STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	IL6005714	A. BUILDING: _____ B. WING _____	05/19/2021

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ALDEN LONG GROVE REHAB &HC CTR	2308 OLD HICKS ROAD LONG GROVE, IL 60047

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S 000	Initial Comments Annual Licensure and Certification	S 000		
S9999	Final Observations Statement of Licensure Violations: 300.610a) 300.696 a) 300.1210b) 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 690)	S9999	Attachment A Statement of Licensure Violations	

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S9999	Continued From page 1 Activities shall be monitored to ensure that these policies and procedures are followed. 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): Section 300.1210 General Requirements for Nursing and Personal Care 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. THESE REQUIREMENTS WERE NOT MET EVIDENCDED BY; Based on observation, interview, and record review, the facility failed to isolate unvaccinated residents that are on a 14 day quarantine and failed to follow Center for Disease Control (CDC) guidance for proper COVID-19 Personal Protective Equipment (PPE) for new admissions that are on a 14 day quarantine. These failures have the potential to affect 4 residents who are unvaccinated and have not had COVID-19. This applies to 4 of 4 residents (R45, R64, R282,	S9999		

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S9999	Continued From page 2 R283) reviewed for infection control in the sample of 27. The findings include: 1. R282's Face Sheet shows that she was admitted on 5/4/21 and has never had a diagnosis of COVID-19. R282's Physician's Orders shows "ISOLATION: CONTACT AND DROPLET PRECAUTIONS - DUE TO POSSIBLE EXPOSURE TO COVID-19" that was started on 5/4/21 and discontinued on 5/18/21. R282's electronic immunization record does not show that she has received a COVID-19 vaccination. On 5/17/21 9:38 AM, R282's room was vacant. There was a sign on the door that said R282 was on contact/droplet isolation. R282 was observed in the hallway with no mask on the face talking to R30 that was less than 6 feet away from her. 9:40AM, R282 was walking down the hallway with no mask on the face. 9:46 AM, V3 (Memory Care Director) applied a mask to R282 but did not try and re-direct her to her room. 10:07 AM, R282 was talking to R30 with no mask. R30's mask was below his nose and they were less than 6 feet apart. 11:48 AM, R282, R30, and R283 (additional isolation resident) were in the hallway talking and less than 6 feet apart. V4 (Registered Nurse) was observing the interaction but did not re-direct R282 or R283 to their rooms.	S9999		

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S9999	Continued From page 3 12:09 PM, R282 was talking to V4 and less than 6 feet away. V4 had a surgical mask on and no eye protection. 12:16 PM, R282 and R283 in the hallway talking less than 6 feet apart and they both did not have masks on there face. R282 gave R283 a piece of paper. R282 and R283 quit talking at 12:27 PM. Multiple staff were in the area and did not redirect them to their rooms. 12:39 PM, R282 went into the dining room and sat next to R127. R282 did not have a mask on and R127 had her mask on her forehead. R282 took the towel that R127 was using folded, and wrapped her mask around it and gave it to R127. R282 then began talking to R127 with her face less than a foot away from R127 and rubbing her back. 12:42 PM, V5 (Activity Aide) tried to put a mask on R282 but the resident refused. V5 did not re-direct her back to her room. V6, Certified Nursing Assistant (CNA) also saw the interaction but did not re-direct R282 back to her room. R45 and R64 (unvaccinated residents) were in the dining room. 12:51 PM, R282 left and went into the hallway. 1:44 PM, R30 was in R282's isolation room helping her make the bed. R282 did not have a mask on her face, and R30's mask was below the nose. 1:47 PM, R30, and R282 were in R282's room holding hand's face to face with each other. Their faces were less than one foot apart. 2. R283's Face Sheet shows that she was	S9999		

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S9999	Continued From page 4	S9999		

admitted to the facility on 5/13/21 and does not have a diagnosis history of COVID-19. R283's electronic immunization record does not show that she has received the COVID-19 vaccine. R283's Physician's Orders show, "ISOLATION: CONTACT AND DROPLET PRECAUTIONS - DUE TO POSSIBLE EXPOSURE TO COVID-19" started on 5/13/21 and still active.

On 5/17/21 at 9:51 AM, there was a sign on R283's door that said contact/droplet isolation and the room was vacant. R283 was sitting in the dining room that had other residents present including R45 and R64 (unvaccinated residents). R64 was sitting unmasked at an adjacent table. R283 was sitting at the table petting a stuffed animal (white fur cat). V5 (Activity Aide) was in the dining room and had a surgical mask on her face. V5 did not try and re-direct R283 back to her room.

10:35 AM, R283 was still sitting at the table. R283 was holding the fur cat and cuddling it next to her face. R283 had her mask under her chin.

