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SEP 29 2020
Healthcare Licensing and Surveys

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STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	BH004	A. BUILDING: _____ B. WING _____	09/03/2020

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
WILLOW CREEK HOMES OF GILLETTE	2300 HARDER DRIVE GILLETTE, WY 82718

(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) COMPLETE DATE
S 000	Opening Comments A COVID-19 focused Infection control survey was conducted by Healthcare Licensing and Surveys on 9/1/20 through 9/3/20. Rules and Regulations utilized for this survey are as follows: Rules and Regulations for Licensure of Boarding Homes, Chapter 7, effective 12/10/1998. Rules and Regulations for Program Administration for Boarding Homes, Chapter 8, effective 12/11/1998.	S 000		
S4008	Ch 8 Sec 5 (b)(ii) Management (b) Staffing. (ii) No person with a reportable communicable, contagious or infectious disease shall be employed. This State Rule and Regulation is not met as evidenced by: Based on observation, staff interview, review of Centers for Disease Control (CDC) guidance, and policy and procedure review, the facility failed to ensure staff and visitors to the facility were screened for symptoms of COVID-19. The census was 6. The findings were: Review of the CDC article titled "Considerations for Retirement Communities and Independent Living Facilities" found at https://www.cdc.gov/coronavirus/2019-ncov/community/retirement/considerations.html (updated 7/31/20) showed "... CDC offers the following considerations for ways in which administrators of retirement communities and independent living	S4008		

This POC was discussed with Administrator Kristi on ~~10:15 AM~~ 10/15/20 @ 10:22 AM and accepted with a compliance date of 10/28/20. J S, RN

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S4008	Continued From page 1 facilities can help protect residents, workers, visitors, and communities and slow the spread of COVID-19...If feasible, conduct daily health checks or ask residents, workers, volunteers, and visitors to conduct self-checks." The following concerns were identified: 1. Observation on 9/1/20 at 3:18 PM showed an unidentified visitor entered through the front door and into the common kitchen and dining area without a facemask on. The visitor was not screened or checked for a temperature. 2. Observation on 9/1/20 at 3:28 PM showed employee #1 entered through the front door of the facility, took her own temperature, and was not screened by another employee. She recorded her temperature on a log posted on the refrigerator. Interview with the employee at that time revealed " ...we record [temperatures] here since everyone gets their temperature taken." Review of the log showed only 1 of 3 employees working on 9/1/20 had logged temperatures for that day. 3. Interview with the facility administrator on 9/1/20 at 4:06 PM revealed " ...we don't allow any outside visitors to come in, or let people just walk in." 4. Review of documentation dated 8/19/20 titled 'Willow Creek Communities COVID-19 Temporary Risk Management Procedures' showed the facility " ...will be screening any and all people and staff who enter our facility ...All visitors shall wear a mask and gloves while in our facility..."	S4008		
S4066	Ch 8 Sec 10 (g) Food Service and Nutrition	S4066		

9/28/20

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S4066	Continued From page 2 (g) The kitchen and dining area shall be kept clean, sanitary and provided with suitable furniture and adequate space to comfortably seat all residents. This State Rule and Regulation is not met as evidenced by: Based on observation, staff interview, review of Centers for Disease Control (CDC) guidance, and policy and procedure review, the facility failed to ensure residents were encouraged to social distance and wear face masks to prevent the transmission of COVID-19. The census was 6. The findings were: Review of the CDC article titled "Considerations for Retirement Communities and Independent Living Facilities" found at https://www.cdc.gov/coronavirus/2019-ncov/community/retirement/considerations.html (updated 7/31/20) showed "... CDC offers the following considerations for ways in which administrators of retirement communities and independent living facilities can help protect residents, workers, visitors, and communities and slow the spread of COVID-19. These considerations are for administrators of retirement communities and independent living facilities that are not healthcare facilities ...Recommend and reinforce use of masks among residents, workers, volunteers, and visitors. Masks should be worn whenever feasible and are most essential in times when social distancing is difficult ... Encourage social distancing by asking workers, residents, volunteers, and visitors to stay at least 6 feet (2 meters) apart both in common areas and individual residences ...Arrange seating of chairs and tables to be least 6 feet apart during shared meals or other events ..." The following concerns were identified:	S4066	Em 9/28/20	

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S4066	Continued From page 3 1. Observation upon entry at on 9/1/20 at 2:48 PM showed four female residents seated within arms-reach of each other around the dining room table. None of the residents were wearing face masks. Additional observation showed a male resident in the common living room was also not wearing a mask. 2. Interview with the facility administrator on 9/1/20 at 4:06 PM revealed " ...we don't screen [the residents] or make them wear masks since they don't go anywhere. We just keep an eye on them and have them wash their hands to stay safe." 3. Review of the "Willow Creek Communities COVID-19 Temporary Risk Management Procedures" dated 8/19/20 showed the facility " ...will be screening any and all people and staff who enter our facility ...All visitors shall wear a mask and gloves while in our facility ...We will offer alternative meal times in addition to social distanced seating arrangements for our residents if they choose to eat in the dining room instead of their room."	S4066		

Em 9/28/20

Willow Creek
ElderCare Communities

Gillette

Corporate office Submission of this response and Plan of Correction is NOT a legal admission that a deficiency exists or, that this Statement of Deficiencies was correctly cited, and is also NOT to be construed as an admission against interest by Willow Creek Community, or any employees, agents, or other individuals who drafted or may be discussed in the response or Plan of Correction. In addition, preparation and submission of this Plan of Correction does NOT constitute an admission or agreement of any kind by Willow Creek Community of the truth of any facts alleged or the correctness of any conclusions set forth in this allegation by the survey agency.

ID Prefix Tag

S4008 Ch 8 Sec 5 (b)(ii) Management

1. A medication delivery driver arrived at our facility to drop off resident medications. The delivery driver who is normally met at the door by staff, entered our facility to give staff the delivery. Staff stopped him at the kitchen, 15 ft form the door and escorted him to the entrance to be screened as per our rules. Staff reported a temp of 97' and no signs or symptoms of COVID-19 or respiratory illness.

2. For additional security measures, we will follow the recommendations of the surveyor and lock our entrances so no person can enter our facility without employees opening the door and immediately conducting COVID screening.

3. Employees will continue to screen all visitors and workers for signs and symptoms of respiratory illness and COVID-19. We will continue our daily logs of staff and visitors' temperatures. We will additionally require a second set of initials on our screening form to give a 3rd party validation for non-biased screening.

4. Manager and Corporate officer will review our training for COVID-19 with all personnel.

5. Corporate officer and Manager will audit documentation and screening practices weekly for 30 days.

6. Date of compliance 10/28/20

Prefix tag S4066 Ch 8 sec 10 (g) Food Services and Nutrition

1. Staff will follow procedures for dining with social distancing, alternate dining times & other dining arrangements.
2. Corporate officer and manager will additionally conduct a COVID-19 training for dining & social distancing policies with staff, recommended seating arrangements & split dining times that better suite social distancing recommendations.
3. Manager will review with residents, enhanced seating and dining arrangements that better suite social distancing and alternate dining time recommendations.
4. Dining tables have been arranged and marked for social distancing as recommended and split dining times or meals in rooms offered to all residents to respect their freedom of choice.
5. Staff will continue to screen residents daily verbally for signs and symptom as well as a temp check.
6. Corporate officer and Manager will review training and dining services in 1 week from training.
7. Corporate officer and Manager will monitor & document meal service for social distancing again each week for 1 month.
8. Date of compliance 10/28/2020

Eric McMillan, President: Eric McMillan Date: 9/28/20