



GEORGIA DEPARTMENT
OF COMMUNITY HEALTH

Brian P. Kemp, Governor

Frank W. Berry, Commissioner

2 Peachtree Street, NW | Atlanta, GA 30303-3159 | 404-656-4507 | www.dch.georgia.gov

IMPORTANT NOTICE – PLEASE READ CAREFULLY
(Receipt of this Notice is presumed to be November 10, 2020)

November 10, 2020

Gerialean Cooper, Administrator
William Breman Jewish Home, The
3150 Howell Mill Road N.W.
Atlanta, GA 30327
gcooper@jewishhomelife.org

SUBJECT: Survey Results
CMS Certification Number: 115022

Dear Ms. Cooper:

SURVEY RESULTS

On October 21, 2020, the Georgia Survey Agency completed COVID-19 Focused Survey at William Breman Jewish Home, The to determine if your facility was in compliance with Federal requirements related to implementing proper infection prevention and control practices to prevent the development and transmission of COVID-19. The survey revealed that no deficiencies were cited. A copy of the CMS Form 2567 is attached.

QUALITY IMPROVEMENT ORGANIZATION (QIO) RESOURCES

The Quality Improvement Organization (QIO) Program is committed to supporting healthcare facilities in the fight to prevent and treat COVID-19 as it spreads throughout the United States. QIO resources regarding COVID-19 and infection control strategies can be found at [QIO Program Website \(https://qioprogram.org/covid-19\)](https://qioprogram.org/covid-19). This page will continue to be updated as more information is made available. QIOs will be reaching out to Nursing Homes to provide virtual technical assistance related to infection control. QIOs per state can be found at [Locate Your QIO \(https://qioprogram.org/locate-your-qio\)](https://qioprogram.org/locate-your-qio).

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CONTACT INFORMATION

If you have any questions regarding the Focused Infection Control Survey results, please contact Robbie Dunbar, Regional Director at (404) 275-6048 or via Robbie.Dunbar@dch.ga.gov.

Sincerely,

Robbie Dunbar

Robbie Dunbar
Regional Director

cc: Melanie Simon, HFRD Chief
CMS Atlanta State Team Coordinator
Stephanie M. Davis, LTC Enforcement Branch Manager
Jill Jones, LTC Survey Branch Manager

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

PRINTED: 11/10/2020
FORM APPROVED
OMB NO. 0938-0391

| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 115022 | (X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____ | | (X3) DATE SURVEY COMPLETED 10/21/2020 |
|--|--|---|---|----------------------|---|
| NAME OF PROVIDER OR SUPPLIER WILLIAM BREMAN JEWISH HOME, THE | | | STREET ADDRESS, CITY, STATE, ZIP CODE 3150 HOWELL MILL ROAD N.W. ATLANTA, GA 30327 | | |
| (X4) ID PREFIX TAG | SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION) | ID PREFIX TAG | PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY) | (X5) COMPLETION DATE | |
| E 000 | Initial Comments A COVID-19 Focused Emergency Preparedness Survey was conducted by Healthcare Management Solutions, LLC on behalf of the Georgia Department of Community Health (DCH) on October 21, 2020. The facility was found to be in compliance with 42 CFR §483.73 related to E-0024 (b)(6). | E 000 | | | |

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

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.

DEPARTMENT OF HEALTH AND HUMAN SERVICES
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| F 000 | INITIAL COMMENTS A COVID-19 Focused Infection Control Survey was conducted on October 21, 2020 by Healthcare Management Solutions, LLC on behalf of the Georgia Department of Community Health (DCH). The facility was found to be in compliance with 42 CFR §483.80 infection control regulations and has implemented the CMS and Centers for Disease Control and Prevention (CDC) recommended practices to prepare for COVID-19. Total census 66. | F 000 | | | |

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