose and mouth.</p> <p>Interview on 9/2/20 at 4:00 PM, the Director of Nursing (DON) stated her expectation was that residents wear a face mask when out of their rooms. She stated it was challenging to get some of the A&amp;O residents to be compliant with IFC practices. She stated Resident #19 liked to sit at NS #2 and do puzzles books. She stated someone must have forgot to assist her with putting her face mask on. The DON stated staff should have noticed Resident #19 sitting at NS #2 not wearing her face mask. The DON stated it was her expectation that A&amp;O residents who needed assistance with putting on a face mask, staff do it and encourage Resident #19 to keep her mask up over her nose and mouth.</p>	F 880			