

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

PRINTED: 05/14/2020
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 315009	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 04/22/2020
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NAME OF PROVIDER OR SUPPLIER RUNNELLS CENTER FOR REHABILITATION & HEALTHCARE	STREET ADDRESS, CITY, STATE, ZIP CODE 40 WATCHUNG WAY BERKELEY HEIGHTS, NJ 07922
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F 000	INITIAL COMMENTS A COVID-19 Focused Infection Control Survey was conducted by the New Jersey Department of Health. The facility was found to be not in compliance with 42 CFR §483.80 infection control regulations and has implemented the CMS and Centers for Disease Control and Prevention (CDC) recommended practices to prepare for COVID-19. Survey date: 4/22/20	F 000	<i>The facility has requested an Informal Dispute Resolution to contest the deficiencies found during the survey.</i>	
F 880 SS=F	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 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;	F 880		4/25/20

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE Electronically Signed	TITLE	(X6) DATE 05/07/2020
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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	Continued From page 1 §483.80(a)(2) Written standards, policies, and procedures for the program, which must include, but are not limited to: (i) A system of surveillance designed to identify possible communicable diseases or infections before they can spread to other persons in the facility; (ii) When and to whom possible incidents of communicable disease or infections should be reported; (iii) Standard and transmission-based precautions to be followed to prevent spread of infections; (iv)When and how isolation should be used for a resident; including but not limited to: (A) The type and duration of the isolation, depending upon the infectious agent or organism involved, and (B) A requirement that the isolation should be the least restrictive possible for the resident under the circumstances. (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 (vi)The hand hygiene procedures to be followed by staff involved in direct resident contact. §483.80(a)(4) A system for recording incidents identified under the facility's IPCP and the corrective actions taken by the facility. §483.80(e) Linens. Personnel must handle, store, process, and transport linens so as to prevent the spread of infection.	F 880	<i>The facility has requested an Informal Dispute Resolution to contest the deficiencies found during the survey.</i>		

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F 880	<p>Continued From page 2</p> <p>§483.80(f) Annual review.</p> <p>The facility will conduct an annual review of its IPCP and update their program, as necessary. This REQUIREMENT is not met as evidenced by:</p> <p>Based on observation, interview, a review of records and other pertinent facility documents, it was determined that the facility failed to ensure (a) the disinfecting chemical dispensing systems were functioning properly on 2 of 5 units observed, these 2 units, [REDACTED] and [REDACTED] were to be designated the units on which CoVid residents would be cohorted. (b) the chemical dispensing system were labeled correctly on 5 of 5 units observed to ensure the correct disinfectant was dispensed and (c) the housekeeping staff were aware of the disinfectant used by the facility and its correct dilution.</p> <p>This deficient practice was evidenced by:</p> <p>On 4/22/20 at 10:18 AM, the administrator stated that the facility did not have a dedicated Covid-19 unit at this time. The administrator further stated that positive COVID-19 residents have been isolated in private rooms and any resident exposed or symptomatic were isolated in private rooms throughout the facility's 5 units. The administrator stated that starting today (4/22/20) the plan was to cohort all positive COVID-19 residents to either [REDACTED] or [REDACTED] units. At this time, the administrator stated that 1 West unit had a census of 21 with two positive COVID -19 residents, [REDACTED] unit had a census of 43 with 1 (one) positive COVID-19 resident, [REDACTED] unit had a census of 32 with 2 (two) positive COVID-19 residents, [REDACTED] unit had a census of 45 with 8 (eight) positive COVID-19</p>	F 880	<p>Runnells Center for Rehabilitation & Healthcare</p> <p>The facility respectfully disagrees with the survey findings. Notwithstanding, the following plan of correction is being submitted.</p> <p>COVID19 Onsite Survey April 22, 2020 Plan of Correction F 880 – S/S F</p> <p>HOW THE CORRECTIVE ACTION WILL BE ACCOMPLISHED FOR THOSE RESIDENTS FOUND TO HAVE BEEN AFFECTED BY THE PRACTICE Matching labels that reflect the container bottle of disinfectant were placed on the dispensers, the indicator knobs and the locked cabinets on [REDACTED] in addition to the open area on the dispenser where the product name is clearly visible on April 24, 2020. This was done immediately upon notification by the surveyor concern on the day of the survey.</p> <p>The dispenser in the janitor's closet on [REDACTED] was not in use at the time of the survey and was immediately reattached to the wall and repaired by the Director of</p>	

The facility has requested an Informal Dispute Resolution to complete this appeal. Please contact the Director of Quality Improvement for further information.

