

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

PRINTED: 02/16/2022
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 315210	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 01/20/2021
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NAME OF PROVIDER OR SUPPLIER HEALTH CENTER AT GALLOWAY, THE	STREET ADDRESS, CITY, STATE, ZIP CODE 66 WEST JIMMIE LEEDS ROAD GALLOWAY TOWNSHIP, NJ 08205
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F 000	<p>INITIAL COMMENTS</p> <p>A COVID-19 Focused Infection Control Survey was conducted by the New Jersey Department of Health. The facility was found not to be in compliance with 42 CFR §483.80 infection control regulations and had not implemented the CMS and Centers for Disease Control and Prevention (CDC) recommended practices to prepare for COVID-19.</p> <p>Survey date: 01/18/2021 - 01/20/2021</p> <p>Census: 99</p> <p>Sample size: 8</p>	F 000		
F 880 SS=F	<p>Infection Prevention & Control CFR(s): 483.80(a)(1)(2)(4)(e)(f)</p> <p>§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.</p> <p>§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:</p> <p>§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</p>	F 880		3/3/21

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE Electronically Signed	TITLE	(X6) DATE 02/15/2021
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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	<p>Continued From page 1 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> <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.</p>	F 880			

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F 880	<p>Continued From page 2</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 observations, interviews, Centers for Disease Control (CDC) publication, and New Jersey Department of Health (NJDOH) Executive Directive No. 20-026-1, revised 01/06/2021, it was determined the facility failed to ensure staff wore required face masks appropriately while in the facility to prevent the possible spread of COVID-19 for 5 (Dietary Director, Housekeeping/Laundry Director, Housekeeper #1, Unit Clerk #1, and Licensed Practical Nurse #1) of 5 staff members observed. This failed practice had the potential to affect all 99 residents in the building, and occurred during the COVID-19 pandemic.</p> <p>Findings included:</p> <p>Reference: A facility provided document, titled, "How to Safely Wear and Take Off a Mask," dated 12/21/2020, indicated, " ...Put it over your nose and mouth to secure it under your chin ... Wear a mask over your nose and mouth to prevent getting and spreading COVID-19 ... Don't put the mask around your neck or up on your forehead ..."</p> <p>Reference: Centers for Disease Control and Prevention (CDC) publication, "Preparing for COVID-19 in Nursing Homes" updated on 11/20/2020 indicated " ...HCP [health care personnel] should wear a facemask at all times while they are in the facility"</p> <p>Reference: NJDOH Executive Directive No. 20-026-1, revised 01/06/2021, revealed the following:</p>	F 880	<p>PROBLEMS IDENTIFIED:</p> <p>The facility failed to ensure staff wore required face masks appropriately while in the facility to prevent the possible spread of COVID-19 as evidenced by:</p> <ul style="list-style-type: none"> Dietary Director and HKL Director were observed in the back service hall near the timeclock and were observed not wearing masks. HK #1 was observed in the back service hall near the timeclock as well wearing a mask under the chin. Unit Clerk #1 was observed sitting at the nurse's station with the mask under the chin. LPN #1 was sitting at the nurse's station as well with the mask under the chin. <p>All residents have the potential to be affected by this practice.</p> <p>CONTRIBUTING FACTORS:</p> <ul style="list-style-type: none"> These staff members did not recognize the severity of not wearing a mask appropriately to prevent the spread of COVID-19 even for a short period. <p>ROOT CAUSES:</p> <ul style="list-style-type: none"> Dietary Director, HKL Director, HK # 1, Unit Clerk # 1, and LPN # 1 need further training on the severity of always wearing masks appropriately. <p>CORRECTIVE ACTIONS:</p> <ul style="list-style-type: none"> The Dietary Director, HKL Director, HK # 1, Unit Clerk #1, LPN # 1 were immediately in-serviced regarding 		

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F 880	<p>Continued From page 3</p> <p>3. Cohorting, PPE and Training Requirements in Every Phase:</p> <p>ii. Facilities shall implement universal source control for everyone in the facility...Source control may be provided with cloth face coverings or facemasks.</p> <p>1. On 01/19/2021 at 8:29 AM, the Dietary Director, Housekeeping/Laundry Director (HLD), and Housekeeper #1 were in the hallway between the kitchen and the laundry, standing next to the time clock. All three staff were standing approximately 6-12 inches from each other. The Dietary Director and HLD were not wearing masks. Housekeeper #1 was wearing a mask under the chin, not covering the nose or mouth.</p> <p>On 01/19/2021 at 8:29 AM, the Dietary Director was asked when and where they have to wear masks while in the building. The Dietary Director replied, "From the time you walk in, to the time you leave. I take it off when I'm in my office because no one is there. We have to wear a KN95. I get a box a week from [Administrator] and pass them out to my staff."</p> <p>On 01/19/2021 at 10:06 AM, the HLD was asked when and where they have to wear masks while in the building. The HLD replied, "We are supposed to wear them all the time. You caught me outside of my office a couple of minutes ago with it not on. We are supposed to. I have a different mask for the COVID unit. [It could lead] to disciplinary action and COVID."</p> <p>On 01/19/2021 at 2:23 PM, Unit Clerk #1 was sitting at the nurse's desk on the [redacted] floor with their face mask underneath the chin. When the surveyor entered the floor, the Unit Clerk pulled the mask up over the nose. The Unit Clerk was</p>	F 880	<p>appropriate mask wearing at all times on 1/19/21 by the IP Nurse. An in-service for all staff was initiated on 1/19/21 as well.</p> <ul style="list-style-type: none"> The IP Nurse and DON took training on Infection Prevention & Control Program Module 1 All staff were trained on the following 3 topics: <ul style="list-style-type: none"> A) Principles of Transmission Based Precautions B) CDC COVID-19 Prevention – Keep COVID-19 Out! C) CDC COVID-19 Prevention – Use PPE Correctly for COVID-19 <p>MONITORING/EVALUATIONS: The IP Nurse/designee will audit 5 staff members on a weekly basis for 4 weeks; then monthly x 3 and quarterly x 2 until compliance attained and maintained.</p> <p>Results of the audits will be forwarded to the Quality Assessment and Performance Improvement Committee for review and action as appropriate. The QAPI committee meets quarterly. The Committee will determine the need for further audits and or action plans.</p>		

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F 880	<p>Continued From page 4</p> <p>asked what the proper placement of a face mask should be and the unit clerk answered, "Covering the nose and face and make sure it's tight."</p> <p>On 01/19/2021 at 2:24 PM, Licensed Practical Nurse (LPN #1) was sitting at the same nurse's desk on the third floor with their face mask positioned underneath the nose. LPN #1 was sitting in close proximity to another nurse, approximately 6-12 inches away, and talking. LPN #1 was asked how the face mask should be worn. LPN #1 replied "is it not tight enough?" LPN #1 was again asked the correct way of wearing a face mask was and no reply was given. LPN #1 was asked if the mask should cover the mouth and chin when worn appropriately and LPN #1 replied "Yes."</p> <p>On 01/20/2021 at 8:54 AM, the Director of Nursing (DON) confirmed that staff were to wear the face masks at all times in the building covering the mouth and nose. If not wearing it, they could contract COVID-19.</p> <p>New Jersey Administrative Code § 8:39-5.1(a)</p>	F 880			