

New Jersey Department of Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 70a001	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 03/18/2021
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NAME OF PROVIDER OR SUPPLIER SUNRISE ASSISTED LIVING OF WAYNE	STREET ADDRESS, CITY, STATE, ZIP CODE 184 BERDAN AVENUE WAYNE, NJ 07470
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A 000	<p>Initial Comments</p> <p>Initial Comments: Census: 57</p> <p>Sample Size: 5</p> <p>A COVID-19 Focused Infection Control Survey was conducted by the State Agency on 3/18/21. The facility was found not to be in compliance with the New Jersey Administrative Code 8:36 infection control regulations standards for Licensure of Assisted Living Residences, Comprehensive Personal Care Homes and Assisted Living Programs and Centers for Disease Control and Prevention (CDC) recommended practices to prepare for COVID-19.</p>	A 000		
A 310	<p>8:36-3.4(a)(1) Administration</p> <p>(a) The administrator or designee shall be responsible for, but not limited to, the following:</p> <p>1. Ensuring the development, implementation, and enforcement of all policies and procedures, including resident rights;</p> <p>This REQUIREMENT is not met as evidenced by:</p>	A 310		

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

TITLE

(X6) DATE

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A 310	<p>Continued From page 1</p> <p>Based on interview and review of pertinent facility documents, it was determined that the Executive Director (ED) failed to develop a policy that ensured the implementation of resident screening in Phase 0 of reopening in accordance with the requirements of the New Jersey Department of Health (NJDOH) Executive Directive No. 20-026¹ to minimize sources and transmission of COVID-19 virus for 5 of 5 residents reviewed for infection prevention and control, Resident #'s 1, 2, 3, 4 and 5. This deficient practice was evidenced by the following:</p> <p>Reference: NJDOH Executive Directive No. 20-026¹, updated 1/6/21, indicated the following: " ...Phase 0: Any facility with an active outbreak of COVID-19, as defined by the Communicable Disease Service (CDS)... Section IV. Required standards for services during each phase. 1. Phase 0 ... iv. Facilities shall screen all residents, at minimum during every shift with questions and observations for signs or symptoms of COVID-19 and by monitoring vital signs. Vital signs recorded shall include heart rate, blood pressure (BP), temperature and pulse oximetry...."</p> <p>On 3/8/21 at approximately 9:30 a.m., during the entrance conference of the survey, the ED stated that the facility was in Phase 0, and was currently in a COVID-19 outbreak, which began with a COVID-19 positive case on 2/19/21. The surveyor asked the ED how the facility screened its residents for COVID-19 and how frequently they screened the residents. The ED stated that the facility screened its residents with a COVID-19 screening tool twice a day.</p> <p>During the interview with the Resident Care Director (RCD) at 9:32 a.m., she stated that</p>	A 310		
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A 310	<p>Continued From page 2</p> <p>residents were not awakened during the night, or overnight shift, and that staff were only required to put resident's temperature and signs and symptoms of COVID-19 in the electronic health record (EHR). The RCD also stated that the staff monitored resident's pulse oximetry readings (amount of oxygen saturation in the blood) but that was not entered in the EHR.</p> <p>At approximately 11:25 a.m., the surveyor reviewed the facility provided document titled, "Assessment History Report" for the five residents. The residents' assessment reports included a document titled, "COVID-19 Screening-V6", which indicated that the resident's temperatures and signs and symptoms of COVID-19 were assessed. The screenings were conducted twice a day during the facility's Phase 0 of the COVID-19 outbreak period.</p> <p>At 11:30 a.m., the surveyor asked the ED to provide documentation of the screening of vital signs for each of the five residents for the month of March and at 12:00 p.m., the surveyor reviewed the facility provided document titled, "Weights and Vitals Summary." The surveyor observed that for each of the five residents there was no documented evidence that the required screening process of a temperature, blood pressure, pulse, oxygen saturation and screening for signs and symptoms of COVID-19 was not consistently performed three times a day during the facility's COVID-19 outbreak period.</p> <p>At 12:08 p.m., during continued surveyor interview with the RCD, she stated that the facility policy indicated that the residents temperature and signs and symptoms of COVID-19 were to be assessed two times a day and a third time if the resident was awake or appeared sick. The RCD</p>	A 310		

