

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  NH0546	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  10/15/2020
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NAME OF PROVIDER OR SUPPLIER  WELL SPRING	STREET ADDRESS, CITY, STATE, ZIP CODE 3560 WILDFLOWER DRIVE GREENSBORO, NC 27410
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L 000	INITIAL COMMENTS  An unannounced Focused Infection Control survey in conjunction with a review of the emergency preparedness for staff was conducted on 10/14 - 15/2020. The facility was found not in compliance with the rules for the licensing of nursing homes at 10 NCAC 13 D .2209 (a) and .2209 (h).	L 000		
L 040	.2209(A) INFECTION CONTROL  10A-13D.2209 (a) (a) A facility shall establish and maintain an infection control program for the purpose of providing a safe, clean and comfortable environment and preventing the transmission of diseases and infection.  This Rule is not met as evidenced by: Based on record review, staff interview and physician interview the facility failed to monitor donning of face masks by employees when a housekeeper (HK) #2 was observed with her face mask below her nose exposing the open nares passage (CDC guideline for health care workers "Using Personal Protective Equipment (PPE)". The deficiency occurred during the COVID19 pandemic.  Findings included:  Review of the facility's "COVID19 Protocol" policy and procedure dated 10-4-20 revealed in part that standard precautions would be used in the care of all residents in all situations regardless of their diagnosis or suspected/confirmed infection status.	L 040	02209 (A) Infection Control  To comply with this portion of the regulation, Well-Spring has reviewed our Infection Control Training Programs and have identified the following:  In March 2020, Face Mask Etiquette and Donning and Doffing training and COVID-19 and Droplet Precautions training was offered for staff. These trainings included visual examples (pictures) and written instructions, as well as demonstration of how to don, wear, and doff face masks.  In May 2020, the CDC Mini Webinar series on COVID-19 was provided for all Healthcare staff. This included the videos of "Keep Covid-19 Out", "Clean Hands", "Closely Monitor Residents"; and "Sparkling Surfaces".  These trainings provide good education and value. See the attached handouts and post tests used for this training. The videos will be utilized in upcoming training to be completed with each department by November 25, 2020.	

