

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER / SUPPLIER / CLIA IDENTIFICATION NUMBER <b>265279</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED <b>05/29/2020</b>
NAME OF PROVIDER OF SUPPLIER <b>CEDAR POINTE</b>		STREET ADDRESS, CITY, STATE, ZIP <b>1800 WHITE COLUMNS DRIVE ROLLA, MO 65401</b>	
For information on the nursing home's plan to correct this deficiency, please contact the nursing home or the state survey agency.			
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F 0880  <b>Level of harm</b> - Minimal harm or potential for actual harm  <b>Residents Affected</b> - Some	<p><b>Provide and implement an infection prevention and control program.</b></p> <p>Based on observation, interview and record review, the facility staff failed to follow infection control protocols for COVID-19 when staff did not properly wear face masks while in the facility. The census was 85. 1. Review of the Centers for Disease Control and Prevention (CDC) recommendation dated 5/21/20, showed in order to prevent the spread of COVID-19, facility staff are to ensure all healthcare personnel (HCP) wear a facemask or cloth face covering for source control while in the facility. Additional review of the CDC recommendation titled How to Wear Face Coverings Correctly dated 5/22/20, showed staff are to place it over their nose and mouth and secure it under their chin. Review of the CDC recommendation, titled Facemask Do's and Don'ts, dated 6/2/20, showed staff are not to do the following: - Touch or adjust facemask without cleaning hands before and after touching; - Wear facemask under nose or mouth. Review of the CDC recommendation, How to Wash Cloth Face Coverings, dated 5/22/20, showed the following: - To wash by washing machine use regular laundry detergent and the warmest appropriate water setting appropriate for material; - To wash by hand use 5 tablespoons of household bleach per gallon of room temperature water or use 4 teaspoons household bleach per quart of room temperature water, soak in bleach solution for five minutes, rinse thoroughly with cool or room temperature water; - Dry in a dryer on the highest heat setting or air dry; 2. Review of the facility's Pandemic COVID 19 policy, dated 10/1/19, showed the following: - Staff are trained on symptoms of COVID 19 and how to prevent transmission; - The facility will follow the recommendations of the local health department, Department of Health and Senior Services (DHSS), CDC, and Centers for Medicare and Medicaid Services (CMS) to minimize the spread of COVID 19; - The plan is implemented by the Administrator and includes emphasizing hand hygiene and reduction or cessation of communal dining; - What staff can do to protect themselves from getting sick includes wash hands often with soap and water, avoid touching nose or mouth, and wear PPE as recommended. Staff received in-service training on the COVID 19 policy on 4/10/20. 3. Observation on 5/22/20 at 9:30 A.M., showed the administrator walked across the main resident dining room and pulled her face mask down under her chin and then walked into an office and touched the copy machine without washing or sanitizing her hands. Additionally, three staff wore face masks, but did not cover their noses and mouths with the mask while in the main dining room. Further observation showed the receptionist in the office wore a face mask, but it did not cover his/her nose and mouth. During an interview on 5/22/20 at 9:45 A.M., the administrator said staff are utilizing cloth face masks and they are responsible for taking their masks home and cleaning them. She said all staff are trained on cleaning procedures. The administrator said staff may hand wash, machine wash, or microwave their cloth face mask to sanitize them. The administrator touched the front of her mask multiple times and did not wash or sanitize her hands afterwards. Observation on 5/22/20 at 10:15 A.M. showed the Director of Nursing (DON) walked throughout the facility. She wore a face mask, but it did not cover her nose and mouth. Observation on 5/22/20 at 10:30 A.M., showed Certified Medication Technician (CMT) M with his/her face mask pulled below his/her nose while at the medication cart in resident common area. Observation on 5/22/20 at 10:34 A.M., showed certified nursing assistant (CNA) A and Maintenance B walked down the hallway together. CNA A and Maintenance B wore a facemask, but it did not cover their nose or mouth. In addition, CNA A and Maintenance B did not social distance from each other while walking down the hallway. Observation on 5/22/20 at 10:35 A.M., showed nursing assistant (NA) C did not wear a face mask as he/she came out of a resident's room. Additional observation showed the resident in the room. Observation on 5/22/20 at 10:43 A.M., showed NA C, CNA