

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>IL6004212</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>11/17/2020</b>
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NAME OF PROVIDER OR SUPPLIER  <b>ILLINI HERITAGE REHAB &amp; HC</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>1315B CURT DRIVE CHAMPAIGN, IL 61820</b>
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(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	Initial Comments  Covid-19 Focused Infection Control Survey:	S 000		
S9999	Final Observations  Statement of Licensure Violation:  300.610a) 300.696a) 300.696b) 300.696c)7) 300.1210b) 300.3240a)  Section 300.610 Resident Care Policies  a) The facility shall have written policies and procedures governing all services provided by the facility. The written policies and procedures shall be formulated by a Resident Care Policy Committee consisting of at least the administrator, the advisory physician or the medical advisory committee, and representatives of nursing and other services in the facility. The policies shall comply with the Act and this Part. The written policies shall be followed in operating the facility and shall be reviewed at least annually by this committee, documented by written, signed and dated minutes of the meeting.  Section 300.696 Infection Control  a) Policies and procedures for investigating, controlling, and preventing infections in the facility shall be established and followed. The policies and procedures shall be consistent with and include the requirements of the Control of Communicable Diseases Code (77 Ill. Adm. Code	S9999	<p><b>Attachment A</b> <b>Statement of Licensure Violations</b></p>	

Illinois Department of Public Health  
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE \_\_\_\_\_ TITLE \_\_\_\_\_ (X6) DATE \_\_\_\_\_

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S9999	<p>Continued From page 1</p> <p>690) and Control of Sexually Transmissible Diseases Code (77 Ill. Adm. Code 693). Activities shall be monitored to ensure that these policies and procedures are followed.</p> <p>b) A group, i.e., an infection control committee, quality assurance committee, or other facility entity, shall periodically review the results of investigations and activities to control infections.</p> <p>c) Each facility shall adhere to the following guidelines of the Center for Infectious Diseases, Centers for Disease Control and Prevention, United States Public Health Service, Department of Health and Human Services (see Section 300.340):</p> <p>7) Guidelines for Infection Control in Health Care Personnel</p> <p>Section 300.1210 General Requirements for Nursing and Personal Care</p> <p>b) The facility shall provide the necessary care and services to attain or maintain the highest practicable physical, mental, and psychological well-being of the resident, in accordance with each resident's comprehensive resident care plan. Adequate and properly supervised nursing care and personal care shall be provided to each resident to meet the total nursing and personal care needs of the resident.</p> <p>Section 300.3240 Abuse and Neglect</p> <p>a) An owner, licensee, administrator, employee or agent of a facility shall not abuse or neglect a resident. (Section 2-107 of the Act)</p> <p>These Requirements are not met as evidenced</p>	S9999		
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S9999	<p>Continued From page 2</p> <p>by:</p> <p>Identified failures required more than one deficient practice statement.</p> <p>A.) Based on observation, interview and record review the facility failed to follow facility policy and local health department guidance to restrict employees with COVID-19 (Human Coronavirus infection) symptoms from working and exposing residents and employees to infection. This failure resulted in all residents residing in the facility being unnecessarily exposed to an infectious disease by symptomatic employees. The facility also failed to follow facility policy and local health department guidance to promptly separate symptomatic COVID-19 (Human Coronavirus infection) infected residents away from non-infected residents for four of 35 residents (R4, R7, R8, and R11) reviewed for infection control in the sample of 35.</p> <p>Findings include:</p> <p>The facility's COVID-19 Control Measures policy revised 10/1/20 documents to implement droplet and contact precautions when a resident is suspected of having fever, respiratory symptoms, sore throat, nausea, vomiting, diarrhea, extreme fatigue, muscle pain, or loss of taste and/or smell. This policy documents to place symptomatic residents in a private room until test results are received, and if a private room is not available cohort residents who have tested positive for COVID-19. This policy documents to wear a facemask/N95, gloves, gown, and goggles or face shields when entering a droplet precaution isolation room. This policy documents "Restrictions for Health Care Personnel 1. Educated all employees if having symptoms of a</p>	S9999		
