

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 035254	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 09/26/2024
NAME OF PROVIDER OR SUPPLIER Winslow Campus of Care		STREET ADDRESS, CITY, STATE, ZIP CODE 826 West Desmond Street Winslow, AZ 86047	

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)
<p>F 0880</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Provide and implement an infection prevention and control program.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 40581</p> <p>Based on review of the facility's infection control program documentation, staff interviews, personnel files, and facility policy and procedures, the facility failed to implement a COVID-19 screening and consistent testing program during a COVID-19 breakout. The deficient practice could result in residents becoming ill.</p> <p>Findings include:</p> <p>Resident #3 was admitted to the facility on [DATE] and readmitted on [DATE] with diagnoses that include COVID-19 acute respiratory disease, Pneumonia, end stage renal disease, and chronic pain.</p> <p>The minimum data set (MDS) dated [DATE] included a brief interview for mental status score of 12 indicating the resident was cognitively intact.</p> <p>The care plan dated June 14, 2024 revealed that the resident may require use of oxygen (O2) to keeps saturation up. Interventions included to check O2 saturation every shift.</p> <p>Hospital documentation revealed that the resident was transported to the emergency room (ER) on July 10, 2024 for shortness of breath. Diagnoses included: bilateral pleural effusion, COVID-19 with dependence on oxygen and and renal dialysis. Education included that COVID-19 is an infection that is caused by a new coronavirus. Sometimes there are no symptoms and other times, symptoms range from mild to severe. The virus that causes COVID-19 can spread person to person through droplets or aerosols from breathing, speaking, singing, coughing, or sneezing.</p> <p>The Human Release Form revealed that the date of death was July 14, 2024. It included that the most recent diagnosis in the resident's medical record was COVID-19 and end stage renal disease (ESRD). The death was unexpected or unexplained.</p> <p>Review of the Communicable Disease Report for Healthcare Providers revealed that on July 7, 2024, resident #52 tested positive for COVID-19.</p> <p>-Staff #9 was employed by the facility for maintenance effective February 6, 2024. Job duties included to check bedrails, and resident restrooms for any breaks, or running water and check all the toilets.</p> <p>(continued on next page)</p>

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.

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
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<p>F 0880</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Review of staff #9's time card revealed that he clocked in for work on July 8, 2024 at 8:02 a.m. and clocked out at 10:00 a.m.</p> <p>Review of the staff testing form dated July 8, 2024 at 11:45 a.m. revealed that staff #9 had no symptoms and tested positive for COVID-19.</p> <p>Review of a statement from the Environmental Director (staff #5) dated September 25, 2024 revealed that staff #9 was taking care of the grounds on July 8, 2024 sometime between 11:45 a.m. and noon, when staff #5 reported not feeling well. Staff #5 tested positive for COVID-19 and was sent home.</p> <p>-Staff #14 was employed by the facility on August 23, 20005 as a housekeeper.</p> <p>Review of staff #14's time card revealed that she clocked in for work on July 10, 2024 at 5:45 a.m. and clocked out at 8:35 a.m.</p> <p>Review of the staff testing form dated July 10, 2024 did not reveal the time the sample was collected. The form did not reveal if staff #14 had had symptoms, but did reveal that she was COVID-19 positive.</p> <p>Review of the July COVID-19 mapping revealed thirty-six resident COVID-19 positive cases from July 7, 2024 through July 26, 2024.</p> <p>Review of the Communicable Disease Report for Healthcare Providers revealed that on:</p> <p>-July 9, 2024, six COVID-19 positive cases were reported to the county.</p> <p>-July 10, 2024, five COVID-19 positive cases were reported to the county.</p> <p>-July 12, 2024, eight COVID-19 positive cases were reported to the county.</p> <p>-July 15, 2024, six COVID-19 positive cases were reported to the county.</p> <p>-July 17, 2024, twelve COVID-19 positive cases were reported to the county.</p> <p>-July 18, 2024, three COVID-19 positive cases were reported to the county.</p> <p>Review of the facility infection control documentation did not reveal any screening documentation for staff, visitors, or allied healthcare professionals during the COVID-19 outbreak in July 2024.</p> <p>Review of the facility documentation did not reveal COVID-19 testing results for all staff.</p> <p>(continued on next page)</p>		

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<p>F 0880</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>An interview was conducted on September 25, 8:33 a.m. with the COVID-19 Safety Coordinator (staff #7), who stated that the facility Infection Control Preventionist (ICP) works nights and she is the second in charge regarding infection control. She stated that there was a COVID-19 outbreak in July 2024 and the ICP (RN/staff #106) during that time, no longer works at the facility. She stated that the first COVID-19 positive case was resident (#52); she stated that the resident did not leave the facility for appointments in July prior to testing positive. She stated that resident (#3) was also one of the residents who tested positive for COVID-19 and passed away during this time. She stated that maintenance personal (staff #9) tested positive, but he would only come into contact with other staff when working in the building. She stated that it is the facility process to test all staff and residents when someone has tested positive for COVID-19.</p> <p>An interview was conducted on September 25, 2024 at 9:39 a.m. with a maintenance employee (staff #34), who stated that he received training on COVID-19 and when he is not feeling well, he needs to don a mask, but can come to work. He stated that his duties as a maintenance employee require him to stock the building with toilet paper and garbage bags in the utility rooms on each hallway, vacuum the hallways, assist maintenance with repairs in the building as needed, and he does come into contact with staff and residents. He stated that he tested himself for COVID-19 on July 8, 2024 and was negative and was not tested again.</p> <p>An interview was conducted on September 25, 2024 at approximately 10:00 a.m. with the Social Services Supervisor (staff #39), who stated that staff were not required to screen for symptoms prior to entering the building during the COVID-19 outbreak in July 2024. She stated that staff were never required to check body temperature.</p> <p>During a second interview conducted on September 25, 2024 at 12:00 p.m. with the COVID-19 Safety Coordinator (LPN/staff #7), she stated that she doesn't have any screening documentation for staff or visitors when the COVID-19 breakout occurred in July 2024, and the facility should have screened everyone before they entered the building. She stated that staff wore masks and residents wore masks when they could get them to wear them.</p> <p>An interview was conducted on September 25, 2024 at 1:30 p.m. with the Director of Nursing (DON/staff #3), who stated that if a resident or staff tested positive for COVID-19, residents should isolate and staff should be sent home or wear a mask if asymptomatic. She stated that staff and visitors should be screened to protect the residents.</p> <p>The facility policy, COVID-19 Plan, Policy and Procedure dated June 1, 2024 states that testing will be performed in the following situations:</p> <ul style="list-style-type: none"> -Any staff or resident experiencing symptoms, and at the request of a visitor experiencing symptoms. -Routine screening/testing during an outbreak, outbreak investigation or on the recommendation of the County Health Department. -Asymptomatic residents with close contact with someone with COVID-19, regardless of vaccination <p>(continued on next page)</p>		

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