STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	265161	A. BUILDING _____ B. WING _____	12/07/2023

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
WILSON'S CREEK NURSING & REHAB	3403 WEST MT VERNON SPRINGFIELD, MO 65802

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETION DATE
F 880 SS=E	Infection Prevention & Control CFR(s): 483.80(a)(1)(2)(4)(e)(f) §483.80 Infection Control The facility must establish and maintain an infection prevention and control program designed to provide a safe, sanitary and comfortable environment and to help prevent the development and transmission of communicable diseases and infections. §483.80(a) Infection prevention and control program. The facility must establish an infection prevention and control program (IPCP) that must include, at a minimum, the following elements: §483.80(a)(1) A system for preventing, identifying, reporting, investigating, and controlling infections and communicable diseases for all residents, staff, volunteers, visitors, and other individuals providing services under a contractual arrangement based upon the facility assessment conducted according to §483.70(e) and following accepted national standards; §483.80(a)(2) Written standards, policies, and procedures for the program, which must include, but are not limited to: (i) A system of surveillance designed to identify possible communicable diseases or infections before they can spread to other persons in the facility; (ii) When and to whom possible incidents of communicable disease or infections should be reported; (iii) Standard and transmission-based precautions to be followed to prevent spread of infections; (iv)When and how isolation should be used for a resident; including but not limited to:	F 880		

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
[signature]	ADMINISTRATOR	1.5.24

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.

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F 880	Continued From page 1 (A) The type and duration of the isolation, depending upon the infectious agent or organism involved, and (B) A requirement that the isolation should be the least restrictive possible for the resident under the circumstances. (v) The circumstances under which the facility must prohibit employees with a communicable disease or infected skin lesions from direct contact with residents or their food, if direct contact will transmit the disease; and (vi)The hand hygiene procedures to be followed by staff involved in direct resident contact. §483.80(a)(4) A system for recording incidents identified under the facility's IPCP and the corrective actions taken by the facility. §483.80(e) Linens. Personnel must handle, store, process, and transport linens so as to prevent the spread of infection. §483.80(f) Annual review. The facility will conduct an annual review of its IPCP and update their program, as necessary. This REQUIREMENT is not met as evidenced by: Based on observation and record review, the facility failed to maintain an effective infection control program when staff failed to follow manufacturer guidelines and their infection control policy when staff administered the TB second step of a required two step tuberculosis (TB - a communicable disease that affects the lungs characterized by fever, cough, and difficulty breathing) screening test outside of recommended guidelines for five staff members (Registered Nurse (RN) A, Licensed Practical	F 880		

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F 880	Continued From page 2 Nurse (LPN) B, Housekeeper C, Certified Nurse Aide (CNA) D, and Dietary Aide (DA) E). The facility census was 128. Review of the facility's "Infection Control Manual, Recommendations for Employees," dated April 2012, showed the following: -The results of annual tuberculin testing of employees in a long-term care facility are a good indicator of the extent of transmission of tuberculosis within that facility; -The following occupationally-exposed persons should be tested at least annually: all employees, attending physicians, and dentists, volunteers who spend greater than 10 hours weekly in the facility, nursing and allied health personnel, students, instructors and other individuals in regular attendance within long-term facilities; -Every facility should have a tuberculosis surveillance program that includes initial examination and provides a tuberculin skin test (Mantoux - five tuberculin units (TU) of purified protein derivative (PPD)) to all employees during pre-employment procedures, unless a pervious reaction greater than 10 millimeters (mm) is documented. If the initial skin test results is zero to nine mm, a second test should be given at least one week and no more than three weeks after the first test. Review of the TB skin test manufacture guidelines, undated, showed the following: -Booster effect and two-step testing: In this testing method, persons who have a negative initial skin test undergo a second tuberculin test one to three weeks after the first. Both tests should be read and recorded at 48 to 72 hours.	F 880		