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S9999	<p>Continued From page 3</p> <p>respiratory infection, fever, sore throat, nausea, vomiting, diarrhea, extreme fatigue, muscle pain, loss of taste and/or smell not to report to work and to contact their regular provider. 2. Initiate screening at entryway of facility for symptoms of COVID-19 and/or fever." This policy documents that residents who are cared for by a healthcare professional with known or suspected COVID-19 should be restricted to their rooms and cared for using all the recommended COVID-19 PPE (Personal Protective Equipment) for 14 days following the last known exposure and tested if they develop symptoms.</p> <p>The facility's COVID-19 Cohorting of Residents policy dated 8/26/20 documents residents with COVID-19 should be transferred to the facility's designated COVID-19 area. This policy documents residents who have had exposure should not room share with residents who are unexposed. This policy documents residents who have had exposure should be transferred to a private observation room, or room share with other exposed residents within a designated observation area.</p> <p>The facility's undated floor plan documents North hall rooms are designated COVID-19 isolation rooms, East hall rooms E1 and E2 are the designated observation rooms, East hall rooms E3-E5 and South hall rooms S1-S16 are Zone 2 (asymptomatic unit.)</p> <p>a.)1.) On 11/4/20 at 8:47 AM there was a sign posted at the entrance to the facility documenting the facility had positive COVID-19 in the facility.</p> <p>On 11/5/20 at 9:29 AM V4 Certified Nursing Assistant (CNA) stated V4 worked on the south/east halls on 11/1/20 from 10:00 PM until</p>	S9999		
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S9999	<p>Continued From page 4</p> <p>2:45 AM. V4 stated V4 had not been feeling well with symptoms of fatigue, chills, nausea, and diarrhea prior to reporting to work on 11/1. V4 stated V4 reported V4's symptoms to V5 Registered Nurse (RN) at the beginning of V4's shift, and V4 had documented V4's symptoms on the employee symptom screening form. V4 stated V5 asked V4 to continue working that night and V5 told V4 to take Tylenol (fever reducing medication.) V4 stated V5 sent V4 home around 2:45 AM after V4 had vomited twice. V4 confirmed V4 provided direct resident care to asymptomatic residents who resided on the south hall (R1-R4, R7-R14, R16, R17) and residents (R19-R21) who resided in the east rooms. V4 stated on 11/1 V4 was not wearing any eye protection while providing care to the residents. V4 stated V4 also worked on the COVID-19 unit on 11/3/20 at 10:00 PM with symptoms of nausea, and V4 reported V4's symptoms to V2 DON. V4 stated V2 sent V4 home around 11:00 PM when V4's COVID-19 positive test results were reported to the facility.</p> <p>On 11/5/20 at 12:56 PM V5 RN stated V4 had reported to V5 on 11/1/20 that V4 "wasn't feeling well," and was fatigued and tired. V5 stated V5 gave V4 Tylenol to take. V5 stated V5 sent V4 home after V4 vomited twice. V5 stated if staff report symptoms of COVID-19 they are to be sent home.</p> <p>V4's Timecard documents V4 worked on 11/1/20 from 10:15 PM until 2:45 AM, and 11/3 from 10:15 PM until 11:15 PM. V4's Employee, Vendor Consultant COVID Screening Questionnaire documents on 10/31 V4 had no symptoms of COVID-19. V4's Questionnaire does not document symptom screening was completed on 11/1/20, and on 11/3 V4's temperature is</p>	S9999		

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S9999	<p>Continued From page 5</p> <p>documented but the symptom screening was left blank. V4's Nasopharyngeal Swab test collected on 11/2/20 and reported 11/3 at 11:03 PM documents V4 was positive for COVID-19.</p> <p>The facility's Daily Assignments dated 10/30/20 and 11/3/20 document V4 worked night shift and documents "iso (isolation)" next to V4's name. The facility's Daily Assignment dated 11/1/20 documents V4 worked night shift with V5 and does not document "iso" next to V4's name.</p> <p>The facility's Room Roster dated 11/3/20 documents R1-R4, R7-, R14, R16, and R17 resided on the South hall and R19-R21 resided on the East hall.</p> <p>The facility's undated Covid Positive Employees list documents a total of 15 employees have tested positive for COVID-19 since 10/14/20. The facility's undated Covid Positive Residents list documents a total of 25 residents have tested positive for COVID-19 since 10/21/20.