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| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 225219 | (X2) MULTIPLE CONSTRUCTION A. Building B. Wing | (X3) DATE SURVEY COMPLETED 06/18/2025 |
| NAME OF PROVIDER OR SUPPLIER Bear Mountain at Worcester | | STREET ADDRESS, CITY, STATE, ZIP CODE 59 Acton Street Worcester, MA 01604 | |

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) |
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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>Provide and implement an infection prevention and control program.</p> <p>Based on observations, interviews, and record reviews, for five out of ten sampled residents (Resident #3, #4, #5, #6, and #7), on one of four nursing units (Unit #2), all of whom were either on Enhanced Barrier Precautions (EBP) or Contact Precautions, both of which required staff to use Personal Protective Equipment (PPE) during the provision of care, the Facility failed to ensure they implemented and maintained an infection control program that helped prevent the development and spread of infections, when staff were observed not following infection control practices in accordance with performing hand hygiene at appropriate intervals and not adhering to posted Precaution Signs.</p> <p>Findings include:</p> <p>Review of the facility's policy, titled Handwashing/Hand Hygiene, with a revision date of October 2023 indicated the following:</p> <ul style="list-style-type: none"> -The facility considers hand hygiene the primary means to prevent the spread of healthcare-associated infections. -Indications for Hand Hygiene: <ul style="list-style-type: none"> *Immediately before and after touching a resident *After touching the resident's environment <p>Review of the facility's policy, titled Transmission Based Precautions, with a revision date of January 2024, included the following:</p> <ul style="list-style-type: none"> -Transmission based precautions are designed for patients documented or suspected of being infected or colonized (a person who is colonized carries the organism in or on their body, but it is not causing symptoms) with transmissible pathogens for which additional precautions beyond Standard Precautions are needed to interrupt transmission in the healthcare setting. -Enhanced Barrier Precautions will be implemented for residents with active or colonized multi drug resistant organisms (MDRO) infections, those with indwelling devices [i.e. urinary catheters (tubes to drain urine from the bladder), tracheostomy (a surgical opening to the wind pipe), gastrostomy (a surgical opening to the stomach)], or chronic wounds. -Review of the Enhanced Barrier Precaution sign, undated, indicated: <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.

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| 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>-Everyone Must: Clean their hands including before and when leaving the room.</p> <p>-Providers and Staff Must Also: Wear a gown and gloves for the following High-Contact Resident Care Activities:</p> <ul style="list-style-type: none"> *Dressing *Bathing/showering *Transferring *Changing Linens *Providing Hygiene *Changing briefs or assisting with toileting *Device Care of Use: central line, urinary catheter, feeding tube, tracheostomy and *Wound Care: any skin opening requiring a dressing <p>-Contact Precautions will be implemented for residents with known or suspected to be infected or colonized with microorganisms that can be transmitted by direct contact with the resident or indirect contact with environmental surfaces or resident care items in the resident's environment.</p> <p>Review of the Contact Precaution Sign, undated, indicated:</p> <p>-Everyone Must: Clean their hands including before entering and when leaving the room.</p> <p>-Providers and Staff Must Also:</p> <ul style="list-style-type: none"> *Put on gloves before room entry and discard gloves before room exit. *Put on gown before room entry and discard gown before room exit. *Do not wear the same gown and gloves for the care of more than one person. <p>During the initial tour of Unit 2 on 06/18/25 at 7:22 A.M., Surveyor #1 observed that there were Enhanced Barrier Precautions Signs on the doorways of Residents #4, #5, #6, and #7 rooms, and a Contact Precaution Sign on the doorway of Resident #3 room.</p> <p>1. Resident #5 was admitted to the facility in August 2023, diagnoses included gastrostomy and tracheostomy.</p> <p>Review of Resident #5's medical record indicated he/she had a current Physician's order for Enhanced Barrier Precautions due to having a tracheostomy.</p> <p>(continued on next page)</p> | | |

