

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER / SUPPLIER / CLIA IDENTIFICATION NUMBER 056024	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 06/25/2020
NAME OF PROVIDER OF SUPPLIER HIGHLAND PALMS HEALTHCARE CENTER		STREET ADDRESS, CITY, STATE, ZIP 7534 PALM AVENUE HIGHLAND, CA 92346	
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.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY**</p> <p>Based on observation, interview, and record review, the facility failed to implement their infection control program to prevent the spread of COVID 19 (Illness caused by [MEDICAL CONDITION]) when there were four instances where staff did not complete a screening assessment for COVID 19 symptoms prior to entering the facility between May 28, 2020 and June 1, 2020. This failure had the potential to place all 75 residents in the facility at increased risk for exposure to COVID 19 by not ensuring staff were assessed for symptoms of COVID 19 prior to entering the facility. Findings: During an interview on June 2, 2020, at 10:22 AM, with Certified Nursing Assistant 1 (CNA 1), CNA 1 stated all staff were supposed to be screened for COVID 19 symptoms when entering the facility each day. During an interview on June 2, 2020, at 10:44 AM, with the Director of Nursing (DON), the DON stated the Infection Preventionist (IP) had responsibility for oversight of the staff screening process. The DON further stated it was his expectation that staff complete a screening assessment for COVID 19 symptoms before staff enter the facility. During a record review with the DON, on June 2, 2020, at 10:52 AM, staff screening logs for COVID 19 symptoms titled Respiratory Screening Questionnaire (COVID-19) dated May 28, 2020 through June 1, 2020, were reviewed. The logs indicated the following: a. On May 28, 2020, Physical Therapy Assistant 1 (PTA 1) and Certified Nursing Assistant 2 (CNA 2), did not answer Yes or No for any of the following questions: Have you or any family members done any international travel to countries with sustained community transmission or have been on a cruise ship in the past 14 days?; In the last 5 days, have you had contact with someone with a confirmed [DIAGNOSES REDACTED].?; Have you been tested for COVID 19? b. On May 29, 2020, CNA 3, did not answer Yes or No for any of the following questions: Have you or any family members done any international travel to countries with sustained community transmission or have been on a cruise ship in the past 14 days?; In the last 5 days, have you had contact with someone with a confirmed [DIAGNOSES REDACTED].?; Have you been tested for COVID 19? c. On June 1, 2020, Maintenance Assistant 1 (MA 1) did not answer Yes or No for any of the following questions: Have you or any family members done any international travel to countries with sustained community transmission or have been on a cruise ship in the past 14 days?; In the last 5 days, have you had contact with someone with a confirmed [DIAGNOSES REDACTED].?; Have you been tested for COVID 19? During an interview on June 2, 2020, at 10:55 AM, with the DON, the DON stated he thought the unanswered COVID 19 screening assessment questions dated May 28, 2020 through June 1, 2020, were an oversight by the staff. DON further stated the Infection Preventionist (IP) was the individual who was supposed to review the COVID 19 screening logs daily. During an interview and concurrent record review on June 2, 2020, at 11:04 AM, with the IP, the staff screening logs for COVID 19 symptoms titled Respiratory Screening Questionnaire (COVID-19) dated May 28, 2020 through June 1, 2020, were reviewed. The IP stated the logs were reviewed by herself and the Registered Nurse (RN) supervisor daily. The IP stated it was important that all staff were screened prior to entering the facility and she was not aware there were incomplete logs between May 28, 2020, and June 1, 2020. The IP further stated she was unsure why the incomplete screening logs were not identified. During an interview on June 2, 2020, at 11:26 AM, with CNA 3, CNA 3 stated the importance of completing the staff screening assessment for COVID 19 was to help keep the residents safe. CNA 3 stated on May 29, 2020, she did not fill out all the questions on the COVID 19 screening assessment because it was an oversight. During a review of the facility's policy and procedure titled, Coronavirus (COVID-19) Employee Screening updated March 31, 2020, indicated To reduce COVID-19 outbreak risk, the facility continues to implement infection prevention methods and interventions consistent with government directives and recommendations. Employee screening is one of these methods, which aids in the reduction of exposure risk to fellow employees, residents and community members. Employee Screening: Prompt identification and isolation of potentially infectious individuals is a critical step in protecting employees, visitors, and others at a facility.</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.