

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER / SUPPLIER / CLIA IDENTIFICATION NUMBER 225491	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 09/22/2020
NAME OF PROVIDER OF SUPPLIER SHREWSBURY NURSING & REHABILITATION CENTER		STREET ADDRESS, CITY, STATE, ZIP 40 JULIO DRIVE SHREWSBURY, MA 01545	
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	Provide and implement an infection prevention and control program. Based on policy review, observation and interview, the facility failed to ensure staff implemented proper infection control practices in order to prevent the transmission of COVID-19 while handling contaminated linens on a quarantine unit (10 residents on Special Droplet/Contact Precautions). Findings include: Review of the PHS Laundry and Training document and policy, undated, indicated staff would be educated on the handling of precaution linen. It also indicated the laundry apron must be made of non-permeable material and have long sleeves. Review of In-service Competency Records for housekeeping and laundry, indicated no education was done specific to the handling of precaution linens, or the handling and removal of contaminated linens on the resident units. On 9/22/20 at 11:07 A.M., the surveyor observed Housekeeping Staff #1 as she pulled contaminated linens out of laundry bins in the Station Two hallway. She wore a short sleeveless smock, and the contaminated linens touched her uncovered arms and her clothing as she handled them. Another staff member gave Housekeeping Staff #1 a precaution gown after they observed her handling the contaminated linens, and told her to put it on. On 9/22/20 at 11:18 A.M., the surveyor observed and heard the Infection Control Nurse tell other housekeeping staff on the unit that it is unacceptable to reach into laundry bins to remove contaminated linens. On 9/22/20 at 11:25 A.M., the surveyor observed and heard the Infection Control Nurse and administrator tell the Housekeeping Supervisor that housekeeping staff must never reach into laundry bins to remove contaminated lines. During an interview on 9/22/20 at 11:58 A.M., the Regional Director of Housekeeping and Laundry said Housekeeping Staff #1 should not have reached into the laundry bin to remove contaminated linen. He said contaminated linen must be contained in a bag on the resident units. He further said Housekeeping Staff #1 should have removed the entire bag containing the contaminated linen and replaced it with a clean bag. He also said that staff must wear a laundry apron when handling contaminated linens. During an interview on 9/22/20 at 12:58 P.M. the Regional Director of Housekeeping and Laundry said he did not educate his staff on handling precaution linens, but should have. He also said he did not have documentation that his staff was educated on the proper procedure for picking up dirty laundry from the resident units, but should have.		
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.