

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 05A264	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 10/08/2024
NAME OF PROVIDER OR SUPPLIER Vista Pacifica Center		STREET ADDRESS, CITY, STATE, ZIP CODE 3674 Pacific Avenue Jurupa Valley, CA 92509	
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** 40000</p> <p>Based on observation, interview, and record review, the facility failed to develop and implement ongoing infection surveillance monitoring for suspected scabies (a highly contagious skin condition caused by mites that burrow into the skin), for six of six residents (Resident 1, 2, 3, 4, 5, and 6).</p> <p>This deficient practice had the potential for a delay in the care and treatment and possible spread of infection throughout the facility.</p> <p>Findings:</p> <p>On September 4, 2024, at 10:50 a.m., an unannounced visit was conducted to investigate infection control issues.</p> <p>On September 4, 2024, at 11:14 a.m., a concurrent observation and interview was conducted with Resident 1. Resident 1 was observed to be sitting up in bed with legs exposed. Resident 1's lower extremities were observed to be red with rash all over. In a concurrent interview, Resident 1 stated he had scabies for a month, and the facility was just treating him now. Resident 1 stated the physician saw him on September 1, 2024, and told him he had scabies. Resident 1 stated he was treated with some lotion and was given a pill for internal treatment.</p> <p>On September 4, 2024, a review of Resident 1 ' s Admission Record, indicated Resident 1 was admitted on [DATE], with diagnoses of schizophrenia (mental condition of a type involving a breakdown in the relation between thought, emotions, and behavior), and hypothyroidism (when the thyroid gland does not produce enough thyroid hormone). Resident 1 ' s Minimum Data Set (MDS - an assessment tool), dated June 20, 2024, indicated Resident 1 had a BIMS (Brief Interview for Mental Status - mandatory tool used to screen and identify the cognitive condition of residents upon admission into long term care facility) score was 15, indicated cognitively intact.</p> <p>A review of Resident 1's care plan, dated August 1, 2024, indicated a care plan for potential/actual impairment to skin integrity to torso.</p> <p>A review of Resident 1 ' s progress notes indicated the following:</p> <p>- August 1, 2024, at 9:13 p.m., indicated resident monitored for bilateral hand redness and rash, no complain of pain or itching doctor notified and no new orders;</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>- August 8, 2024, at 6:01 p.m., indicated resident remained on monitoring for redness/rash to hands and body. Resident 1 refused topical treatment ordered;</p> <p>- August 31, 2024, at 12:31 a.m., indicated order for Ivermectin (medication to treat scabies) tablet 15 mg (milligram - unit of measurement) for possible scabies and repeat dose again in one week; and</p> <p>- September 1, 2024, at 9:24 a.m., indicated physician ' s visit with order for Elimite (topical cream to treat scabies) External Cream 5% until September 8, 2024.</p> <p>On September 4, 2024, at 11:19 a.m., a concurrent observation and interview was conducted with Resident 2. Resident 2 was observed sitting up at bedside. Resident 2 stated he had not been itching and did not have rash.</p> <p>On September 4, 2024, a Resident 2's record was reviewed. Resident 2's Admission Record, indicated Resident 2 was admitted on [DATE], with diagnoses which included schizophrenia (mental condition of a type involving a breakdown in the relation between thought, emotions, and behavior), and hypertension (high blood pressure). A review of Resident 2 ' s MDS, dated , indicated Resident 2 had a BIMs score of 9, (moderate cognitive impairment).</p> <p>A review of Resident 2's care plan dated August 30, 2024, indicated a care plan for rash and excoriation.</p> <p>A review of Resident 2 ' s Progress Notes, indicated the following:</p> <p>- August 30, 2024, at 3:03 p.m., indicated Resident 2 had redness and rash to the inner thighs, scrotum, left leg and inner arms;</p> <p>- August 31, 2024, at 12:16 a.m., indicated a telephone order for Lotrimin (topical cream to treat rashes) to apply to skin areas;</p> <p>- August 31, 2024, at 1:30 p.m., indicated resident was on monitoring for rash/excoriation to inner thighs around scrotum, left leg and left inner arm. Treatment applied as ordered; and</p> <p>- September 1, 2024, at 09:16 a.m., indicated physician ' s visit with order for Elimite External Cream 5% until September 2, 2024.</p> <p>On September 4, 2024, at 11:22 a.m., a concurrent interview and record review was conducted with Resident 3. Resident 3 was observed walking around in his room. In a concurrent interview, Resident 3 stated he did not have a rash and no itching.</p> <p>A review of Resident 3 ' s electronic medical record (EMR) indicated Resident 3 was admitted on [DATE], with diagnoses of Schizophrenia (mental condition of a type involving a breakdown in the relation between thought, emotions, and behavior), and hypothyroidism (when the thyroid gland does not produce enough thyroid hormone). Resident 3 ' s Brief Interview for Mental Status, (BIM- mandatory tool used to screen and identify the cognitive condition of residents upon admission into long term care facility) was 14, indicated cognitively intact.