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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>On 06/18/25 at 7:28 A.M., Surveyor #1 observed Certified Nurse Aide (CNA) #1 exit Resident #5's room wearing gloves and then walk down the hallway to the Nurses Station, where she then removed the gloves.</p> <p>During an interview on 06/18/25 at 7:30 A.M., CNA #1 said she had just changed Resident #5's bed linens and should have taken her gloves off and performed hand hygiene prior to exiting his/her room.</p> <p>2. Resident #7 was admitted to the facility in February 2025, diagnoses included neuromuscular bladder, and he/she had an indwelling urinary catheter.</p> <p>Review of Resident #7's medical record indicated he/she had a current Physician's order for Enhanced Barrier Precautions.</p> <p>On 06/18/25 at 7:51 A.M., Surveyor #1 observed Certified Nurse Aide (CNA) #2 enter Resident #7's room without performing hand hygiene and then minutes later CNA #2 exited his/her room holding a plastic bag of linen, without performing hand hygiene.</p> <p>During an interview on 06/18/25 at 7: 54 A.M., CNA #2 said she had provided care for Resident #7 and his/her roommate, and they were both on Enhanced Barrier Precautions.</p> <p>CNA #2 said she should have performed hand hygiene when she entered and exited the room.</p> <p>3. Resident #6 was admitted to the facility in January 2025, diagnoses included traumatic brain injury, gastrostomy, and tracheostomy.</p> <p>Review of Resident #6's medical record indicated he/she had a current Physician's order for Enhanced Barrier Precautions.</p> <p>A. On 06/18/25 at 7:32 A.M., Surveyor #1 observed Laboratory Technician #1 leaning over Resident #6's bed and obtaining a blood sample from his/her right arm, without wearing a gown.</p> <p>Laboratory Technician #1 exited Resident #6's room moments later without performing hand hygiene.</p> <p>During an interview on 06/18/25 at 7:36 A.M., Laboratory Technician #1 said she did not know, until the nurse just told her, that she was supposed to wear a gown when providing direct care to Resident #6.</p> <p>B. On 06/18/25 at 9:16 A.M., Surveyor #1 observed Certified Nurse Aide (CNA) #4 enter Resident #6's room without performing hand hygiene.</p> <p>During an interview on 06/18/25 at 9:20 AM., CNA #4 said she did not know she was supposed to perform hand hygiene before entering Resident #6's room.</p> <p>4. Resident #4 was admitted to the facility in December 2024, diagnoses included tracheostomy and gastrostomy.</p> <p>Review of Resident #4's medical record indicated a current Physician's order for Enhanced Barrier Precautions.</p> <p>(continued on next page)</p> | | |

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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>On 06/18/25 at 7:58 A.M., Surveyor #1 observed CNA #3 inside Resident #4's room, tidying Resident #4's bed linens, without wearing a gown.</p> <p>During an interview on 06/18/25 at 8:00 A.M., CNA #3 said she had just completed activities of daily living care (bathing/dressing/grooming) for Resident #4 and only needed to wear gloves during care.</p> <p>CNA #3 said she did not need to wear a gown because, although Resident #4 had a tracheostomy and a gastric tube,, he/she was able to feed him/herself, therefore it was her understanding that a gown was not required for high contact care.</p> <p>5. Resident #3 was admitted to the facility in April 2025, diagnoses included carbapenem resistant pseudomonas colonized in his/her sputum (CRPA-can be spread through direct contact with patients or residents who are colonized or infected with CRPA or by the hands or clothing of health care personnel (HCP). CRPA can also be spread through contaminated surfaces in the patient's or residents' environment. A person who is colonized with CRPA carries the organism in or on their body, but it is not causing symptoms. People who are colonized can spread the organism to surfaces in their environment and to other people), anoxic brain injury and tracheostomy.</p> <p>Review of Resident #3's medical record indicated he/she had a current Physician's order for Contact Precautions every shift for CRPA in the sputum.</p> <p>On 06/18/25 at 7:28 A.M., Surveyor #1 observed the Certified Occupational Therapist Assistant (COTA) leaning over Resident #3's bed, wearing a gown, gloves and surgical mask.</p> <p>-At 7:34 A.M., Surveyor #1 observed the COTA exit Resident #3's room, wearing a surgical mask.</p> <p>Surveyor #1 did not observe a supply of surgical masks inside Resident #3's room, and noted the box of clean surgical masks was in a bin located outside of Resident #3's room.</p> <p>During an interview on 06/18/25 at 7:35 A.M., the COTA said she was doing Range of Motion exercises with Resident #3 and that she changed her mask inside Resident #3's room before leaving it. The COTA said she had a mask in the pocket of her scrubs which she applied before leaving Resident #3's room.</p> <p>The COTA said she knew Resident #3 was on precautions but was not sure why. The COTA said she should not have used a mask that was kept in her pocket.</p> <p>During a telephone interview on 06/20/25 at 10:13 A.M., the Director of Nurses (DON) said that all staff, including vendors, are expected to follow the Precaution Signs posted at the entry of residents' rooms.</p> <p>The DON said all staff should perform hand hygiene upon entry and exit of rooms for residents who are on precautions.</p> <p>The DON said clean PPE should not be stored in the pockets of staff members clothing and staff should not wear masks in general.</p> <p>(continued on next page)</p> | | |

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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>The DON said she expected all staff to always adhere to infection control protocols.</p> | | |