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F 880	Continued From page 3 1. Review of RN A's personnel record showed the following information: -Hire date of 01/02/23; -Start date of 01/04/23; -Staff administered the first step TB skin test on 01/02/23 with negative results noted on 01/05/23; -Staff administered the second step TB skin test on 01/05/23 (three days after the 1st step TB skin test was administered and the same day the first step results were read). 2. Review of LPN B's personnel record showed the following information: -Hire date of 01/30/23; -Start date of 02/01/23; -Staff administered the first step TB skin test on 01/30/23 with negative results noted on 02/01/23; -Staff administered the second TB skin test on 02/01/23 (two days after the first step TB skin test was administered and the same day the first step results were read). 3. Review of Housekeeper C's personnel record showed the following information: -Hire date of 08/25/23; -Start date of 08/27/23; -Staff administered the first step TB skin test on 08/25/23 with negative results noted on 08/28/23; -Staff administered the second step TB skin test on 08/29/23 (four days after the first step TB skin test was administered and one day after reading the results of the first test). 4. Review of CNA A D's personnel record showed the following information:	F 880		

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F 880	Continued From page 4 -Hire date of 09/18/23; -Start date of 09/20/23; -Staff administered the first step TB skin test on 09/18/23 with negative results noted on 09/20/23; -Staff administered the second TB skin test on 09/20/23 (two days after the first step TB skin test was administered and the same day the first step was read). 5. Review of DA E's personnel record showed the following information: -Hire date of 06/16/23; -Start date of 06/18/23; -Staff administered the first step TB skin test on 06/16/23 with negative results noted on 06/19/23; -Staff administered the second TB skin test on 06/20/23 (four days after the first step TB skin test was administered and one day after reading the results of the first step was read). 6. During an interview on 12/07/23, at 11:17 A.M., the Director of Nursing (DON) said the following: -She is responsible for monitoring the employee TB skin tests; -Nurses administer the first TB skin test on an employee's first day of orientation; -Nurses read the new employee's first step TB skin test and administer the second step TB skin test; -The practice has been nurses administer the second step TB skin test when the first step is read; -The reason nurses should wait to administer the second TB skin test for one to three weeks later is a possible delayed reaction.	F 880		

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F 880	Continued From page 5 7. During an interview on 12/07/23, at 11:30 A.M., the Administrator said the following: -The DON is responsible for monitoring new employee TB skin tests; -The TB skin test was given in 3 days due to the TB skin test form states within three weeks; -Staff should administer the second TB skin test per manufacturer guidelines and policy.	F 880		

Missouri Department of Health and Senior Services

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	05579	A. BUILDING: _____ B. WING _____	12/07/2023

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A4031	19 CSR 30-85.042(27) Communicable Disease-Employees The facility must develop and implement policies and procedures which ensure employees are screened to identify communicable diseases and ensure that employees diagnosed with communicable diseases do not expose residents to such diseases. The facility's policies and procedures must comply with the Missouri Department of Health's regulations pertaining to communicable diseases, specifically 19 CSR 20-20.010 through 19 CSR 20-20.100, as amended. II This regulation is not met as evidenced by: 1. Please refer to F880.	A4031	PLEASE REFER TO THE POC FOR F880 TO SHOW COMPLIANCE TO A4031	

Missouri Department of Health and Senior Services
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE — TITLE: ADMINISTRATOR — (X6) DATE: 1.5.24

F880	The facility does and will continue to develop and implement procedures to ensure employees are screened for communicable diseases. 1. A review of F880 and TB solution insert was conducted on 1/10/2024 by facility nursing administration and facility administrator. An in-service was completed on 1/10/2023 with all nursing staff responsible for	1/10/2024

	administering 2 step TB tests to new employees. 2. This has the potential to affect all new employees who are required to be administered a 2 step TB process to limit exposure of communicable disease to all residents. 3. Facility in-servicing was completed on 1/10/2024 discussing TB 2 Step processes and giving the second step 1-3 weeks after the first TB test and not sooner. The TB staff immunization records form was revamped to a new form with instructions that a second TB step can only be administered 1-3 weeks after the first step. This form replaced the old form in facility orientation packet for all new employees. 4. The DON monitors and distributes Second Step TB tests. She specifically writes on the folder the soonest date that it could be administered and then distributes the form to the appropriate management staff to coordinate its completion. These are monitored by her when a new employee is hired. All items are reviewed monthly in facility safety meeting. This data is then compiled and reviewed during quarterly QAA meetings.	