11:53 AM, V6 (CNA) walked past R283 with a surgical mask on and did not re-direct R283 back to her room. At 11:55 AM, R283 walked into the dining room and was standing by the table that R64 was sitting at and started talking to her. At 11:58 AM, R283 was wandering around the dining room with other residents present in the dining room. V8 (CNA) was doing an activity with R45 (unvaccinated resident) and R283 came up to her and started talking to her. R283 was within 6 feet of V8 and V8 only had a surgical mask on. V8 touched R283 on the shoulder and directed R283 to sit in a chair in the dining room that was within 6 feet of R78 who was not wearing a mask. At 12:03 PM, R283 was at the beverage cart that

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S9999	Continued From page 5 was located in the hallway touching the cups. At 12:07 PM, R283 was pacing the hallway. V9 (Admissions Director) was talking to R283 and was within 6 feet of her with a surgical mask on. V9 did not re-direct her back to her room. V9 spoke with her until 12:15 PM. 11:55 AM, the same cat was on the table within reach of R64 (unvaccinated resident). At 11:51 AM, R283 was in the hallway talking with R30 and was less than 6 feet away from him. R283's Nursing Notes dated 5/16/21 show, "wanders in the unit but no attempt to open exit doors, calm and cooperative during the shift, noted at times talking to herself, wanders in the unit but easily redirected." During observations on 5/17/21 between 9:50 AM and 1:47 PM, no behaviors besides wandering were observed for R282 and R283. On 5/17/21 at 10:19 AM, V10 (Registered Nurse) said that R282 and R283 are on isolation since they are new admits from the hospital. On 5/17/21 at 1:47 PM, V11 (Business Office Manager) stated "when he is doing a 1:1 with an isolation resident he just has to make sure that they do not touch anything and if they do, he has to disinfect the item". V11 said that they could be out of their rooms but they should not be in close contact with another resident. V11 also said that other residents should not be going into isolation rooms. On 5/17/21 at 2:26 PM, V2 (Infection Control Registered Nurse) said that all new admissions are put on contact/droplet isolation for 14 days.	S9999		

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S9999	Continued From page 6 Isolation residents should stay in their room. V2 said that gloves, gown, N95 mask and a face shield is the required PPE before entering an isolation room. V2 said that any staff member that is in contact with a contact/droplet isolation resident should be wearing PPE. V2 said she tries to schedule 1:1 supervision for R282 and R283 since they wander and are on isolation. V2 said that the staff member should watch to make sure that they do not come out of their room and if they do, they should immediately re-direct them back to their room. V2 said that the on the morning of 5/17/21, R282 and R283 did not have 1:1 supervision but the CNAs should be watching them and re-directing them back to their room if they exit the room. V2 said she did tell the dementia unit staff that they should be wearing N95s but not face shields. V2 said that CNAs should also be watching other residents to prevent them from going in an isolation room. On 5/18/21 at 8:54 AM, V7 (CNA) stated "if a resident is on contact/droplet isolation, they should be isolated in their room. If a staff member sees them outside of the room, they should immediately redirect them back to their room. V7 stated "they do not go in the dining room, they do activities and eat in their room". V7 said R282 and R283 are easy to re-direct and she has never had any issues with re-directing them besides them coming out again. The facility provided call log to the county health department from 5/17/21 documents, "Memory Care Units are a hard area when it comes to isolation because of the unique needs of memory care residents ....She stated, to be safer and take extra precaution practice is for all staff to wear N95s and face shields in the unit, as other staff members might be in the position to redirect	S9999		

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S9999	Continued From page 7 residents back into their isolation room until resident is out of their 14 day quarantine." The facility provided Immunization Report printed on 5/17/21 shows that R45, R64, R282 and R283 have not received the COVID-19 vaccine. The facility provided Residents COVID Positive Log 2020-2021 reviewed on 5/18/21 shows that R45, R64, R282, R283 all have not had COVID within the past 90 days. The facility's Admission/Readmission to Long Term Care Facilities Policy updated on 4/9/21 shows, "The facility will follow the guidance and recommendations from the CDC (Center for Disease Control), state and federal health departments when admitting/readmitting patients Unvaccinated, Partially Vaccinated or Unknown Vaccination Status Recommendations: New or returning residents who are not fully vaccinated, unvaccinated, partially vaccinated or whose vaccination status is unknown will be admitted to a single room within the designated facility transition area and will quarantine with transmission-based precautions for 14 days from the date of admission. Contact/droplet precautions can be discontinued, and the resident can be moved to a regular unit after 14 days .... The CDC guidance titled Preparing for COVID-19 in Nursing Homes-Create a Plan for Managing New Admissions and Readmissions updated 11/20/2020 shows, "HCP (Healthcare personnel) should wear an N95 or higher-level respiratory, eye protection, gloves, and gown when caring for new admissions and readmissions. Residents can be transferred out of the observation area to the main facility if they remain afebrile and without symptoms for 14 days after their admission."	S9999		

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S9999	Continued From page 8 The CDC guidance titled Memory Care Units updated on 5/12/21 shows, "Infection Prevention and Control (IPC) Guidance for Memory Care Units .....Limit the number of residents or space residents at least 6 feet apart as much as feasible when in a common area, and gently re-direct residents who are ambulatory and are in close proximity to other residents or personnel.When residents on a memory care unit are suspected or confirmed to have COVID-19..As it may be challenging to restrict residents to their rooms, implement universal use of eye protection and N95 or other respirators (or facemasks for all personnel when on the unit to address potential for encountering a wandering resident who might have COVID-19." " B "	S9999		