

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  055247	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED  07/27/2024
NAME OF PROVIDER OR SUPPLIER  Country Oaks Care Center		STREET ADDRESS, CITY, STATE, ZIP CODE 215 W Pearl St Pomona, CA 91768	
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 - Few</p>	<p>Provide and implement an infection prevention and control program.</p> <p>37198</p> <p>Based on observation, interview, and record review, the facility failed to follow the facility's policies and procedures (P&amp;P) titled, Infection Prevention and Control Program, Hand Hygiene, and Handling Soiled Linen, by failing to:</p> <ol style="list-style-type: none"> <li>1. Ensure Housekeeping 1 (HK 1) wore gloves as a personal protective equipment (PPE- equipment worn to minimize exposure to hazards that cause serious workplace injuries or illnesses) and performed hand hygiene before and after the tasks.</li> <li>2. Ensure HK 1 covered the barrel labeled soiled linen with a lid during transport in the facility's hallway.</li> </ol> <p>These deficient practices had the potential to result in cross-contamination (the transfer of harmful bacteria from one person, object, or place to another) and the spread of infection throughout the facility.</p> <p>Findings:</p> <p>During an observation on 7/25/2024 at 11:31 am, in the hallway in front of Room A, HK 1 was observed pushing an uncovered yellow barrel lined with a plastic bag and labeled soiled linen on the outside of the barrel. HK 1 reached into HK 1's pocket for one glove and HK 1 put the glove on HK 1's right hand only. With the gloved right hand, HK 1 grabbed a black bin by the doorway inside Room A and emptied the contents of the black bin into the yellow barrel in the hallway. HK 1 was observed holding the yellow barrel with the ungloved left hand and touching the inside plastic liner of the yellow barrel. HK 1 removed the glove on HK 1's right hand and discarded it. HK 1 proceeded to push the yellow barrel in the hallway to Room B without performing hand hygiene. HK 1 reached into HK 1's right pocket for one glove and HK 1 put the glove on HK 1's right hand only. With the gloved right hand, HK 1 grabbed the black bin by the doorway inside Room B and emptied the contents of the black bin into the yellow barrel in the hallway. HK 1 removed the glove on the right hand and discarded the glove. HK 1 proceeded to push the yellow barrel in the hallway towards Room C without performing hand hygiene.</p> <p>During an interview on 7/25/2024 at 11:35 am with HK 1, HK 1 stated HK 1 needed to wear gloves on both hands and needed to perform hand hygiene between each room.</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 - Few</p>	<p>During an interview on 7/25/2024 at 11:38 am with the Infection Preventionist (IP- a trained professional who helps prevent, control, and identify the spread of infectious agents like bacteria and viruses in a healthcare environment), the IP stated the process for emptying soiled linen bins was to sanitize (to reduce or eliminate disease-causing agents) hands with alcohol-based hand rub (ABHR- an alcohol-containing preparation designed for application to hands to inactive microorganisms and/or stop their growth) before touching, put gloves on both hands, open the bin, empty the used linen into the soiled linen barrel, take the gloves off, discard the gloves, and sanitize hands. The IP stated the soiled linen barrel needed to be covered because it was being transported in the hallway containing soiled gowns with possibly different kinds of infection. The IP stated it was important to perform hand hygiene to prevent spreading infection.</p> <p>During an interview on 7/25/2024 at 1:52 pm with the Housekeeping Supervisor (HS), the HS stated it was important to sanitize hands with ABHR before going into another room after collecting soiled linens. The HS stated without sanitizing hands, HK 1 could contaminate other residents and self. The HS stated the barrel in the hallway was supposed to be always covered for infection control.</p> <p>During a review of the facility's P&amp;P titled, Infection Prevention and Control Program, revised on 12/19/2022, the P&amp;P indicated, all staff assumed that all residents were potentially infected or colonized with an organism that could be transmitted while providing resident care services. The P&amp;P indicated, hand hygiene was performed in accordance with the facility's established hand hygiene procedures. The P&amp;P indicated, all staff used personal protective equipment according to established facility policy governing the use of PPE.</p> <p>During a review of the facility's P&amp;P titled, Hand Hygiene, revised on 12/19/2022, the P&amp;P indicated, all staff performed proper hand hygiene procedures to prevent the spread of infection to other personnel, residents, and visitors. This applies to all staff working in all locations within the facility. The P&amp;P indicated, the use of gloves did not replace hand hygiene. If the task required gloves, perform hand hygiene prior to donning gloves, and immediately after removing gloves. The P&amp;P indicated, staff performed hand hygiene with either soap and water or alcohol-based hand rub (ABHR preferred) before and after handling clean or soiled dressings, linens, etc.</p> <p>During a review of the facility's P&amp;P titled, Handling Soiled Linen, revised on 12/19/2022, the P&amp;P indicated, the facility handled, stored, processed, and transported linen in a safe and sanitary method to prevent the spread of infection. The P&amp;P indicated, staff washed hands after contact with soiled linen.</p>		