

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER / SUPPLIER / CLIA IDENTIFICATION NUMBER 555012	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 07/23/2020
NAME OF PROVIDER OF SUPPLIER WINDSOR GARDENS HEALTHCARE OF THE VALLEY		STREET ADDRESS, CITY, STATE, ZIP 13000 VICTORY BLVD, NORTH HOLLYWOOD, CA 91606	
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>Based on observation, record review and interview, the facility failed to ensure staff were trained on the contact time (the amount of time a surface must remain wet with disinfectant to kill disease-causing bacteria, viruses, and fungus) of disinfectants. As a result eight of 11 staff did not know spray disinfectants contact time to properly disinfectant equipment and this failure created the potential to spread infections to other residents, staff and visitors. Findings: During an observation and interview with Physical Therapy Assistant (PTA 1), on July 7, 2020, at 11:40 a.m., PTA 1 showed a spray-bottle of disinfectant (Brand Name) and said, Equipment is sprayed with this disinfectant that has a 2 minute contact time. During an interview with Certified Occupational Therapy Assistant (COTA 1), on July 7, 2020, at 11:42 a.m., stated that the disinfectant spray, Has a 2 minute contact time. During an interview with Occupational Therapist (OT 1), on July 7, 2020, at 11:43 a.m., stated that the disinfectant spray, Has a 2 minute contact time. During an interview with Rehabilitation Director, on July 7, 2020, at 11:45 a.m., stated the equipment was disinfected with the spray bottle, and confirmed, The contact time is 2 minutes. During observation and interview with Licensed Vocational Nurse (LVN 1), on July 7, 2020, at 1:05 p.m., LVN 1 displayed a spray bottle of disinfectant and stated, The contact time is 4 minutes. During observation and interview with Registered Nurse (RN 1), on July 7, 2020, at 1:07 p.m., RN 1 displayed a spray bottle of disinfectant and stated, The contact time is about 4 to 5 minutes. During an interview with the Certified Nursing Assistant (CNA 1), on July 7, 2020, at 1:09 p.m., CNA 1 stated, I know we use wipes for cleaning surfaces, but I don't know that there's a contact wet time for that. I just don't touch it while it's still wet. During observation and interview with Licensed Vocational Nurse (LVN 2), on July 7, 2020, at 1:10 p.m., LVN 2 displayed a spray bottle of disinfectant and stated, The contact time is about 2 to 4 minutes, then wiped down. During an interview with the Certified Nursing Assistant (CNA 2), on July 7, 2020, at 1:12 p.m., CNA 2 stated, We have wipes and spray for disinfecting, but I don't know about the contact wet time I think it's two to three minutes until it gets dry then it's okay. During an interview with Director of Staff Development (DSD), on July 7, 2020, at 2:00 p.m., the DSD stated, We have not conducted training for staff about the different disinfectants and their contact times. During a record review of product information from Environmental Protection Agency, dated October 21, 2004, indicated, To disinfect, all surfaces must remain wet for ten (10) minutes.</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.