

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 345129	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 08/09/2024
NAME OF PROVIDER OR SUPPLIER Davie Nursing and Rehabilitation Center		STREET ADDRESS, CITY, STATE, ZIP CODE 498 Madison Road Mocksville, NC 27028	

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 - Few</p>	<p>Provide and implement an infection prevention and control program.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 45276</p> <p>Based on observations and staff interviews, the facility failed to ensure 1 of 1 Nurse Aides (NA #1) followed the Special Droplet Contact Precautions signage posted on the door of a resident's room (Resident # 47) by not donning and doffing Personal Protective Equipment (PPE) while entering 1 of 1 resident rooms on transmission-based precautions (TBP).</p> <p>The findings included:</p> <p>The Special Droplet Contact Precautions (SDCP) signage, with a revised date of 02/09/22, noted staff should follow the instructions listed on the signage before entering the resident's room which included: all healthcare personnel must: 1) clean hands before entering and when leaving the room, 2) wear a gown when entering room and remove before leaving, 3) wear N95 or higher level respirator before entering the room and remove after exiting, 4) wear protective eyewear (face shield or goggles), and 5) wear gloves when entering room and remove before leaving.</p> <p>A review of staff training revealed NA #1 received training on the facility's Infection Control policy and completed the PPE Skills Competency review on 08/06/24.</p> <p>A progress note and physician order dated 08/05/24 revealed the Nurse Practitioner assessed Resident #47 for a sore throat and cough. An order was written for throat lozenges and Combined Droplet/Contact Precautions/Isolation related to pending respiratory viral panel results. Resident was tested for influenza, respiratory syncytial virus, and corona virus.</p> <p>An observation on 08/06/24 at 9:46 AM of the 400-hall revealed NA #1 entered room [ROOM NUMBER], which had SDCP signage posted on the room door and a PPE cart outside of it, without sanitizing her hands or donning any personal protective equipment (PPE) per the instructions on the signage.</p> <p>An interview was conducted with NA #1 on 08/06/24 at 9:47 AM as she exited room [ROOM NUMBER] without required PPE. When asked about the instructions on the SDCP signage on room [ROOM NUMBER] she stated the Assistant Director of Nursing (ADON) told her she could enter any room that had precaution signage without PPE on as long as she did not touch a resident to provide care. She stated she was hired through an agency, and she never wore all PPE at any other facility unless she was providing direct care. NA #1 questioned this surveyor Are you going to fine them for me not wearing PPE? That's messed up. NA #1 then donned a gown, gloves, and mask and reentered room [ROOM NUMBER]. She did not wear a face shield or goggles when she reentered room [ROOM NUMBER].</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 - Few</p>	<p>An interview was conducted with Nurse #1 on 08/06/24 at 9:53 AM. Nurse #1 stated earlier, on the morning of 08/06/24, NA # 1 had requested to wear a surgical mask instead of the N95 respirator prior to entering rooms with SDCP signage posted. Nurse #1 stated she asked the Director of Nursing (DON) about NA #1's request to wear a surgical mask and the DON replied No, an N95 respirator is required for droplet precautions. Nurse #1 stated she educated NA #1 on the required PPE, including the N95 respirator, for rooms with SDCP signage posted. Nurse #1 said she informed NA #1 the required PPE was to protect both residents and staff from respiratory illnesses. She stated she told NA #1 the signage posted on the outside of the room for any resident on TBP listed the required PPE and instructions.</p> <p>On 08/06/24 at 10:00 AM NA #1 opened the door of room [ROOM NUMBER] and asked Nurse #1 if she could leave after she finished her assignment. She told Nurse #1 she was hired through agency, and she was not going to wear all the PPE to enter the rooms posted with SDCP the rest of the day. She stated she felt as if this surveyor had intentionally allowed her to initially enter the room without PPE. Nurse #1 sent a text to the DON and asked for her assistance.</p> <p>An interview was conducted with the DON on 08/06/24 at 10:02 AM outside of room [ROOM NUMBER]. She stated NA #1 was aware of the PPE required for rooms posted with SDCP signage. She stated NA #1 would be relieved of her assignment upon exit from room [ROOM NUMBER].</p> <p>On 08/06/24 at 11:05 AM an interview was conducted with NA #2 and she stated full PPE is required for rooms with droplet precaution signage. She stated the SDCP signage contained instructions and outlined which PPE was required before entering a room of a resident on TBP. NA #2 stated she received infection control training when she was hired [AGE] years ago and was required to complete yearly competencies on infection control.</p> <p>An interview was conducted with the ADON on 08/06/24 at 2:28 PM. She stated she is the facility Infection Preventionist. She stated for rooms with SDCP signage an N 95 mask, face shield or appropriate goggles, gown and gloves are required prior to entry for any reason. She stated she had not educated NA #1 that she could enter a room with SDCP signage without PPE if she was not going to make any contact with the resident. She stated infection control policy education was provided to all facility and agency during orientation and a yearly training competency. She stated the training included the PPE required for each type of precaution. She stated all staff are required have infection control and PPE training prior their first assignment on a hall. She stated NA #1 had received the infection control and PPE training that morning, 08/06/24, before she started working on the floor. The ADON stated NA #1 was specifically educated on the two signs (droplet, enhanced barrier) that were active on her assigned hall. She stated she explained to NA #1 if she forgot the difference between the two precautions to read the signage outside [NAME] door, and it would direct her to the proper PPE required prior to entering the room. The ADON added NA #1 was directed to leave the facility when she exited room [ROOM NUMBER] that morning.</p> <p>On 08/06/24 at 2:45 PM a follow up interview was conducted with the DON and she stated NA #1 should have had utilized the required PPE indicated on the SDCP signage. She stated she had received a message from Nurse #1 asking if the NA #1 could wear a surgical mask in place of an N 95 respirator and she told her No, not if it is an isolation room. She said she told Nurse #1 to inform NA #1 that an N 95 respirator was required to enter a room with SDCP signage. The DON stated all staff, including agency NAs, are trained on PPE and the infection control policy and procedures policy when hired and yearly thereafter.</p>		