Division of Health Service Regulation

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

*Mish Ridenour, NHA*

TITLE

*Director of Health Services*

(X6) DATE

*10/23/20*

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L 040	<p>Continued From page 1</p> <p>Review of the facility's "Isolation Precautions" policy and procedure dated 7-21-20 revealed in part: masks should be worn to protect the health care workers mouth, nose and facial skin.</p> <p>Review of the Center for Disease Control "Using Personal Protective Equipment (PPE)" sub part "face mask do's and don'ts" revealed in part: put on your face mask so it fully covers your mouth and nose.</p> <p>Observations of housekeeper (HK) #2 occurred on 10-14-20 between 12:45pm and 1:00pm on the general skilled nursing unit. The observation revealed HK #2 was wearing a K95 face mask below her nose exposing the opened nares passage.</p> <p>HK #2 was interviewed on 10-14-20 at 1:00pm. The HK stated she had received training on donning a face mask as well as infection control and COVID19. HK #2 acknowledged her face mask was below her nose and she stated, "it won't stay on my nose." She further explained she preferred to wear the masks she bought and not the facility's supplied masks. She presented a surgical mask from her cart and stated, "this one stays on my nose, but I don't like them." The HK acknowledged she was putting herself and others at risk when she did not have her mouth and nose covered with the face mask.</p> <p>The Facility's staff development coordinator (SDC) was interviewed by telephone on 10-15-20 at 11:38am. The SDC discussed staff receiving a face to face education on the proper way to wear their face masks which included making sure the face mask covered their nose and mouth, back in March 2020 and that the staff had follow up</p>	L 040	<p>Continued from page 1</p> <p>As a result of the findings from this survey, The Housekeeping Department staff were immediately required to attend an in-service training on 10/16/20 on "Mask etiquette, donning and doffing, storage, and face shield cleaning and storage". This included the following learning objectives:</p> <ol style="list-style-type: none"> <li>1. How COVID-19 is spread</li> <li>2. How to don a mask</li> <li>3. How to wear a mask properly</li> <li>4. How to doff a mask</li> <li>5. Proper storage of mask</li> <li>6. Storage and cleaning of face shield</li> </ol> <p>HK # 2 was in attendance at this in-service and completed a post test, indicating her understanding of the proper way to wear her mask.</p> <p>During the survey, HK #2 told the surveyor that she was providing her own masks. Well-Spring has deemed this to not be appropriate in this situation due to poor fit with the masks the housekeeper was using. On October 16, 2020, HK #2 met with the housekeeping manager and different, proper fitting masks were provided. Management continues to monitor the employee, as well as all employees, to assure that appropriate masks and fit are maintained.</p> <p>HK #2 continues to be monitored for proper placement of her face mask. She was coached on October 16, 2020, by her supervisor for non-compliance with how she was wearing her mask. Ongoing monitoring will be provided and progressive coaching will follow if needed. Progressive coaching can lead to termination.</p>	
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L 040	Continued From page 2 training through videos since March 2020. She further discussed the staff that were trained included housekeeping and dietary.  An interview with the facility manager occurred on 10-15-20 at 3:26pm by telephone. The facility manager stated housekeeping did attend the training's provided by the SDC and the infection control nurse. He discussed monitoring of the housekeeping staff was completed by himself and other staff. He stated if a housekeeper brought in their own mask, the mask was examined by the housekeeping manager for appropriateness and that he would discuss the issue with the housekeeping manager.  During an interview with the Administrator on 10-15-20 at 3:58pm by telephone, the Administrator discussed the need for the HK to obtain a mask from the facility if her mask was not able to cover her nose and mouth. She further stated the staff were taught that their face mask must cover their nose and mouth. The Administrator stated she and the unit managers monitor staff for the proper wearing of their mask and would remind staff to keep their mask over their nose and mouth.  The facility's Medical Director was interviewed by telephone on 10-15-20 at 4:29pm. The Medical Director stated staff were putting themselves and the residents at risk for COVID19 if they are not wearing their mask, so it covers their nose and mouth. She also discussed the facility's plan to move from K95 face masks to surgical face masks by next week.	L 040	Continued from page 2  In multiple group meetings among management teams, on 10/16, 10/19, and 10/20, all managers were informed of this concern, and they will monitor their staff's mask usage and proper wearing. Any need for masks should be shared with the Nursing Home Administrator or Director of Facility Services who will assure that masks are available to be provided to any employee needing an appropriate mask immediately.  In mid-October, Well-Spring's Safety Committee members were assigned audit and education activities on proper mask wearing and handwashing performance. Each committee member was given the responsibility of performing education and auditing of their assigned area within the community, with the goal of reviewing proper hand hygiene and use of masks. This exercise included a written script and pictures to demonstrate the content of the education and audit. Within their assigned areas, each safety team member will review the information and complete an audit of their finding. See attached audit document. Findings from the audits will be reviewed over the next 30 days and incorporated into any additional future training for staff.	
L 047	.2209(H) INFECTION CONTROL	L 047		

