STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	315113	A. BUILDING _____ B. WING _____	C 04/19/2021

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
CLOVER MEADOWS HEALTHCARE AND REHABILITATION CENTE	112 FRANKLIN CORNER ROAD LAWRENCEVILLE, NJ 08648

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F 000	INITIAL COMMENTS Complaint# NJ 144728 Census: 82 Sample: 3 THE FACILITY IS NOT IN SUBSTANTIAL COMPLIANCE WITH THE REQUIREMENTS OF 42 CFR PART 483, SUBPART B, FOR LONG TERM CARE FACILITIES BASED ON THIS COMPLAINT VISIT.	F 000		
F 880 SS=D	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; §483.80(a)(2) Written standards, policies, and	F 880		6/2/21

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

Electronically Signed | 05/03/2021

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F 880	Continued From page 1	F 880		

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.

§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

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F 880	Continued From page 2 by: Based on observations, interviews, review of the Medical Record (MR), it was determined that on 4/19/2020, the facility staff failed to ensure Residents wore face masks while in a common area. The facility staff also failed to wear appropriate PPE during care, as well as failure to follow the facility's policies titled "Infection Control/Standard Precautions/Transmission-Based Precautions" and "Covid-19 Management Plan/Policy & Procedure" for 1 of 3 Residents (Resident #1) sampled. This deficient practice were evidenced by the following: 1. According to Resident #1's MR, the Resident was admitted to the facility on [redacted] with diagnoses which included but were not limited to: [redacted]. According to the Minimal Data Set (MDS), an assessment tool dated [redacted], Resident #1 had a Brief Interview for Mental Status (BIMS) score of [redacted], which indicated the Resident's cognition [redacted]. The MDS also indicated Resident #1 needed assistance with Activity of Daily Living (ADLs). Review of Resident #1's Physicians Orders Sheet (POS), revealed an order for the following: Covid (+)-Maintain Isolation, strict droplet, airborne and contact precautions for positive exposure, every shift for infection control for 14 days,dated [redacted] Review of Resident #1's Progress Notes (PN) dated [redacted] showed the following: Resident is awake alert oriented, was exposed to staff	F 880	1.¿ Immediate in-service with the staff regarding ensuring residents wear masks while in a common area in accordance with facility□s policy and procedure and the centers of Disease Control and Prevention guidelines for Infection control to mitigate the spread of COVID-19. ¿ Immediate in-service with the staff regarding wearing proper PPE during resident care in accordance with facility□s policy and procedure and the centers of Disease Control and Prevention guidelines for Infection control to mitigate the spread of COVID-19. 2.¿ All residents, including resident#1, have the ability to be affected by not meeting the requirements to ensure residents wear masks while in a common area and proper PPE with residents on transmission -based precautions when in contact and/or rendering care. 3¿ ¿ All nursing staff are receiving ongoing in-service education and competencies on the proper PPE use, with residents on transmission based precautions. ¿ Infection Preventionist (IP) /designee will conduct an audit based on observation of the staff using proper PPE and Infection Control Policy and Procedure weekly for 1 month, monthly for 3 months then quarterly thereafter. ¿ Increase mask signage to encourage compliance with mask wearing ¿ Educate residents during resident council of importance of mask wearing ¿ Topline staff and Infection	

