

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER / SUPPLIER / CLIA IDENTIFICATION NUMBER 285203	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 06/24/2020
NAME OF PROVIDER OF SUPPLIER GOOD SAMARITAN SOCIETY - BEATRICE		STREET ADDRESS, CITY, STATE, ZIP 401 S 22ND STREET BEATRICE, NE 68310	
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	<p>Provide and implement an infection prevention and control program.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY**</p> <p>Licensure Reference Number 175 NAC 12-006.17B Based on observation, record review and interview; the facility failed to ensure staff donned (put on) N95 or surgical mask with face shield to enter grey zone isolation room; and failed to properly doff (take off) PPE (Personal Protective Equipment) before exiting grey zone isolation room and to properly doff gown to prevent the potential for cross contamination. This had the potential to affect all residents on the 300 and 400 hallways, 24 residents total. The facility census was 64. Findings are: Observation on 6/24/20 at 10:00am of LPN B and LPN C donning PPE to go into a grey zone isolation room revealed both LPN B and LPN C used hand sanitizer and donned gown and gloves, N95 mask and face shield were already worn by both LPN B and LPN C and entered grey zone room [ROOM NUMBER]. When ready to leave grey zone isolation room, both LPN B and LPN C exited the room and outside of the room, removed gloves, hand sanitized and removed gown and placed in trash can and the performed hand hygiene. LPN B and LPN C then walked to the medication cart where they unlocked the medication cart and obtained disinfectant wipes and wiped face shield. Observation on 6/24/20 at 10:06am of Housekeeper A revealed that Housekeeper A was standing outside room [ROOM NUMBER] with surgical mask on. Housekeeper A donned gown and gloves and went into grey zone isolation room [ROOM NUMBER] with 2 bottles of chemicals. At 10:07am, Housekeeper A walked out of room [ROOM NUMBER] with PPE on and put the 2 bottles of chemicals back onto housekeeping cart and then walked back into room [ROOM NUMBER]. At 10:08am Housekeeper A walked out of isolation room with PPE on and threw trash from room [ROOM NUMBER] into trash can outside of room and took mop from mop bucket and went back into room [ROOM NUMBER]. At 10:09am Housekeeper A came out of room [ROOM NUMBER] and put mop back in bucket and then took a rag from the housekeeping cart and went back into room [ROOM NUMBER] and at 10:11am, Housekeeper A came out of room [ROOM NUMBER] and removed gown by pulling straight down on front of gown and then ripped the front of the gown all the way down and put hands straight out with front of the gown exposed and moving the front of the gown toward both sides away from self. Record review of Droplet Precaution educational material from Emory University provided by facility revealed that gowns should be removed by rolling the gown inward and gown and gloves should be removed before exiting the isolation room. Record review of Infection Control Assessment and Promotion Program (ICAP), revised 4/20/20 states to place a laundry bag/bin near the exit of each resident room in isolation for staff members to doff PPE and discard it into bag/bin before leaving the room. Record review of CDC (Centers for Disease Control and Prevention), Interim Infection Prevention and Control Recommendations for Patients with Suspected or Confirmed Coronavirus Disease 2019 in Healthcare Settings, revised 6/19/20 revealed that gloves and gowns should be removed before leaving the patient room. Record review of CDC (Centers for Disease Control and Prevention), FAQ's (Frequently Asked Questions) for Health Care Infection Prevention and Control guidance, updated April 23, 2020 reveals that if Environmental Services Personnel are in isolation rooms, they should wear all recommended PPE when in the room. PPE should be removed upon leaving the room, immediately followed by performance of hand hygiene. Management of laundry, food service utensils and medical waste should also be performed in accordance with routine procedures. Interview on 6/24/20 at 2:48pm with QAPI Coordinator revealed that the expectation of staff entering a grey zone isolation room would be to have a mask on, either a N95 or a surgical mask with a face shield, that PPE would be removed before exiting the isolation room and that gowns be removed by rolling the gown inward.</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.