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A 310	<p>Continued From page 3</p> <p>confirmed that the facility was not performing the required screening process, three times a day, during the COVID-19 outbreak period.</p> <p>At 1:16 p.m., the surveyor continued the interview with the ED who stated that in the past the facility screened residents with a full set of vital signs, however, the managing company changed the screening to what they were currently doing, temperatures and signs and symptoms of COVID-19. The ED agreed that the facility was following the facility policy and not consistently following NJDOH Executive Directive.</p> <p>The surveyor reviewed the facility provided policy titled, "COVID-19 Mitigation and Response Plan," with a revised date of 2/17/21, which included the following: "... Management/Containment: Known/Confirmed (positive) or Suspected COVID-19 Cases Institute Community Management Protocols... Communities with a confirmed case of COVID-19: Residents are screened at least twice daily for fever and symptoms of COVID-19"</p> <p>The surveyor observed that the facility's policy did not include all required elements of the screening requirements for Phase 0 of a reopening and the facility was unable to provide documented evidence that resident screening was performed consistently in accordance with the NJDOH Executive Directive No. 20-026¹ requirement.</p>	A 310		
A1271	<p>8:36-18.1(a) Infection Prevention and Control Services</p> <p>(a) The facility shall develop and implement an infection prevention and control program.</p>	A1271		

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A1271	<p>Continued From page 4</p> <p>This REQUIREMENT is not met as evidenced by: Based on observation, interview and record review, it was determined that the facility failed to implement mitigation strategies in accordance with Centers for Disease Control (CDC) guidelines, and the facility failed to ensure that staff followed infection control practices by utilizing appropriate personal protective equipment (PPE) during COVID-19 antigen testing of facility visitors. This deficient practice was evidenced by the following:</p> <p>Reference:</p> <p>CDC guidelines titled, "Guidance for SARS-COV-2 Point-of-Care and Rapid Testing" updated March 12, 2021, revealed, "... For personnel collecting specimens or working within 6 feet of patients suspected to be infected with SARS-CoV-2, maintain proper infection control and use recommended personal protective equipment (PPE), which could include an N95 or higher-level respirator (or face mask if a respirator is not available), eye protection, gloves, and a lab coat or gown"</p> <p>On 3/18/21 at 9:05 a.m., Surveyor #1 was greeted by the Resident Care Director (RCD) in the lobby of the facility. The RCD stated that she was required to perform a rapid COVID-19 antigen test, (a diagnostic test for COVID-19 that uses protein (antigen) in a sample taken from the nose or throat), on all visitors who entered the building as part of the facility screening process. The surveyor observed that the RCD wore a</p>	A1271		
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A1271	<p>Continued From page 5</p> <p>white mask beneath a cloth mask, eye glasses and as she prepared to collect the sample, she donned a pair of gloves and placed a sterile swab into the Surveyor #1's nostrils and proceeded to process the sample. Surveyor#1 observed that the RCD did not wear a protective gown over her clothes, or eye protection (i.e., goggles or face shield) as she performed the tests.</p> <p>At 9:25 a.m., the RCD presented to the lobby to repeat the same process on Surveyor #2. The surveyor observed that the RCD wore eyeglasses with a face shield and a white mask beneath a cloth mask. The RCD used alcohol-based hand rub to perform hand hygiene before she donned a pair of gloves, however, the surveyor observed that the RCD did not wear a protective gown over her clothes, as required, when she obtained the sample from Surveyor #2.</p> <p>At 9:59 a.m., during the entrance conference, the RCD stated that the white mask that she wore beneath her cloth mask was a surgical mask that she purchased at a retail store because she could not tolerate the blue surgical masks that the facility provided. She stated that she realized that she failed to put on a face shield when she performed the test on Surveyor #1 because it caused her glasses to fog up. She further stated that she obtained a face shield and put it on before she tested Surveyor #2.</p> <p>The RCD stated that all personnel that performed the rapid COVID-19 antigen tests were required to wear full Personal Protective Equipment (PPE), which included protective clothing, helmets, goggles, or other equipment designed to protect the body of a person from injury or infection i.e. full face shield, N95 respirator mask (a respirator mask that filters out at least 95% of airborne</p>	A1271		

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A1271	<p>Continued From page 6</p> <p>particles), surgical mask and gloves. The RCD explained that the facility was in the process of performing fit testing for N95 masks use, which was expected to be completed on 4/1/21. She stated that "to her knowledge" staff were not required to wear a protective gown over their clothing during testing.</p> <p>Additionally, at 12:20 p.m., the Executive Director provided the surveyor with the facility policy, titled, "Testing Plan Effective 8.24.20" which revealed the following: "... Community Clinic Set Up ... PPE supplies - Goggles, N95 or masks, Gloves, Gown, Surgical Masks ... Licensed Team Member or Lab technician to complete test administration (full PPE to include N95...."</p>	A1271		