STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	495015	A. BUILDING _____ B. WING _____	10/16/2020

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
ROMAN EAGLE REHABILITATION AND HEALTH CARE CENTER	2526 NORTH MAIN STREET DANVILLE, VA 24540

(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 An unannounced Emergency Preparedness COVID-19 Focused Survey was conducted onsite 10/14/2020 and offsite from 10/14-10/16/2020. The facility was in compliance with E0024 of 42 CFR Part 483.73, Requirements for Long-Term Care Facilities.	E 000		
F 000	INITIAL COMMENTS An unannounced COVID-19 Focused Survey was conducted onsite 10/14/2020 and continued with offsite review 10/14-10/16/2020. The facility was not in compliance with 42 CFR Part 483.80 infection control regulations, for the implementation of The Centers for Medicare & Medicaid Services and Centers for Disease Control practices to prepare for COVID-19. The census in this 312 certified bed facility was 187. During the onsite portion of the survey (10/14/2020) of the 187 residents none were positive for COVID-19. Prior to the conclusion of the survey (10/16/2020) one resident had tested positive for COVID-19. Five staff were COVID-19 positive.	F 000		
F 886 SS=D	COVID-19 Testing-Residents & Staff CFR(s): 483.80 (h)(1)-(6) §483.80 (h) COVID-19 Testing. The LTC facility must test residents and facility staff, including individuals providing services under arrangement and volunteers, for COVID-19. At a minimum, for all residents and facility staff, including individuals providing services under arrangement and volunteers, the LTC facility must: §483.80 (h)((1) Conduct testing based on parameters set forth by the Secretary, including	F 886		10/30/20

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE | TITLE | (X6) DATE

Electronically Signed | 11/23/2020

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F 886	Continued From page 1	F 886		

but not
limited to:
(i) Testing frequency;
(ii) The identification of any individual specified in this paragraph diagnosed with
COVID-19 in the facility;
(iii) The identification of any individual specified in this paragraph with symptoms
consistent with COVID-19 or with known or suspected exposure to COVID-19;
(iv) The criteria for conducting testing of asymptomatic individuals specified in this paragraph, such as the positivity rate of COVID-19 in a county;
(v) The response time for test results; and
(vi) Other factors specified by the Secretary that help identify and prevent the
transmission of COVID-19.

§483.80 (h)((2) Conduct testing in a manner that is consistent with current standards of practice for conducting COVID-19 tests;

§483.80 (h)((3) For each instance of testing:
(i) Document that testing was completed and the results of each staff test; and
(ii) Document in the resident records that testing was offered, completed (as appropriate
to the resident's testing status), and the results of each test.

§483.80 (h)((4) Upon the identification of an individual specified in this paragraph with symptoms
consistent with COVID-19, or who tests positive for COVID-19, take actions to prevent the transmission of COVID-19.

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F 886	Continued From page 2 §483.80 (h)((5) Have procedures for addressing residents and staff, including individuals providing services under arrangement and volunteers, who refuse testing or are unable to be tested. §483.80 (h)((6) When necessary, such as in emergencies due to testing supply shortages, contact state and local health departments to assist in testing efforts, such as obtaining testing supplies or processing test results. This REQUIREMENT is not met as evidenced by: Based on observation, staff interview, and facility document review, the facility staff failed to maintain an infection control program designed to help prevent the development and transmission of communicable diseases and infections. The facility staff failed to follow the manufacturer's guidelines when obtaining rapid COVID-19 tests for two of two employees (Employee #1 and #2). The findings included: The facility staff failed to obtain COVID-19 rapid test samples per the manufactures instructions. The facility staff only sampled one nare when the instructions stated to use the same swab for both nares. The facility was using the BinaxNOW COVID-19 Ag Card test system. During the entrance conference on 10/14/2020 with RN (registered nurse) #1 and #2, these staff verbalized to the surveyor that they were doing the rapid COVID-19 testing. On 10/14/2020 at approximately 11:05 a.m., the surveyor observed RN #3 obtain a nasal swab sample from employee #1.	F 886	When performing the BINAX-Now COVID-19 AG card for COVID-19 testing, the facility RN Staff swab both the left and right nares according to the COVID-19 AG card instructions provided by the manufacturer. (see enclosed instructions) The Staff Development Coordinator provided training on how to correctly perform the BINAX-NOW COVID-19 AG testing. She and the Director of Nursing (DON) ensured compliance. (See enclosed policy). The Staff Development Coordinator performed 100% competency evaluations on all RNs performing the BINAX-NOW COVID-19 AG testing. The DON ensured compliance. Quarterly, as part of our Quality Assurance Program,the Staff Development Coordinator will perform a 10% audit of all RNs completing the BINAX-NOW COVID-19 AG test to ensure continued compliance.	

