

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER / SUPPLIER / CLIA IDENTIFICATION NUMBER <b>265457</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED <b>06/10/2020</b>
NAME OF PROVIDER OF SUPPLIER <b>CREST VIEW REHABILITATION AND HEALTHCARE CENTER</b>		STREET ADDRESS, CITY, STATE, ZIP <b>11278 SCHUETZ ROAD SAINT LOUIS, MO 63146</b>	
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  <b>Level of harm</b> - Minimal harm or potential for actual harm  <b>Residents Affected</b> - Few	<p><b>Provide and implement an infection prevention and control program.</b>  <b>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY**</b>  Based on observation, interview and record review, the facility failed to follow facility policy and current standards of practice to prevent possible transmission of Coronavirus disease 2019 (COVID-19, an infectious disease caused by severe acute respiratory syndrome coronavirus 2 (DIAGNOSES REDACTED)-CoV-2). Common symptoms include fever, cough, fatigue, shortness of breath, and loss of smell and taste), when four facility staff (Nurse E, Nurse A, Certified Medication Technician (CMT) D, and Dietary Aide B) failed to ensure masks were worn properly to cover the mouth and nose and to perform proper hand hygiene after touching their facemasks. Three residents were sampled. The census was 76. Review of the facility's Outbreak Management policy, issued 3/17/20, showed: -Prevention: There is currently no vaccine to prevent coronavirus disease 2019 (COVID-19). The best way to prevent illness is to avoid being exposed to this virus. However, as a reminder, Centers for Disease Control and Prevention (CDC) always recommends everyday preventive actions to help prevent the spread of respiratory diseases, including: -Avoid touching your eyes, nose and mouth; -Follow CDC's recommendations for using a facemask. Review of CDC.gov, showed: -Preparing for COVID-19 in Nursing Homes: -Implement Source control measures: Health care personnel (HCP) should wear a facemask at all times while they are in the facility; -Provide supplies necessary to adhere to recommended infection prevention and control practices: Care must be taken to avoid touching the respirator, facemask or eye protection. If this must occur (e.g., to adjust or reposition personal protective equipment (PPE)), HCP should perform hand hygiene immediately after touching PPE to prevent contaminating themselves or others. 1. Observation on 6/9/20, showed: -At 9:45 A.M., Nurse E stood in front of a treatment cart in the facility's main hall, across from the front entrance. He/she wore a facemask looped around both ears and pulled down to the chin, leaving his/her mouth and nose uncovered. Nurse E spoke with another employee and then pulled his/her mask over his/her mouth and nose. He/she did not sanitize his/her hands before pushing the treatment cart down the hall, toward the 300/400 halls; -At 10:03 A.M., Nurse E stood in front of a treatment cart at the 300/400 hall nurse's station, with his/her elbows on top of the treatment cart and his/her facemask looped around both ears and pulled down to the chin, leaving his/her mouth and nose uncovered. Nurse E spoke to an employee seated at the nurse's station, and then pulled the facemask over his/her mouth and nose. He/she did not sanitize his/her hands before pushing the treatment cart to the back of the nurse's station, in front of the 300 hall. Nurse E pulled down his/her mask to the chin, and pulled the mask back up to cover his/her mouth and nose. He/she did not sanitize his/her hands before pushing the treatment cart down the 300 hall. 2. Observation of the 100/200 hall on 6/9/20 at 10:45 A.M., showed Nurse A handled items on top of a medication cart while wearing a facemask over his/her mouth with his/her nose uncovered. He/she entered a resident's room and exited less than two minutes later with his/her facemask over his/her mouth and nose uncovered. During an interview on 6/9/20 at approximately 10:50 A.M., Nurse A said all employees are required to wear masks throughout the facility in order to prevent the spread of communicable diseases. Masks should be worn over the nose and mouth. He/she has trouble keeping his/her mask over the nose due to allergies [REDACTED]. He/she did not perform hand hygiene before he/she touched the medication cart. 3. Observation of the 300/400 hall on 6/9/20, showed: -At 11:04 A.M., Certified Medication Technician (CMT) D walked down the main hall toward the 300/400 hall nurse's station, carrying food wrapped in a napkin with his/her facemask looped around both ears and pulled down to the chin, leaving his/her mouth and nose uncovered. He/she approached the medication cart on one side of the nurse's station and set his/her food on the cart, poured a cup of water, then carried his/her food and water to the medication cart on the other side of the nurse's station, approximately 20 feet away. He/she set his/her food down on the medication cart and used both hands to pull his/her mask over his/her mouth and nose, washed his/her hands at the nurse's station and walked down the 300 hall; -At 11:08 A.M., CMT D retrieved his/her food and water from the top of the medication cart and carried it into the employee break room. During an interview on 6/9/20 at approximately 10:40 A.M., CMT C said employees are required to wear facemasks at all times while in the facility. Masks should cover just above the nose and below the chin to ensure the mouth and nose are fully covered. It is unacceptable for staff to wear masks over their mouths only, leaving their nose uncovered. 4. Observation of the 300/400 hall dining room on 6/9/20, showed: -At 11:04 A.M., seven residents wearing facemasks gathered in the dining room, in between the kitchen door and exit door. One resident's facemask covered his/her mouth, but not his/her nose; -At approximately 11:06 A.M., Dietary Aide B exited the kitchen through the 300/400 dining room. He/she wore a facemask looped around both ears and pulled down to the chin, leaving his/her mouth and nose uncovered. He/she walked through the dining room, where residents remained seated, and down the hall to the employee break room. During an interview on 6/9/20 at 10:25 A.M., the assistant dietary manager said dietary staff helps prevent the spread of germs by ensuring kitchen equipment is sanitized, by performing frequent hand hygiene and by wearing facemasks. Masks should cover the nose and mouth and should be worn in the kitchen and throughout the facility. During an interview on 6/9/20 at approximately 11:15 A.M., the Director of Nurses/Infection Preventionist (DON/IP) said all employees are required to wear facemasks in all areas of the facility. When employees arrive for their shift, they are screened at the front entrance and must put on a facemask before proceeding to the rest of the facility. Facemasks should be worn properly, with the nose and mouth fully covered in order to be effective in preventing the spread of communicable diseases. Adjustments for a better fitting mask can be made with the mask's flexible strip across the bridge of the nose. Since the pandemic began, all employees have been in-serviced regarding proper use of PPE.</p>		

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.