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L 047	<p>Continued From page 3</p> <p>10A-13D.2209 (h) The facility shall require all staff to use hand washing technique as indicated in the Centers for Disease Control, "Guideline for Hand Hygiene in Health-Care Settings, Recommendations of the Healthcare Infection Control Practices Advisory Committee and the HICPAC/SHEA/APIC/IDSA Hand Hygiene Task Force". This information can be accessed at <a href="http://www.cdc.gov/mmwr/preview/mmwrhtml/rr5116a1.htm">http://www.cdc.gov/mmwr/preview/mmwrhtml/rr5116a1.htm</a>.</p> <p>This Rule is not met as evidenced by: Based on record review, staff interview and physician interview the facility failed to (H) implement hand hygiene when a nursing assistant (NA) #1 entered and exited 3 of 6 resident rooms (Resident #4, Resident #5 and Resident #6) without performing hand hygiene before and after each contact with a resident and/or the residents immediate objects (CDC guideline for "Clean hands count for health care providers" and "Guideline for Hand Hygiene in Health-Care Settings"). The deficiency occurred during the COVID19 pandemic.</p> <p>Findings included:</p> <p>Review of the facility's "COVID19 Protocol" policy and procedure dated 10-4-20 revealed in part that standard precautions would be used in the care of all residents in all situations regardless of their diagnosis or suspected/confirmed infection status.</p> <p>Review of the facility's "Isolation Precautions" policy and procedure dated 7-21-20 revealed in part under subtitle "Personal Protective Equipment (PPE)" gloves are to be worn</p>	L 047	<p>Continued from page 3</p> <p>.2009(H) Infection Control</p> <p>Well-Spring's Infection Control Plan addresses hand hygiene and the techniques for proper hand hygiene. The policy also addresses the indications for when handwashing and hand antisepsis is necessary.</p> <p>Well-Spring has utilized the CDC Clean Hands video for staff training and will continue to utilize this and other tools. Going forward, in outbreaks and pandemic situations, such as COVID-19, refresher trainings will be scheduled on a quarterly basis to enforce continued good hand hygiene. All staff will also continue to be assigned to annual training on Infection prevention, with emphasis on hand hygiene. Well-Spring's Policy on Pandemic Outbreak emphasizes washing hands when entering and leaving every resident room.</p> <p>The Infection Preventionist met with NA #1 on October 22, 2020 to provide education and coaching on how germs spread, the necessity of proper hand hygiene, and the appropriate times and methods for glove wearing and removal. As part of this education and coaching, the employee viewed the video "Nurse Demonstrates how Germs Spread Even with Gloves".</p>	

