

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER / SUPPLIER / CLIA IDENTIFICATION NUMBER <b>056035</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED <b>09/29/2020</b>
NAME OF PROVIDER OF SUPPLIER <b>SHAFTER NURSING CARE</b>		STREET ADDRESS, CITY, STATE, ZIP <b>140 EAST TULARE AVENUE SHAFTER, CA 93263</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 0563  <b>Level of harm</b> - Minimal harm or potential for actual harm  <b>Residents Affected</b> - Few	<p><b>Honor the resident's right to receive visitors of his or her choosing, at the time of his or her choosing.</b></p> <p><b>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY**</b></p> <p>Based on interview and record review, the facility failed to allow end-of- life care visitation for one of three sampled residents (Resident 1). This failure resulted in a violation of resident's rights to receive hospice care (a type of health care that focuses on the palliation of a terminally ill patient's pain and symptoms and attending to their emotional and spiritual needs at the end-of- life). Findings: During a review of the clinical record for Resident 1, the Admission Record indicated Resident 1 was admitted to the facility on [DATE]. The Progress Notes dated 7/24/20, indicated Resident 1 was sent to the hospital and returned the same day with orders for comfort care (a form of hospice care or palliative care). During an interview on 7/30/20, at 10:18 AM, with Resident 1's Responsible Party (RP), RP stated, The doctor from the hospital gave them (skilled nursing facility) orders and I also told them that I wanted Hospice but they said they didn't need to come in (be)cause they were able to provide end-of-life care services for my dad. During an interview on 7/30/20, at 3:18 PM, with Director of Nursing (DON) and Social Service (SS), DON and SS stated that they were not allowing hospice services to come in the facility because of COVID-19 (COVID - an infectious disease caused by a new coronavirus). DON stated, What hospice is able to do, our nurses are able to do it. During an interview on 7/30/20, at 3:46 PM, with License Vocational Nurse (LVN), LVN stated, I don't think we've ever had an in-service on end-of-life care. During an interview on 7/30/20, at 3:48 AM, with Director of Staff Development (DSD), DSD stated she has not given any of the nursing staff any in-services on hospice or end-of-life care. During an interview on 9/3/20, at 11:35 AM with Registered Nurse (RN) from the hospice agency, RN stated, A referral was received from (hospital) and an evaluation was done on 7/24/20, (Resident 1) meets the criteria for hospice. A follow-up was made with the facility. I told them that we had an order and that (RP) was adamant she wanted hospice for (Resident 1). They said they are not allowing outside agencies to come in to the facility and that they will be providing comfort care for (Resident 1). During a review of the facility's policy and procedure (P&amp;P) titled, Resident's Rights (Patient's Bill of Rights), dated 11/16, the P&amp;P indicated, The Resident has the right to a dignified existence, self-determination, and communication with, and access to, persons and services inside and outside the facility . The Resident has the right to reside and receive services in the facility with reasonable accommodation of resident needs and preferences . During a review of the Centers for Medicare &amp; Medicaid Services (CMS - a federal agency within the United States that oversees federal healthcare programs) QSO-20-16-Hospice Guidance for Infection Control and Prevention of COVID in Nursing Homes, dated 3/9/20, indicated, If Hospice care is provided in a nursing home, we have advised nursing homes that hospice workers should be allowed entry . During a review of the CMS QSO-20-14-NH Guidance for Infection Control and Prevention of COVID in Nursing Homes, dated 3/13/20, indicated, Facilities should restrict visitation of all visitors and non-essential health care personnel, except for certain [MEDICATION NAME] care situations . Exceptions to restrictions: Health care workers. This also applies to other health care workers, such as Hospice workers . During a review of the California Department of Public Health AFL 20-47, dated 4/3/20, indicated, Hospice providers will have flexibility in how they provide basic services to patients . Services may be provided via telehealth or other remote methods.</p>		

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
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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.