

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 505474	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 07/08/2024
NAME OF PROVIDER OR SUPPLIER Martha and Mary Health Service		STREET ADDRESS, CITY, STATE, ZIP CODE 19160 Front Street Northeast Poulsbo, WA 98370	

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>46068</p> <p>Based on observation, interview and record review, the facility failed to ensure 3 of 3 staff members (Staff A, B and C) used personal protective equipment (PPE) in accordance with the Centers for Disease Control (CDC) guidelines when caring for residents with known COVID 19 (an infectious virus causing respiratory illness that may cause difficulty breathing and could lead to severe impairment or death) infections. This failure placed residents and staff at risk for contracting and spreading COVID 19.</p> <p>Findings included .</p> <p>A 03/18/2024 CDC update titled, Interim Infection Prevention and Control Recommendations for Healthcare Personnel During the Coronavirus Disease 2019 Pandemic, showed when health care personnel enter the room of a patient with suspected or confirmed COVID 19, they should use a N95 respirator (a mask that filters 95% of airborne particles), gown, gloves, and eye protection. When a N95 respirator was used during the care of a resident with a COVID 19 infection, they should be removed and discarded after the resident care encounter and a new one should be donned.</p> <p>A 06/03/2020 CDC factsheet titled, Use of Personal Protective Equipment When Caring for Patients with Confirmed or Suspected COVID-19, showed to perform hand hygiene after removing the N95 respirator and before putting on a new one.</p> <p>Review of Resident 1's progress note, dated 07/05/2024, showed Resident 1 tested positive for COVID 19 infection.</p> <p>An observation on 07/08/2024 at 11:50 AM showed Staff A, Certified Nursing Assistant (CNA), entered Resident 1's room wearing a N95 respirator, gown, gloves and no eye protection. Prior to exiting Resident 1's room, Staff A removed their gown and gloves and performed hand hygiene. Staff A had not removed or discarded their N95 respirator. Staff A exited Resident 1's room with their N95 respirator on and proceeded to pass lunch trays to other residents on the unit.</p> <p>At 12:12 PM, Staff B, CNA, was observed entering Resident 1's room wearing a N95 respirator, gown, gloves and eye protection. Prior to exiting Resident 1's room, Staff B removed their gown, gloves, eye protection and performed hand hygiene. Staff B exited the room and removed their N95 respirator. Staff B donned a new N95 respirator without performing hand hygiene.</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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NAME OF PROVIDER OR SUPPLIER Martha and Mary Health Service		STREET ADDRESS, CITY, STATE, ZIP CODE 19160 Front Street Northeast Poulsbo, WA 98370	
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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>Review of Resident 2's progress note, dated 07/06/2024, showed Resident 2 was COVID positive and they would be off isolation on 07/09/2024.</p> <p>An observation on 07/08/2024 at 12:42 PM showed, Staff C, Licensed Practical Nurse, entering Resident 2's room wearing a N95 respirator, gown, gloves and eye protection. Prior to exiting Resident 2's room, Staff C removed their gown, gloves, and eye protection and performed hand hygiene. Staff C had not removed or discarded their N95 respirator. Staff C exited Resident 2's room with their N95 respirator on and proceeded down the hallway.</p> <p>At 12:58 PM, Staff C said they were not aware if they had to change their N95 respirator after caring for a resident with COVID 19 and they would have to check.</p> <p>On 07/08/2024 at 1:08 PM, Staff D, Infection Preventionist, said Resident 1 and Resident 2 had tested positive for COVID 19 and were currently on isolation. Staff D said staff were expected to wear N95 respirators, eye protection, gowns, and gloves when they cared for residents with COVID 19 infections and remove the PPE on exiting the room. Staff D said the N95 respirators were expected to be removed and discarded after caring for a resident with COVID 19 infection. Staff D said staff should perform hand hygiene upon removal of PPE and prior to placing new PPE.</p> <p>Reference WAC 388-97-1320 (1)(a)(2)(a)</p>		