Department of Veterans Affairs State Veterans Home Survey Report

This survey report and the information contained herein, resulted from the State Veterans Home (SVH) Survey as a Summary Statement of Deficiencies. (Each Deficiency Must be Preceded by Full Regulatory or applicable Life Safety Code Identifying Information.) Title 38 Code of Federal Regulations Part 51 is applied for SVHs applicable by level of care.

General Information:

Facility Name: Veterans Home of California – Barstow

Location: 100 East Veterans Parkway, Barstow, CA 92311

Onsite / Virtual: Onsite

Dates of Survey: 3/30/23-3/31/23

NH / DOM / ADHC: DOM

Survey Class: Annual

Total Available Beds: 220

Census on First Day of Survey: 26

VA Regulation Deficiency	Findings
	Initial Comments: A VA Annual Survey was conducted from March 30, 2023 through March 31, 2023 at the Veterans Home of California-Barstow. The survey revealed the facility was not in compliance with Title 38 CFR Part 51 Federal Requirements for State Veterans Homes. The census on the first day of the survey was 68.
§ 51.43(b) Drugs and medicines for certain veterans. VA will also furnish drugs and medicines to a State home for a veteran receiving nursing home, domiciliary, or adult day health care in a State home pursuant to 38 U.S.C. 1712(d), as implemented by §17.96 of this chapter, subject to the limitation in §51.41(c)(2). Rating: Not Met Scope and Severity - B Residents Affected – Some	The facility was unable to demonstrate they received only drugs and medicines for Residents who were eligible to receive such medications. Based on record review, two (2) of four (4) sampled Residents was ineligible to have medications furnished by the VA. The facility did not reimburse the VAMC of jurisdiction for medications received for ineligible residents. In interview with Administrative Staff A on March 28, 2023, it was identified that the facility failed to ensure only eligible Residents received medications from the VAMC of jurisdiction. Administrative Staff A reported two (2) residents obtain mental health services at the VAMC of jurisdiction and fill their medications at the VAMC pharmacy. Upon further review, it was identified the two (2) residents do not have eligibility to receive medications. The facility advised one (1) of the two (2) residents obtains their mental health medications from the State Veterans Home onsite pharmacy

	in Chula Vista and provided evidence of one prescription being filled there. A full medication list was requested to verify whether all medications were being filled at Chula Vista. The medication list was not provided for review prior to survey exit; therefore, unable to validate where resident is obtaining mental health medications as earlier reported.
§ 51.43(d) Drugs and medicines for certain veterans VA may furnish a drug or medicine under this section and under §17.96 of this chapter by having the drug or medicine delivered to the State home in which the veteran resides by mail or other means and packaged in a form that is mutually acceptable to the State home and to VA set forth in a written agreement. Rating: Not Met Scope and Severity - C Residents Affected - Many	The facility was unable to provide an executed Sharing Agreement for medications between the facility and the VA of jurisdiction and/or the VA which is required due to the facility obtaining medications purchased from the Pharmaceutical Prime Vendor (PPV) as well as receiving reimbursement from the VA of Jurisdiction for Veterans eligible under §51.43. Based on interviews and record review, the facility is obtaining medications from the onsite pharmacy at the Veterans Home of California in Chula Vista. "AGREEMENT FOR USE OF DEPARTMENT OF VETERANS AFFAIRS HEALTH CARE RESOURCES", Agreement Number 36C26221S0011 effective July 17, 2021, was reviewed which reveals an agreement between the VA San Diego Healthcare System and the Veterans Home of California in Chula Vista. The Veterans Home of California in Barstow is not addressed in the document. The facility sends electronic order requests to the State Veterans Home onsite pharmacy in Chula Vista who fills the order and sends the medications through overnight mail back to Barstow. The SVH onsite pharmacy in Chula Vista confirms eligibility for VA to furnish medications and submits an invoice to the VA Loma Linda Health Care System. During interviews on 3/29/23 with the Consultant Staff A, Administrative Staff B, and Consultant Staff B, it was confirmed that the SVH has been actively working with the VA of jurisdiction to establish a written sharing agreement. The facility was unable to provide a written sharing agreement to meet the requirements under §51.43 to allow the State Veterans Home onsite pharmacy in Chula Vista to provide medications to the facility as well as bill the facility's VA of jurisdiction. This is a repeat finding.
§51.350 (c) Life safety from fire The facility must meet the applicable requirements of the National Fire Protection Association's NFPA 101, Life Safety Code, as incorporated by reference in §51.200. **Level of Harm** – No Actual Harm, with potential for more than minimal harm **Residents Affected** – Many	**Means of Egress** Based on records review and interview, the facility failed to properly test the battery powered emergency lights. The deficient practice affected eight (8) of eight (8) smoke compartments, staff, and all residents. The facility had a capacity for 220 beds with a census of 26 on the day of the survey. The findings include:

	Records review, on 3/29/24, at 10:30 a.m., of the facility's inspections for the battery powered emergency lighting for the 12-month period prior to the survey revealed there was no 90-minute annual test conducted on the battery powered emergency lights installed throughout the corridors and at the generator, as required by section 7.9.3.1.1 of NFPA 101, Life Safety Code. An interview, on 3/27/23, at 10:30 a.m., with Maintenance Staff A revealed the facility was not aware annual testing was required. The census of 26 was verified by Administrative Staff A on 3/30/23, at 1:00 p.m. The findings were acknowledged by Administrative Staff A and verified by Maintenance Staff A during the exit interview on 3/31/23, at 3:00 p.m. **Actual NFPA Standard: NFPA 101, Life Safety Code (2012)** **19.2.9.1** Emergency lighting shall be provided in accordance with Section 7.9. **7.9.3.1.1** Testing of required emergency lighting systems shall be permitted to be conducted as follows: **(1)** Functional testing shall be conducted monthly, with a minimum of 3 weeks and a maximum of 5 weeks between tests, for not less than 30 seconds, except as otherwise permitted by 7.9.3.1.1(2). **(2)** *The test interval shall be permitted to be extended beyond 30 days with the approval of the authority having jurisdiction. **(3)** Functional testing shall be conducted annually for a minimum of 11⁄2 hours if the emergency lighting system is battery powered. **(4)** The emergency lighting equipment shall be fully operational for the duration of the tests required by 7.9.3.1.1(1) and (3). **(5)** Written records of visual inspections and tests shall be kept by the owner for inspection by the authority having jurisdiction.