

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER / SUPPLIER / CLIA IDENTIFICATION NUMBER 265178	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 06/12/2020
NAME OF PROVIDER OF SUPPLIER OZARK REHABILITATION & HEALTH CARE CENTER		STREET ADDRESS, CITY, STATE, ZIP 1083 OZARK CARE DRIVE, PO BOX 270 OSAGE BEACH, MO 65065	
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 Level of harm - Minimal harm or potential for actual harm Residents Affected - Some	<p>Provide and implement an infection prevention and control program. **NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY**</p> <p>Based on observation, interview and record review, the facility failed to follow infection control protocols for 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 staff did not properly wear facemasks while in the facility, failed to follow handwashing protocols after touching their facemask, failed to properly store their facemask, and did not practice social distancing to maintain 6 feet of space between others. The census was 48. 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 their facemask without cleaning their hands before and after touching; -And wear their facemask under their nose or mouth. Review of the CDC's recommendation Strategies for Optimizing the Supply of Facemasks, dated 3/17/20, showed facemasks should be carefully folded so that the outer surface is held inward and against itself to reduce contact with the outer surface during storage. The folded mask can be stored between uses in a clean, sealable paper bag or breathable container. Review of the facility's COVID-19 Control Measures Policy, revised 4/21/20, showed staff are required to wear face coverings when in the facility, and when in close proximity of residents or other staff members. Additional Strategies Depending on the Facility's Reopening Status Review of the Centers for Disease Control and Prevention (CDC) recommendation, titled Preparing for Covid-19 in Nursing homes, dated 5/21/20, showed facility staff and residents are to remain 6 feet apart from others and wear a facemask including in breakrooms and common areas. 1. Observation on 6/8/20 at 10:30 A.M., showed seven facility staff sat outside in the smoking area. The staff were not wearing masks, and did not maintain a distance of at least six feet from each other. The Director of Nursing (DON) walked up to the survey staff and pulled his/her facemask under his/her chin to speak to them. The DON did not maintain a distance of at least six feet from the survey staff while he/she spoke to them. The DON placed his/her mask over his/her nose and mouth and opened the door of the facility. He/She did not wash or sanitize his/her hands after he/she touched his/her facemask. Additional observation on 6/8/20 at 10:35 A.M., showed the DON walked through the facility with his/her mask not covering his/her nose and mouth. Additionally, the observation showed he/she touched his/her mask multiple times, and did not perform hand hygiene, before he/she touched chairs, tables, and notebooks. Observation on 6/8/20 at 11:05 A.M., showed the Administrator touched his/her facemask multiple times during an interview. Further observation showed he/she did not wash or sanitize his/her hands after he/she touched his/her facemask. Observation on 6/8/20 at 11:58 A.M., showed Certified Nursing Assistant (CNA) A wore a facemask. The facemask did not cover his/her nose and mouth. Additional observation showed CNA A went in and out of occupied resident rooms with his/her mask not covering his/her nose and mouth. During an interview on 6/8/20 at 12:12 P.M., Resident #1 said the staff wear their masks, but they wear it incorrectly. He/She said the staff wear the mask so it does not cover the nose and mouth. He/She tells the staff that the mask should cover the nose and mouth, but some of the staff laugh at him/her. Additionally, he/she said some of the staff do not wash their hands when they come into his/her room. Observation on 6/8/20 at 12:15 P.M., showed CNA B wore a mask, while he/she delivered hall trays during lunch. The mask did not cover his/her mouth or nose. Observation on 6/8/20 at 12:24 P.M., showed CNA A wore a mask while he/she assisted Resident #2 during meal time. The mask did not cover his/her mouth or nose. Additional observation showed CNA A adjusted his/her mask and continued to assist the resident without performing hand hygiene. Observation on 6/8/20 at 12:27 P.M., showed Community Relations staff opened the door to the patio. He/she pulled down his/her facemask and spoke to a resident who sat outside. Additional observation showed Resident #3 stood within six feet of Community Relations staff, without wearing a facemask. The staff member then put his/her facemask over his/her nose and mouth and shut the door. He/She did not wash or sanitize his/her hands after touching his/her facemask. Observation on 6/8/20 at 12:36 P.M., showed Medical Records staff wore a mask. The mask did not cover his/her nose and mouth. Observation on 6/8/20 at 1:00 P.M., showed CNA B provided care to Resident #4 while he/she wore a facemask. The facemask did not cover his/her nose. During an interview on 6/8/20 at 2:45 P.M., CNA B said he/she had been educated on how, and when to wear a mask. Observation on 6/8/20 at 2:29 P.M., showed Business Office staff and Community Relations staff stood in the resident common area with facemasks on. The masks did not cover their nose and mouth. Observation on 6/8/20 at 2:49 P.M., showed CNA C enter and exit resident rooms handing out fliers, while he/she wore a facemask. The mask did not cover his/her nose and mouth. Additional observation showed CNA C adjusted his/her facemask and continued visiting resident rooms. He/She did not wash or sanitize his/her hands after adjusting his/her facemask and touched door knobs and the fliers. During an interview on 6/8/20 at approximately 2:50 P.M., CNA C said his/her mask did not fit him/her, and the mask kept slipping out of place. He/She said the facility has other masks that he/she can use, and he/she can get one of those if he/she wants. He/she has received training on wearing a facemask and handwashing/hand sanitizing. Additionally, CNA C said he/she should wash or sanitize his/her hands after touching his/her facemask. Observation on 6/8/20 at 3:21 P.M., showed a facemask with a bent nose piece laid on the Dietary Manager's (DM) desk. Further observation showed another mask, with a bent nose piece, hung on the side of a locker near the DM's desk. The mask was held in place by a staff name tag. Furthermore, during an interview, the DM touched his/her facemask multiple times, and he/she did not wash or sanitize his/her hands after touching his/her facemask. During an interview on 6/8/20 at approximately 3:25 P.M., the DM said facemasks should be stored in a brown paper bag when they are not in use. He/She said masks should not be placed on the desk or on the locker, and he/she did not know who the mask belonged to. Furthermore, the DM manager said staff should wash their hands before putting on the facemask and should sanitize or wash their hands after adjusting the facemask. During an interview on 6/8/20 at 4:42 P.M., the Administrator and the DON said facemasks should cover the nose and mouth. Staff should wash or sanitize their hands when putting on, taking off, or adjusting their facemask. Staff should store their facemask in a brown paper bag when they are not using them. Additionally, they said staff should not leave facemasks on desks or hanging on lockers. Staff should not remove their facemask from their nose and mouth when speaking to a resident. Staff have been trained on proper use of personal protective equipment and handwashing/hand sanitizing.</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.