

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

PRINTED: 01/20/2022
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 495361	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____		(X3) DATE SURVEY COMPLETED 10/27/2020
NAME OF PROVIDER OR SUPPLIER ENVOY OF WOODBRIDGE, LLC			STREET ADDRESS, CITY, STATE, ZIP CODE 14906 JEFFERSON DAVIS HIGHWAY WOODBIDGE, VA 22191		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)		(X5) COMPLETION DATE
E 000	Initial Comments	E 000			
F 000	An unannounced Emergency Preparedness survey was conducted 10/26/2020 through 10/27/2020. The facility was in substantial compliance with 42 CFR Part 483.73, Requirement for Long-Term Care Facilities. INITIAL COMMENTS	F 000			
F 880 SS=D	An unannounced Medicare/Medicaid FICS survey was conducted 10/26/2020 through 10/27/2020. Corrections are required for compliance with F-880 of 42 CFR Part 483 Federal Long Term Care requirement(s). The census of this 120 bed facility was 80 at the time of the survey. Of the 80 current residents, 22 were COVID-19 positive. The survey sample consisted of six current resident reviews [Residents #1, #2, # 3, #4, # 5 and #6]. Infection Prevention & Control CFR(s): 483.80(a)(1)(2)(4)(e)(f) §483.80 Infection Control The facility must establish and maintain an infection prevention and control program designed to provide a safe, sanitary and comfortable environment and to help prevent the development and transmission of communicable diseases and infections. §483.80(a) Infection prevention and control program. The facility must establish an infection prevention and control program (IPCP) that must include, at a minimum, the following elements: §483.80(a)(1) A system for preventing, identifying, reporting, investigating, and controlling infections	F 880			11/12/20

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

Electronically Signed

11/05/2020

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.

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F 880	<p>Continued From page 1</p> <p>and communicable diseases for all residents, staff, volunteers, visitors, and other individuals providing services under a contractual arrangement based upon the facility assessment conducted according to §483.70(e) and following accepted national standards;</p> <p>§483.80(a)(2) Written standards, policies, and procedures for the program, which must include, but are not limited to:</p> <p>(i) A system of surveillance designed to identify possible communicable diseases or infections before they can spread to other persons in the facility;</p> <p>(ii) When and to whom possible incidents of communicable disease or infections should be reported;</p> <p>(iii) Standard and transmission-based precautions to be followed to prevent spread of infections;</p> <p>(iv) When and how isolation should be used for a resident; including but not limited to:</p> <p>(A) The type and duration of the isolation, depending upon the infectious agent or organism involved, and</p> <p>(B) A requirement that the isolation should be the least restrictive possible for the resident under the circumstances.</p> <p>(v) The circumstances under which the facility must prohibit employees with a communicable disease or infected skin lesions from direct contact with residents or their food, if direct contact will transmit the disease; and</p> <p>(vi) The hand hygiene procedures to be followed by staff involved in direct resident contact.</p> <p>§483.80(a)(4) A system for recording incidents identified under the facility's IPCP and the corrective actions taken by the facility.</p>	F 880			