</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>A review of Resident 3's care plan dated August 29, 2024, indicated a care plan for rash to bilateral feet.</p> <p>A review of Resident 3 ' s progress notes indicated the following:</p> <ul style="list-style-type: none"> - August 29, 2024, at 6:15 p.m., noted a change of condition charting for rash on Resident 3 ' s bilateral feet; - August 30, 2024, 1:04 p.m., indicated Resident 3 was on monitoring for to bilateral feet rash, possible fungal/athletes ' feet; - September 1, 2024, at 4:12 a.m., indicated Resident 3 was on monitoring for bilateral feet rash. Resident 3 receiving prophylactic medication for scabies; - September 1, 2024, at 4:31 a.m., indicated resident was on monitoring for bilateral feet rash. Resident 3 remains on contact isolation; and - September 1, 2024, at 9:30 a.m., indicated physician ' s visit with order for Elimate External Cream 5% until September 2, 2024. <p>A review of Resident 4 ' s electronic medical record (EMR) indicated Resident 4 was admitted on [DATE], with Bipolar (disorder associated with episodes of mood swings from depressive lows to manic highs), and seizures (uncontrolled electrical activity in the brain cells causes abnormality in muscle tone). Resident 4 ' s Brief Interview for Mental Status, (BIM- mandatory tool used to screen and identify the cognitive condition of residents upon admission into long term care facility) was 15, indicated, cognitively intact.</p> <p>A review of Resident 4's care plan, dated August 30, 2024, indicated prophylaxis treatment to prevent rash.</p> <p>Review of Resident 4 ' s progress notes indicated the following:</p> <ul style="list-style-type: none"> - August 31, 2024, at 13:18 p.m., indicated a Skin/Wound note indicated resident was on continuous monitoring for prophylactic treatment to prevent rash, isolation precautions. No rashes; - August 31, 2024, at 12:40 a.m., indicated new doctor ' s orders for Ivermectin 15 mg prophylaxis for scabies; and - September 1, 2024, 9:41 a.m., order note indicated new orders for Elimate External Cream 5% to apply to the whole body. <p>A review of Resident 5 ' s electronic medical record (EMR) indicated Resident 5 was admitted on [DATE], with diagnoses of Schizophrenia (mental condition of a type involving a breakdown in the relation between thought, emotions, and behavior), and hypothyroidism (condition where thyroid gland doesn ' t produce enough thyroid hormone). Resident 5 ' s Brief Interview for Mental Status, (BIM- mandatory tool used to screen and identify the cognitive condition of residents upon admission into long term care facility) was 15, indicated, cognitively intact.</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>Review of Resident 5 ' s progress notes indicated the following:</p> <ul style="list-style-type: none"> - August 30, 2024, at 1 p.m., skin/wound note indicated resident on continuous monitoring for prophylactic treatment to prevent rash, isolation precautions, no rash noted; - August 31, 2024, 12:44 a.m., order note indicated Ivermectin 15mg prophylaxis for scabies; - September 1, 2024, at 9:45 a.m., new telephone order for Elimate External Cream 5%; and - September 1, 2024, at 1:03 p.m., continued monitoring for prophylactic treatment to prevent rash. <p>A review of Resident 5's care plan, dated September 3, 2024, indicated prophylactic treatment to prevent rash.</p> <p>A review of Resident 6 ' s electronic medical record (EMR) indicated Resident 6 was admitted on [DATE], with diagnoses of schizoaffective disorder (mental health illness that causes dramatic changes in thoughts, moods, and behavior) and hypertension (high blood pressure). Resident 6 ' s Brief Interview for Mental Status, (BMI- mandatory tool used to screen and identify the cognitive condition of residents upon admission into long term care facility) was 15, indicated cognitively intact.</p> <p>A review of Resident 6's care plan, dated August 30, 2024, indicated prophylactic treatment to prevent rash.</p> <p>A review of Resident 6 ' s progress notes indicated the following:</p> <ul style="list-style-type: none"> - August 30, 2024, at 12:47 p.m., skin/wound note indicated, late entry: monitoring for prophylactic treatment to prevent rash, isolation precautions, with no rash at this time; - August 31, 2024, at 12:43 a.m., indicated order note for Elimate 5% cream for rash; - September 1, 2024, at 9:38 a.m., indicated order note for Ivermetin prophylaxis for scabies; - September 2, 2024, at 12:57 p.m. indicated late entry: continue monitoring for prophylactic treatment to prevent rash, on isolation precautions. Resident 6 completed oral and external cream medication and has been cleared by doctor the doctor. <p>On September 4, 2024, at 1:10 p.m., an interview with the designated Infection Preventionist (IP) was conducted. The designated IP stated she became aware of residents being treated for scabies on September 2, 2024, by a mental health worker. The designated IP stated at that point she initiated contact isolation. The IP stated no other residents have been assessed for possible exposure. The IP stated she was not able to provide or describe the facility ' s surveillance process for scabies. The designated IP stated no tracing or surveillance to track other residents in the facility who may have been affected with the rashes was done.