

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER / SUPPLIER / CLIA IDENTIFICATION NUMBER 055475	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 08/19/2020
NAME OF PROVIDER OF SUPPLIER MAIN WEST POSTACUTE CARE		STREET ADDRESS, CITY, STATE, ZIP 812 WEST MAIN STREET TURLOCK, CA 95380	
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 - Few	<p>Provide and implement an infection prevention and control program. **NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on observation, interview, and record review, the facility failed to implement and maintain a safe environment with an effective infection prevention and control program for the prevention of Coronavirus (COVID-19- a contagious serious respiratory infection transmitted from person to person) transmission when: 1. Housekeeping staff did not follow a disinfectant (a chemical liquid that destroys bacteria) manufacturer's instructions for use in regards to the contact time (the amount of time the surface must remain visibly wet in order to kill pathogens (germs that can cause disease)) to disinfect environmental surfaces; 2. Dietary staff did not use a disinfectant that specified it targeted COVID-19 during disinfection (cleaning something in order to destroy bacteria) of food carts that were used to transport residents' food from the kitchen to patient care areas; and 3. A Hospice (care designed to give supportive care to people at end of life) License Nurse (HLN) wore an isolation gown (a protective article used by medical personnel to avoid exposure to blood, body fluids, and other infectious (likely to spread infection) materials, or to protect patients from infection) while in the nurse's station. These practices potentially placed the residents and staff at risk for the spread and transmission of COVID-19. Findings: 1. During a concurrent observation and interview, on 8/19/20 at 10 a.m., in the hallway, the Housekeeper (HK) wiped the handrail with a cloth. The HK wiped the handrail once. The HK stated she wiped the handrail with a cloth that contained (brand name) disinfectant. The HK touched the handrail and stated the handrail was dry. The HK stated the disinfectant's contact time was ten minutes. The HK stated she did not leave the handrail wet for ten minutes. During a concurrent interview and record review, on 8/19/20 at 11 a.m., with the Housekeeping Supervisor (HKS), the (brand name) disinfectant manufacturer's direction for use was reviewed. The disinfectant manufacturer's direction for use indicated, .To disinfect . surfaces . apply solution with a mop cloth, sponge .to wet all surfaces thoroughly. Allow to remain wet for 10 minutes . The HKS stated the manufacturer's instructions for use regarding contact time should have been followed for the disinfectant to be effective. During an interview on 8/18/20, at 12:33 p.m., with the Director of Nursing (DON), the DON stated the disinfectant's manufacturer's instructions for use regarding contact time should have been followed to effectively kill bacteria [MEDICAL CONDITION] on surfaces. The DON stated if the contact time was not followed, there was a potential for harm to residents and spread of infection. During a review of (brand name of disinfectant) product label, undated, indicated, .DIRECTIONS FOR USE .DISINFECTION .Apply solution with a mop, cloth, sponge .Allow to remain wet for 10 minutes . During a review of the facility's policy and procedure (P&P) titled, Cleaning and Disinfection of Environmental Surfaces, dated 01/18, the P&P indicated, .Environmental surfaces will be cleaned and disinfected according to current CDC (Centers for Disease Control) recommendations for disinfection of healthcare facilities and the OSHA (Occupational Safety Health Administration (agency that ensures safe and healthful working conditions)) Blood Borne Pathogens (organisms that cause disease) Standard . Process . c. Non-Critical items are those that come in contact with intact skin but not mucous membranes .2. Non-critical surfaces will be disinfected with an EPA (Environmental Protection Agency (agency that protects people and the environment from significant health risk)) -registered intermediate or low-level hospital disinfectant according to the label's safety precautions and use directions . a. Most EPA-registered hospital disinfectants have a label contact time of 10 minutes . 2. During an interview on 8/19/20, at 11 a.m., with the Dietary Supervisor (DS), the DS stated food carts used to transport residents' food were washed with soap and water and then (brand name) disinfectant was applied. During an interview on 8/19/20, at 11:30 a.m., with the DS, the DS stated it was important to use a disinfectant on equipment such as food carts, in order to properly kill any viruses on the surfaces and prevent any cross contamination (process by which microorganisms (germs such as bacteria or viruses) are unintentionally transferred from one substance or object to another, with harmful effect) between residents and staff. During an interview on 8/19/20, at 12:10 p.m., with the Territory Manager (TM), the TM stated the (brand name) disinfectant did not have a claim to target COVID-19. The TM stated food carts would need to be disinfected with a solution that could kill COVID-19. During a concurrent interview and record review, on 8/19/20, at 12:30 p.m., with the DS, the (brand name) disinfectant manufacturer's specification was reviewed. The (brand name) disinfectant manufacturer's specification dated 2020, did not indicate which viruses the solution could kill. There was no claim for disinfection against Coronavirus. The DS stated the (brand name) disinfectant did not have a claim against killing Coronavirus nor COVID 19, and the facility would have to use a different disinfectant to properly disinfect food carts. During an interview on 8/19/20, at 12:40 p.m., with the DON, the DON stated if food carts were not being properly disinfected, there could be a potential for COVID-19 to infect other residents or staff in the facility. During a professional reference, review retrieved on 8/25/2020, from https://www.cdc.gov/coronavirus/2019-ncov/community/disinfecting-building-facility.html dated 7/28/20, titled Cleaning and Disinfecting Your Facility indicated, .How to clean and disinfect . Clean surfaces using soap and water, then use disinfectant .Cleaning with soap and water reduces number of germs, dirt and impurities on the surface. Disinfecting kills germs on surfaces .Disinfect .Recommend use of EPA-registered .Follow the instructions on the label to ensure safe and effective use of the product . 3. During an observation and concurrent interview on 8/19/20, at 10:20 a.m., the Hospice License Nurse (HLN) was observed at a nurse's station in the facility's Green Zone (area in the facility dedicated for Covid-19 negative residents). The HLN wore an isolation gown while in the nurse's station. The HLN stated she did not work for the facility, she worked for (Name of Hospice Agency) but was responsible for providing hospice care for one of the residents in the facility. During an interview on 8/19/20, at 10:30 a.m., with the DON, the DON stated the HLN should not have worn her isolation gown in the nurse's station. The DON stated there was a potential for cross contamination. During an interview on 8/19/20, at 11:15 a.m., with the Facility Consultant (FC), the FC stated the facility's COVID-19 infection control requirements for contracted HLN's that enter the facility was provided to (Name of Hospice Agency). The FC stated the infection control requirements were discussed with the (Name of Hospice Agency) supervisor. The FC stated the infection control requirements included HLN's to not wear isolation gown in the nurse's station. The FC stated HLN should not wear isolation gowns in the nurse's station to prevent cross contamination. During a review of the facility's P&P titled, Interim Infection Prevention and Control Recommendations for Patients with Suspected or Confirmed Coronavirus Disease 2019 (Covid-19), dated 4/6/20, indicated, .1. To protect residents and healthcare provider. 2. To minimize transmission of . Covid-19 . B. Personal Protective Equipment . Gowns a. Put on a clean isolation gown upon entry into the patient room or area . Remove and discard the gown in dedicated container for waste disposal . before leaving the patient room .</p>		
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.