

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER / SUPPLIER / CLIA IDENTIFICATION NUMBER 035234	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 08/18/2020
NAME OF PROVIDER OF SUPPLIER ARIZONA STATE VETERAN HOME-PHX		STREET ADDRESS, CITY, STATE, ZIP 4141 NORTH S HERRERA WAY PHOENIX, AZ 85012	
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 observations, staff interviews, the Centers for Disease Control (CDC) recommendations and policy and procedures, the facility failed to ensure that infection control standards were maintained, as one staff member did not wear a face covering when in a hallway and one staff member failed to don PPE according to facility policy. The deficient practice could result in the spread of infection, including COVID-19. Findings include: -Upon entering the facility on August 18, 2020 at 8:13 a.m., the Infection Preventionist (staff #66) and the Administrator (staff #21) led the surveyors down a hall to the conference room. Staff #51 (Minimum Data Set nurse) was observed standing in the doorway of an office speaking to a staff member, who was seated at a desk in an office. Staff #51 was not wearing a face covering and the co-workers were not six feet apart. On August 18, 2020 at 10:40 a.m., an interview was conducted with staff #51. Staff #51 stated she is supposed to wear a face mask when she leaves her office. She stated she should have been wearing a mask in the hall this morning. An interview was conducted on August 18, 2020 at 11:40 a.m., with the Infection Preventionist (staff #66). She said that staff are to put on a face mask whenever they leave their office. She stated that staff are allowed to remove their face masks in their office, as long as no one else is in the office with them. The CDC's guidance regarding Preparing for COVID-19 in Nursing Homes updated June 25, 2020, included that health care providers should wear a face mask at all times while they are in the facility. A facility policy titled, COVID Surveillance included that masks are to be worn at all times while out on the floors and through the halls of the facility.</p> <p>-On August 18, 2020 at 10:10 a.m. during a tour of the Covid Unit, a CNA (Certified Nursing Assistant/staff #50) was observed donning (putting on) Personal Protective Equipment (PPE). The CNA first put on gloves, then a surgical mask over her N95 mask, a new face shield, a disposable surgical gown, a hair bonnet and shoe covers. An interview was conducted on August 18, 2020 at 10:15 a.m., with staff #50 regarding the sequence of donning PPE. She stated that she puts her gloves on first, but was unsure of the sequence. She stated she had not received any education on how to put on or take off PPE. An interview was conducted on August 18, 2020 at 10:20 a.m. with the Infection Preventionist (staff #66) regarding the sequence of donning PPE. She stated that staff #50 should have put her gloves on last, per their policy and CDC guidance. She stated that inservice's were provided, as well as audits of staff donning and doffing PPE. She further stated that documentation shows that staff #50 received the inservice and was observed during an audit. Review of the facility's policy titled, Personal Protective Equipment-Donning and Doffing revealed that they will follow the CDC guidelines for PPE for Donning and Doffing. The policy included the sequence for donning PPE was as follows: 1. gown 2. mask or respirator 3. goggle or face shield 4. gloves. According to the CDC guidelines for Using Personal Protective Equipment updated August 19, 2020, revealed the type of PPE used will vary based on the level of precautions required, such as standard, contact, droplet or airborne infection isolation precautions. Regarding the sequence for donning PPE, it stated to apply a gown, then an N95 respirator/face mask, goggles or face shield and then gloves. The guidelines included that more than one donning method may be acceptable. Training and practice using your facility's procedure is critical.</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.