MSDH - Health Facilities Licensure and Certification

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	25CI	A. BUILDING: _____ B. WING _____	04/11/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
WOODLANDS REHABILITATION AND HEALTHCARE (	102 WOODCHASE PARK DRIVE CLINTON, MS 39056

(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) COMPLETE DATE
M 000	Initial Comments The State Agency (SA) conducted an Annual Recertification survey along with two (2) Complaint Investigations (CI MS #24636 and CI MS #24697), at the facility from 04/09/24 through 04/11/24. The SA investigated CI MS #24636 for dialysis after care and CI MS #24697 for resident-on-resident abuse, grooming, and facility staff. Based on the findings of the Complaint Investigations, the SA determined the facility was in compliance with the Minimum Standards for Institutions for the Aged or Infirm, state licensure requirements, no citations were written related to the complaint investigations. During the recertification survey, the SA determined the facility was not in compliance with the Minimum Standards for Institutions for the Aged or Infirm, state licensure requirement and cited M1570.	M 000		
M1570	48.58.1 Infection Control The following infection control standards shall be met: 1. The facility must maintain and document an effective infection control program that protects patients, families, visitors, and facility personnel by preventing and controlling infections and communicable diseases. 2. The facility must have an active surveillance program that includes specific measures for prevention, early detection, control, education, and investigation of infections and communicable diseases in the facility. There must be a mechanism to evaluate the effectiveness of the program(s) and take corrective action when necessary. The program must include implementation of nationally recognized systems of infection control guidelines to avoid sources	M1570		5/23/24

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M1570	Continued From page 1 and transmission of infections and communicable diseases. 3. The facility must follow accepted standards of practice to prevent the transmission of infections and communicable diseases, including the use of standard precautions. This Statute is not met as evidenced by: Level II Based on observations, interviews, record review, and the facility policy review, the facility failed to transport dirty linen in a manner to prevent the possible spread of infection, for one (1) of three (3) days of observations. Findings include: Review of the facility's policy titled, "Laundry and Bedding, Soiled," revised 10/18, revealed, " ...Soiled laundry/bedding shall be handles, transported and processed according to best practices for infection prevention and control ... Handling 1. All used laundry is handled as potentially contaminated until it is properly bagged and labeled for appropriate processing... b. Laundry... is placed in leak proof bags or containers. c. Contaminated laundry is placed in a bag or container at the location where it is used... Transport 1. Contaminated laundry bags/containers are not held close to the body or squeezed during transport ..." During an observation on 04/09/24 at 9:18 AM, Certified Nursing Assistant (CNA) #2 was observed walking down the hallway with dirty linen braced against her clothes. CNA #2 placed the linen in the dirty clothes barrel several rooms down the hall.	M1570	1.On 4/12/2024, CNA (Certified Nursing Assistant) #2 received a one-to-one demonstration and written in-service by the Director of Nursing (DON) completed pertaining to proper transporting and handling of soiled laundry, bedding, and linen. On 4/12/2024, the Director of Nursing (DON) assessed all eleven (11) residents assigned to CNA#2 for any adverse reactions related to the deficient practice. No adverse reactions were found. 2.All eleven (11) residents assigned to the care area of Certified Nursing Assistant (CNA)#2 on 4/9/2024 have the potential to be affected by this practice, no other negative outcomes were identified. 3. Beginning on 4/9/2024, an in-service on Infection Control policy and transport of soiled laundry, linen, and bedding was initiated by Staff Development Coodinator (SDC) and Certified Nursing Assistant (CNA) educator for all CNA's (Certified Nursing Assistants). On 4/12/2024, The Staff Development Coordinator (SDC) and CNA educator-initiated skills check offs with return demonstration all Certified Nursing Aides (CNA) related to infection control practices while transporting soiled	

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M1570	Continued From page 2 During an interview on 04/09/24 at 9:20 AM, CNA #2 confirmed she had the dirty linen braced against her clothes. CNA #2 explained that she should have place the linen in a plastic bag because she could get an infection or cause other residents and staff to become infected. CNA #2 said she could not find a bag at that time. During an interview on 04/11/24 at 2:34 PM, the Director of Nursing (DON) confirmed CNA #2 should have placed the linen in a plastic bag prior to taking it down the hallway to the dirty clothes barrel. The DON said the CNA's actions could cause other residents, herself, or other staff to be infected. In an interview on 04/11/24 at 3:21 PM with the Administrator explained she expect the staff to follow the infection control policy at all times. Record review of an orientation checklist dated 12/12/23 revealed CNA #2 had been trained in infection control. Review of a completion certificate dated 1/23/24 revealed CNA #2 had successfully completed an eLearning educational activity titled "Infection Prevention in Long-Term Care Settings."	M1570	linen, laundry, and bedding. 4. Beginning on 4/12/2024, the Staff Development Coordinator (SDC), Director Of Nursing (DON), and the Risk Manager, Registered Nurse will observe infection control practices being met related to transportation of soiled linen, laundry, and bedding with one (1) CNA per day for one week, then one (1) CNA weekly for one month, then one (1) CNA monthly for three months. A report will be submitted to the Quality Assurance Performance Improvement on 05/01/2024 for review and recommendations then monthly for three (3) months. The Director of Nursing is responsible for monitoring and compliance.	