A, and the Social Service Designee (SSD) walked in the hallway. Their face masks did not cover their nose and mouth. Observation on 5/22/20 at 10:47 A.M., showed licensed practical nurse (LPN) D pulled his/her mask down off his/her face to speak to a resident. LPN D did not wash or sanitize his/her hands after touching his/her facemask. During an interview on 5/22/20 at 10:51 A.M., Housekeeping E said he/she does not wash his/her hands between resident rooms when cleaning, because he/she wears gloves. He/She said he/she removes his/her gloves in a sanitary manner. Housekeeping E said he/she did not receive training on how to clean his/her cloth mask. He/She hand washes his/her facemask in the sink with dish liquid. During the interview, Housekeeping E touched his/her face multiple times, but he/she did not wash or sanitize his/her hands after touching his/her facemask. Observation on 5/22/20 at 11:25 A.M., showed twenty two residents in the unit dining room at tables and waiting for lunch. Additional observation showed two to four residents sat at each table. Further observation showed the tables were not six feet apart. Observation on 5/22/20 at 11:28 A.M., Housekeeping G walked through the main dining room. He/She wore a mask, but it did not cover his/her nose and mouth. During an interview, Housekeeping G said the mask did not fit him/her, and it would not stay up. Observation on 5/22/20 at 12:50 P.M., showed the facility staff served the residents' lunch in the main dining room. Dietary aide (DA) H wore a mask, but it did not cover his/her nose and mouth. Housekeeper G wore a mask, but it did not cover his/her nose and mouth. Additional observations in the main dining room showed the residents sat at tables and waited for lunch. Two to four residents sat at each table. Further observation showed the tables were not six feet apart. Observation on 5/22/20 at 12:55 P.M., showed CMT M leaning over and speaking to residents with his/her face mask pulled below his/her nose and mouth. During an interview on 5/22/20 at 12:56 A.M., the Dietary Manager (DM) said the facility has always served meals in the dining rooms. He/She said the facility did not serve resident meals on hall trays during the pandemic shutdown. Observation on 5/22/20 at 1:04 P.M., showed the SSD stood in the hallway and talked to two staff. The SSD wore his/her facemask under his/her chin. Observation on 5/22/20 at 1:05 P.M., showed NA J propelled a resident in a wheelchair. NA J wore his/her facemask under his/her chin. NA J stopped propelling the resident, adjusted his/her facemask over his/her nose and mouth, and continued propelling the resident. NA J did not wash or sanitize his/her hands after touching his/her facemask. Observation on 5/22/20 at 1:10 P.M., showed Housekeeping G walked through the main dining room. He/She wore a mask, but it did not cover his/her nose and mouth. DA H cleaned tables in the main dining room. He/She wore a mask, but it did not cover his/her nose and mouth. Observation on 5/22/20 at 1:15 P.M., showed NA J pulled his/her facemask under his/her chin to speak to LPN D. NA J finished speaking and readjusted his/her facemask over his/her nose and mouth. NA J did not wash or sanitize his/her hands after touching his/her facemask. Observation on 5/22/20 at 2:21 P.M., showed LPN K with his/her face mask pulled below his/her nose while he/she passed medications. Observation on 5/22/20 at 2:23 P.M., showed LPN K and LPN L stood at a medication cart and talked. LPN K and LPN L wore a mask, but it did not cover their nose and mouth. LPN K and LPN L touched their facemasks, but did not wash or sanitize their hands. Observation on 5/22/20 at 3:12 P.M., showed CMT M with his/her face mask pulled below his/her nose while at the medication cart in the resident common area. Observation on 5/22/20 at 3:14 P.M., showed DA N with his/her face mask pulled below his/her nose, while he/she pushed a resident down hall. Additional observations showed DA N with his/her face mask pulled below his/her nose, while he/she brought a resident in from outside. During an interview on 5/22/20 at 4:45 P.M., the administrator and the DON said face masks should cover the nose and the mouth. They said if a mask does not fit or will not stay up, then it is expected the staff get a different face mask. They said staff have access to the disposable, surgical masks. Additionally, they said if staff touch their mask, then they should wash or sanitize their hands. The administrator and the DON said staff are instructed on how to clean their mask when they receive their facemasks. They said they believe the facemasks can be microwaved according to a CDC recommendation. The</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.

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