

NEW DEPARTMENT OF HEALTH

HEALTH FACILITY SURVEY & FIELD OPERATIONS

The Wanaque Center For Nursing & Rehabilitation

Date of Survey 10/21/18

During the care tour of the unit on 10/21/18, residents were on precautions (droplet, contact), observed stop signs on the residents' door and postage about adenovirus precautions. Surveyors observed isolation carts with Personal Protective Equipment (PPEs): such as gloves, gowns, and masks located outside the residents' rooms. Staff were observed applying PPEs before entering the residents' rooms. However, 4 out of 6 staff were deficient with their hand hygiene technique. The surveyor observed 2 out of 6 staff use proper hand hygiene technique. In addition, the surveyor observed staff a second time performing hand hygiene in the proper manner.

The surveyor conducted interviews with staff, and they stated that the residents on the unit were not leaving their rooms and are not taken off the unit unless it was an emergent situation. Staff also stated that they were assigned to specific units and were not floating to other units. Staff further stated that there were dedicated staff assigned on each pediatric hall (North, East, South, and West). Residents were being monitored for signs and symptoms of respiratory illness related to the adenovirus.

The facility is not accepting any new admissions.

During an interview with the Administrator, Director of Nursing, and Infection Control staff they initially reported the incident to the local Health Department/ Communicable Disease Services (CDS) on 10/9/18. Record review confirmed that on 10/10/18 an email was sent from the facility to CDS to report the incident and included line listing. On 10/11/18, CDS provided recommendations for the facility. Staff stated that communication with the Local Health Department was still ongoing.

Medical record review for all residents that expired revealed that prior to hospitalization they were being monitored for fever, Medical Doctor (MD) was notified, medicated with Tylenol alternating with Ibuprofen, antibiotic administered according to the MD's orders, and orders were obtained from the MD to send the residents to the hospital.

On 10/11/18 the following protocol was received from the MD:

- If fever for 2 shifts is 101 give 100 milliliter (ml) bolus of Pedialyte.
- If fever is 24 hours, order Complete Blood Count (CBC) with differential count.
- Maintain droplet precautions as well as roommate.
- May order Chest X-ray if respiratory symptoms are exhibited.

Multiple in-services and memos were given to staff regarding infection control since the outbreak.

On 10/21/18, staff were educated on the do's and don'ts for wearing procedure masks in non-surgical healthcare settings. Post-survey staff were re-educated on proper hand washing techniques.

The facility had on going communication with their Local Health Department for guidance.

During the tour on 10/21/18, the surveyor observed Sani-cloth germicidal disposable wipes with a purple lid, sanitizers, masks, gloves, yellow gown were available on every wing and mostly in every room for the staff and visitors to use prior to entering the room. The surveyor observed stop signs and guidelines regarding adenovirus for visitors were available and visible in each room. The surveyor observed Housekeeping staff cleaning the rooms with germicidal approved cleaning solutions as recommended by CDS. The surveyor observed proper transport technique in handling garbage and soiled linens. A review of the facility's infection control precaution showed that there was a memo dated 10/8/18, informing all staff on intensive housekeeping and disinfection on the Pediatric Unit and classrooms. During general observation of the facility no immediate odors were noted.

During the entrance to the facility DOH surveyors observed signage for all visitors not to visit if they are sick. The surveyors observed signage before entering the unit to use a mask and use proper hand hygiene. The surveyors observed a stop sign posted on each residents' room to see nurse prior to entering the residents' room. In addition, the facility had good communication with physicians and the receiving hospitals.

Hand hygiene deficiency will be cited. See F 880.