

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

PRINTED: 03/18/2015
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 055039	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____		(X3) DATE SURVEY COMPLETED C 03/17/2015
NAME OF PROVIDER OR SUPPLIER GOOD SAMARITAN REHAB AND CARE CENTER			STREET ADDRESS, CITY, STATE, ZIP CODE 1630 N. EDISON STREET STOCKTON, CA 95204		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)		(X5) COMPLETION DATE
F 000	INITIAL COMMENTS The following represents the findings of the California Department of Public Health during an abbreviated survey for the investigation of complaint number CA00426918. Representing the Department of Public Health: HFEN, 26663 The inspection was limited to the specific complaint investigated and does not represent the findings of a full inspection of the facility.	F 000	"This plan of correction constitutes my written credible allegation of compliance for the deficiency noted." <i>Debbie Zarilla</i> Debbie Zarilla NHA Administrator		4-14-15
F 441 SS=E	483.65 INFECTION CONTROL, PREVENT SPREAD, LINENS The facility must establish and maintain an Infection Control Program designed to provide a safe, sanitary and comfortable environment and to help prevent the development and transmission of disease and infection. (a) Infection Control Program The facility must establish an Infection Control Program under which it - (1) Investigates, controls, and prevents infections in the facility; (2) Decides what procedures, such as isolation, should be applied to an individual resident; and (3) Maintains a record of incidents and corrective actions related to infections. (b) Preventing Spread of Infection (1) When the Infection Control Program determines that a resident needs isolation to prevent the spread of infection, the facility must isolate the resident. (2) The facility must prohibit employees with a communicable disease or infected skin lesions	F 441 441	The facility will provide a safe sanitary and comfortable environment to prevent the development and transmission of disease and infection when resident care supplies are re-used between residents. The sanitizer was shut down at the time of the surveyors visit for repair, to prevent the potential of transmission of Infections or disease. The sanitizer was repaired on 3/24/2015 and is now operating properly. The water temp. is 220 degrees to 240 degrees.		

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

Debbie Zarilla

Administrator

4-14-15

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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F 441	<p>Continued From page 1</p> <p>from direct contact with residents or their food, if direct contact will transmit the disease.</p> <p>(3) The facility must require staff to wash their hands after each direct resident contact for which hand washing is indicated by accepted professional practice.</p> <p>(c) Linens Personnel must handle, store, process and transport linens so as to prevent the spread of infection.</p> <p>This REQUIREMENT is not met as evidenced by: Based on observations, staff interviews and record review the facility failed to provide a safe, sanitary and comfortable environment to prevent the development and transmission of disease and infection when resident care supplies were re-used between residents, after immersion in an improperly functioning machine meant to "sanitize" these items, for a census of 94.</p> <p>This failure had the potential to cause multiple infections and possibly death, when residents were exposed to fecal bacteria and other organisms.</p> <p>Findings:</p> <p>During the an initial tour of the facility on 1/20/15 at approximately 10 a.m., the utility room next to Room 5 was observed to emit a stench into the hallway with the door closed. Upon entering the room a trash barrel was observed, near the back of the room, which was filled with used bedpans collected together. The utility room also contained</p>	F 441	<p>The maintenance supervisor will check and document the water temp of the sanitizer on a weekly basis and report to the administrator if it falls below the boiling point for 3 months and then thereafter monthly.</p> <p>The administrator will review the temp log periodically.</p> <p>The maintenance supervisor will report to the Quality Assurance committee on April 15th at the quarterly quality assurance meeting.</p> <p>The DON and DSD will inservice the License staff and CNAS on the proper use of the sanitizer and infection control reference, re-usable resident care items beginning on 3/26/2015. The Policy and Procedure for sanitizing resident care items was revised on 3/25/2015 to read no co-mingling of bed pan and wash basins etc., they are to be washed separately. Resident care items are to be placed in the sanitizer and submerged completely in the water for cleaning.</p> <p>The DON, DSD, and the Nursing Supervisors will monitor this procedure on their daily rounds of the facility.</p>	

