

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER / SUPPLIER / CLIA IDENTIFICATION NUMBER 39A434	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 06/24/2020
NAME OF PROVIDER OF SUPPLIER PENNSYLVANIA SOLDIERS AND SAILORS HOME		STREET ADDRESS, CITY, STATE, ZIP PO BOX 6239 ERIE, PA 16512	
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	Provide and implement an infection prevention and control program. Based on observation, review of facility policies and staff interviews, it was determined that the facility failed to implement thorough infection control measures regarding the screening process of visitors as related to COVID-19 prior to entrance to the facility for one of two visitors. Findings include: The Facility Screening Process For COVID19, dated 4/28/20, revealed for staff, volunteers, and contracted personnel, here after referred to as staff will be screened prior to entering the facility and when leaving the facility: (1) All staff will receive an initial screening upon implementation of this process. The policy indicates that screening is completed prior to entering the facility and exiting the facility. The screening form utilized includes a temperature, a list of symptoms ie fever, cough, headache ,and if there was contact with a person with coronavirus. During entrance to the facility property on 6/23/20, at 10:30 a.m., Security Employee E1 approached the window of the Department of Health (DOH) Surveyor 1's vehicle. DOH Surveyor 1 announced that they were from the DOH and Security Employee E1 did not perform temperature testing or a questionnaire form but instructed the surveyor to go ahead in. Continued observation of Security Employee E1 revealed that the employee handed a clipboard and a pen to the occupant of the next vehicle, and took their temperature. The occupant handed the supplies back to Security Employee E1 and proceeded to park. Security Employee E1 did not remove their gloves nor sanitize their hands between vehicles. The next vehicle was then approached by Security Employee E1 (occupant was DOH Surveyor 2) and handed the clipboard with a questionnaire to DOH Surveyor 2. During an interview on 6/23/20, at 10:50 a.m. the Nursing Home Administrator confirmed that all persons entering the facility grounds must have a temperature done and questionnaire completed prior to entering the facility. During an interview on 6/23/20, at 12:30 p.m., Security Employee E1 stated that they had not performed the screening on the DOH employee because they were instructed certain personal were not to be screened when entering the facility such as ambulance, fire, police and environmental protection agency persons and thought that DOH was not to be screened. When questioned about sanitizing the clipboard and the pen used to sign the screening paper, Security Employee E1 stated that until today, they had not been sanitizing the clipboard or the pen between persons during the screening process 28 Pa. Code 201.14(a) Responsibility of licensee		
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.