STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	255110	A. BUILDING _____ B. WING _____	08/18/2020

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
MS CARE CENTER OF ALCORN COUNTY, INC-SNF	3701 JOANNE DRIVE CORINTH, MS 38834

(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 000	INITIAL COMMENTS A COVID-19 Focused Infection Control Survey was conducted by the Centers for Medicare & Medicaid Services (CMS) from August 17 thru August 18, 2020. The facility was found to be not in compliance with 42 CFR §483.80 infection control regulations. Total census was 99..	F 000		
F 880 SS=F	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	F 880		8/31/20

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE | TITLE | (X6) DATE

Electronically Signed | 09/04/2020

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F 880	Continued From page 1 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: (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 observations, interviews and review of the facility's in-service training documents, facility	F 880	F880 1)The March 17 thru 18, 2020 survey date	

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F 880	Continued From page 2 staff on four (4) of four (4) units, failed to follow the Center for Disease Control and Protection (CDC) guidelines for the use of facemasks in a healthcare setting to prevent pathogen transmission in response to COVID-19. The facility census was 99 and there currently were no residents positive for COVID-19. The findings include: On 8/17/20 at 3:30 p.m., upon entrance to the Nursing Home, the employee conducting the screening of visitors and staff was observed wearing a cloth mask. On 8/17/20 at 4:30 p.m., during initial tour of the Nursing Home and observation of meal service, on the 400 Hall, one Licensed Practical Nurse (LPN) and two Certified Nursing Assistants (CNA) were observed wearing cloth masks. On the 100 Hall, two (2) CNA's and one staff member were observed wearing cloth masks. On the 200 Hall, two (2) CNA's and one Staff member were observed wearing cloth masks. One (1) of the CNA's stated, "We all have to wear a mask at all times. They have cloth masks here that you can go and get." On the 300 Hall one (1) LPN and one (1) CNA were observed wearing cloth masks. At 6:40 p.m., during an interview with both the Director of Nursing (DON) and the Infection Control Nurse (IC Nurse), the IC Nurse stated, "Our policy says you need to have a mask on that covers your mouth and nose. They can wear the cloth mask. We have plenty of surgical masks." The facility had no policy to address the use, cleaning and/or disposal of cloth masks, which increased the risk for the spread of infection. The DON and IC Nurse confirmed the facility had no	F 880	noted in the first two Initial Comments paragraphs of the 2567 is incorrect. The dates of the survey were August 17 thru 18, 2020. On 08/17/2020 at approximately 5:30PM, all employees wearing cloth mask in facility were issued a surgical mask by the Infection Preventionist RN. All employees at the facility at that time were in-serviced to wear surgical mask from this point forward by the Infection Preventionist RN. 2)Residents receiving direct care from employees wearing cloth mask while in the facility have the potential to be affected by this alleged deficient practice. 3)All employees were in-serviced on 08/17/2020 and 8/18/2020 by the facility Infection Preventionist RN to wear surgical mask to prevent pathogen transmission in response to COVID-19. Beginning the week of 08/31/2020, Audits of employees will be conducted to ensure that surgical masks are worn at all times while in the facility. Audits will be done weekly for four weeks, then monthly for three months, and Quarterly by the Director of Nursing and Infection Preventionist RN. 4)The Infection Preventionist RN will report audit findings to the Quality Assurance Committee monthly to review actions taken to ensure continued compliance. The Quality Assurance Committee will make recommendations and changes as needed.	

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F 880	Continued From page 3 COVID positive cases at the time of the survey Both the DON and IC Nurse communicated in agreement with each other, "The CDC did say we can wear cloth masks. We didn't know it was only if you didn't have any surgical masks." The IC Nurse went on to say, "Weird, We were talking about switching to the surgical masks. We just hadn't done it yet. The numbers in our town were going up, but they (the numbers) have kind of settled done this week." On 8/18/20 at 9:00 a.m., review of the facility's documentation revealed the following staff announcements occurred: 4/30/20: "Attention all staff, cloth masks must be worn at all times when inside the building!! There are no exceptions!!" On 5/1/20 an all Staff in-service was conducted and staff were instructed to do the following: "All staff, Cloth Masks must be worn at all times when inside the building. No paper mask is allowed without permission from DON or Administrator. If you need a cloth mask you may receive one from "Person name" in the front office. You will be required to keep up with your mask and bring it to work with you daily." There was no documentation that staff were instructed on how to clean the cloth masks to prevent the spread of infection. Review of the CDC guidance revealed the following: "Healthcare Professionals (HCP) use of homemade masks: In settings where facemasks are not available, HCP might use homemade masks for care of patients with COVID-19 as a last resort. However, homemade masks are not considered PPE, since	F 880		

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F 880	Continued From page 4 their capability to protect HCP is unknown. Caution should be exercised when considering this option. Homemade masks should ideally be used in combination with a face shield that covers the entire front (that extends to the chin or below) and sides of the face."	F 880		