

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER / SUPPLIER / CLIA IDENTIFICATION NUMBER 265851	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 10/09/2020
NAME OF PROVIDER OF SUPPLIER SILVERSTONE PLACE		STREET ADDRESS, CITY, STATE, ZIP 2735 EAGLESON DR ROLLA, MO 65401	
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.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY**</p> <p>Based on observation, interview, and record review, the facility staff failed to follow infection control protocols, for Coronavirus Disease 2019 (COVID-19), when staff did not wear facemasks according to Centers for Disease Control and Prevention (CDC) guidance, while in the facility or perform hand hygiene as directed after touching their masks, and failed to maintain a social distance of at least six feet from each other. The facility census was 82. Review of the CDC's recommendation titled Core Practices, Implement Source Control Measures, dated 5/21/20, showed the following: -Health care professionals (HCP) should wear a facemask at all times while they are in the facility; -And these practices should remain in place even as nursing homes resume normal activities. Review of the CDC recommendation titled Preparing for Covid-19 in Nursing Homes, updated 6/5/20, showed the following: - The potential for asymptomatic Severe Acute Respiratory Syndrome, [MEDICAL CONDITION] 2 ([DIAGNOSES REDACTED]-CoV-2; [MEDICAL CONDITION] that causes COVID-19) transmission underscores the importance of applying prevention practices to all patients, including social distancing, hand hygiene, and surface decontamination; -And to protect patients and co-workers, HCPs should wear a facemask at all times while they are in a healthcare facility. 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 they are not to wear their facemask under their nose or mouth. Review of the CDC recommendation, titled Interim Infection Prevention and Control Recommendations for Healthcare Personnel During the Coronavirus Disease 2019 (COVID-19) Pandemic Infection Control Guidance, dated 7/15/20, showed the following: - Recommended routine infection prevention and control (IPC) practices during the COVID-19 pandemic are intended to apply to all patients, not just those with suspected or confirmed [DIAGNOSES REDACTED]-CoV-2 Infection; - Implement source control measures (refers to use of cloth face coverings or facemasks to cover a person's mouth and nose to prevent spread of respiratory secretions when they are talking, sneezing, or coughing): health care personnel (HCP) should wear a facemask at all times while they are in the health care facility; - Encourage physical distancing (maintaining six feet between people); - For HCP, the potential for exposure to [DIAGNOSES REDACTED]-CoV-2 is not limited to direct patient care interactions. Transmission can also occur through unprotected exposures to asymptomatic or pre-symptomatic co-workers or visitors in break rooms or other common areas. Review of the facility's social distancing policy, undated, showed staff are instructed to remain six feet apart, including on breaks, and while inside or outside of the building. Social distancing practices are to be maintained when appropriate and/or possible, in an effort to prevent the spread of COVID-19. Review of the facility's COVID-19 Team Member PPE - Facemask Policy and Procedure, dated 3/27/20, showed staff are instructed as follows: - This policy will remain in effect until the policy is updated or the date of the coronavirus crisis agency guidelines have been removed or recalled; - All staff members are to wear a respirator and other available masks during the performance of their duties; - Team members should exercise caution in adjusting or removing masks: carefully remove the mask without touching the outside; -When taking off the mask, avoid touching the outside of the mask as this part may be covered with germs; - Wash hands immediately after removing the mask; - The mask fits snugly over the face, covering the nose, mouth, and chin; - Try not to touch the mask once it is secured on your face, as frequent handling may reduce its protection; - And if you must touch the mask, wash your hands before and after touching the mask. 1. Observation on 10/8/20 at 11:35 A.M., showed four staff stood outside the nurses' station near the main dining room. Licensed practical nurse (LPN) A pulled his/her facemask under his/her mouth to speak to the three other staff. The staff were less than six feet apart from each other. Additional observation showed LPN A did not perform hand hygiene after he/she touched the front of his/her facemask with his/her bare hand. Observation on 10/8/20 at 11:45 A.M., showed Certified Nursing Assistant (CNA) B poured resident drinks for lunch. CNA B touched the front of his/her facemask with his/her bare hand and then touched a resident's cup. Further observation showed CNA B gave the cup to the resident, and the resident drank from the cup. CNA B did not perform hand hygiene after touching his/her facemask. Observation on 10/8/20 at 11:50 A.M., showed Certified Medication Technician (CMT) C propelled a resident in his/her wheelchair into the dining room for lunch. CMT C's facemask did not cover his/her nose and mouth. Observation on 10/8/20 at 11:50 A.M., showed CNA D assisted a resident with eating lunch. CNA D touched his/her facemask multiple times while assisting the resident. CNA D did not perform hand hygiene after he/she touched his/her facemask. Observation on 10/8/20 at 12:12 P.M., showed CMT C walked in and out of resident rooms and administered medication while his/her facemask did not cover his/her nose and mouth. Furthermore, CMT C pulled his/her facemask under his/her mouth to speak to staff and other personnel. CMT C did not perform hand hygiene after he/she