

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER / SUPPLIER / CLIA IDENTIFICATION NUMBER 675336	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 08/17/2020
NAME OF PROVIDER OF SUPPLIER KIRKLAND COURT HEALTH AND REHABILITATION CENTER		STREET ADDRESS, CITY, STATE, ZIP 1601 KIRKLAND DR AMARILLO, TX 79106	
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	<p>Provide and implement an infection prevention and control program.</p> <p>Based on observation, interview, and record review, the facility failed to maintain an infection prevention and control program designed to provide a safe, sanitary and comfortable environment and to help prevent the development and transmission of communicable diseases and infections for 2 of 11 Employees (ADM and PRC) observed for infection control and prevention practices. - ADM and PRC failed to wear a mask or face covering in the facility at all times during the COVID-19 pandemic despite CDC guidance and local and state ordinances to do so. This failure has the potential to affect residents by placing them at an increased and unnecessary risk of exposure to communicable diseases and infections. Findings include: During an observation on 08/17/2020 at 8:07 AM, the front door to the facility had several notices related to the COVID-19 pandemic posted on it. One of the notices was signed by the Local Health Authority and read in part All staff must wear a surgical mask in the facility. The notice indicated that the restrictions on it were in effect until August 31 of 2020. During an observation on 08/17/2020 at 8:28 AM, ADM entered the facility while not wearing a mask or face covering of any kind. She underwent screening procedures and then walked down the hall to her office without wearing a mask or face covering. During an observation on 08/17/2020 at 8:30 AM, during the entrance conference meeting, the ADM was in possession of a surgical mask but was not wearing it properly. She was frequently pulling and tugging on the mask and holding it out away from her face by a couple inches. During an observation on 08/17/2020 at 9:07 AM, the ADM was sitting at her desk in her office with the door open to the hallway. She was not wearing a mask or face covering of any kind, and she was not holding or partaking of a food or beverage item. During an observation on 08/17/2020 at 9:40 AM, PRC was in her office sitting at her desk with the door to the office open to the hallway. She was wearing a surgical mask improperly in that it was dangled down below her chin. The mask was not covering any part of her mouth or nose and she was not holding or partaking of a food or beverage item. During an observation on 08/17/2020 at 10:10 AM, the ADM was sitting at her desk in her office with the door open to the hallway. She was not wearing a mask or face covering of any kind, and she was not holding or partaking of a food or beverage item. During an observation on 08/17/2020 at 11:20 AM, the ADM and PRC were both in the ADM's office sitting across from one another. The door to the office was open to the hallway. ADM was not wearing a mask or face covering of any kind. PRC was wearing a surgical mask improperly in that it was dangled down below her chin and the mask was not covering any part of her mouth or nose. Neither ADM or PRC were holding or partaking of a food or beverage item. During an observation on 08/17/2020 at 11:30 AM, the ADM and PRC were both still in the ADM's office sitting across from one another. The door to the office remained open to the hallway. ADM was not wearing a mask or face covering of any kind. PRC was wearing a surgical mask improperly in that it was dangled down below her chin and the mask was not covering any part of her mouth or nose. Neither ADM or PRC were holding or partaking of a food or beverage item. During an observation on 08/17/2020 at 11:58 AM, the ADM was sitting at her desk in her office with the door open to the hallway. She was not wearing a mask or face covering of any kind, and she was not holding or partaking of a food or beverage item. During an observation on 08/17/2020 at 1:00 PM, PRC was in her office sitting at her desk with the door to the office open to the hallway. She was talking on the phone and was not wearing a mask or face covering of any kind. She was not holding or partaking of a food or beverage item. During an observation on 08/17/2020 at 1:03 PM, PRC was in her office standing near her desk with the door to the office open to the hallway. She was no longer talking on the phone and was not wearing a mask or face covering of any kind. She was not holding or partaking of a food or beverage item. During an observation and interview on 08/17/2020 at 1:17 PM, PRC was in her office standing near her desk with the door to the office open to the hallway. She was not wearing a mask or face covering of any kind. She was not holding or partaking of a food or beverage item. She was asked when she is expected to wear a mask or face covering and replied that she will take her mask off when she is in her office alone but put it on if someone enters her office. She did not don a mask when the surveyor entered the room