

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER / SUPPLIER / CLIA IDENTIFICATION NUMBER 055240	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 05/27/2020
NAME OF PROVIDER OF SUPPLIER WATSONVILLE NURSING CENTER		STREET ADDRESS, CITY, STATE, ZIP 535 AUTO CENTER DRIVE WATSONVILLE, CA 95076	
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 Level of harm - Minimal harm or potential for actual harm Residents Affected - Some	Provide and implement an infection prevention and control program. Based on observation, interview and document review, the facility failed to ensure infection control measures were implemented when: 1. Dietary staff wore cloth face coverings instead of surgical face masks (masks intended to be worn by health professionals to catch the bacteria shed in liquid droplets and aerosols from the wearer's mouth and nose) in the kitchen; and 2. Certified nursing assistant A (CNA A) did not wear her surgical face mask properly while providing services to a resident. These failures had the potential to spread infection in the facility. Findings: 1. During an observation on 5/27/2020 at 12:10 p.m., there were three dietary staff members in the food preparation area of the kitchen. All three dietary staff members were wearing cloth face coverings instead of surgical masks. During a concurrent interview with the director of nursing (DON), she confirmed the above observation and stated the facility did not require dietary staff to wear surgical masks. Review of the Centers for Disease Control and Prevention's (CDC's) guidance titled Preparing for COVID-19 in Nursing Homes, (https://www.cdc.gov/coronavirus/2019-ncov/hcp/long-term-care.html) updated 5/19/2020, indicated HCP (health care personnel) should wear a facemask at all times while they are in the facility. When available, facemasks are generally preferred over cloth face coverings for HCP as facemasks offer both source control and protection for the wearer against exposure to splashes and sprays of infectious material from others. According to the guidance, health care personnel includes dietary staff. 2. During an observation on 5/27/2020 at 12:20 p.m., CNA A wore a surgical mask that covered her mouth, but did not cover her nose. With her nose uncovered, CNA A delivered a meal tray to a resident's room. While delivering the tray, CNA A was less than six feet away from the resident. During a concurrent interview with the DON, she confirmed CNA A did not wear her surgical mask properly. Review of the CDC's guidance titled Using Personal Protective Equipment (PPE) (https://www.cdc.gov/coronavirus/2019-ncov/hcp/using-ppe.html), indicated Respirator/facemask should be extended under chin. Both your mouth and nose should be protected.		

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.