

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER / SUPPLIER / CLIA IDENTIFICATION NUMBER 515176	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 07/15/2020
NAME OF PROVIDER OF SUPPLIER HAMPSHIRE CENTER		STREET ADDRESS, CITY, STATE, ZIP 260 SUNRISE BOULEVARD ROMNEY, WV 26757	
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. **NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY**</p> <p>. Based on record review and staff interview, the facility failed to follow their surveillance plan for identifying/screening residents with possible signs and symptoms of COVID - 19. This was true for six (6) of nine (9) records reviewed during a COVID - 19 focused survey. Resident identifiers: #1, #2, #3, #4, #5, and #6. Facility census: 58. Findings included: a) COVID - 19 screening assessment Review of the facility's policy, IC405 COVID - 19, section 9, found the following direction: .Complete the COVID 19 Screen UDA (User Defined Assessment) to monitor patients each shift for fever and signs/symptoms of COVID - 19 The COVID - 19 screening assessment requires licensed nursing staff to complete the following questions: Record the most recent temperature. Is a fever of 100.0 or greater present? (document yes/no) Record the most recent pulse. Is [MEDICAL CONDITION](more than 100 beats per minute) present? (document yes/no) Record the most recent O2 SATs (oxygen saturation) and the method, such as room air, oxygen etc. Has the O2 SAT decreased by 3 points or greater since last taken? yes/no Most recent respiration Are new onset indicators present (check all that apply): --sore throat --chest congestion --cough --or increase in shortness of breath --or worsening confusion --other symptoms --malaise and/or muscle pain --nausea --vomiting --diarrhea --chills and/or shaking chills --headache --new loss of taste or smell --[MEDICAL CONDITION] O2 SAT drop as indicated above, or --none present Under the category entitled, Action: --The following are new onset indicators of suspected COVID-19 (if none listed below no indicators were identified.) --Indicators present? (document yes/no) b) Resident #1 Review of the COVID - 19 screening assessment completed on 07/11/20, found the resident's O2 SAT was 99.0% on room air at 12:48 AM. The following COVID-19 screening tool was completed at 6:38 PM on 07/11/20. The licensed nurse recorded the O2 SAT as 96.0 % via nasal cannula on the screening tool. A drop from 99.0% to 96.0% is a decrease in 3 points. The nurse answered, No, on the 07/11/20 COVID -19 screen at 6:38 PM to the question, Has the O2 sat decreased by 3 points or greater since last taken? The nurse also documented, No, to any new onset indicator present, which included coding fever, [MEDICAL CONDITION] O2 SAT drop as indicated above. The nurse documented , No, to indicators present. c) Resident #2 At 5:47 PM on 07/07/20 a COVID -19 screening assessment was completed. The residents O2 level was 96.0% on room air. The following COVID - 19 screening assessment was completed at 12:30 AM on 07/08/20. At this time the O2 was recorded as 93.0 % on room air. A drop from 96.0 % to 93.0 % is a three point drop in O2. The nurse answered, No, on the 07/08/20 COVID -19 screen at 12:30 AM to the question, Has the O2 sat decreased by 3 points or greater since last taken? The nurse also documented, No, to any new onset indicator present, which included coding fever, [MEDICAL CONDITION] O2 SAT drop as indicated above. The nurse documented , No, to indicators present. d) Resident #3 Review of the COVID -19 screening assessment for 07/12/20 at 10:23 AM, found the Resident's O2 level was recorded as 95.0% on room air. The following assessment, completed at 9:39 PM on 07/12/20, recorded the O2 level as 92.0% on room air. A drop from 95.0% to 92.0% is a three point drop in oxygen saturation. The nurse answered, No, on the 07/12/20 COVID -19 screen completed at 09:39 PM, to the question, Has the O2 sat decreased by 3 points or greater since last taken? The nurse also documented, No, to any new onset indicator present, which included coding fever, [MEDICAL CONDITION] O2 SAT drop as indicated above. The nurse documented , No, to indicators present. At 3:48 PM on 07/15/20, the Director of Nursing (DON) said the facility completes two (2) COVID - 19 assessments per day on each resident to screen for COVID - 