

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER / SUPPLIER / CLIA IDENTIFICATION NUMBER <b>555808</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED <b>03/17/2020</b>
NAME OF PROVIDER OF SUPPLIER <b>THE REHABILITATION CENTER OF SANTA MONICA</b>		STREET ADDRESS, CITY, STATE, ZIP <b>1338 20TH STREET SANTA MONICA, CA 90404</b>	
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)		
F 0880  <b>Level of harm</b> - Minimal harm or potential for actual harm  <b>Residents Affected</b> - Few	<b>Provide and implement an infection prevention and control program.</b>  Based on observation, interview, and record review, Laundry Aide (LA) 2 failed to maintain infection control when handling linens in the laundry room. LA 2 failed to: 1. Wear personal protective equipment (PPE) when sorting and loading soiled linens into a frontloading washing machine. 2. Wash hands between glove changes after sorting and loading soiled linens into a frontloading washing machine. 3. Fold clean linens without coming in contact with body. These deficient practices had the potential for widespread infection. Findings: On [DATE], at 1:03 p.m., an unannounced visit was made to the facility to investigate a complaint. During an observation on 1/27/20 at 3:28 p.m., LA 2 was observed folding clean sheets or linens coming in contact with his body. During a concurrent interview, LA 2 stated that he was unaware that the linens were coming in contact with his body while he was folding the items. He acknowledged that he should avoid letting the linens touch his body while folding them to prevent the spread of infection. During an observation on 1/27/20 at 4:29 p.m., LA 2 was observed sorting and loading soiled linen into the number two frontloading washing machine without wearing PPE. During a concurrent interview, LA 2 acknowledged that he was not wearing PPE and that he had been instructed in the past to wear PPE to prevent the spread of infection. During an observation on 1/27/20 at 4:40 p.m., LA 2 was observed finishing loading the number two washing machine, discarded his gloves and donned a new pair of gloves without performing hand hygiene. During a concurrent interview, LA2 acknowledged that he did not perform hand hygiene between glove changes as observed to prevent the spread of infection. During an interview with Laundry/Housekeeping Supervisor (LHS), on 01/28/20 at 11:40 a.m., LHS stated laundry aides should wear PPE when sorting and washing dirty linens, perform hand hygiene between glove changes, and fold the clean laundry away from their body to prevent the spread of infection. During an interview with the Director of Nursing (DON), on 01/28/20 at 02:41 p.m., DON stated laundry aides should wear proper PPE when handling soiled linens, avoid linens from coming in contact with their body, and perform hand hygiene between glove changes to prevent widespread infection. A review of the facility's policy and procedure titled, Infection Control Program, updated on [DATE]9/2016, indicated The infection control program is designed to identify and reduce the risk of acquiring and transmitting infections among residents, staff Employees must wash their hands for ten (10) to fifteen (15) seconds using antimicrobial or non-antimicrobial soap and water under the following conditions : after removing gloves, after handling items potentially contaminated with blood, body fluids, or secretions Wear personal protective equipment as necessary to prevent exposure to . body fluids or other potentially infectious materials.		
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.