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F 880	<p>Continued From page 3</p> <p>residents and [REDACTED] unit had a census of 43 with 8 (eight) positive COVID-19 residents.</p> <p>On 4/22/20 at 10:50 AM, Surveyor #1 and Surveyor #2 interviewed the Director of Housekeeping (DH) who stated the disinfectant being used by the housekeepers was called Sienna (a trade name for a multi surface cleaner and disinfectant manufactured by Santec). The DH stated he attended morning meetings every day to find out how many Covid-19 positive residents are in the facility. The DH provided a brown colored label of the disinfectant Sienna manufactured by Santec which described Sienna was a multi -surface cleaner plus disinfectant.</p> <p>At 11:48 AM, Surveyor #1 interviewed Housekeeper #1 (HK#1) on the [REDACTED] unit. HK #1 stated that Orchid (a trade name disinfectant manufactured by Santec) had been used in the past, but now Sienna is used to disinfect the rooms.</p> <p>At 1:30 PM, Surveyor #1 and Surveyor #2 requested the facility to provide further information that Sienna was an approved CDC-EPA-N list disinfectant. That information was provided to the surveyors at 3:15 PM.</p> <p>At 2:19 PM, Surveyor #1 and Surveyor #2 interviewed the Supervisor of Housekeeping (SH) who stated she used Orchid to disinfect all tables, toilets and overbed tables. She stated she lets it sit for 10 minutes then wipes it off. The SH provided the spray bottle she was using at that time and the surveyors observed a spray bottle which was labeled with a dark pink Orchid sticker and contained a dark purple color liquid in</p>	F 880	<p>Housekeeping on April 23, 2020 is functioning properly. Housekeeping staff were instructed to notify the Director of Housekeeping if any equipment needs repair.</p> <p>Spray bottles are checked daily by the housekeeping supervisor to ensure they are properly labeled and contain the proper dilution of disinfectant. The housekeeping supervisor also confirms that housekeeping staff understand the importance of using properly labeled and properly diluted disinfectant according to manufacturer instructions.</p> <p>HOW THE FACILITY WILL IDENTIFY OTHER RESIDENTS HAVING THE POTENTIAL TO BE AFFECTED BY THE SAME DEFICIENT PRACTICE</p> <p>An audit of all cleaning chemical dispensers was completed on April 23, 2020 by the Director of Housekeeping and no other dispensers required repair.</p> <p>WHAT MEASURES WILL BE PUT INTO PLACE OR WHAT SYSTEMIC CHANGES WILL BE MADE TO ENSURE THAT THE DEFICIENT PRACTICE WILL NOT RECUR</p> <p>Each chemical dispenser was tested, and all were properly functioning dispensing the correct parts of chemical to water when dispensed into the spray bottle.</p> <p>Housekeeping staff were re-educated regarding the use and the efficacy of both</p>		