</p> <p>R1-R4's COVID-19 tests dated as collected 10/26/20 and reported 10/28 documents R1-R4 were negative for COVID-19. R1-R3's and R7-R9's COVID-19 tests dated as collected 11/2/20 and reported 11/3 documents R1-R3 and R7-R9 tested positive for COVID-19. R10's, R11's, R13's, R14's, and R17-R20's COVID-19 tested dated as collected 11/2/20 and reported on 11/3 document R10, R11, R13, R14, and R17-R20 tested negative for COVID-19.</p> <p>On 11/5/20 at 10:12 AM V2 Director of Nursing (DON) stated the facility follows CDC (Centers for Disease Control and Prevention) and the state and local health departments' guidance for COVID-19. V2 stated employees are to complete</p>	S9999		

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S9999	<p>Continued From page 6</p> <p>the COVID-19 symptom screening questionnaire at the beginning of their shift. V2 stated if employees have any symptoms of COVID-19 they are not allowed to work and are given instructions to be tested and follow up with their physician. V2 stated the employee is to remain off work until COVID-19 test results are received. V2 stated if the test is negative and COVID-19 symptoms have improved the employee can return to work. V2 stated V2 was not aware of V4's COVID-19 symptoms on 11/1 and confirmed V4 should not have been allowed to work. V2 stated V2 worked with V4 on 11/3, and V4 told V2 that V4 had an upset stomach and believed it was due to something V4 ate. V2 confirmed V4 was not sent home from work until around 11:00 PM on 11/3 when V2 received V4's positive COVID-19 test result. V2 stated the facility tries to dedicate employees to work on the COVID-19 unit, and employees who work on the South Hall provide care to all residents residing on the East and South halls. On 11/6/20 at 2:38 PM V2 stated the facility's schedule documents "iso" next to the employee's name who is assigned to work the COVID-19 isolation unit, and if the employee does not have "iso" next to their name they are assigned to the South/East rooms.</p> <p>On 11/6/20 at 2:48 PM V1 ,Administrator stated V1 was unable to locate any additional documentation to provide for V4's COVID-19 symptom screening questionnaires that were requested for 11/1-11/3/20. V1 stated the room roster dated 11/3 is the same for 11/1 and 11/2. V1 stated R12 and R16 who resided on the South hall have also tested positive for COVID-19.</p> <p>On 11/6/20 at 11:47 AM V8 (County Health Dept. COVID-19 Lead Investigator) stated V8 has noticed an influx in COVID-19 positive cases in</p>	S9999		
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S9999	<p>Continued From page 7</p> <p>both residents and staff of the facility. V8 stated V8 has been providing COVID-19 guidance from CDC and IDPH (Illinois Department of Public Health) regularly to the facility. V8 stated the facility should be conducting employee COVID-19 symptom screening at the beginning and middle of the shifts. V8 stated if an employee has COVID-19 symptoms, they should not be allowed to work, and the employee should be sent to be tested for COVID-19. V8 stated employees should be wearing an N95 mask and face shield or goggles when providing care to asymptomatic residents during an outbreak. V8 stated that allowing V4 to work with COVID-19 symptoms (who tested positive on 11/3) and provide direct resident care unnecessarily exposing unexposed staff and residents would contribute to the spread of COVID-19 within the facility.</p> <p>a.)2.) On 11/4/20 at 9:09 AM R4 was in R4's room located on the South hall. There was a sign on R4's door indicating R4 was on isolation and an isolation cart was outside of R4's room. R11's room was located on the south hall with the door closed, there was no isolation signage posted or an isolation cart locate outside of R11's room.</p> <p>On 11/5/20 at 8:15 AM V6 Licensed Practical Nurse stated R7 returned from the hospital and was placed in a room with R4. V6 stated R7 had a cough on 11/2 and 11/3 during second shift when V6 worked. V6 confirmed R7 and R4 shared a room until 11/3. V6 stated V6 had given R7 a mask to wear, but R7 refused to wear the mask. V6 stated the nurses were monitoring residents for elevated temperatures, but V6 told the nurses that we (nurses) should be monitoring for other COVID-19 symptoms besides a fever. V6 stated R8 and R11 shared a room until 11/3 and were not on isolation.</p>	S9999		
