

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: IL6000129	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 04/09/2021
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NAME OF PROVIDER OR SUPPLIER ALPINE FIRESIDE HEALTH CENTER	STREET ADDRESS, CITY, STATE, ZIP CODE 3650 NORTH ALPINE ROAD ROCKFORD, IL 61114
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S 000	Initial Comments Annual Licensure Survey	S 000		
S9999	Final Observations Statement of Licensure Violations (Violation 1 of 2) 330.790a) Section 330.790 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 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. This REQUIREMENT was not met as evidence by: Based on observation, interview, and record review, the facility failed to follow recommended guidelines from the Centers for Disease Control (CDC) by not wearing gloves on a PUI (Person Under Investigation) unit on transmission-based precautions (contact/droplet precautions). The facility also failed to remove and sanitize PPE when exiting the transmission-based precaution unit. These failures have the potential to infect high risk residents with COVID-19 and spread COVID-19 to negative residents. This applies to all 48 residents residing in the facility.	S9999	<p>Attachment A Statement of Licensure Violations</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>Findings include:</p> <p>The facility resident roster printed on 4/6/21 shows there are 48 residents residing in the facility.</p> <p>On 4/6/21 at 10:00 AM, V1 (Administrator) stated the facility is currently in outbreak status and all four resident unit hallways are on transmission based precautions. V1 said two residents and one staff member recently tested positive for COVID-19 and there is a possibility other residents may have been exposed. V1 stated all 48 residents are considered potentially exposed and are currently on PUI (contact/droplet) precautions. V1 said the two COVID-19 positive residents reside on an entirely separate unit.</p> <p>During the survey on 4/6/21 to 4/8/21, multiple signs were posted outside of hall 3 and hall 4. Signage included: "STOP. See nurse before entering. COVID-19 exposed hallway." Signage also stated: "EXITING HALLWAY- 5. N95 or KN95 masks are covered with a surgical mask so they can be worn off the hallway. 6. Eye protection can be worn off the hallway, but should be sanitized before leaving the COVID monitoring (PUI) hallway." PPE requirements were posted which showed gloves must be worn upon entering the units.</p> <p>1. On 4/6/21 at 12:40 AM, V4 (Licensed Practical Nurse) was on the 400 hallway wearing PPE which included a gown, N95 mask without a surgical mask over it, cap, shoe covers, and face shield. V4 was not wearing gloves. V4 entered and exited four individual resident rooms to deliver medications. V4 delivered a medication cup to each resident with his ungloved hands. At</p>	S9999		
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S9999	<p>Continued From page 2</p> <p>1:00 PM, V4 exited the 400 hallway isolation unit and did not sanitize his face shield. V4 did not remove his contaminated N95 mask. V4 continued down the hallway and into the common area of the facility.</p> <p>2. On 4/6/21 at 11:25 AM, V9 (Housekeeper) was on the 400 hallway wearing PPE which included a gown, N95 with a surgical mask over it, cap, shoe covers, gloves, and face shield. V9 entered and exited multiple resident rooms while cleaning. At 12:00 PM, V9 exited the 400 hallway isolation unit and did not sanitize her face shield. V9 continued wearing the contaminated surgical mask over her N95 mask. V9 continued down the hallway and into the common area of the facility.</p> <p>3. On 4/7/21 at 1:15 PM, V8 (Certified Nurse Aide) entered a resident room on the 300 hallway while wearing a mask and gown. V8 picked up the after meal lunch tray on the table in front of the resident. V8 was not wearing gloves. V8 stated she did not need to wear gloves on the 300 hallway if she is performing hand hygiene between residents. V8 said she wasn't sure if she needed to wear gloves on an isolation unit hallway because the rules have been changing so much.</p> <p>On 4/7/21 at 10:30 AM, V3 (Assistant Director of Nurses) stated full PPE is required for staff members on all four hallway units, including halls 3 and 4. V3 said the halls are on contact/droplet isolation. V3 said full PPE includes a gown, mask, cap, shoe covers, face shield, and gloves. V3 said staff can continue to wear the same N95 mask outside of the halls, but only if it was covered with a surgical mask while on the unit. V3 said the surgical mask must be discarded upon exiting the unit. V3 said face shields can be</p>	S9999		