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L 047	<p>Continued From page 4</p> <p>whenever there is a possibility of contact with contaminated resident care equipment or contaminated surfaces. Gloves should never take the place of hand washing and should not be worn outside of the resident room. Gloves should be changed between each resident.</p> <p>Review of the Center for Disease Control "Clean Hands Count for Healthcare Providers" sub part "When and How to Perform Hand Hygiene" revealed in part: Hand hygiene should occur after touching a patient or the patient's immediate environment and after contact with contaminated surfaces.</p> <p>Review of the Center for Disease Control "Clean Hands Count for Healthcare Providers" sub part "When and how to wear gloves" revealed in part: Gloves are not a substitute for hand hygiene. Never wear the same pair of gloves in the care of more than one patient.</p> <p>Review of the Center for Disease Control "Guideline for Hand Hygiene in Health-Care Settings" revealed in part: Failure to perform appropriate hand hygiene is considered the leading cause of health care associated infections and spread of organisms and has been recognized as a substantial contributor to outbreaks. Health care workers should be reminded that failure to remove gloves between patients may contribute to transmission of organisms. Health care workers may contaminate their hands (or gloves) merely by touching inanimate objects in patient rooms.</p> <p>The Director of Nursing (DON) was interviewed on 10-14-20 at 11:50am. The DON stated the skilled nursing hall continued to be on lock down and required staff to wear gowns, gloves, face</p>	L 047	<p>Continued from page 4</p> <p>The Infection Preventionist performed a visual demonstration of how germs spread and how cross contamination is caused by inappropriate glove usage. The employee then completed the same exercise.</p> <p>Following the education and coaching, the employee confirmed that she had learned how germs spread, that she now understood why she needed to follow the handwashing and glove protocols that she has learned. Well-Spring utilizes progressive coaching and further violations will be taken through the progressive coaching process, up to possible termination.</p> <p>During the week of October 19<sup>th</sup>, Well-Spring's Staff Development Coordinator and the Infection Preventionist held "Germ Buster Week" for staff education. There were three days of focused education. On October 20, the focus was on hand hygiene. On October 21<sup>st</sup>, staff visited a "room of doom" to identify infection control problems. On October 22<sup>nd</sup>, training focused on mask etiquette. Records of attendance are maintained by the Staff Development Coordinator.</p> <p>Further Infection Prevention Training will be provided to each individual department over the next 30 days. The course will be structured as follows:</p>	
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L 047	<p>Continued From page 5</p> <p>mask and a face shield or goggles while on the unit. The DON discussed there were no residents on the skilled nursing halls that were on enhanced droplet/contact precautions.</p> <p>During an observation of NA #1 delivering the lunch meal to residents located on the general skilled nursing unit on 10-14-20 between 12:30pm and 12:40pm, the NA was observed entering Resident #4's room wearing gloves, gown, mask and goggles. NA #1 was seen placing the resident's lunch on his over the bed table and assisting the resident in setting up the meal. The NA was noted to touch the over the bed table during the process. NA #1 exited Resident #4's room without removing her gloves or performing hand hygiene and then the NA proceeded into Resident #5's room with the resident's meal. The NA was observed assisting the resident in setting up her meal and touching the resident's over the bed table during the process. NA#1 exited Resident #5's room without removing her gloves or performing hand hygiene and proceeded to grab the handle of the meal cart moving it approximately 10 feet down the hall. NA #1 was observed to not perform hand hygiene. The NA proceeded to enter Resident #6's room with the resident's meal. Again, the NA was observed assisting the resident in setting up the meal and touching the resident's over the bed table. NA #1 exited Resident #6's room without removing her gloves or performing hand hygiene.</p> <p>NA #1 was interviewed on 10-14-20 at 12:40pm. The NA stated she had received training on COVID19, hand hygiene and the use of PPE. She confirmed she had moved from one resident to another without changing her gloves or performing hand hygiene. NA #1 discussed feeling it was "ok" to move from one resident to</p>	L 047	<p>Continued from page 5</p> <p>Learning Objectives: By the end of this class the learner will:</p> <ol style="list-style-type: none"> <li>1. Understand how Covid-19 is spread, the symptoms associated with Covid-19, and will identify at least two ways to prevent the spread of the virus.</li> <li>2. Describe the proper way to wear and store a face mask.</li> <li>3. Describe and demonstrate proper hand hygiene using soap and water and sanitizer and indications for use</li> <li>4. Demonstrate how to properly put on and remove gloves</li> <li>5. Discuss when gloves should be worn</li> </ol> <p>Course Content/Outline</p> <ol style="list-style-type: none"> <li>1. Covid Overview Discussion Handout "What You Should Know About Covid-19 to Protect Yourself" (Resource: CDC)</li> <li>2. Mask Etiquette Video: "How to Wear a Mask Safely" (Resource: World Health Organization) Handout: Do's and Don'ts of Wearing a Mask (Resource: CDC) Discussion on proper storage of mask</li> <li>3. Hand Hygiene Video: Hygiene Games/UCLA Infection Prevention (Resource: UCLA) Return demonstration</li> <li>4. Proper use of Gloves Discussion Donning and doffing of gloves</li> </ol>	

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L 047	<p>Continued From page 6</p> <p>another without performing hand hygiene if she had her gloves on and stated she did not think she was taught in training when to perform hand hygiene when passing meal trays.</p> <p>The facility's staff development coordinator (SDC) was interviewed by phone on 10-15-20 at 11:38am. The SDC discussed staff receiving training on proper hand hygiene that covered how long to wash their hands for using soap and water and the proper way to use hand sanitizer. She further stated the staff were taught to remove their gloves after each resident interaction and perform hand hygiene. She discussed the training method was a video with a return demonstration.</p> <p>During an interview with the Administrator on 10-15-20 at 3:58pm by telephone, the Administrator stated staff should be well versed and trained on hand hygiene techniques. She further discussed staff were trained to perform hand hygiene before and after contact with each resident.</p> <p>The facility's Medical Director was interviewed on 10-15-20 at 4:29pm by telephone. The Medical Director discussed the likely hood of COVID being passed from one resident to another if staff was not following proper hand hygiene techniques. She further stated she would discuss the issue with the facility and help provide further education.</p>	L 047	<p>Continued from page 6</p> <p>On an ongoing basis, employee practices around handwashing and proper glove usage will be monitored by managers and supervisors. Positive reinforcement activities are being reviewed to put into practice. Retraining and progressive coaching will be provided as indicated.</p>	