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S9999	<p>Continued From page 8</p> <p>The facility's Room Roster dated 11/3/20 documents R4 and R7 share a room and R8 and R11 share a room.</p> <p>R7's Nurse's Note dated 10/30/20 at 1:00 PM documents R7 stayed in bed and had a nonproductive cough. R7's nursing note dated 11/3/20 documents R7 was coughing with liquids. R7's COVID-19 test with a collected date 11/2 and reported date 11/3/20 documents R7 tested positive for COVID-19. R7's Physician Orders dated 11/1-11/30/20 documents R7 admitted to the facility on 10/27/20 into the same room as R4. There is no documentation in R7's medical record that R7 was transferred to an observation room or placed on contact and droplet precautions.</p> <p>R4's Physician Orders dated 11/1-11/30/20 documents R4 has diagnoses of Pneumonia, Congestive Heart Failure, and Diabetes Mellitus. R4's Nurse's Note dated 10/28/20 at 5:30 PM documents R4 readmitted to the facility into the same room as R7. This note documents R4 was treated at the hospital for Aspiration Pneumonia. R4's Nursing Note dated 11/1 at 7:00 PM documents R4 had wheezing bilaterally to R4's lungs. R4's COVID-19 test with collection date 11/2/20 and reported date 11/3/20 documents R4 is negative for COVID-19.</p> <p>R8's COVID-19 assessments document as follows: on 10/28/20 and 10/29/20 R8 had increased lethargy. On 10/30/20 and 11/1/20 R8 had a cough. On 11/1/20 R8 had wheezing to R8's lungs. On 11/2/20 at 1:35 PM, R8 had a nonproductive cough and diminished lung sounds. On 11/3/20 R8 had a nonproductive cough and an oxygen saturation (measurement of oxygen level in the blood) of 85 percent. R8's</p>	S9999		

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S9999	<p>Continued From page 9</p> <p>COVID-19 test with collected date 11/2 and reported 11/3 at 11:05 PM documents R8 was positive for COVID-19. There is no documentation in R8's medical record that R8 was transferred to an observation room or placed on droplet/contact isolation.</p> <p>R11's Physician Orders dated 11/1-11/30/20 documents R11 has diagnoses of Alzheimer's Disease, Hypertension, and Chronic Obstructive Pulmonary Disease. R11's medical record documents R11 had no observed or reported symptoms of COVID-19. R11's COVID-19 test with collected date 11/2 and reported date 11/3 documents R11 tested negative for COVID-19.</p> <p>On 11/5/20 at 10:12 AM V2 ,DON ,stated V2 worked night shift on 11/3 and received R7's and R8's COVID-19 positive test results. V2 stated R7 and R8 were transferred to rooms located on the COVID-19 unit during the night shift on 11/3. V2 confirmed R7 had been sharing a room with R4, and R8 had been sharing a room with R11 prior to 11/3. V2 stated V2 was not aware that R7 or R8 had COVID-19 symptoms prior to testing positive on 11/3. V2 stated nurses are to report to V2 when residents have COVID-19 symptoms, and the symptomatic residents are to be placed on droplet/contact isolation in a private room. V2 confirmed R4 and R11 would be considered to be exposed to COVID-19 and should also be placed on contact/droplet precautions.</p> <p>On 11/6/20 at 2:48 PM V1 stated the room roster dated 11/3/20 is the same for 11/1 and 11/2. V1 stated R12 and R16 who resided on the South hall have also tested positive for COVID-19.</p> <p>On 11/6/20 at 11:47 AM V8 County Health Dept. COVID-19 Lead Investigator stated V8 has</p>	S9999		
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S9999	<p>Continued From page 10</p> <p>noticed an influx in COVID-19 positive cases in both residents and staff of the facility. V8 stated V8 has been providing COVID-19 guidance from CDC and IDPH (Illinois Department of Public Health) regularly to the facility. V8 stated the facility should be monitoring residents for COVID-19 symptoms and residents who have COVID-19 symptoms should be housed in a separate location away from residents who are COVID-19 negative and placed on isolation. V8 stated residents that shared a room with a COVID-19 positive resident would be exposed and should be transferred to a location away from COVID-19 negative residents and placed on isolation.</p> <p>The Employee, Vendor Consultant COVID Screening Questionnaire for V28 ,CNA, documents on 11/11/20 at 6:00 AM and 10:00 AM, and 11/12/20 at 6:00 AM V28 had COVID-19 symptoms of new or worsening cough, sore throat, headache, new loss of taste/smell, and runny nose/nasal drainage. V28's COVID Screening Questionnaire documents V28 had muscle pain on 11/12/20 at 6:00 AM. The The Employee, Vendor Consultant COVID Screening Questionnaire for V29 CNA documents on 11/11/20 at 10:00 PM V29 had COVID-19 symptom of sore throat. The Employee, Vendor Consultant COVID Screening Questionnaire for V6 Licensed Practical Nurse (LPN) documents on 11/11/20 at 8:00 PM and 11/12/20 at 2:00 PM V6 had COVID-19 symptoms of runny nose or nasal drainage. The Employee, Vendor Consultant COVID Screening Questionnaire for V27 LPN documents COVID-19 symptom screening was completed on 11/8-11/10/20, but does not document COVID-19 symptom screening was completed for 11/11/20.</p>	S9999		
