

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER / SUPPLIER / CLIA IDENTIFICATION NUMBER <b>055407</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED <b>05/27/2020</b>
NAME OF PROVIDER OF SUPPLIER <b>CUPERTINO HEALTHCARE &amp; WELLNESS CENTER</b>		STREET ADDRESS, CITY, STATE, ZIP <b>22590 VOSS AVENUE CUPERTINO, CA 95014</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	<p><b>Provide and implement an infection prevention and control program.</b></p> <p>Based on observation, interview, and record review, the facility failed to implement strategies to prevent the spread of communicable disease when: 1. Three facility staff did not wear facemasks inside the facility; 2. Five residents did not wear facemasks while working with the therapists in the rehabilitation gym; two residents did not wear facemasks while they were sitting in the lobby; another two residents did not wear facemasks while they were sitting in the hallway; 3. Two certified nursing assistants (CNAs) were wearing cloth face covering while providing direct care and activities of daily living (ADLs) for the residents in the facility; 4. Two CNAs and one housekeeper (HK) did not wear their facemasks properly in the facility and two kitchen staff (KS) did not wear their facemasks properly while preparing the food in the kitchen; These failures had the potential to result in transmission of Coronavirus Disease 2019 (COVID-19) to residents. Findings: 1. During an observation on 5/27/2020 at 10:35 a.m., the administrator (ADM) did not wear a facemask while she was talking to the California Department of Public Health (CDPH) surveyor. During an interview with the ADM on 5/27/2020 at 10:35 a.m., she acknowledged the above observation and stated that she forgot to put her facemask on when she was talking to the CDPH surveyor. During an observation on 5/27/2020 at 10:55 a.m., licensed vocational nurse A (LVN A) did not wear a facemask in front of the medication cart. During a concurrent observation and interview with LVN A on 5/27/2020 at 10:56 a.m., she acknowledged the above observation and stated that she should have worn a facemask in the facility. During an observation on 5/27/2020 at 11:20 a.m., admission coordinator (AC) did not wear a facemask inside her office. During an interview on 5/27/2020 at 11:21 a.m. with the AC, she confirmed the above observation and stated she thought it was not necessary to wear a facemask if she was inside her office. 2. During an initial tour observation in the rehabilitation gym on 5/27/2020 at 10:42 a.m., five residents did not wear their masks while they were working with the therapists. During a concurrent observation and interview with the DON on 5/27/2020 at 10:56 a.m., he acknowledged the above observation and stated residents should have worn facemasks in the gym. During an observation on 5/27/2020 at 10:45 a.m., two residents did not wear their facemasks while sitting in the lobby. During an observation in the hallway on 5/27/2020 at 10:52 a.m., Resident 1 did not wear a facemask and coughed in front of her room. During an observation in the hallway on 5/27/2020 at 10:53 a.m., Resident 2 did not wear a facemask and coughed in front of her room. During a concurrent observation and interview with the DON on 5/27/2020 at 10:54 a.m., he acknowledged the above observations. 3. During observations on 5/27/2020 at 10:50 a.m., and 11:07 a.m., both CNAs B and C wore a cloth face covering while providing direct care and ADLs for the residents in the facility. During an interview on 5/27/2020 at 11:51 a.m., with CNA B, she acknowledged the observation and stated she should wear a surgical mask while providing direct care to the residents. During an interview on 5/27/2020 at 11:08 a.m., with CNA C, she acknowledged the observation and stated she should wear a surgical mask. During a concurrent observation and interview with the DON on 5/27/2020 at 11:08 a.m., he acknowledged the above observations and stated CNAs should wear a surgical mask while inside the facility providing direct care to the residents. 4. During observations on 5/27/2020 at 11:00 a.m., and 11:03 a.m., both CNAs D and E wore their facemasks under their chins and the facemasks did not cover their mouths and noses. During an observation in one resident's room on 5/27/2020 at 11:15 a.m., HK F wore a facemask under her chin. The facemask did not cover her mouth and nose. During an interview on 5/27/2020 at 11:16 a.m., with HK F, she acknowledged the observation. During the kitchen observations on 5/27/2020 at 11:10 a.m., both KS G and KS H wore the facemasks under their chins and the facemasks did not cover their mouths and noses. During a concurrent observation and interview with both KS G and KS H on 5/27/2020 at 11:11 a.m., they acknowledged the observation. Further, both stated it was hot in the kitchen while they are preparing the food. Review of the Centers for Disease Control and Prevention (CDC) guidelines dated 5/19/2020, Preparing for COVID-19 in Nursing Homes- Implement Source Control Measures, indicated health care personnel (HCP) should wear a facemask at all times while in the facility. Cloth face coverings should NOT be worn by HCP. (HCP- include, but are not limited to, emergency medical service personnel, nurses, nursing assistants, physicians, technicians, therapists, phlebotomists, pharmacist, students and trainees, contractual staff not employed by the healthcare facility, and persons not directly involved in patient care, but who could be exposed to infectious agents that can be transmitted in the healthcare setting (eg., clerical, ancillary staff such as environmental and dietary services, laundry, security, engineering and facilities management, administrative, billing, and the volunteer personnel). Residents should wear a cloth face covering or facemask (if tolerated) whenever they leave their room Implement aggressive social distancing measures (remaining at least 6 feet apart from others). Remind HCP to practice social distancing and wear a facemask (for source control) when in break rooms or common areas.</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.