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F 880	<p>Continued From page 2</p> <p>§483.80(e) Linens. Personnel must handle, store, process, and transport linens so as to prevent the spread of infection.</p> <p>§483.80(f) Annual review. The facility will conduct an annual review of its IPCP and update their program, as necessary. This REQUIREMENT is not met as evidenced by: Based on observation, clinical record review, staff interview and facility document review, it was determined that facility staff failed to implement infection control practices for one of 16 residents under quarantine, Resident #2. The facility staff failed to ensure the appropriate PPE [personal protective equipment], donning of gloves prior to entering Resident #2's room and providing feeding assistance to Resident # 2, who was under quarantine. CNA [certified nursing assistant] #1 was observed in Resident #2's room feeding the resident without gloves.</p> <p>The findings include:</p> <p>Resident #2 was admitted to the facility with diagnoses that included but were not limited to: dementia (a progressive state of mental decline, especially memory function and judgement, often accompanied by disorientation.) (1), high blood pressure, dysphagia (a condition in which swallowing is difficult or painful due to obstruction of the esophagus or muscular abnormalities of the esophagus or pharynx) (2), aphasia (Inability to speak or express oneself in writing or to comprehend spoken or written language because of a brain disorder. (3), and diabetes (A chronic</p>	F 880	<p>1. Resident #2 suffered no untoward effects from alleged deficient practice. CNA #1 was immediately given a 1:1 in-service on the proper use of PPE in an isolation room and the usage of gloves while feeding a resident in an isolation room.</p> <p>2. Current residents on isolation have the potential to be affected. A review of current residents on isolation was conducted to ensure correct PPE is used while in the resident's rooms.</p> <p>3. Current staff will be educated by the DON or designee on the Standard and Transmission based precautions and which PPE should be worn on contact and other transmission based precautions during care and upon entering the room. Current employees will demonstrate competency on donning and doffing of PPE.</p> <p>4. The DON or designee will conduct a random audit for the correct usage of PPE according to the isolation type to include donning and doffing 5 times per week for</p>		

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F 880	<p>Continued From page 3</p> <p>disease in which the body cannot regulate the amount of sugar in the blood.)(4).</p> <p>The most recent MDS (minimum data set) assessment, a significant change assessment, with an assessment reference date of 10/11/2020 coded the resident as scoring a "3" on the BIMS (brief interview for mental status) score, indicating the resident was severely impaired to make daily cognitive decisions. The resident was coded as requiring extensive assistance of one staff member for eating. Resident #2 was coded as requiring extensive assistance to totally dependent upon one or more staff members for their activities of daily living.</p> <p>A physician order dated, 10/14/2020 documented, Contact droplet isolation, precautions and quarantine X [times] 14 days. All care and activities must be given in patient's room. The orders documented, "Regular diet, dysphagia mechanical soft with thin, regular liquids."</p> <p>On 10/26/2020 at approximately 1:14 p.m., an observation of Resident # 2 revealed the resident in bed having breakfast. Further observation revealed CNA [certified nursing assistant] # 1 seated at Resident # 2's bedside feeding the resident. Observation of CNA # 1's PPE [personal protective equipment] revealed they were wearing a mask. Further observation failed to evidence CNA # 1 wearing gloves. Observation of the entrance to Resident # 2's room revealed a yellow sign posted outside the residents door that documented, "Quarantine. Precautions. Please take the following precautions before entering the room. 1. Wash hands. 2. Wear a mask. 3. Wear gloves. 4. Wash hands after care. 5. Report to nurse any</p>	F 880	<p>6 weeks. The findings will be reported to the quality improvement committee monthly and the plan will be revised as necessary.</p> <p>5. Date of Compliance 11/12/2020</p>		

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F 880	<p>Continued From page 4 changes in condition."</p> <p>On 10/26/2020 at approximately 1:25 p.m., an interview was conducted with RN [registered nurse] # 2. When asked about the PPE that should be worn by staff when entering the room of a resident under quarantine, RN # 2 stated that staff should wash their hands before going into the room or use hand sanitizer, wear a mask, wear gloves, wash hands after care or using hand sanitizer and then remove the gloves inside the room. When informed of the above observation, RN # 2 was asked if CNA # 1 should have been wearing gloves. RN # 2 stated, "The CNA doesn't need to wear gloves when feeding because they're not coming into contact with the resident she's not physically touching the patient." When asked why Resident # 2 was under quarantine, RN # 2 stated Resident #2 was under quarantine for observations for signs or symptoms of COVID-19 because they had a possible exposure. When asked how COVID-19 was transmitted, RN # 2 stated that it was airborne. When asked if CNA # 1 was at risk for contracting droplets from Resident # 2 while feeding them, RN # 2 stated, "The CNA's hand could obtain droplets from feeding the resident but washing hands reduces the risk and the spoon or the utensil became the barrier between the resident mouth and her [CNA's] hand."</p> <p>On 10/26/2020 at approximately 1:34 p.m., an interview was conducted with CNA # 1. When asked if they had fed Resident # 2, CNA # 1 stated yes. When asked about the quarantine precautions posted outside of Resident # 2's door and the use of gloves, CNA # 1 stated, "I don't wear gloves when feeding but I wear the gloves when providing patient care."</p>	F 880			

