

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER / SUPPLIER / CLIA IDENTIFICATION NUMBER 315464	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 06/16/2020
NAME OF PROVIDER OF SUPPLIER CARE ONE AT EVESHAM		STREET ADDRESS, CITY, STATE, ZIP 870 EAST ROUTE 70 MARLTON, NJ 08053	
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 - Many	<p>Provide and implement an infection prevention and control program.</p> <p>Based on observation, interview, and review of other pertinent facility documentation, it was determined that the facility failed to ensure that all staff, and contracting services were familiar with, and adhered to infection control practices in accordance with CDC (Centers for Disease Control) and facility's guidelines in regards to donning (application) and doffing (removal) of personal protective equipment (PPE) to prevent the spread of infection on 2 of 2 isolation units. This deficient practice was identified during tour observation and was evidenced by the following: According to the facility's undated Cohorting Guidelines, the facility is divided into zones. The zones are as follows: The Red Zone is comprised of all Covid-19 positive residents. The residents in this zone were on isolation, and signage was posted on each resident's door to indicate as such. This zone was separate from all other cohorts. There were designated staff and designated equipment on this unit. Full PPE is required for this unit, such as eye protection, gown gloves, and mask. The Yellow Zone was comprised of exposed, asymptomatic, or potentially incubating Covid-19 residents. Signage was posted on the front of each resident's door, and separate gowns and gloves for each patient were made available at the point of use; an additional white re-usable lab jacket is labeled for each staff member and made available for use inside the yellow unit when not rendering care. The staff is required to wear a facemask, eye protection, separate gown, and gloves when rendering resident care. Extended use/re-use of a mask and eye protection is utilized as per facility policy. The Green Zone (clean) was comprised of residents that were Covid-19 negative, not exposed or asymptomatic Covid-19, and recovered over 14 days. Only fully recovered residents over 14 days may be moved into the Green Zone. On 6/16/2020 at 12:15 PM, the surveyor toured the unit designated as the Yellow Zone. The surveyor interviewed the Registered Nurse Unit Manager (RN/UM), who explained that she oversaw the Yellow Zone. The RN/UM stated that there was designated staff on Yellow Zone and that all staff were assigned a white re-usable lab jacket that was hung just inside the zippered plastic tent set up and was labeled for each staff member. She explained that all staff were assigned their own re-usable white lab jacket and were to wear when on the Yellow Zone. She also explained that before exiting the Yellow Zone, the staff was to remove the white lab jacket to prevent cross-contamination. On 6/16/2020 at 12:17, the surveyor observed signs posted on the outside and the inside of the plastic wall barrier tent set up that explained what PPE was required to enter the yellow zone and what PPE was to be removed when exiting the yellow zone. The sign posted on the plastic barrier before entering the Yellow Zone indicated the PPE required to enter the Yellow Zone was an N95 facemask, gown, gloves, and face. The sign posted on the plastic barrier before exiting the Yellow Zone indicated that gown, gloves, and face shield should be removed before exiting the Yellow Zone. At this time, the surveyor observed a staff member exiting the Yellow Zone wearing the re-usable white lab jacket and heading toward the Green Zone (clean) unit. The surveyor interviewed the staff member at this time, who identified herself as a Registered Nurse Supervisor (RNS). The RNS stated that she worked on the Yellow Zone, which was the Presumptive Covid-19 positive unit, and that all residents on that zone were considered positive for Covid-19. She admitted that she did not take off the white lab jacket before leaving the unit because she was only going to get supplies. The RNS acknowledged that she should have removed the white lab jacket because it did have the potential to be contaminated. She also stated that she was educated by the facility about proper donning and doffing of PPE to prevent the spread of infection. On 6/16/2020, at 12:25 PM, two surveyors observed a staff member exiting the Yellow Zone with a white re-usable lab jacket. The staff member identified herself as a Speech Therapist (ST). She admitted to leaving the Yellow Zone without removing the contaminated white lab jacket. She indicated that she was not educated that the white re-usable lab jacket was to be removed before exiting the Yellow Zone. The surveyor pointed to the sign that was posted in full view that indicated what PPE was to be removed before exiting the Yellow Zone, and the ST stated, Okay. The ST did not provide the surveyor with any additional information. On 6/16/2020 at 12:45 PM, the surveyor interviewed the RN UM, who stated that employees should not be exiting the Yellow Zone with contaminated PPE and that the RNS and the ST should have removed the white lab jacket before exiting the Yellow Zone. On 6/16/2020 at 1:10 PM, the surveyor toured the Red Zone, which was identified as the Covid-19 positive unit. Before entering the Red Zone, the surveyor observed signage posted indicating that an N95 mask, gloves, gown, and eye protectors must be worn when entering the unit. In the presence of 2 surveyors, a gentleman was