</p> <p>On September 4, 2024, at 2:52 p.m., an interview with the Director of Nursing (DON) was conducted. The DON stated she was made aware on September 3, 2024, of residents with possible scabies. The DON stated Residents 1, 2, 3, 4, 5, and 6 did not have a confirmed diagnoses of scabies but were treated prophylactically. The DON stated the residents were placed on contact isolation.</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>On September 4, 2024, at 3:50 p.m., a follow up interview with the DON was conducted. The DON stated she did not know the facility ' s identified process for surveillance for prevention and control of scabies. The DON stated, that means I will have to ask each resident if they have any signs and symptoms of scabies. The DON further stated, there was no system in place to verify, assess, monitor, or track if other residents were affected by scabies.</p> <p>On September 4, 2024, at 7:22 p.m., an interview with the Administrator (ADM) was conducted. The ADM stated he was not aware of a current facility ' s process of surveillance for contact precaution for scabies. The ADM stated the facility should have a process to track residents who develop rashes and evaluate for possible scabies.</p> <p>A review of the facility's policy and procedure titled Surveillance of Infections, revised March 15, 2022, indicated, .It is the policy of this facility to scrutnize various aspects of the occurrence and spread of infection and to monitor and investigated the cause of infections via a routine surveillance program .</p> <p>A review of the facility's policy and procedure titled Infection Prevention and Control Program, revised March 4, 2022, indicated, .The elements of our Infection Prevention and Control Program include .A system of surveillance designed to identify possible communicable diseases or infections before they spread to other persons in the facility .</p>		

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<p>F 0882</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Designate a qualified infection preventionist to be responsible for the infection prevent and control program in the nursing home.</p> <p>40000</p> <p>Based on interview and record review, the facility failed to ensure the designated Infection Preventionist (IP - professional who ensures healthcare workers and patients are doing all the things they should to prevent infections) completed the required specialized training for the IP certification program.</p> <p>This failure resulted in the Infection Control and Prevention Program of the facility not having the benefit of a fully qualified and competent IP having the potential to negatively affect the quality of care provided to all the residents.</p> <p>Findings:</p> <p>On September 4, 2024, at 10:50 a.m. an unannounced visit was made to the facility.</p> <p>On September 4, 2024, at 1:10 p.m., an interview with the designated Infection Preventionist (IP) was conducted. The designated IP stated she did not have IP certification at this time.</p> <p>On September 4, 2024, at 2:52 p.m., an interview with Director of Nursing (DON) was conducted. The DON stated the designated IP was not certified. The DON stated the designated IP did not have to be certified to be in the position if in the process of certification. The DON stated she was not overseeing the designated IP and did not know who was.</p> <p>On September 4, 2024, at 7 p.m. an interview with the Administrator (ADM) was conducted. The ADM stated he and the DON were overseeing the IP. The ADM stated the designated IP was not certified and was waiting to finish her certification class. Stated the DON had previous experience as an IP but she was not certified.</p> <p>A review of the facility's document titled Job Description /Job Title: Infection Preventionist, indicated, .The Infection Preventionist plans, organizes, develops and manages the Infection Prevention and Control Program (IPCP) for the facility in accordance with current regulatory requirements .must be qualified by education, training, experience, or certification .must have completed specialized training in infection prevention control .</p> <p>A review of the All Facilities Letter (AFL- a letter from the Center for Health Care Quality (CHCQ), licensing and Certification (L&C) Program to health facilities that are licensed or certified by L&C) provided by the DON as the facility ' s policy, indicated, .The IP must have primary professional training as a licensed nurse, medical technologist, microbiologist, epidemiologist, public health professional, or other health related. The Ip must be qualified by education, training, clinical or health care experience, or certification, and must have completed specialized training in infection prevention and control.</p> <p>A review of the facility ' s policy and procedures titled Infection Prevention and Control Program, revised March 4, 2022, indicated, .the IP must be qualified by education, training, experience, or certification, .and have completed specialized training in infection prevention and control .</p>		