19. The DON confirmed the COVID - 19 assessments were not completed per the directions on the assessment form for Resident's #1, #2, #3, #4, #5, and #6. The documentation on the assessments did not address a three or more point drop in O2. In addition, documentation did not reflect the, new onset indicator present, which included coding fever, [MEDICAL CONDITION] O2 SAT drop as indicated above. The DON said, If any signs are present the nurse will notify the primary care physician. Had the nursing staff answered the question with, yes, indicating a 3 or more percent drop in O2 and yes, to a new onset indicator present, which included fever, [MEDICAL CONDITION] O2 SAT drop as indicated above, the assessment would have triggered a change in condition on each resident. At 4:38 PM on 07/15/20, the DON said she had no further information to present to substantiate the COVID assessment was completed per the directions on the form. .</p> <p>. e) Resident #4 Review of the COVID -19 assessment on 07/13/20 at 5:40 PM, found the resident's oxygen saturation was 94.0% on room air at 4:49 PM. The following COVID-19 assessment was completed at 9:40 AM on 07/13/20. The licensed nurse recorded the oxygen saturation as 97.0 % at 10:06 AM, via room air on the screening tool. A drop from 97.0% to 94.0% is a decrease in three (3) points. The nurse answered, No, on the 07/13/20 COVID -19 assessment at 5:40 PM to the question, Has the oxygen saturation decreased by three (3) points or greater since last taken? The licensed nurse marked none present for new onset indicators present. The licensed nurse failed to mark 11i, which says: fever, [MEDICAL CONDITION] or oxygen saturation drop as indicated above. The resident had a oxygen saturation drop as indicated above. f) Resident #5 Review of the COVID -19 assessment on 07/05/20 at 10:59 AM, found the resident's oxygen saturation was 92% via nasal cannula on the screening tool at 10:26 AM. The following COVID-19 assessment was completed at 6:01 PM on 07/04/20. The licensed nurse recorded the oxygen saturation as 98.0 % at 5:44 PM via nasal cannula on the screening tool. A drop from 98.0% to 92.0% is a decrease greater than three (3) points. The nurse answered, No, on the 07/05/20 COVID -19 assessment at 10:59 AM to the question, Has the oxygen saturation decreased by three (3) points or greater since last taken? The licensed nurse marked none present for new onset indicators present. The licensed nurse failed to mark 11i, fever, [MEDICAL CONDITION] or oxygen saturation drop as indicated above. The resident had a oxygen saturation drop as indicated above. g) Resident #6 1. 07/05/20 COVID-19 assessment Review of the COVID 19 assessment on 07/05/20 at 3:26 PM, found the resident's oxygen saturation was 90.0% on room air at 2:11 PM. The following COVID-19 assessment was completed at 5:29 PM, on 07/04/20. The licensed nurse recorded the oxygen saturation as 96.0 % via room air at 5:39 PM on the screening tool at A drop from 96.0% to 90.0% is a decrease greater than three (3) points. The nurse answered, No, on the 07/05/20 COVID -19 assessment at 5:26 PM to the question, Has the oxygen saturation decreased by three (3) points or greater since last taken? The licensed nurse marked none present for new onset indicators present. The licensed nurse failed to mark 11i, fever, [MEDICAL CONDITION] or oxygen saturation drop as indicated above. The resident had a oxygen saturation drop as indicated above. 2. 07/09/20 COVID-19 assessment Review of the COVID - 19 assessment on 07/09/20 at 9:21 PM, found the resident's oxygen saturation was 94.0% on room air at 5:28 PM. The following COVID-19 assessment was completed at 1:19 PM on 07/09/20. The licensed nurse recorded the oxygen saturation as 97.0 % via room air at 2:39 PM on the screening tool. A drop from 97.0% to 94.0% is a decrease in three (3) points. The nurse answered, No, on the 07/09/20 COVID -19 assessment at 9:21 PM to the question, Has the oxygen saturation decreased by three (3) points or greater since last taken? The licensed nurse marked none present for new onset indicators present. The licensed nurse failed to mark 11i, fever, [MEDICAL CONDITION] or oxygen saturation drop as indicated above. The resident had a oxygen saturation drop as indicated above. .</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.