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STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>IL6004212</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>11/17/2020</b>	
NAME OF PROVIDER OR SUPPLIER  <b>ILLINI HERITAGE REHAB &amp; HC</b>		STREET ADDRESS, CITY, STATE, ZIP CODE <b>1315B CURT DRIVE CHAMPAIGN, IL 61820</b>		
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S9999	<p>Continued From page 11</p> <p>V28's Time Card documents V28 worked on 11/11/20 from 6:00 AM until 2:00 PM and on 11/12/20 at 6:00 AM. V29's Time Card documents V29 worked on 11/11/20 from 10:15 PM until 6:00 AM on 11/12/20. V6's Time Card documents V6 worked on 11/11/20 from 2:00 PM until 10:30 PM. V27's Time Card documents on 11/11/20 V27 punched in at 2:00 PM. The facility's Daily Assignment dated 11/11/20 documents V28 worked first shift on the south hall (where asymptomatic and COVID-19 negative residents reside), V6 worked second shift on the south hall, V27 worked second shift on the north hall, and V29 worked third shift on the south hall. The facility's Daily Assignment dated 11/12/20 document V28 was scheduled to work first shift on the north hall and V6 was scheduled to work 2nd shift on the south hall.</p> <p>The facility's Room Roster dated 11/12/20 documents R19 and R21 reside on the east hall, and R4, R6, R14, R17, R24-R26, and R29 reside on the south hall.</p> <p>On 11/12/20 at 11:50 AM V10,LPN stated V10 worked with V28 on first shift on 11/11/20. V10 stated V28 provided direct resident care on the south/east halls on 11/11, and on the north hall this morning (11/12/20.) V10 stated V28 left the facility sometime this morning after V28 received a phone call that V28's child was ill. V10 stated V28 had not reported V28's symptoms to V10 on 11/11 and 11/12/20. V2 DON stated V2 was not aware that V28 had COVID-19 symptoms on 11/11 and 11/12. Both V2 and V10 stated that V28 should not have been allowed to work in the facility with COVID-19 symptoms. On 11/12/20 at 12:55 PM V1 Administrator stated V28 had worked (today) (11/12) and left the facility</p>	S9999		

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S9999	<p>Continued From page 12</p> <p>between 8:30 AM and 9:00 AM.</p> <p>On 11/12/20 at 1:58 PM V2 stated employees conduct self-screening for COVID-19 symptoms and complete the screening questionnaire at the beginning of their shift. V2 stated the forms are not turned into anyone, and they are placed in the binder at the nurse's station. V2 stated V1 is responsible for reviewing employee COVID-19 symptom screening. V2 stated V2 was unable to locate V27's COVID-19 symptom screening questionnaire for 11/11/20. On 11/12/20 at 11:05 AM V1 confirmed V1 had not reviewed COVID-19 symptom screening questionnaires dated 11/11 and 11/12/20 for V28, V27, V29, and V6. On 11/12/20 at 3:25 PM V1 verified between 11/11 and 11/12/20 V27-V29, and V6 had documented symptoms of COVID-19 and worked in the facility providing resident care while having symptoms of COVID-19. V1 stated that part of the problem may be that staff are self screening for COVID-19 symptoms, and the facility will need to adjust their policy for conducting employee COVID-19 symptom screening.</p> <p>B) Based on observation, interview, and record review the facility failed to ensure an employee was properly wearing a face covering to contain potential respiratory pathogens. This failure has the potential to affect all residents residing in the facility. The facility also failed to implement Transmission Based Precautions for a resident exposed to COVID-19, ensure employees and visitors apply and remove Personal Protective Equipment (PPE), properly store isolation garbage and linen containers, post isolation signage, and complete COVID-19 symptom monitoring per the facility's policy for 24 of 35</p>	S9999		