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F 880	<p>Continued From page 5</p> <p>On 10/26/2020 at approximately 2:34 p.m., an interview was conducted with RN [registered nurse] # 1. RN #1 was informed of the above observation of CNA # 1 feeding Resident # 2. RN # 1 was asked about the use of gloves for a resident under quarantine precautions. RN # 1 stated that if the resident is being assisted with a meal or being fed their meal, the staff should be wearing gloves. RN # 1 was then asked to provide a copy of the facility's policy regarding the use of PPE for quarantined residents.</p> <p>On 10/26/2020 at approximately 3:00 p.m., RN # 1 and RN # 3 were made aware of the above findings</p> <p>On 10/27/2020 at approximately 7:11 a.m., a second request was made to RN # 1 for a copy of the facility's policy regarding the use of PPE for quarantined residents.</p> <p>On 10/27/2020 at approximately 2:27 p.m., during an exit conference by telephone with RN # 1 stated that they did not have a specific policy regarding the use of PPE for quarantined residents.</p> <p>COVID-19 Long-Term Care Facility Guidance April 2, 2020, documents in part the following: "The Centers for Medicare & Medicaid Services (CMS) and the Centers for Disease Control and Prevention (CDC) are issuing new recommendations to State and local governments and long-term care facilities (also known as nursing homes) to help mitigate the spread of the 2019 Novel Coronavirus (COVID-19). Nursing Homes should immediately ensure that they are complying with all CMS and CDC guidance</p>	F 880			

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F 880	<p>Continued From page 6</p> <p>related to infection control." This information was obtained from the website: https://www.cms.gov/files/document/4220-covid-19-long-term-care-facility-guidance.pdf</p> <p>Responding to Coronavirus (COVID-19) in Nursing Homes Considerations for the Public Health Response to COVID-19 in Nursing Homes Updated Apr. 30, 2020, documents in part the following: "Create a plan for managing new admissions and readmissions whose COVID-19 status is unknown. Options include placement in a single room or in a separate observation area so the resident can be monitored for evidence of COVID-19.</p> <p>- All recommended COVID-19 PPE should be worn during care of residents under observation, which includes use of an N95 or higher-level respirator (or facemask if a respirator is not available), eye protection (i.e., goggles or a disposable face shield that covers the front and sides of the face), gloves, and gown." This information was obtained from the following website: https://www.cdc.gov/coronavirus/2019-ncov/hcp/nursing-homes-responding.html</p> <p>Interim Infection Prevention and Control Recommendations for Healthcare Personnel During the Coronavirus Disease 2019 (COVID-19) Pandemic Updated July 15, 2020, documents in part the following: "The PPE recommended when caring for a patient with suspected or confirmed COVID-19 includes the following: Gloves: Put on clean, non-sterile gloves upon entry into the patient room or care area. Change gloves if they become torn or heavily contaminated. Remove and discard gloves before</p>	F 880			

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F 880	<p>Continued From page 7</p> <p>leaving the patient room or care area, and immediately perform hand hygiene." This information was obtained from the following website: https://www.cdc.gov/coronavirus/2019-ncov/hcp/infection-control-recommendations.html#adhere</p> <p>No further information was provided prior to exit.</p> <p>References: (1) Barron's Dictionary of Medical Terms for the Non-Medical Reader, 5th edition, Rothenberg and Chapman, page 124. (2) Barron's Dictionary of Medical Terms for the Non-Medical Reader, 5th edition, Rothenberg and Chapman, page 178. (3) Barron's Dictionary of Medical Terms for the Non-Medical Reader, 5th edition, Rothenberg and Chapman, page 44. (4) This information was obtained from the website: https://www.nlm.nih.gov/medlineplus/ency/article/001214.htm.</p>	F 880			