

Survey Deficiency Summary

2 Facilities Surveyed

Surveys Taken 8/04/20-8/17/20

F835 Administration

- L Facility administrator failed to ensure the facility addressed staff noncompliance with PPE usage and failed to ensure COVID-19 recommendations and guidance for the control of COVID-19 was communicated to key clinical staff. This failure resulted in the spread of the virus to 44 of 49 patients in the facility and contributed to the death of eight of 44 patients placing all of the patients in immediate jeopardy.

On multiple occasions staff was not wearing the proper PPE or not wearing it correctly. Some staff were wearing masks with exhalation valves which were not recommended by CDC or facility policy. The facility did not follow the HAI recommendations for contact tracing and assessing patients at least three times per day.

F865 QAPI Program/Plan, Disclosure/Good Faith Attempt

- L Facility quality assurance and performance improvement (QAPI) committee failed to identify breaches in infection control practices in the facility and failed to monitor infection control practices which contributed to the transmission of COVID-19 within the facility. This failure resulted in the spread of COVID-19 to 44 of 49 patients in the facility and contributed to the death of eight of the 44 patients who tested positive for the virus. This failure placed all of the patients in the facility in immediate jeopardy.

The jeopardy was removed onsite and was effective from 7/11/2020-8/17/2020. An acceptable removal plan, which removed the immediacy of the Jeopardy, was received on 8/17/2020.

F880 Infection Prevention & Control

- L Facility failed to send home a COVID-19 symptomatic staff, and failed to ensure staff followed PPE requirements for the mitigation and control of the virus in the facility. This failure resulted in the spread of COVID-19 to 44 of 49 patients in the facility and contributed to the death of eight of 44 patients who tested positive for the virus. These failures placed all patients in the facility in immediate jeopardy. The facility submitted an approved allegation of compliance and the immediacy of the jeopardy was removed on 8/17/2020.

The facility staff was not wearing appropriate PPE at all times while in the facility. A staff member who became ill did not report to the supervisor and then go home per facility policy. The HAI from the Tennessee department of health recommended the facility conduct assessments on the patients three times a day after the outbreak at the facility and the facility did not do this. PPE compliance audits and social distancing audits had not been completed prior to the start of the survey.

18-Sep-20

D Facility failed to prevent the risk of transmission of COVID-19 for three patients in isolation. Three patients with symptoms were not moved to private room when the symptoms occurred. Rather the facility waited for confirmed lab results prior to moving them thus exposing the roommates to the virus.