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S9999	<p>Continued From page 13</p> <p>residents (R1-R8, R10, R18, R22-R35) reviewed for infection control in the sample of 35.</p> <p>Findings include:</p> <p>The facility's COVID-19 Control Measures policy revised 10/1/20 documents when a resident is placed on Contact or Droplet Precautions signage will be posted on the door. This policy documents staff will remove PPE and perform hand hygiene when leaving the resident's room and after direct contact with potentially contaminated surfaces. This policy documents for contact precautions wear gloves and a gown if potentially coming into contact with contaminated surfaces in the resident's room, and for droplet precautions wear a facemask/N95, gloves, gown, goggles or face shields when entering the resident's room. This policy documents to obtain resident vital signs and pulse oximetry twice daily, and residents will be monitored for symptoms of COVID-19 including fever, cough, shortness of breath, sore throat, nausea, vomiting, diarrhea, extreme fatigue, muscle pain, and loss of taste/smell.</p> <p>The facility's Contact Precautions policy reviewed on 12/7/18 documents "Resident Transport: Limit the movement and transport of the resident from the room to essential purposes only." The facility's Droplet Precautions policy reviewed on 12/7/18 documents "Resident Transport: Limit the movement and transport of the resident from the room to essential purposes only. If transport or movement is necessary, minimize resident dispersal of droplets by masking the resident and follow the cough Hygiene Etiquette Protocol."</p> <p>The facility's Visitation Guidelines dated 10/27/20 documents "Purpose: To provide different means of visitation based on the facility's structure the</p>	S9999		
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S9999	<p>Continued From page 14</p> <p>facility will restrict indoor visitation based on the facility's structure and residents' needs, utilizing the Core Principles and best practices to reduce the risk of COVID-19 transmission." This policy documents Core Principles include hand hygiene and use of Alcohol Based Hand Rub, face coverings/masks, social distance of at least 6 feet, and provide education to visitors on infection control precautions. This policy documents that visitors should be monitored for compliance with following the facility's Core Principles, wear required PPE during the visit, and be instructed on the proper disposal of PPE and hand hygiene before and after the visit. This policy documents visitors should go directly to the resident room and not walk around different hallways in the facility. This policy documents "The facility with the cooperation of the visitor can allow personal contact during a visit only if it can be done following appropriate infection prevention guidelines and for a limited amount of time (i.e. (for example) N95, gown, gloves, face shields/goggles.)"</p> <p>b.1) On 11/4/20 at 1:55 PM V16 Cook was working in the kitchen. V16 was wearing a surgical mask below V16's nose, only covering V16's mouth. V16 confirmed V16's mask was below V16's nose, and stated if V16 wears the mask covering both V16's nose and mouth it makes it hard for V16 to breathe.</p> <p>On 11/5/20 at 10:12 AM V2 DON stated nondirect care staff such as kitchen staff should be wearing surgical masks covering both their nose and mouth. V2 stated V16 has been told before to wear V16's mask covering V16's nose and mouth.</p> <p>The Daily Roster dated 11/4/20 documents 32</p>	S9999		
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S9999	<p>Continued From page 15</p> <p>residents reside in the facility.</p> <p>b.2) The facility's undated Covid Positive Residents list documents R3, R5-R8, R18, and R22-R35 tested positive for COVID-19 between 10/21/20 and 11/2/20.</p> <p>The facility's Daily Roster dated 11/4/20 documents R5, R6, R18, and R22-R35 reside on the North Hall, the facility's designated COVID-19 unit.</p> <p>On 11/4/20 at 8:47 AM there were COVID-19 unit signs posted on the double doors to the facility's North hall. On 11/4/20 at 12:12PM V25 (R18's Family Member) was standing in the hallway of the COVID-19 unit wearing a gown, gloves, goggles, and a surgical mask over top of a cloth mask. V25 was talking to R3 and R5 in the hallway and standing within 6 feet of R3 and R5. On 11/4/20 at 12:20 PM V25 left the COVID-19 unit while still wearing the (potentially contaminated) surgical/cloth masks, gloves, and gown worn on the COVID-19 unit and in R18's room. V25 stated V25 was visiting R18 and stated the facility had not provided education to V25 on when to change PPE or perform hand hygiene. V25 stated V25 was wearing the PPE that the facility had given to V25 and that V25 was not sure when V25 was suppose to remove V25's PPE. V25 proceeded to the exit of the facility and was instructed by the surveyor to remove V25's PPE and perform hand hygiene.</p> <p>On 11/4/20 at 12:05 PM V18 CNA (Certified Nursing Assistant) was working on the North hall. V18 was going in and out of resident rooms while wearing V18's goggles (eye protection PPE) on top of V18's head. V18 was observed leaving a resident room wearing a gown, gloves, N95</p>	S9999		