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S9999	<p>Continued From page 3</p> <p>used but must be disinfected when exiting the units. V3 stated staff should be wearing gloves at all times on the PUI units. V3 said it is necessary to wear and discard PPE properly to stop the spread of germs. It is an infection control precautionary measure. There is the potential to spread infection if staff are not following infection control measures.</p> <p>The facility's undated Coronavirus (COVID-19) Donning and Doffing policy states under the procedure section: "Donning PPE's: 1) gown 2) mask 3) face shield 4) cap 5) boot covers 6) gloves"</p> <p>The CDC (Center for Disease Control) website guidance under the Interim Infection Prevention and Control Recommendations to Prevent SARS-CoV-2 Spread in Nursing Homes updated 3/29/21 states: "Manage Residents who had Close Contact with Someone with SARS-CoV-2 Infection-Residents who have had close contact with someone with SARS-CoV-2 infection should be placed in quarantine for 14 days after their exposure ... HCP (health care personal) should wear an N95 or higher-level respirator, eye protection (i.e., goggles or a face shield that covers the front and sides of the face), gloves, and gown when caring for these residents."</p> <p>(B)</p> <p>(Violation 2 of 2)</p> <p>330.1120a)</p>	S9999		

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S9999	<p>Continued From page 4</p> <p>Section 330.1120 Personal Care</p> <p>a) Each resident shall have proper daily personal attention and care including skin, nails, hair, and oral hygiene, in addition to treatment ordered by the physician.</p> <p>This REQUIREMENT was not met as evidence by:</p> <p>Based on observation, interview, and record review the facility failed to ensure a resident with a history of skin breakdown received pericare for one (R201) of three residents reviewed for personal care in the sample of three.</p> <p>Findings include:</p> <p>R201's Client Diagnosis Report printed 4/8/21 showed diagnoses including but not limited to heart disease, polyarthritis, stage 3 kidney disease, dementia, Alzheimer's disease, and overactive bladder.</p> <p>R201's April 2021 physician orders shows an order start dated 12/9/20 for (Menthol/Zinc Oxide) Calmoseptine (packet) Ointment. Apply to skin to gluteal crease for protection topically every shift. R201's 4/3, 3/20, 3/13, and 3/6/21 shower sheets show ongoing redness and/or discoloration to her gluteal area (buttocks area). R201's Body Check Form dated 12/9/20 shows a stage 2 pressure injury to the gluteal crease resolved on the same date.</p> <p>On 4/6/21 at 11:55 AM, V7 (Certified Nurse Aide) transferred R201 out of the wheelchair and onto the toilet. R201's gluteal area was covered on both the left and right side buttock with a melon size reddened area. R201's incontinence brief</p>	S9999		
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S9999	<p>Continued From page 5</p> <p>was saturated with urine R201 had a bowel movement in the toilet. V7 stood R201 up, put on a fresh brief, and pulled up R201's pants. V7 did not provide any type of cleansing or pericare to R201's groin or buttock areas.</p> <p>On 4/7/21 at 11:50 AM, V4 (Licensed Practical Nurse) stated R201 has chronic skin issues and is prone to breakdown on her buttocks. V4 said R201 also has incontinence issues and is frequently wet with urine. V4 stated it is important to keep her skin clean and dry to prevent further problems. V4 said leaving urine or stool on R201's skin adds to the problem. V4 said R201 needs help with toileting and hygiene due to her mental and physical limitations.</p> <p>On 4/7/21 at 12:10 PM, V2 (Director of Nurses) stated CNAs should be using periwipes to clean the skin after a resident uses the toilet. V2 said skin breakdown, infections and irritation could occur if wet or soiled skin is not cleansed. V2 said aides should be doing that for every resident that is unable to do it for themselves. V2 stated R201 has a history of pressure ulcers on her buttocks and is very prone to fungal infections.</p> <p>R201's care plan shows a problem area for risk of skin breakdown related to incontinence of bladder. Interventions include encourage and assist R201 with toileting and make sure R201 is clean and dry. R201's care plan shows a problem area for the need of extensive assistance with one person support for toilet use and extensive to limited assistance at times with hygiene after toilet use. Interventions include provide assistance with toilet use and hygiene as needed.</p> <p>The facility's undated Perineal Care policy states under the procedure section: "Wash all areas that</p>	S9999		
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