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F 880	<p>Continued From page 4</p> <p>the bottle. The SH stated that for COVID-19 residents she uses bleach first then the Orchid disinfectant. The SH further stated that she used Sienna, but since the Corona Virus outbreak housekeeping has only been using Orchid. She did not think Sienna was effective on the Corona Virus.</p> <p>At 2:27 PM, Surveyor #1 and Surveyor #2 accompanied by the DH and SH toured the janitor storage room located on the bottom floor. The DH's office was also located within the janitor storage room. The surveyors observed 6-one-gallon containers labeled Sienna. When asked if the DH had any Orchid, the DH retrieved an opened 1- gallon container labeled Orchid from under his desk. The DH placed this 1-gallon container labeled Orchid on the shelf with the 6 containers of Sienna. The DH pointed to an unopened white box and stated it contained an additional four 1-gallon containers of Sienna. The DH stated that he had just filled a dispensing machine on the [REDACTED] unit that morning with Sienna. The SH stated she had not filled any machines with Sienna. The DH stated he started at the facility in the beginning of April and the disinfectants were ordered before he started. He did not know why the manufacturer had sent Sienna instead of Orchid.</p> <p>At 2:35 PM, in the presence of both surveyors, the DH unlocked the janitors closet on the 2 West unit. The surveyors observed a blue colored machine attached to the left inside wall of the closet. This blue dispensing machine was a chemical dispensing system used to accurately dilute janitorial chemicals in order to guarantee efficacy of disinfectants and had an indicator dial located on top and to the right of the dispenser.</p>	F 880	<p>the Orchid chemical disinfectant in place of the Sienna disinfectant and verbalized understanding of the proper dilution when dispensed into the spray bottles for use to ensure proper disinfecting.</p> <p>Housekeeping staff also received re-education about the current disinfectants being used and the correct dilution ratio.</p> <p>Housekeeping staff were re-instructed to report any dispenser in need of repair to the Director of Housekeeping immediately.</p> <p>HOW WILL THE FACILITY MONITOR ITS CORRECTIVE ACTIONS TO ENSURE THAT THE DEFICIENT PRACTICE WILL NOT RECUR, I.E., WHAT QUALITY ASSURANCE PROGRAM WILL BE PUT INTO PLACE</p> <p>The Director of Housekeeping or designee will make daily rounds was initiated on April 24 and will continue for four weeks and then monthly for three months to check all dispensers and ensure they are in working condition. Findings from these rounds will be discussed at morning management meetings. The Director of Housekeeping will also report findings in aggregate to the QA committee quarterly for action as appropriate on an ongoing basis.</p> <p>COMPLETION DATE - 4/25/2020</p>	

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F 880	<p>Continued From page 5</p> <p>The dispensing machine had a short light gray hose on the right to dispense liquid into spray bottles and a longer light gray hose on the left of the machine to dispense liquid into buckets. The machine also had levers on the top of the machine that when pushed dispensed either from the short hose or the longer hose. The blue dispensing machine had two cabinets located under the knobs and hoses. These cabinets were locked and had a small opening in the front. The first cabinet on the left was labeled with a pink Orchid sticker. The DH unlocked the cabinet labeled Orchid and the surveyors observed a 1-gallon container of Sienna located in this cabinet.</p> <p>At 2:37 PM, in the presence of the DH, Surveyor #1 and Surveyor #2 interviewed HK#2 who stated has been using Sienna for about a week.</p> <p>At 2:40 PM both surveyors observed the DH unlock the janitors closet on the [REDACTED] unit. Both surveyors observed a blue dispensing machine with three locked cabinets attached to the wall inside the closet. The indicator knob was labeled with an Orchid sticker and a Sienna sticker. The surveyors observed the first locked cabinet to the left was labeled Sienna, the second (middle cabinet) labeled Orchid and the third cabinet was not labeled. The DH unlocked the first two cabinets and the surveyors observed the first locked cabinet labeled Sienna contained a 1-gallon bottle of Sienna, the next cabinet labeled Orchid contained a 1-gallon bottle labeled Rose (a deodorizer/air freshener) and the third cabinet was empty. The DH stated that the indicator knobs were mislabeled and then removed the Orchid sticker from the indicator knob. Beneath the Orchid sticker both surveyors</p>	F 880	<p><i>The facility has requested an Informal Dispute Resolution to contest the deficiencies found during the survey.</i></p>		

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F 880	<p>Continued From page 6</p> <p>observed a sticker labeled Primrose, which was a deodorizer/air freshener.</p> <p>The DH and both surveyors returned to the [REDACTED] unit and the DH unlocked the housekeeper's storage closet on [REDACTED] which was located across the hall from the janitor's closet. The surveyors observed a black and yellow housekeeping cart and Housekeeper #3 (HK#3) inside the locked storage room. HK # 3 opened the bottom door of the cart and removed a spray bottle labeled Orchid that contained a tan colored liquid. The DH stated that Orchid was purple in color and Sienna was blue in color.</p> <p>At that time, the DH, in the presence of both surveyors, unlocked the janitor's closet on [REDACTED] and took the spray bottle with the tan colored liquid into the closet. The DH turned the indicator on the blue dispensing machine and added more liquid to the spray bottle. The liquid remained a tan color. The DH tried to smell the spray bottle without removing his mask. Surveyor #2 removed the N-95 mask and exposed his nose only, smelled the bottle and immediately replaced the mask. Surveyor # 1 removed the N-95 mask and exposed her nose only, smelled the bottle and immediately replaced the mask. Neither surveyor could detect an odor of disinfectant in the spray bottle. The DH turned the indicator dial and dispensed liquid from the short hose and the long hose into clear 4-ounce cups and each time the liquid came out clear. Both surveyors removed their N-95 masks and exposed their nose only, smelled the clear plastic cups and immediately replaced their masks. Neither surveyor could smell any odor in the liquid dispensed. The DH removed his mask, exposed his nose only,</p>	F 880	<p><i>The facility has requested an Informal Dispute Resolution to contest the deficiencies found during the survey.</i></p>	

