STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	535031	A. BUILDING _____ B. WING _____	11/20/2020

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
WIND RIVER REHABILITATON AND WELLNESS	**1002 FOREST DRIVE RIVERTON, WY 82501**

(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, which included a review of emergency preparedness requirements, was conducted by Healthcare Licensing and Surveys from 11/17/20 through 11/20/20.	F 000		
F 880 SS=E	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 infections before they can spread to other	F 880		12/14/20

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

Electronically Signed | 12/11/2020

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F 880	Continued From page 1 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 observation, review of facility "High Touch Area Disinfecting" log sheets; the EPA's (Environmental Protection Agency) List N;	F 880	This plan of correction is prepared and submitted as required by law. By submitting this plan of correction, Wind	

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F 880	Continued From page 2 manufacturer's directions for use; and CDC (Centers for Disease Control) guidelines; and staff interview, the facility failed to ensure appropriate infection control practices were implemented. The census was 63. The findings were: 1. Observation on 11/17/20 at 3:05 PM showed ECW (emergency care worker) #1 was using a spray bottle of disinfectant to sanitize the handrails in the secure unit. Observation on 11/17/20 at 4:45 PM showed housekeeper #1 was walking down Owl Creek hall spraying the handrails and door handles with a spray bottle of disinfectant. Review of the "High Touch Area Disinfecting" log sheets showed the handrails, room/office door knobs, bathroom door knobs, bathroom grab bars, facility entrance doors, time clocks, hand sanitizer dispensers, hand soap dispensers, refrigerator handles, and microwave handles were to be disinfected 3 times daily. Interview with the DNS (director of nursing services) on 11/18/20 at 3:31 PM revealed the facility used the disinfectant "Virex" as their "first go to" and would use a bleach solution as a second option and for shower areas. The DNS provided the EPA registration number of 70627-24 for the product "Virex II/256". The following concerns were identified: a. Review of the EPA's List N (found at https://cfpub.epa.gov/giwiz/disinfectants/index.cfm and retrieved on 11/20/20) showed EPA product number 70627-24 was a quaternary ammonium compound and was effective against SARs-coV-2, however the product required a 10 minute contact time to be effective. b. Review of the manufacturer's instructions for use for "Virex II/256" (found at https://1source.diversey.com/see3/PSS064-VirexI	F 880	River Rehabilitation and Wellness Center does not admit that the deficiency listed on this form exist, nor does the center admit to any statements, findings, facts, or conclusions that form the basis for the alleged deficiency. The center reserves the right to challenge in legal and/or regulatory or administrative proceedings the deficiency, statements, facts, and conclusions that form the basis for the deficiency. Corrective Actions All high touch areas were cleaned and audited to be ensure surfaces were still wet after completion of dwell time on 12/11/2020 Housekeeper #1 was educated by housekeeping account manager on ensuring cleaned surfaces are still wet after completion of dwell time on 12/8/2020. Identification of Others All high touch areas identified as potentially deficient. Systemic Changes Housekeeping contractor account manager educated housekeeping contractor employees on ensuring cleaned surfaces are still wet after completion of dwell time on 12/11/2020. Staff Development Coordinator educated clinical employees on ensuring cleaned surfaces are still wet after completion of dwell time on 12/03/2020. Executive Director educated business office, dietary, and other support	

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F 880	Continued From page 3 I256-LTR-env3-HRNC.pdf and retrieved on 11/20/20) showed "For Use as a One-Step Cleaner/Disinfectant Apply use solution to hard, non-porous environmental surfaces. To disinfect, all surfaces must remain wet for 10 minutes. Air Dry, wipe surfaces to dry and remove any residue, or rinse with potable water as necessary." c. Observation on 11/17/20 at 4:45 PM showed housekeeper #1 at no time stopped to ensure the surface of the handrails were visibly wet and remained wet for 10 minutes. In addition, the housekeeper sprayed the door handles and then immediately wiped them down with a cloth. d. Interview with the DNS on 11/18/20 at 3:54 PM revealed she was unaware the disinfectant required a 10 minute contact time to be effective against SARs-CoV-2. e. Review of CDC guidelines "Preparing for COVID-19 in Nursing Homes", dated 6/25/20 showed "Environmental Cleaning and Disinfection: Develop a schedule for regular cleaning and disinfection of shared equipment, frequently touched surfaces in resident rooms and common areas; Ensure EPA-registered, hospital-grade disinfectants are available to allow for frequent cleaning of high-touch surfaces and shared resident care equipment. Use an EPA-registered disinfectant from List N external icon on the EPA website to disinfect surfaces that might be contaminated with SARS-CoV-2. Ensure HCP (healthcare providers) are appropriately trained on its use."	F 880	employee's on ensuring cleaned surfaces are still wet after completion of dwell time on 12/11/2020. Therapy contractor's Interim Director of Rehab educated therapy contractor's employees on ensuring cleaned surfaces are still wet after completion of dwell time on 12/11/2020 Housekeeping contractor changed cleaner to Peroxide Multi Surface Cleaner and Disinfectant (EPA# 1677-238). Product was ordered 12/2/2020, and is expected at facility by 12/10/2020. Will implement change by 12/11/2020 or first business day after arrival or product. Will continue to train new employees using the CMS Infection Control Modules for Covid-19. Monitoring for Compliance High traffic areas to be audited by housekeeping contractor account representative for chemical still being present after dwell time specified by manufacturer daily for seven days, twice a week for 4 weeks, and then once a week for 4 weeks. Results of initial and ongoing audits will be presented at QAPI meeting monthly times three months with recommendations made as needed. Date of Compliance: December 14, 2020	