touched his/her facemask. Observation on 10/8/20 at 12:30 P.M., showed Housekeeper E touched his/her facemask and then opened a soda bottle for a resident. Housekeeper E did not perform hand hygiene after he/she touched his/her facemask. Observation on 10/8/20 at 12:52 P.M., showed CMT C and CNA D walked out of the staff breakroom and into the hallway without a facemask, while residents were present in the hallway. CMT C and CNA D were less than six feet apart. Observation on 10/8/20 at 12:54 P.M., showed CNA F walked out of the bathroom and into the hallway without a facemask, while residents were present in the hallway. Observation on 10/8/20 at 12:57 P.M., showed CMT C, CNA D, CNA F, Cook G, and Dietary Aide H stood outside in the smoking area. The staff were not wearing masks, and they stood less than six feet apart. Observation on 10/8/20 at 1:03 P.M., showed the Human Resource Director (HRD) stood in the receptionist area with two other staff members. The HRD's facemask did not cover his/her nose and mouth. Observation on 10/8/20 at 1:06 P.M., showed the HRD and CNA B sat at a desk in the HRD's office and ate lunch. The HRD and CNA B did not wear a facemask and sat less than six feet apart. Further observation, showed the Minimum Data Set (MDS) Coordinator and the Housekeeping/Laundry Supervisor sat at a table in the HRD's office. The MDS Coordinator and the Housekeeping/Laundry Supervisor did not wearing a facemask and sat less than six feet apart. Additional observation at 1:20 P.M., showed the HRD sat at his/her desk without a facemask, and CNA B sat at the same desk and ate his/her lunch. The HRD and CNA B were less than six feet apart. Observation on 10/8/20 at 1:30 P.M., showed Cook G walked through the hallway and into the kitchen. Cook G stood at the kitchen counter with his/her phone. Cook G's facemask did not cover his/her nose and mouth. Additional observation showed another dietary staff stood less than six feet from Cook G. During an interview on 10/8/20 at 1:30 P.M., Cook G said facemasks are to be worn at all times in the facility, except in the staff breakroom and the smoking area. He/She said staff should not pull their facemask under their chin for any reason. Furthermore, he/she said the facility has a social distancing policy that states staff should be at least six feet apart whenever possible. He/She said the policy is applicable indoors and outdoors. Additionally, he/she said he/she has received training on the facility's facemask, hand hygiene, and social distancing policies. During an interview on 10/8/20 at 1:40 P.M., CMT C said staff should wear their facemask so it covers their nose and mouth. Staff must wear their facemask the whole time they are at work, except in the breakroom, bathroom, or outside. He/She said staff should not pull their facemask down for any reason, and if they touch their facemask, they should perform hand hygiene before touching something else. He/She said the facility's social distancing policy is to remain at least six feet apart,</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.

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F 0880 Level of harm - Minimal harm or potential for actual harm Residents Affected - Some	<p>(continued... from page 1)</p> <p>and this policy is for the residents, but staff should also try to do it. He/She said there is not enough room in the breakroom or smoking areas to be six feet apart. Furthermore, he/she said he/she received training on the facility's facemask, hand hygiene, and social distancing policies. During an interview on 10/8/20 at 1:49 P.M., LPN A said facemasks should be worn over the nose and mouth, and staff should not pull their facemask under their nose or mouth for any reason. He/She said staff must wear their facemask everywhere in the facility, but they can remove it outside and in the bathroom. Additionally, he/she said the facemask should be adjusted by the ear loops, and staff should perform hand hygiene after touching their facemask. He/She said staff should maintain a social distance of at least six feet apart whenever possible, whether they are indoors or outdoors. He/She said he/she received training on the facility's facemask, hand hygiene, and social distancing policies. During an interview on 10/8/20 at 2:18 P.M., the Director of Nursing (DON) said all staff have been trained on the facility's policies for facemasks, hand hygiene, and social distancing. Staff are expected to wear their facemask everywhere in the facility, except in the bathroom, alone in their office with the door shut, the breakroom, or outside. He/She said staff are expected to wear their facemask so it covers their nose and mouth, and should not pull down their facemask for any reason. He/She said staff should adjust their facemask by the ear loops and if staff touch their facemask they are to perform hand hygiene. Additionally, he/she said staff are to maintain a social distance of at least six feet apart whenever possible. He/She said there is not much space in the breakroom or in the smoking area, so those areas are limited to two or three staff at one time. During an interview on 10/8/20 at 3:45 P.M., the Assistant Administrator said all staff have received training on the facility's policies for facemasks, hand hygiene, and social distancing. He/She said staff are expected to wear their facemask so it covers their nose and mouth, and are expected to wear their facemask everywhere in the facility. Staff are expected to perform hand hygiene after touching or adjusting their facemask, and are not to remove or pull down their facemask for any reason. Additionally, he/she said staff are expected to maintain a social distance of at least six feet apart whenever possible, and this includes when staff are eating or smoking, or inside or outside.</p>		