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F 880	<p>Continued From page 7</p> <p>immediately replaced the mask and confirmed he could not smell disinfectant in the liquid dispensed. The machine was dispensing a colorless and odorless liquid. The DH removed the two tubes inside the 1-gallon container of Sienna and stated they must be clogged. The DH stated that the machine was broken and will need to be replaced. When asked if anyone informed the DH that the machine was broken, the DH stated no. The DH stated the procedure is for the staff to inform him if a machine was not working. The DH further stated that the facility had a contract with a company that maintained the dispensing machines.</p> <p>At 3:03 PM, the DH unlocked the janitor's closet on [REDACTED]. The surveyors observed this closet did not have a blue disinfectant dispensing machine attached to the wall. The DH stated the dispensing machine was broken. The DH then stated that the housekeepers used the dispensing machine on the [REDACTED] unit.</p> <p>The entrance to the [REDACTED] unit is approximately fifty feet from the entrance of the [REDACTED] unit. To reach this dispensing machine, which at the time of the survey was not functioning, housekeeping staff would have to leave the [REDACTED] unit, go past an entrance to a Dining/Activity room, a bank of elevators used by all staff for transport of meals and residents, and then enter the [REDACTED] unit.</p> <p>Surveyor #1 interviewed the DH who stated that the housekeepers have access to the janitor's closets on each unit and there is one housekeeper per unit. Both surveyors observed a spray bottle on the housekeeper's cart on [REDACTED] unit that had a pink sticker labeled Orchid.</p>	F 880	<p><i>The facility has requested an Informal Dispute Resolution to contest the deficiencies found during the survey.</i></p>		

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F 880	<p>Continued From page 8</p> <p>The surveyors observed a light purple color liquid inside the spray bottle. The DH stated that Orchid is supposed to be diluted and not poured right out of the 1-gallon container. The surveyor asked the DH why the supervisor's spray bottle labeled Orchid was a dark purple, the DH stated "She likes hers' (disinfectant) strong and pours it right out of the container"</p> <p>At 3:08 PM, the surveyors observed the DH unlock the janitors closet on the [REDACTED] unit. The surveyors observed a blue dispensing machine with 3 locked cabinets labeled Orchid, Sienna and Rose. The DH unlocked the three cabinets and the surveyors observed that the locked cabinet labeled Orchid contained a 1-gallon container of Sienna (dark blue color), the cabinet labeled Sienna was empty and the cabinet labeled Rose contained a 1- gallon container of Rose (deodorizer). The DH then turned the indicator knob to Orchid and dispensed from the small gray hose a very light blue tinged color liquid into a 4-ounce clear cup. The DH then adjusted the tubing in the gallon container of Sienna and dispensed a light blue color liquid into a clear 4-ounce cup.</p> <p>At 5:00 PM, Surveyor #2 interviewed the night porter who stated that housekeeping had left for the day and he was responsible for cleaning at that time. The porter confirmed that he was using a cleaning product called Sienna and would spray the surface, then wipe with a paper towel, and immediately discard the paper towel in the trash. In the presence of Surveyor #2, the porter unlocked the janitors closet on the [REDACTED] unit. Surveyor #1 observed a blue dispensing machine attached to the wall. The locked cabinet labeled Orchid held a 1-gallon container of Sienna. The indicator knob was positioned to</p>	F 880	<p><i>The facility has requested an Informal Dispute Resolution to contest the deficiencies found during the survey.</i></p>		

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F 880	Continued From page 9 Orchid, but Surveyor #2 observed the machine dispense Sienna. At 5:52 PM, the administrator in the presence of both surveyors and the DON stated that the facility did not have any policies or procedures for the chemical dispensing machines. NJ 8:39-19.4	F 880	<i>The facility has requested an Informal Dispute Resolution to contest the deficiencies found during the survey.</i>		