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S9999	<p>Continued From page 16</p> <p>(respirator mask PPE), and surgical mask to obtain items from the clean linen cart located in the hallway. V18 did not change gloves and perform hand hygiene upon leaving the resident's room, prior to obtaining items from the cart. On 11/4/20 at 12:10 PM V26 CNA was wearing a gown, N95 mask, surgical mask, gloves, and goggles on the North hall. V26 was observed leaving a resident room wearing gloves, and carrying supplies into another resident room while wearing the same pair of (potentially contaminated) gloves. V18 left a resident room carrying trash with gloved hands into resident room N15. On 11/4/20 at 12:25 PM V18 was passing meal trays into resident rooms on the North hall. V18 did not change V18's contaminated gloves and perform hand hygiene between entering each resident rooms. V18 then used the phone located on the wall while wearing the same pair of gloves used to pass meal trays. V26 carried a bag of garbage while wearing gloves into room N15, and left the room without changing gloves or completing hand hygiene prior to entering another resident room.</p> <p>On 11/4/20 at 12:18 PM V18 stated V25 was visiting R18 who was actively dying. V18 stated any staff or visitors on the COVID-19 unit are to wear a gown, gloves, goggles, and a surgical mask over top of an N95 mask. V18 stated the North hall's isolation soiled linen and garbage containers are located in the same room where R1 and R35 reside.</p> <p>On 11/5/20 at 10:12 AM V2 DON (Director of Nursing) stated the facility has not been allowing indoor family visits, except for residents who are actively dying. V2 stated visitors are to call the facility to schedule a visit. V2 stated visitors should be instructed to come to a certain door,</p>	S9999		
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S9999	<p>Continued From page 17</p> <p>given gown, gloves, N95 mask, surgical mask, and either a face shield or goggles, and should be instructed on to remove PPE and perform hand hygiene upon leaving the COVID-19 unit. V2 stated staff working on the COVID-19 unit should wear a surgical mask covering an N95 mask, gown, goggles or face shield, and gloves into resident rooms and when on the unit. V2 stated staff should be changing gloves and performing hand hygiene between each resident and upon leaving a resident room. V2 stated isolation garbage and soiled linen containers on the COVID-19 unit should be stored near the double door entrance to the unit, and V2 was not aware that the soiled linen and garbage containers were located in a room where residents reside.</p> <p>On 11/6/20 at 11:47 AM V8 County Health Department COVID-19 Lead Investigator stated the facility has been advised against allowing indoor family visits. V8 stated any staff or visitor on the COVID-19 unit should be wearing an N95 mask, eye protection, gown and gloves and all PPE should be removed upon leaving the unit and hand hygiene performed. V8 stated staff should be changing gloves between each resident.</p> <p>b.3) The Room Roster dated 11/3/20 documents R3 and R10 share a room, R4 and R7 share a room, and R11 and R8 share a room on the South hall. The Daily Roster dated 11/4/20 documents R1, R4, R10, and R11 reside on the South hall.</p> <p>R1's COVID-19 test collected on 11/2/20 and reported on 11/3/20 documents R1 tested positive for COVID-19.</p>	S9999		

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S9999	<p>Continued From page 18</p> <p>R3's COVID-19 test collected on 11/2/20 and reported on 11/3/20 documents R3 tested positive for COVID-19. R10's COVID-19 test collected 11/2/20 and reported on 11/3 documents R10 was negative for COVID-19.</p> <p>R7's COVID-19 test collected on 11/2/20 and reported on 11/3/20 documents R7 was positive for COVID-19. R4's COVID-19 test collected on 11/2/20 and reported on 11/3/20 documents R4 was negative for COVID-19.</p> <p>R8's COVID-19 test collected on 11/2/20 and reported on 11/3/20 documents R8 was positive for COVID-19. R11's COVID-19 test collected on 11/2/20 and reported on 11/3/20 documents R11 was negative for COVID-19.</p> <p>On 11/4/20 at 9:09 AM R1's, R4's, R8's and R10's rooms were located on the South hall. There was no isolation signage posted on R4's, R8's and R10's door, and there were no isolation carts outside of R8's and R10's rooms. There were droplet and contact isolation signs posted on R4's door and an isolation cart was outside of R4's room. There was an isolation cart located outside of R1's door and there was no isolation signage posted on R1's door.</p> <p>On 11/4/20 at 9:24 AM V9 Licensed Practical Nurse (LPN) 9:24 AM stated R1 is on isolation and has to be moved today due to testing positive for COVID-19. At this time V14 Minimum Data Set Coordinator posted signs for Contact and Droplet Precautions on R1's door.</p> <p>On 11/4/20 at 11:28 AM V3 Housekeeper was cleaning R1's room on the South hall, R1 and R1's belongings were no longer in the room. V3 was wearing gloves, a surgical mask over top of</p>	S9999		