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F 886	Continued From page 3 After obtaining this sample and while it was processing the surveyor, RN #1, and RN #3 reviewed the manufacturer's instructions. Page 2 of these instructions read in part, "...Nasal Swab Only the swab provided in the kit is to be used for nasal swab collection...carefully insert the swab into the nostril exhibiting the most visible drainage, or the nostril that is most congested if drainage is not visible...Using the same swab, repeat sample collection in the other nostril..." Page 1 included information to indicate what was provided with the test kits (40) nasal swabs were included for use with the BinaxNOW COVID-19 Ag Card test. RN #3 verbalized to the surveyor that they had only obtained a sample from employee #1's right nare and stated their facility policy stated to only use one nare. After reading the manufacturer's instructions RN #3 began the process of obtaining a nasal swab sample from employee #2. RN #3 was observed to obtain a sample from employee #2's right nare only. RN #1 asked RN #3 if they had obtained the nasal sample from employee #2 from both nares. RN #1 verbalized that they had not. The facility provided the surveyor with a copy of their policy titled, "COVID-19 Infectious Disease." This document read in part, "COVID-19 Testing for Staff and Residents...Steps for collecting a COVID-19 nasopharyngeal Specimen...It is not necessary to collect specimen from other nare if the tip of the swab is fully saturated from first nare. Place swab into viral transport	F 886	The QA Coordinator and DON will ensure continued compliance. These systematic changes will ensure continued compliance with the regulation.	

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F 886	Continued From page 4	F 886		

medium...send to lab..." This document did not include a date.

The surveyor observed RN #3 obtain two rapid test samples that were processed onsite and not sent to the lab.

The facility also provided the surveyor with a copy of document from the CDC (centers for disease control and prevention). The facility staff had highlighted the following statement for a NP (nasopharyngeal) sample. "...Specimens can be collected from both sides using the same swab, but it is not necessary to collect specimens from both sides if the minitip is saturated with fluid from the first collection..."

This document also included the following information that had not be highlighted by the facility staff, "...Anterior nares specimen...insert the swab at least 1 cm (0.5 inch) inside the nostril...Sample both nostrils with same swab..."

On 10/15/2020 at 4:00 p.m., during an interview with RN #1 and #2. RN #1 verbalized to the surveyor that they had spoken with RN #3 yesterday and instructed them to swab both nares when obtaining the COVID-19 samples.

During an interview with RN #3 on 10/16/2020 at 12:40 p.m., RN #3 was asked the difference between a nasal swab and a nasopharyngeal swab. RN #3 verbalized that the nasal swab was thinner. RN #3 verbalized to the surveyor that they had used the swabs that were packaged with the rapid test kit when obtaining the samples and they had been obtaining samples from both nares until last Monday. RN #3 then added if they did not obtain an adequate amount of mucus, they

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F 886	Continued From page 5	F 886		

would swab the other nare unless the person had a medical reason such as a deviated septum. RN #3 stated they were obtaining samples from both nares now.

The surveyor accessed the website https://www.fda.gov/media/141568/download on 10/16/2020. This website included information regarding the BinaxNOW COVID-19 Ag Card. The document was dated August 26, 2020 and was titled, "FACT SHEET FOR HEALTHCARE PROVIDERS." "...This test is to be performed only using nasal swab specimens collected from individuals who are suspected of COVID-19 by their healthcare provider within the first seven days of the onset of symptoms...The BinaxNOW COVID-19 Ag Card can be used to test nasal swab samples directly using a dual nares collection (swab inserted in both nares)..."

Both IPs (infection preventionists) were out during the time of the survey and were not interviewed.

No further information regarding this issue was provided to the surveyor prior to the exit conference on 10/16/20.