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F 441	<p>Continued From page 2</p> <p>a metal box-like machine on four legs, which had a lid on top.</p> <p>During an interview with Licensed Nurse 1 (LN 1) on 1/20/15 at 12:10 p.m., LN 1 stated the utility room contained a sanitizing system that the staff used to clean resident care items.</p> <p>During an observation and interview with the Director of Staff Development (DSD) on 1/20/15, beginning at 12:12 p.m., the DSD stated, "The night shift sterilizes the bed pans." The DSD verified the facility did not write resident names on the wash basins and bedpans because, "They are sanitized and clean ones are given to residents." The DSD verified the processed resident care items were placed in the cupboard to the right of the utility room door.</p> <p>In an observation of the utility room on 1/20/15 at 12:12 p.m. the "sanitizer" was observed to contain three pink plastic wash basins and a bed pan. The "sanitizer" did not contain any water. The utility room also had a cupboard to the right of the door which the DSD described as clean storage containing more than ten each of bedpans, wash basins, and commode basins.</p> <p>In an interview and observation with Housekeeper 1 (H 1) on 1/20/15 at 12:30 p.m., H 1 described the "sanitizer" and stated, "It gets really, really hot." He stated the plastic care items were rinsed then placed in the "sanitizer." H 1 started the "sanitizer" by turning on the water to fill the tank, then left the utility room.</p> <p>Review of an undated sign, titled "Instructions for Sterilizer Use," posted in the utility room on the wall to the right of the "sanitizer," directed staff:</p>	F 441	<p>The Housekeeping Supervisor will have chemicals available at all time for the nursing staff to clean resident care items, before sanitizing.</p> <p>The Housekeeping Supervisor on his daily rounds will check to ensure that chemicals are available.</p> <p>The Housekeeping Supervisor will supply the nursing stall an extra bottle of the chemicals, which will be kept in the Medication room at Station one.</p> <p>The nursing staff have been instructed to use the Maintenance Repair Log, to inform the supervisor, if they are out cleaning solution, The log will be Checked daily by the Housekeeping Supervisor.</p> <p>The Housekeeping Supervisor will address this at the Quarterly Quality Assurance Meeting, April 15,2015.</p> <p>This will become part of the Quality assurance Program and will be reviewed at least quarterly for then next four quarters.</p>		

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F 441	<p>Continued From page 3</p> <p>"Clean the bedpans/urinals/basins with chemical solutions then rinse them out before soaking them in the sterilizer 2. Fill sterilizer with items to be sterilized. (do not mix bath basins with urinal and bedpans) 3. Turn large black knob on right sterilizer. Fill until water level below outlet drain (do not over fill) 4. Flip the two black switches to on position located on left side 5. Run sterilizer approximately by 25 mins. 6. Turn both switches to down position. 7. Turn black knob labeled drain (sic) to allow water to drain. 8. Allow to air dry and return items to clean storage."</p> <p>In a continuous interview and observation with the Director of Nurses (DON) and the Maintenance Supervisor (MS) on 1/20/15 starting at 12:40 p.m., the MS verified the water in the "sanitizer" reached a maximum temperature of 118° Fahrenheit (F). The plastic care items were observed to float, and did not remain immersed. When the MS was asked where the chemical solution was stored for staff use to clean the care items, he pointed to a cabinet. When the MS opened the cabinet door, there was no chemical solution available for staff use. The DON verified staff had mixed bedpans and wash basins together, and she verified the presence of brown matter in a wash basin in the "sanitizer" which appeared to be fecal matter. The DON verified the "sanitizer" was not adequately cleaning plastic resident care items.</p> <p>Review of an undated "Sanitizing Machine Maintenance Log," documented the equipment was cleaned monthly. The log documented the water temperature each month was either 121° F or 122° F.</p> <p>Review of the facility-provided, bedpan</p>	F 441		

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F 441	<p>Continued From page 4</p> <p>manufacturer's description of, "Autoclavable Adult Bedpans" for the blue plastic bed pans, dated 1/20/15, directed: "The plastic material of the bed pans is autoclavable, sterilizing the products for reuse."</p> <p>Review of Center for Disease Control's "Guidelines for Disinfection and Sterilization in Healthcare Facilities," dated 2008 directed: "The basic principle of steam sterilization, as accomplished in an autoclave, is to expose each item to direct steam contact at the required temperature and pressure for the specified time...Specific temperatures must be obtained to ensure the microbicidal activity. The two common steam-sterilizing temperatures are 250°F and 270°F. These temperatures must be maintained for a minimal time to kill microorganisms."</p> <p>In an interview with the DON on 1/20/15 at 2:40 p.m., the DON stated the facility did not have an autoclave unit for sterilization of equipment.</p>	F 441		