

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER / SUPPLIER / CLIA IDENTIFICATION NUMBER 515131	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 06/18/2020
NAME OF PROVIDER OF SUPPLIER SISTERSVILLE CENTER		STREET ADDRESS, CITY, STATE, ZIP 201 WOOD STREET OPERATIONS, LLC SISTERSVILLE, WV 26175	
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 - Few	Provide and implement an infection prevention and control program. . Based on observation and staff interview, the facility failed to provide and maintain an infection prevention and control program designed to provide a safe, sanitary environment to help prevent the development and transmission of communicable diseases, including COVID-19, in the laundry area. The facility failed to provide a separation to prevent airflow cross-contamination of linens and residents personal clothing. This practice had the potential to affect a limited number of residents. Facility census: 62. Findings included: Observation of the laundry area on 06/18/20 at 10:15 AM, revealed the door between the soiled utility area and the clean area did not have a separation to prevent air flow from the soiled to clean side. The door was propped open by a wedge, and air flow was noted into the clean side of the room from the soiled side. Soiled items in bins were observed and items were being washed at this time. In addition, a staff member was observed to be folding clean clothes/linens from the dryer. An interview on 06/18/20 at 10:15 AM, with Housekeeping (HK) Employee #2, verified the door was completely open, secured with a wedge, and was allowing air to flow into the clean area from the soiled side. Further, HK Employee #2 stated it had been hot and that allowed some air to flow into the area where clothes were being folded, but knew the door was always supposed to be closed. An interview on 06/18/20 at 10:40 AM, with the Administrator, confirmed the expectation in the laundry area was to maintain separation between the soiled and clean side of the laundry room by a closed door to prevent cross contamination and verified having the door propped open between the clean and soiled side was not an acceptable practice. .		

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.