

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER / SUPPLIER / CLIA IDENTIFICATION NUMBER 225537	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 07/28/2020
NAME OF PROVIDER OF SUPPLIER TOWN AND COUNTRY HEALTH CARE CENTER		STREET ADDRESS, CITY, STATE, ZIP 259 BALDWIN STREET LOWELL, MA 01851	
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>Based on observation, record review and interview the facility failed to ensure that (1). A Certified Nurse's Aide (CNA), an Infection Lead Aide and a Dietary Aide followed appropriate infection control practices to avoid the potential spread of COVID-19. Findings include: Review of the Center for Disease Control (CDC) recommendation titled, Interim Infection Prevention and Control Recommendations for Healthcare Personnel During the Coronavirus Disease 2019 (COVID-19) Pandemic and updated July 15, 2020, indicated that Health Care Personnel (HCP) should wear a facemask at all times while they are in the healthcare facility, including in breakrooms or other spaces where they might encounter co-workers. Further review indicated that HCP should wear eye protection in addition to their facemask to ensure the eyes, nose, and mouth are all protected from exposure to respiratory secretions during patient care encounters. 1. During observation of the North unit on 7/28/20, at 9:45 A.M., the surveyor observed CNA #1 enter room [ROOM NUMBER]N (a room with COVID-19 negative residents) without eye protection or a protective gown. The surveyor then observed CNA #1 to put sneakers on the resident in bed A, transfer the resident to her/his wheelchair, bring her/him to the bathroom and transfer her/him to the toilet, all actions of direct resident care to a COVID-19 negative resident, without the recommended personal protective equipment (PPE) on. CNA #1 then exited the room. At 9:59 A.M., the surveyor observed CNA #1 re-enter room [ROOM NUMBER]N, without eye protection, gloves or protective gown and without performing hand hygiene, obtain clothing and bathing items from the residents closet, then enter the bathroom and provide direct resident care. During an interview on 7/28/20, at 10:15 A.M., CNA #1 said that she is not supposed to wear full PPE because negative residents are okay. During an interview on 7/28/20, at 10:17 A.M., the Director of Nursing said that CNA #1 should have been wearing full PPE when providing direct care to a COVID-19 negative resident because either the resident or the staff member could be positive but asymptomatic and could spread the disease to one another. 2. During observation of the North unit on 7/28/20, at 10:46 A.M., the surveyor observed Infection Lead #1 sitting at the nurse's station talking with 3 other staff members, with her face mask pulled down below her chin, exposing her nose and mouth. After 2 minutes Infection Lead #1 saw the surveyor observing her and pulled her mask up over her nose and mouth, touching the outside of her mask thus contaminating her hands. The surveyor then observed that Infection Lead #1's face mask repeatedly fell down below her nose while she was talking and she pulled the mask back up by touching the outside of the mask, contaminating her hands. She then touched multiple items at the nurse's station including the phone and papers, contaminating them. 3. During observation of the kitchen on 7/28/20, at 10:59 A.M., the surveyor observed Kitchen Aide #1 filling cups with coffee, for several minutes, with his face mask hanging off his face, attached to one ear only. Not until another kitchen staff member told him to put the mask back on over his mouth and nose did the surveyor observe Kitchen Aide #1 apply his facemask appropriately. During an interview on 7/28/20, at 11:15 A.M., the Director of Nursing said that face masks are to be worn by all staff at all times while in the facility. She also said that she did not have a policy that indicated when providing direct care to a COVID-19 negative resident full PPE is supposed to be worn but that the staff have all been trained to wear full PPE when caring for COVID-19 negative residents.</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.