

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  115538	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED  06/27/2024
NAME OF PROVIDER OR SUPPLIER  Powder Springs Center for Nursing & Healing		STREET ADDRESS, CITY, STATE, ZIP CODE  3460 Powder Springs Road Powder Springs, GA 30127	

For information on the nursing home's plan to correct this deficiency, please contact the nursing home or the state survey agency.

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (Each deficiency must be preceded by full regulatory or LSC identifying information)
<p>F 0880</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Provide and implement an infection prevention and control program.</p> <p>45811</p> <p>Based on observations, staff interviews, record review, and review of the facility policy titled, Personal Protective Equipment (PPE), the facility failed to follow infection control protocol related to disposal of PPE in two out of five rooms with residents on Droplet Precautions (infection control measures used to prevent the spread of respiratory infections). The census was 183.</p> <p>Findings include:</p> <p>1. Review of the facility policy titled Personal Protective Equipment date reviewed/revised January 2024, revealed under Policy: This facility promotes appropriate use of personal protective equipment to prevent the transmission of pathogens to residents, visitors, and other staff. Under the section Policy Explanation and Guidelines revealed: Wear a mask to protect the face from contamination with blood, body fluids, and other potentially infectious materials during tasks that generate splashes or sprays. Do not reuse. Under the section Respiratory Protection: Wear a NIOSH [National Institute for Occupational Safety and Health]-approved N95 or higher-level respirator to prevent inhalation of pathogens transmitted by the airborne route. Do not reuse single-use-only respirators.</p> <p>Review of the education roster revealed the in-service on 6/17/2024 titled, Symptoms of COVID-19, Activities Director BB attended the class. The class was taught by Registered Nurse (RN) AA. The overview of the class included to provide a review of COVID-19 symptoms, report change in condition, and Employees - Stay home away from others if symptomatic.</p> <p>During an observation on 6/25/2024 at 12:15 pm, Activities Director BB entered a room where the Residents were on Droplet Precautions. The Activities Director put on a gown, gloves, and face shield; she already had on a KN95 mask. When Activity Director BB exited the room, she discarded the gown and gloves in the room. She came out in the hall with the mask and face shield on. She took the face shield off, cleaned it, and took it with her off the floor. She did not take off her mask and she began passing trays to other residents.</p> <p>During an interview on 6/26/2024 at 2:15 pm with Registered Nurse (RN) AA revealed staff would put on a gown, gloves, mask, and face shield, before entering a resident's room who was on Droplet Precautions. She stated the mask and face shield can be re-used. If the face shield was re-used, it would be cleaned with sanitizer and put in a clean bag. The staff could re-use the N95 mask and would keep it in a clean bag.</p> <p>(continued on next page)</p>

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.

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
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<p>F 0880</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>During an interview on 6/27/2024 at 10:28 am with Activities Director BB revealed they had recent in-services on COVID-19. When she goes into a room and the resident has COVID, she will put on a face mask, gloves, gown, and face shield. Once finished in the room, she will take off the face shield, gown, and gloves, sanitize the face shield, and re-use it. She keeps the face shield in her office. She stated she can keep using the KN95 and discard it at the end of the day. If she uses an N95 mask she will not throw it away but keep it in a bag and use for a few days, unless she starts to sweat and it is soiled.</p> <p>During an interview on 6/27/2024 at 11:20 am with Certified Nursing Assistant (CNA), the CNA stated she will wear a gown, gloves, face mask, and face shield in the room with residents who have COVID-19. Once finished in the room, she will discard all PPE before leaving the room. She stated the PPE cannot be re-used. She believes there was enough PPE for staff.</p> <p>During an interview on 6/27/2024 at 11:42 am with Licensed Practical Nurse (LPN) DD revealed if taking care of a resident with COVID-19 or who was on Droplet Precautions, she would wear a gown, gloves, mask, and face shield into the room. Once she completed care, LPN DD would discard the PPE in the room. She does not re-use any of the PPE. She believes there was enough PPE to take care of the residents.</p> <p>During an interview on 6/27/2024 at 12:45 pm with Central Supply EE revealed she replenishes the PPE on the floor about three times a week. She stated there was enough PPE for the staff to take care of the residents.</p> <p>During an interview on 6/27/2024 at 1:14 pm with the Director of Nursing (DON) revealed the staff would wear a mask, gown, gloves, and face shield into an isolation room. Once finished in the room, they would doff (remove) all PPE and dispose of it in the room. They would not re-use any of the PPE. She stated there was enough PPE for staff to use.</p> <p>49396</p> <p>2. During an observation on 6/27/2024 at 11:24 am, Housekeeper FF was observed entering a room where the residents were on Droplet Precautions. She was wearing a gown, gloves, and a KN95 mask, but did not use a face shield. Upon exiting the room, Housekeeper FF failed to discard her gown and gloves inside the room as required. Instead, she removed them in the hallway, discarding them into a trash bin on her cart outside the room.</p> <p>During an interview on 6/27/2024 at 2:37 pm with the DON the proper protocol for PPE disposal was discussed. The DON stated that the behavior observed was unacceptable and confirmed that under no circumstances should staff exit a room without properly discarding their PPE in the designated trash receptacles inside the room.</p>		