

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER / SUPPLIER / CLIA IDENTIFICATION NUMBER 056159	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 08/31/2020
NAME OF PROVIDER OF SUPPLIER SHERMAN VILLAGE HCC		STREET ADDRESS, CITY, STATE, ZIP 12750 RIVERSIDE DRIVE NORTH HOLLYWOOD, CA 91607	
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>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY**</p> <p>Based on observation, interview, and record review, the facility failed to implement infection control practices to prevent the spread of Coronavirus Disease 2019 (COVID-19, a highly contagious [MEDICAL CONDITION] infection, transmitted from person-to-person causing respiratory problems severe enough that may cause death). One of 17 sampled staff members were not wearing facemask while on duty. Two staff were taking a break together without observing social distancing (at least six feet apart). Five of 17 sampled staff were wearing cloth facemask (instead of surgical mask) in residents care areas. These deficient practices increased the risk of spreading COVID-19 to residents and other staff members. Findings: a. On 8/13/2020 at 8 a.m., at Nursing Station 1 there was a posted sign indicating, Wear a mask AT ALL TIMES PLEASE. Across the Nursing Station, one staff member was observed not using a facemask. The staff member introduced self as the Infection Preventionist (IP) Nurse. A review of the the Handwashing, Personal Protective Equipment (PPE) and Mask In-Service sign-in sheet dated 5/21-25/2020 indicated staff were trained on the use of facemask. The lecture was instructed by IP Nurse. A review of the policy titled, Universal Use of Masks dated 4/3/2020 indicated, The Safety of our caregivers and residents is our highest priority. All long-term facility personnel should wear a facemask while they are in the facility. b. On 8/13/2020 at 8:55 a.m., during observation, two staff members, one of them Certified Nursing Assistant (CNA 1), were eating in close proximity to one another. On concurrent interview, the IP Nurse stated the staff should implement social distancing. On 8/13/2020 at 10:10 a.m., during interview, CNA 1 stated, I know we are to keep our distance from each other. We are to stay separated for COVID-19 prevention. I am supposed to be at least six feet away when possible. A review of the In Service Sheet 7-3 completed 6/29/2020 with the topic, Spread of COVID-19 and Home Isolation, Social distancing indicated CNA 1 was in attendance. The lesson plan titled Novel Coronavirus (COVID-19) indicated to, Limit close contact with others by maintaining a distance of at least 6 feet, when possible. c. On 8/13/2020 at 08:14 a.m., during an observation and concurrent interview, the Dietary Service Supervisor (DSS) was observed wearing a cloth facemask coming out of Resident 4's room, carrying a meal tray. The DSS stated that she picked up Resident 4's tray because she heard the resident banging on her tray. The DSS stated the Director of Staff Development (DSS) provided an in-service with instructions that staff can wear cloth mask. On 8/13/2020 at 8:35 a.m., during an observation and concurrent interview, Registered Nurse 1 (RN 1) was observed in the Nursing Station wearing a cloth face mask. RN 1 stated that she is aware she is supposed to wear a surgical mask but her shift has ended and she kept her surgical mask in her purse. On 8/13/2020 at 8:43 a.m., during an observation and concurrent interview, Respiratory Therapist 1 (RT 1) was coming out of Resident 3's room in the Sub-Acute (SA) area wearing a cloth facemask that did not fully cover RT 1's nose and mouth. RT 1 was not wearing a face shield or protective eyewear and was touching and adjusting the cloth facemask to keep the mask from falling off his nose. RT 1 stated he had just finished suctioning and providing [MEDICAL CONDITION] (hole made in the neck to the windpipe) care. RT 1 was asked what PPE was required while suctioning and providing [MEDICAL CONDITION] care. RT 1 stated that he should have used an N95 mask (a mask that reduces wearer's exposure to particle aerosol and large droplets, filters out at least 95% of airborne particles) and a face shield. On 8/13/2020 at 9 a.m., during an observation and concurrent interview, Licensed Vocational Nurse 4 (LVN 4) was walking in the hallway of the SA area wearing a cloth facemask. LVN 4 stated the cloth facemask had a filter and would wear the surgical mask (a mask that is fluid resistant and provides the wearer protection against large droplets, splashes, or sprays of bodily or other hazardous fluids) only when providing resident care. On 8/13/2020 at 9:30 a.m., during an observation and concurrent interview, CNA 3 was grabbing a straw from a medication cart, wearing a cloth facemask. CNA 3 stated when she goes inside the resident's room, she places a surgical mask over the cloth face mask. On 8/13/2020 at 10 a.m., during an interview with the Director of Nursing (DON), she stated that she was aware staff should wear surgical masks and / or N95 based on the webinar that was provided by the Los Angeles County Department of Public Health on 8/7/2020, but the staff were not provided yet with an in-service. The DON stated that Respiratory Therapists are to wear an N95 mask and face shield while suctioning and providing [MEDICAL CONDITION] care because the RTs are performing aerosol generating procedures. A review of facility policy and procedure titled, Universal Use of Mask, dated 4/3/2020, indicated, It is essential that the facility follow the guidelines set by the Centers for Disease Control (CDC) and Public Health to preserve limited supplies of face masks as recommended. This policy is temporary and is subject to change based on guideline updates. A review of the Guidelines for Preventing and Managing COVID-19 in Skilled Nursing Facilities, revised on 8/4/2020, indicated that staff must wear a surgical mask or an N95 respirator when they are in patient care areas or in areas where residents may congregate. N95 respirators should be used for aerosol generating procedures on patients with suspected or confirmed COVID 19.</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.