Statement of Deficiencies	**(X1) Provider/Supplier/CLIA Identification Number**	**(X3) Date Survey Completed**
	054536	01/11/2024
Name of Provider or Supplier	**Street Address, City, State**	
La Mesa Rehab	8380 Center Drive, # E, La Mesa, CA	

For information on the provider's plan to correct this deficiency, please contact the provider or the state survey agency.

(X4) ID Prefix Tag	**Summary Statement of Deficiencies** (Each deficiency should be preceded by full regulatory or LSC identifying information)
I0581	SANITARY ENVIRONMENT CFR(s): 485.62(b)(2) The facility must monitor the infection control program to ensure that the staff implement the policies and procedures and that the policies and procedures are consistent with current practices in the field. This STANDARD is not met as evidenced by: Based on observation, interview and record review, the facility failed to ensure the Infection Control Program included procedures and approved cleaners for disinfecting patient equipment. This failure had the potential to affect the health and safety of all patients, staff and visitors. 1. During a tour of the therapy area on 1/11/24 at 0900 hours, an observation was made of unlabeled spray bottles containing clear liquid. The bottles were observed in baskets on the floor at Bed 1, Bed 2, Bed 3 and Bed 4. The Administrator stated the bottles all contained a solution of 70% isopropyl alcohol and 30% water and they were used for cleaning equipment between patients. 2. During a tour of the facility and concurrent interview with Staff 1 on 1/11/24 at 0900 hours, a container of Lysol Wipes was observed on the counter. Staff 1 was asked how and when the product is used. Staff 1 stated the wipes are used at the end of the day to clean the equipment. When asked to describe the cleaning process Staff 1 stated they wipe with a cloth and let air dry. A review of the label on the Lysol Disinfectant Wipes showed a 2 minute wet/dwell time is needed to disinfectant surfaces. Staff 1 stated they were not aware of what a wet time or dwell time meant and they were not following that process.

	3. A pulmonary function (PFT) machine (a device that measures airflow used in respiratory medicine) was observed in Private Room 1 during a tour of the facility. The Administrator was interviewed on 1/11/24 at 1030 hours and asked how the equipment was cleaned. The Administrator stated it was cleaned with alcohol. A follow up interview was conducted with the Clinic Manager at 1100 hours. The manager stated the PFT machine should be cleaned with Opticide Max wipes but that they had run out of them. A review of the manufacturer guidelines showed the equipment should not be cleaned with disinfectant solvents and recommended using Oxivir Wipes (EPA Reg No 70627-60). When asked if the facility referred to the manufacturer's guidelines for cleaning the Manager and Administrator stated they do not. Review of the Infection Control Policy and Procedure updated 1/3/24, showed the following: Policy Ic-2 (I-581): The clinic will monitor the infection control program to ensure that the staff implements the policies and procedures and that the policies and procedures are consistent with current practices in the field. Procedure: The Administrative Board appoints an Infection Control Committee that will provide the required treatment, monitor and as needed modify infection control policies and procedures. Minutes of the meeting will be maintained in Form Ic-2: Infection Control Committee Minutes, and will be utilized in the yearly Program Evaluation, as in Policy Ut-2: Utilization Review: Program Evaluation. During a review of the Infection Control Committee Minutes dated 1/2/24 showed all policies and procedures were reviewed without change. During an interview with the Administrator and Clinic Manager on 1/2/24 at 1030 hours, they both verified the IC committee did not review or approve cleaning products.