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F 880	Continued From page 3 member who was [redacted] (for) the Covid-19 Virus. Resident was tested on [redacted], on which Resident was [redacted], however, Resident is placed on isolation precaution of droplet contact and airborne for 14 days due to positive exposure.... Review of Resident #1's Care Plan (CP) indicated the following: Under "Focus" Resident is on isolation precautions x 14 days due to exposure to Covid-19, dated [redacted]. During a tour of the [redacted] Unit on 4/19/2021 at 9:05 a.m., an observation was made of an LPN in a droplet precaution resident room without gloves on. During an interview on 4/19/2021 at 9:10 a.m., the LPN stated "I should be wearing gloves while in the residents room." During a tour on 4/19/2021 at 11:07 a.m., an observation of the [redacted] area revealed 2 Residents [redacted]. Resident #1 self propelled themselves into the facility side door from the outside [redacted] area wearing a face mask that was not covering their nose and mouth. During an observation on 4/19/2021 at 11:19 a.m., Resident #1 was observed sitting in a wheelchair in the common area of the [redacted] Unit with a face mask below their chin. During an interview on 4/19/2021 at 11:20 a.m., the Registered Nurse (RN) on the [redacted] Unit explained; Resident #1 was outside [redacted]. Residents under Persons Under Isolation (PUI) should not be out of their rooms. The RN further explained Resident #1 has not been [redacted]	F 880	Preventionist are being trained on Nursing Home Infection Preventionist Course Module 1-Infection Control and Prevention Program ¿ All staff are receiving training on the following topic: Principles of Transmission Based Precautions CDC COVID-19 prevention - Keep Covid-19 out! CDC COVID-19 Prevention- Use PPE correctly for Covid-19. ¿ Any Per-diem staff will be trained on their next scheduled shift ¿ IP will maintain monitoring, log and documentation of the compliance of Infection control policies and procedures including residents wearing masks while in common areas, proper PPE usage, and will intervene accordingly in adherence to this plan of correction. 4.¿ The DON/designee will review any findings of these audits and present them quarterly with the QAPI committee to determine frequency of future audits.	

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During an interview on 4/19/2021 at 11:25 a.m., Resident #1 stated [redacted]." Resident #1 further stated, "I do go outside of my room to the [redacted] section.... Sometimes I don't wear my mask, staff will remind me to wear it."

During an interview on 4/19/2021 at 11:35 a.m., the CNA explained, Activities staff will take the Residents out to [redacted], they are requested to wear a mask, but sometimes they don't.

During an interview on 4/19/2021 at 12:46 p.m., the Director of Housekeeping (DOH) explained, all staff ask the residents to put on a mask but many refuse. Residents on the [redacted] unit will go outside to [redacted] unescorted and without a mask on. The DOH stated, "I believe the staff do not take wearing a mask seriously, it is very concerning."

During an interview on 4/19/2021 at 1:55 p.m., the Infection Preventionist (IP) explained PUI Residents should be isolated, if they leave their room they should have a mask on. The IP further explained Resident #1 has not been [redacted] he/she has refused the [redacted]. We encourage Residents to wear a mask but the residents have the right not to wear a mask, we follow the policy.

Review of the facility's policy titled "Infection Control/Standard Precautions/Transmission-Based Precautions" dated 4/13/2021, revealed the following: Under 'Policy": Every reasonable attempt will be made to prevent the spread of infection at (Facility). A variety of infection control measures outlined below are used for decreasing the risk of

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F 880	Continued From page 5 transmission of organisms at (facility).... Under '"Transmission-Based Precautions": #2. Droplet Precautions: Droplet transmission of diseases involves the contact of eyes, or the mucous membranes of the nose or mouth of a susceptible person with large particle droplets containing microorganisms generated from who is infected by or a carrier of that pathogen. Droplets are generally formed during coughing, sneezing, talking... B. ... mask patient when he/she leaves the room... Review of the facility's policy titled "Covid 19 Management Plan/Policy & Procedure" dated 4/6/2021, indicated the following: Under II. All direct-care staff on the Covid unit/exposure unit should be wearing appropriate PPE: N95 mask, face shields, gloves, and washable/disposable gowns when in a patient's room... Under IV. All residents on Covid/exposure unit are to be encouraged to stay inside their room; if the resident is at risk and requires supervision by the nursing station, residents must wear a mask at all times and be a minimum of 6 feet from other residents or staff in the supervision area. Under VII. ... Residents are required to wear the mask anytime he/she is out of their room... N.J.A.C: 8:39-19.1(b)	F 880		