

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER / SUPPLIER / CLIA IDENTIFICATION NUMBER 335539	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 05/11/2020
NAME OF PROVIDER OF SUPPLIER OUR LADY OF CONSOLATION NURSING AND REHAB CARE CTR		STREET ADDRESS, CITY, STATE, ZIP 111 BEACH DRIVE WEST ISLIP, NY 11795	
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 0836 Level of harm - Potential for minimal harm Residents Affected - Some	<p>Ensure the facility is licensed under applicable State and local law and operates and provides services in compliance with all applicable Federal, State, and local laws, regulations, and codes, and with accepted professional standards.</p> <p>Based on interview and record review during the COVID-19 Focused Infection Control Survey (Complaint # NY 599) the facility did not ensure that it was in compliance with all applicable Federal, State, and local laws, regulations, and codes. Specifically, the facility did not comply with New York State Executive Order (EO) 202.18 and did not ensure that all residents and/or their next of kin were notified of either a single confirmed infection of COVID19 or COVID19 death within 24 hours from the date of occurrence between 4/19/20 to 4/24/20. The finding is: The EO 202.18 as amended by EO 202.19 documented Any skilled nursing facility, nursing home, or adult care facility licensed and regulated by the Commissioner of Health shall notify family members or next of kin if any resident tests positive for COVID-19, or if any resident suffers a COVID-19 related death, within 24 hours of such positive test result or death. The facility's policy titled Communication During COVID-19, dated 4/13/2020 and revised 5/1/2020, documented that the facility will provide written notification to residents/patient/health care proxy/surrogate/guardian that there are positive COVID19 cases within the facility. The facility's death listing from 3/1/2020 documented 13 COVID-19 in-facility deaths between 4/19/20-4/24/20. The facility's admissions listing documented that there were 14 residents admitted from the hospital between 4/19/2020 and 4/24/2020 who were positive for COVID-19. Review of the facility's Email COVID-19 notification system revealed that the first Email update sent out to families was dated 4/24/2020 at 6:13 PM. The Administrator was interviewed on 5/11/20 at 5:55 PM. He stated that the notification process to all families/next of kin did not begin until 4/24/2020 because the facility was waiting for further guidance on the Executive Order 202.18. He stated as of 4/24/2020 the facility put in place an Email notification system. The Administrator alleged that the Executive Order was not clear initially and he interpreted it as an order to notify only affected families of individual health status as it related to COVID19. He stated calls were made to individual affected families regarding health status between 4/19/2020 and 4/24/2020. He stated he did not have documentation of phone call records to individual families from 4/19/2020 to 4/24/2020. 400.2</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.