

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER / SUPPLIER / CLIA IDENTIFICATION NUMBER 495235	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 08/06/2020
NAME OF PROVIDER OF SUPPLIER ENVOY OF WILLIAMSBURG, LLC		STREET ADDRESS, CITY, STATE, ZIP 1235 MT VERNON AVENUE WILLIAMSBURG, VA 23185	
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	<p>Provide and implement an infection prevention and control program.</p> <p>Based on observation, staff interview, and facility documentation, the facility staff failed to maintain infection control practices in accordance with the Center for Medicare and Medicaid Services (CMS) and Centers for Disease Control and Prevention (CDC) recommendations to prevent the spread of COVID-19 in 2 of 2 nursing units of the facility. The findings included: 1) The facility staff were unaware of the chemicals used and the contact/dwell time required to properly sanitize and disinfect the facility and surfaces. 2) The facility staff failed to properly wear personal protective equipment (PPE) to prevent the spread of COVID-19. On 8/5/2020 at approximately 11:15 AM Surveyor A was accompanied by the facility Director of Nursing (DON). During an interview with Employee C, housekeeper, she indicated she uses Virex to clean and disinfect. Employee C was unclear of the surface contact time to provide proper disinfection to surfaces. In addition, Employee C was observed throughout the interview to have her facemask below her nose. On 8/5/2020 at approximately 11:23 AM Surveyor A, while accompanied by the DON, interviewed Employee D, a housekeeper. Employee D stated she uses the chemicals in the housekeeping cart to clean with. Surveyor A observed Virex. When Employee D was asked what she uses the Virex on, Employee D stated she is only using the diluted bleach. Employee D stated the bleach was diluted for her and she is unaware of concentration, contact time, etc. On 8/5/2020 at approximately 11:30 AM an interview was conducted with Employee E, the Housekeeping Supervisor who stated Employees C and Employee D are aware of the chemicals and the dwell time of 10 minutes for Virex. On 8/5/2020 at 11:38 AM Surveyor A observed LPN A at the nursing station on the COVID warm unit with her N95 mask (medical respirator) over top of a procedure mask as she exited the nursing station and proceeded down the hall on the warm unit. The DON was asked why LPN A would have a medical respirator on over a procedure mask, the DON stated she didn't know. On interview LPN A stated she forgot she had it on. By applying the N95 mask over the procedure mask LPN A failed to have a seal on her N95. On 8/5/2020 at approximately 11:50 AM, prior to Surveyor A exiting the facility, Surveyor A shared her observation concerns with the DON. On 8/5/2020 the facility provided a document indicating LPN A was educated on 8/3/2020 of the need to wear an N95 mask while working on the warm unit. On 8/5/2020 a review of the facility policy titled COVID-19 Pandemic Plan with a revision date of 7/27/2020 read, Per CDC guidance when respirator supplies, including fit test kits are severely limited; Review the Voluntary usage form with employee. Assist employee to choose the respirator that fits best. Provide education on donning/applying and doffing/removing respirator. Have employee perform seal test. Complete skills competency. The above referenced policy further stated: Follow CDC (Center for Disease Control) guidance. Cleaning and disinfection for pandemic COVID-19 follows the general principles used daily in health care settings, per CDC guidance. Per the CDC's guidance, it stated, Assign environmental services (EVS) staff to work only on the unit. If there are not a sufficient number of EVS staff to dedicate to this unit despite efforts to mitigate staffing shortages, restrict their access to the unit. Also, assign HCP dedicated to the COVID-19 care unit (e.g., NAs) to perform cleaning and disinfection of high-touch surfaces and shared equipment when in the room for resident care activities. HCP should bring an Environmental Protection Agency (EPA)-registered disinfectant (e.g., wipe) from List N into the room and wipe down high touch surfaces (e.g., light switch, doorknob, bedside table) before leaving the room. Ensure that high-touch surfaces in staff break rooms and work areas are frequently cleaned and disinfected (e.g., each shift) accessed online 8/5/2020 at: https://www.cdc.gov/coronavirus/2019-ncov/hcp/nursing-homes-responding.html. The EPA List N stated the following: Clorox Bleach and Virex both have a surface contact time of 10 minutes. Accessed online 8/5/2020 at: https://cfpub.epa.gov/giwiz/disinfectants/index.cfm. Per the CDC's guidance, it stated Put on NIOSH-approved N95 filtering facepiece respirator or higher. If the respirator has a nosepiece, it should be fitted to the nose with both hands, not bent or tented. Do not pinch the nosepiece with one hand. Respirator/facemask should be extended under chin. Both your mouth and nose should be protected. Do not wear respirator/facemask under your chin or store in scrubs pocket between patients.* Respirator: Respirator straps should be placed on crown of head (top strap) and base of neck (bottom strap). Perform a user seal check each time you put on the respirator. accessed online 8/5/2020 at: https://www.cdc.gov/coronavirus/2019-ncov/hcp/using-ppe.html The CDC gives this direction on how to properly don (put on) PPE: 4. Put on NIOSH-approved N95 filtering facepiece respirator or higher (use a facemask if a respirator is not available). If the respirator has a nosepiece, it should be fitted to the nose with both hands, not bent or tented. Do not pinch the nosepiece with one hand. Respirator/facemask should be extended under chin. Both your mouth and nose should be protected. Do not wear respirator/facemask under your chin or store in scrubs pocket between patients.* Respirator: Respirator straps should be placed on crown of head (top strap) and base of neck (bottom strap). Perform a user seal check each time you put on the respirator. Accessed online 8/5/2020 at: https://www.cdc.gov/coronavirus/2019-ncov/hcp/using-ppe.html The facility Administrator and DON were made aware of the findings during the end of day meeting held on 8/6/2020. No further information was provided.</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.