observed at the nursing station wearing a mask, gloves, and a short-sleeve shirt with both arms fully exposed; no other PPE was noted. The surveyor interviewed him at this time, and he identified himself and the pharmacy medication deliverer. He stated that he delivered medications to the facility daily with only gloves and mask on. The surveyor observed that he had the medication bag lying directly on the unit's floor. The pharmacy medication deliverer picked the bag off the floor and left the unit without removing the gloves and headed directly to the facility exit; he did not go through any other units. On 6/16/2020 at 1:40 PM, the surveyor interviewed the Licensed Practical Nurse Unit Manager (LPN UM), who stated that the pharmacy deliverer should have worn full PPE, including gown and face shield before entering the Red Zone. She said that she never saw him come to the unit before, but that every vendor is educated at the front desk, and signage was posted about the proper application of PPE before entering the Red Zone. On 6/16/2020 at 1:45 PM, the surveyor interviewed the Director of Nursing (DON), who was also the Infection Preventionist (IP). She stated that the Pharmacy Delivery man should not have been allowed to go past the front desk and should not have gone to the Covid-19 positive unit without wearing the appropriate PPE. The DON/ IP further stated, I was not aware that he was going on that unit without the appropriate PPE. On 6/16/2020 at 2:00 PM, the surveyor interviewed the front door receptionist, who stated that she does the surveillance on all persons entering the facility's front door. All vendors are required to fill out the questionnaire and have temperatures taken. We also provide them with PPE. I don't know how the pharmacy delivery man went on the COVID positive unit. On 6/16/2020 at 3:00 PM, the surveyor interviewed the DON who stated that when the staff exited the Yellow Zone, the staff must remove the re-usable white lab coat and hang it up inside the Yellow Zone to be used later. The DON acknowledged that the Yellow Zone was an isolation unit for residents that were exposed or potentially infected with the Covid-19 virus, but did not think the re-usable white lab coat was contaminated. The DON further stated, I don't think it is contaminated because the white lab coat is covered with a yellow gown before coming in direct contact with residents, but just to be safe, the staff should remove it (white lab jacket) before leaving the Yellow Zone. The surveyor reviewed the facility form dated 6/12/2020, titled Yellow Zone PPE USE which indicated that Gown use-disposable or washable: Must be worn for each resident. May not be worn into more than one resident room. Each caregiver/staff member is assigned a gown (white lab jacket) for each resident for the shift. Gowns are to be hung on labeled hooks (contaminated side facing forward) and re-used for any encounter with the same patient by the same staff member during the shift. Staff members without direct contact with the resident or environment may cover a base gown with an apron to preserve gowns. The surveyor reviewed the facility Cohort Plan revised date of 5/29/2020, that indicated that The PPE use in the Red Zone was as follows: Full PPE Respirator or facemask if not available Eye protection-shield or goggles Gown and gloves The surveyor</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.

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F 0880 Level of harm - Minimal harm or potential for actual harm Residents Affected - Many	<p>(continued... from page 1)</p> <p>reviewed Employee Educational Attendance Records with staff signatures that reflected that the RNS was educated on: 3/21/2020- Covid-19, Infection Control and Prevention, Standard and Transmission based precautions to prevent the transmission of various illnesses, including Covid-19. 3/30/2020- Donning and Doffing PPE. 4/8/2020 and 4/11/2020- PPE use, Covid patients, and Crisis PPE use. Conservation of PPE use is crisis pandemic with safety and handwashing and hygiene. 4/21/2020- Use of PPE with return demonstration. 4/28/2020-PPE review, Zones for patients in each stage=Red, Yellow, Green. 6/12/2020-Removing PPE when leaving the Red and Yellow Zone, Donning and Doffing PPE, Infection Control Practices, and Review of transmission and infection control procedures. The surveyor reviewed Employee Educational Attendance Records with staff signatures that reflected that the ST was educated on: 4/21/2020-Covid-19, N95 mask, use of fabric gowns re-use, and laundering protocol. 5/20/2020- Covid-19 updates and overviews. 6/12/2020-Removing PPE when leaving the Red and Yellow Zone, Donning and Doffing PPE, Infection Control Practices, and Review of transmission and infection control procedures. The surveyor reviewed the facility policy dated 3/4/2019 and titled, Infection Control that indicated that the facilities infection control policies and practices apply equally to all personnel, consultants, contractors, residents, visitors, volunteer workers, general public alike regardless of race, color, creed, national origin, religion, age, sex, handicap, marital or veteran status or payor source. The objectives of our infection control policy and practices are to: a. Prevent, detect, investigate, and control infections in the facility. b. Maintain a safe sanitary and comfortable environment for personnel, residents, visitors, and the general public. c. Establish guidelines for implementing Isolation Precautions, Including Standard and transmission-based precautions. NJAC 8:39-19.4 (a), 19.8 (g)</p>		