Wyoming Dept of Health - Office of Healthcare Licensi

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	WY0009	A. BUILDING _____ B. WING _____	09/27/2006

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
CROOK COUNTY MEDICAL SERVICES	BOX 517 SUNDANCE, WY 82729

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEEDED 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
S 000	State Rules and Regulations State Standards Rules and Regulations for Program Administration of Nursing Care Facilities Section 5. Organization and Administration. (b) (iv) (A) Tuberculin testing shall be accomplished for each employee upon employment and before resident contact begins and annually thereafter. (B) Employees having known positive skin tests shall provide a certificate of noninfectiousness from a physician, recommendations, if any, for treatment , and evidence that they have complied with such recommendations. (D) Individuals never having had a skin test or who do not have written proof of skin test results, shall have an intradermal Mantoux...accomplished via the two (2) step procedure. If the first test is negative and the employee is asymptomatic, the employee may engage in resident contact prior to the results of the second skin test." This Standard was not met as evidenced by: Based upon review of personnel health files, review of schedules, and staff interviews, the facility failed to prevent four of five newly hired employees from resident contact before they were confirmed negative for tuberculosis (TB). The findings were: 1. Review of personnel files revealed licensed practical nurse (LPN) #15 was hired on 7/24/06. According to the personnel health files, the employee's TB skin test results were documented	S 000	S000 Tuberculin testing will be done on employees upon employment and prior to resident contact, and yearly thereafter. Appropriate screening for all employees will be done prior to resident contact and will be evidenced by: All employee files were audited for proof of TB tests, chest x-ray and health questionnaires. Those employees with known positive TB tests have had chest x-rays, and those needing TB tests have been completed. Current tuberculin guidelines/policy have been updated and reviewed with department heads. 10/19/06	10/19/06

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S 000	Continued From page 1 as negative on 7/29/06. On 9/26/07 at 1 PM, the unit clerk reviewed the nursing schedule which showed the employee started orientation on 7/24/06. The unit clerk confirmed the LPN had contact with the residents on that date. 2. According to the personnel file, LPN #11 was hired on 8/16/06. Review of the employee's health file showed she could not have a TB skin test as she was a "positive reactor" (having known positive skin test results). No further information was available in the file. Interview with the infection control nurse on 9/27/06 at 12 PM revealed the facility had not obtained a certificate of noninfectiousness from a physician nor any recommendations for treatment. Review of the August 2006 nursing schedule with the unit clerk on 9/26/06 at 1 PM revealed the LPN started orientation on 8/16/06. Further review showed the LPN was a full-time employee. 3. Review of the personnel file showed certified nurse aide (CNA) #18 was hired on 8/28/06. Review of the health file showed the CNA did not receive a TB skin test. However, according to the August 2006 nursing schedule, the CNA started orientation on 8/28/06. Interview with unit clerk on 9/27/06 at 1 PM revealed the CNA quit after three days, but the clerk confirmed the employee did have resident contact. 4. According to the personnel file, employee #20 was hired on 6/19/06 in the housekeeping department. Review of the health file showed a negative TB skin test was documented for the employee on 6/22/06. However, interview with the director of housekeeping revealed the employee started orientation, and had contact with the residents, on 6/20/06.	S 000		