or during the interview. She was asked when she has been trained to wear a mask and reported that that she has been trained to wear a mask as soon as you come in. She reported that a mask should be worn any time she would be in direct contact with a resident or come within 6 feet of another person. During an observation on 08/17/2020 at 1:20 PM, ADM entered the facility through the front door while not wearing a mask or face covering of any kind. She underwent screening procedures and then walked down the hall to her office without wearing a mask or face covering. During an interview with ADON on 08/17/2020 at 1:23 PM, she reported that the facility DON was not at work today. ADON was asked when staff are expected to wear a mask or face covering and replied, At all times in the facility. She was asked if there are any areas of the building that staff can be without a mask and stated, In the building no, they have to have them on at all times. During an observation and interview on 08/17/2020 at 1:40 PM, the ADM was in her office with the door open to the hallway. She was not wearing a mask or face covering of any kind and was not holding or partaking of a food or beverage item. ADM was asked when and where staff are expected to wear a mask or face covering and replied, Everyone is supposed to be wearing a mask. It was my understanding that I didn't have to wear one in my office. She reported that staff must wear a mask in common areas and to care for patients. ADM was asked how the facility is maintaining compliance with local pandemic related ordinances and pandemic related State Executive Orders. She did not answer the question, but instead called someone on the phone. After speaking briefly with someone on the phone that she referred to as her supervisor, she stated, I did not realize I was supposed to be wearing one outside before I even came in. Record review of facility provided policy titled COVID-19 Best Practices, not dated, revealed in part: Personal Protective Equipment (PPE)/Supplies Facemasks All staff must wear a facemask. Label with staff member name Record review of CDC web page titled Preparing for COVID-19 in Nursing Homes, dated 06/25/2020, accessible at https://www.cdc.gov/coronavirus/2019-ncov/hcp/long-term-care.html, revealed in part: Implement Source Control Measures HCP should wear a facemask at all times while they are in the facility. Definitions: Healthcare Personnel (HCP): HCP include, but are not limited to, emergency medical service personnel, nurses, nursing assistants, physicians, technicians, therapists, phlebotomists, pharmacists, 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 (e.g., clerical, dietary, environmental services, laundry, security, engineering and facilities management, administrative, billing, and volunteer personnel). Record review of CDC web page titled Interim Infection Prevention and Control Recommendations for Healthcare Personnel During the Coronavirus Disease 2019 (COVID-19) Pandemic, dated 07/15/2020, accessible at https://www.cdc.gov/coronavirus/2019-ncov/infection-control/control-recommendations.html, revealed in part: Implement Universal Source Control Measures HCP should wear a facemask at all times while in the healthcare facility, including in breakrooms or other spaces where they might encounter co-workers. Definitions: Healthcare Personnel (HCP): HCP refers to all paid and unpaid persons serving in healthcare settings who have the potential for direct or indirect exposure to patients or infectious materials, including body substances (e.g., blood, tissue, and specific body fluids); contaminated medical supplies, devices, and equipment; contaminated environmental surfaces; or contaminated air. HCP include, but are not limited to, emergency medical service personnel, nurses, nursing assistants, physicians, technicians, therapists,</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.

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<p>F 0880</p> <p>Level of harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>(continued... from page 1)</p> <p>phlebotomists, pharmacists, 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 (e.g., clerical, dietary, environmental services, laundry, security, engineering and facilities management, administrative, billing, and volunteer personnel). Record review of document titled Executive Order by the Governor of the State of Texas, Executive Order GA 29, dated 07/02/2020, and retrieved from https://open.texas.gov/uploads/files/organization/opentexas/EO-GA-29-use-of-face-coverings-during-COVID-19-IMAGE-07-02-2020.pdf, revealed in part: NOW, THEREFORE, I, Greg Abbott, Governor of Texas, by virtue of the power and authority vested in me by the Constitution and laws of the State of Texas, do hereby order the following on a statewide basis effective at 12:01 p.m. on July 3, 2020: Every person in Texas shall wear a face covering over the nose and mouth when inside a commercial entity or other building or space open to the public, or when in an outdoor public space, wherever it is not feasible to maintain six feet of social distancing from another person not in the same household;</p>		