

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER / SUPPLIER / CLIA IDENTIFICATION NUMBER 065245	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 04/20/2020
NAME OF PROVIDER OF SUPPLIER COLUMBINE WEST HEALTH AND REHAB FACILITY		STREET ADDRESS, CITY, STATE, ZIP 940 WORTHINGTON CIR FORT COLLINS, CO 80526	
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 - Few	<p>Provide and implement an infection prevention and control program. **NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on observations, record review and interviews, the facility failed to ensure infection control practices were established and maintained to provide a safe, sanitary and comfortable environment to help prevent the possible development and transmission of Coronavirus (COVID-19) and other communicable diseases, and infections. Specifically, the facility failed to properly clean resident rooms, and follow proper hand hygiene procedures while cleaning resident rooms. Findings include: I. Facility policies The Infection Prevention and Control policy and procedure, last revised February 2020, provided by the nursing home administrator (NHA) on 4/14/2020 at 12:47 p.m. read in pertinent part: Standard Precautions: Standard precautions shall be used routinely during the care and interactions of all residents regardless of their [DIAGNOSES REDACTED]. Hand Hygiene: Healthcare workers must perform hand hygiene (even if gloves are used): -After contact with inanimate objects in the resident's room, especially those in the immediate vicinity of the resident; and -After removing gloves. Use of PPE: Gloves: Wear gloves with fit and durability appropriate to the task: Wear disposable medical examination gloves or reusable utility gloves for cleaning the environment or medical equipment. II. Failure to properly clean resident rooms and follow proper hand hygiene procedures A. Observations On 4/14/2020 at 10:04 a.m. a housekeeper (HK) was observed entering an unidentified double occupancy resident room. The HK did not perform hand hygiene prior to entering the room, she removed a bottle of cleaner from her housekeeping cart and entered the room. The HK was observed lifting personal pictures and items in the resident room with her bare hands, in order to spray the residents shelf with the cleaning product. -10:05 a.m., the HK entered the resident bathroom, and lifted the raised toilet seat with her ungloved hands. The HK did not perform hand hygiene. -10:07 a.m. the HK was observed wiping one of the residents' bedside table, while picking up the resident's television remote and her oxygen incentive spirometer with her ungloved hand. -10:09 a.m., the HK was observed holding the resident's call light in her ungloved hand and wiping the residents' call light. -10:12 a.m. the HK went into the resident bathroom, she did not perform hand hygiene, she removed a pair of gloves and put them on. -10:13 a.m., the HK cleaned the sink and toilet in the resident bathroom with her gloved hands, when she finished with the bathroom she emptied the resident trash can and wiped the trash can with a rag. She removed her gloves, and did not perform hand hygiene. -10:14 a.m., the HK picked up the toilet riser with her bare hands and placed it back over the resident's toilet. -10:14 a.m. the HK performed hand hygiene in the resident's bathroom sink, for 10 seconds, and used her bare hand to turn off the faucet. -10:15 a.m., the HK removed the trash from the room, and stated that she needed to go to the housekeeping closet for additional mop heads. -10:17 a.m., the HK returned with several mop heads, she placed one on her mop, and used her bare hands to get the mop head wet in the bucket of mop water. -10:18 a.m. the HK began mopping the residents room, while mopping the floor, she was observed using her bare hands to move both the resident's wheelchair and walkers. The HK touched the handles multiple times with her bare hands. -10:20 a.m. the HK was observed picking up one of the resident's oxygen tubing from the floor and placing it onto the resident's bed in order to mop the floor. -10:22 a.m. the HK mopped the bathroom floor, and removed the soiled mop head with her bare hand. -10:23 a.m., the HK placed the soiled mop head in her housekeeping cart, and reentered the residents bathroom to wash her hands. The HK washed her hands for less than 10 seconds, and used her bare hand to turn off the water. B. Interviews The HK was interviewed on 4/14/2020 at 10:24 a.m. She said she had not had much training regarding COVID-19 and did not think anything had changed as far as how to clean. She said the only difference was that she was now required to wear a mask. The HK said wearing gloves was a personal preference, and she only wore them when she cleaned the bathroom. The HK said she did not wash her hands or use alcohol based hand hand rub (ABHR) everytime she changed gloves or switched tasks because she washed her hands when she finished a room. The environmental service director (ESD) was interviewed on 4/14/2020 at 10:33 a.m., she said she and the other managers had done several trainings and hands on demonstrations over the past month regarding COVID-19, how to properly clean and what chemicals to use, as well as how to correctly use personal protective equipment (PPE). The ESD said the facility was not currently low on gloves, and the housekeepers should be using disposable gloves the entire time they are cleaning resident rooms. The ESD said each housekeeper had heavy-duty reusable gloves they could also use while cleaning the bathroom, they just needed to be sanitized between rooms. The ESD said hand hygiene needed to be performed before putting gloves on and after gloves had been removed. The ESD said the dirty mop head should never be touched with bare hands. The NHA, director of nursing (DON), and infection preventionist/unit manager (IP) were interviewed on 4/14/2020 at 11:45 a.m. The NHA said all of the staff in the building, including all of the housekeeping staff had multiple training sessions including training on COVID-19, proper PPE use, as well as how to properly don (put on) and doff (remove) PPE including gloves. The IP said gloves needed to be worn the entire time a housekeeping staff was cleaning a resident room, and needed to be changed when the housekeeper changed tasks. The DON said anytime gloves are removed, hand hygiene should be performed either by washing hands, or using ABHR. The IP said she would make sure the room and the resident's personal items were re-cleaned using proper cleaning procedures. The NHA reviewed the training the housekeeper had attended and stated she had training on 3/11/2020, 3/12/2020, 3/13/2020, 3/16/2020, 3/20/2020, 3/24/2020 and 4/13/2020. The NHA said the housekeeper did hands on training on 4/2/2020, where the housekeeper did a return demonstration on properly donning and doffing PPE, which included donning and doffing gloves, and proper hand hygiene.</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.