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S9999	<p>Continued From page 19</p> <p>an N95 mask, and a face shield. V3 was not wearing an isolation gown. V3 was wiping down the mattress, bed railings, and mopping the floor. V3 was observed leaving the room and while wearing the same pair of contaminated gloves worn to clean R1's room obtained items from the housekeeping cart located in the hall. V3 left R1's room at 11:35 AM and pulled the door closed while wearing the same gloves used to clean R1's room. V3 then removed V3's gloves and washed V3's hands.</p> <p>On 11/4/20 at 2:45 PM V12 Housekeeping Supervisor stated after a resident transfers to the COVID-19 unit their room is cleaned from top to bottom and their belongings are bagged up. V12 stated housekeeping staff should wear gown, gloves, goggles, and an N95 mask to clean the room. V12 stated V3 should have been wearing a gown while V3 cleaned R1's room and removed V3's gloves upon leaving the room prior to closing the door.</p> <p>On 11/5/20 at 10:12 AM V2 stated V2 received R3's, R7's and R8's COVID-19 positive test results around 11:00 PM on 11/3/20. V2 stated R3, R7, and R8 were moved that night to the COVID-19 unit. V2 confirmed that R10 had been residing with R3, R4 had been residing with R7, and R11 had been residing with R8 prior to R3, R7, and R8 testing positive for COVID-19. V2 confirmed R4, R10, and R11 reside on the South hall, the facility's designated area for asymptomatic or COVID-19 negative residents. V2 confirmed R10 and R11 were not placed on isolation. V2 stated when a resident's room mate tests positive for COVID-19 they are considered to be exposed and should be moved to an observation room and placed on isolation. V2 stated R3, R11, and R10 will be moved to</p>	S9999		
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S9999	<p>Continued From page 20</p> <p>observation rooms and placed on isolation. V2 stated residents should have Contact and Droplet Precaution signs posted on the door when they are on isolation.</p> <p>On 11/6/20 at 11:47 AM V8 County Health Department COVID-19 Lead Investigator stated V8 has been providing the facility with updated CDC (Centers for Disease Control) and IDPH (Illinois Department of Public Health) guidance to prevent the spread of COVID-19. V8 stated the facility should be housing residents who have been exposed to COVID-19 and residents with COVID-19 symptoms in a designated area on isolation, away from other residents who are asymptomatic or negative for COVID-19. V8 stated staff should be wearing full PPE including an N95 mask, eye protection, gown, gloves to provide care for COVID-19 positive, symptomatic, and exposed residents. V8 stated exposed residents and those who have symptoms should be presumed positive for COVID-19.</p> <p>b.4) R1's COVID-19 test collected on 11/2/20 and reported on 11/3/20 documents R1 was positive for COVID-19. R2's COVID-19 test collected on 11/2/20 and reported on 11/3/20 documents R2 was positive for COVID-19. R3's COVID-19 test collected on 11/2/20 and reported on 11/3/20 documents R3 tested positive for COVID-19.</p> <p>R4's COVID-19 test collected on 11/2/20 and reported on 11/3/20 documents R4 was negative for COVID-19. R5's COVID-19 test collected on 11/2/20 and reported on 11/3/20 documents R5 was negative for COVID-19. R10's COVID-19 test collected on 11/2/20 and reported on 11/3/20 documents R10 was negative for COVID-19</p> <p>R1's, R2's, R3's, R4's and R10's medical records</p>	S9999		

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S9999	<p>Continued From page 21</p> <p>do not consistently document COVID-19 symptom assessments were completed twice daily between 10/1 and 11/4, per the facility's policy.</p> <p>R1's, R2's, R3's, R4's, and R10's documentation from 10/1 through 11/4 provided from the facility does not consistently document COVID-19 symptom assessments were completed twice daily per the facility's policy.</p> <p>On 11/5/20 at 10:12 AM V2 DON stated residents should be assessed for COVID-19 symptoms every shift. V2 stated the COVID-19 symptom assessment should indicate yes or no for symptoms and should not be left blank. On 11/6/20 at 2:38 PM V2 confirmed R1-R4's and R10's COVID-19 symptom monitoring documentation is inconsistent, and V2 stated V2 has no additional documentation to provide.</p> <p>(A)</p>	S9999		
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