

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: IL6007447	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 06/10/2021
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NAME OF PROVIDER OR SUPPLIER PINECREST MANOR	STREET ADDRESS, CITY, STATE, ZIP CODE 414 SOUTH WESLEY AVENUE MOUNT MORRIS, IL 61054
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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 Annual Licensure and Certification	S 000		
S9999	<p>Final Observations</p> <p>Statement of Licensure Violations:</p> <p>300.610a) 300.696a) 300.696b) 300.696c)2)7) 300.1210b)</p> <p>300.610 Resident Care Policies</p> <p>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.</p> <p>300.696 Infection Control</p> <p>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</p>	S9999	<p style="text-align: center;">Attachment A Statement of Licensure Violations</p>	

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE _____ TITLE _____ (X6) DATE _____

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S9999	<p>Continued From page 1</p> <p>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>2) Guideline for Hand Hygiene in Health-Care Settings</p> <p>7) Guidelines for Infection Control in Health Care Personnel</p> <p>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>There regulations are not met as evidenced by:</p>	S9999		

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S9999	<p>Continued From page 2</p> <p>Based on observation, interview, and record review the facility failed to implement infection control policies and recommendations from the Centers of Disease Control (CDC) for the use of Personal Protective Equipment, (PPE) for resident (R144) in transmission based isolation. This failure has the potential to infect high risk residents with COVID-19 and spread the disease of COVID-19 to negative residents.</p> <p>The findings include:</p> <p>R144's Resident Information sheet printed on June 9, 2021 showed R144 was admitted to the facility on May 29, 2021; the special instructions showed: "Contact/Droplet Isolation 5/29/21 to 6/11/21." There were no diagnoses listed that showed she has had Covid-19. The Immunization record in R144's electronic medical record on June 9, 2021 did not show that she has received and COVID-19 vaccinations.</p> <p>As of 6/9/21, 92% of the residents at the facility have received the COVID vaccine and are fully vaccinated. Seventy percent of the facility's employees have received the COVID vaccine and are fully vaccinated.</p> <p>The Centers for Disease Control 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</p>	S9999		

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S9999	<p>Continued From page 3</p> <p>after their admission."</p> <p>On June 8, 2021 at 1:24 PM, R144 was sitting in a recliner in her room. V3 (Housekeeper) was wearing goggles, an N95 mask, isolation gown and gloves while cleaning her room. V3 had a bottle of cleaner in her hand and walked out of the resident's room in full PPE, went to her housekeeping cart in the hall and placed the cleaner in her cart. V3 then grabbed the broom and dust pan from the cart, went into R144's room and swept the floor. V3 emptied the dustpan in the resident's room and came out of the room and put the broom and dustpan on her cart in the hall. V3 grabbed the mop and a wet floor sign, placed the wet floor sign on the floor in front of R144's room, went into the resident's room and mopped her floor. V3 removed her gloves, used hand sanitizer and walked out into the hall and put the mop on her cleaning cart. V3 went back into R144's room, removed her gown, used hand sanitizer and came out of the room. V3 removed her goggles and then her N95 mask. V3 did not put a new N95 mask or surgical mask on. V3 placed her contaminated goggles inside the top drawer of the supply dresser in the hallway. V3 stated she could not find the wipes to clean the goggles. V3 went to another supply dresser in the hallway and removed Clorox wipes, walked over to the previous supply dresser, opened the top drawer and removed the contaminated goggles from the drawer, wiped them with the Clorox wipe and placed them back into the drawer. V3 stated she did not know why R144 was on isolation and that she follows the signs on the door for what PPE to wear. V3 stated she has to wear goggles, gown, gloves and an N95 mask for each room and pointed to the other isolation rooms across from R144's room.</p>	S9999		
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S9999	<p>Continued From page 4</p> <p>On June 8, 2021 at 2:28 PM, V2 DON (Director of Nursing) stated, "R144 is on the fourteen day quarantine. R144 is a new admission that is not vaccinated. She is on droplet and contact precautions. Donning for any room for the fourteen day, there is a supply dresser with gowns, N95, gloves and eye protection. They are to put all of this on before going into room. Doffing is done just before leaving the room. The room is equipped with biohazard waste and linen hampers if gown is disposable it goes in waste, if it is a reusable cloth gown then it goes in the hamper. Hand hygiene is done in the room after they remove their gloves. They wear an N95 mask, they should have a supply in the chest and ideally it's one use. They can have single person usage for the N95 and can put in baggie that is disposed of at end of day. After the N95 is removed then they apply a surgical mask. Housekeeping should be following the same procedures. Goggles are to be cleaned; they should have disinfectant wipes to be able to sanitize those and then they can be reused. I would think they (housekeeper) would have their cart at doorway so they don't come in and out of the room."</p> <p>On June 8, 2021 at 2:39 PM, V4 (Housekeeping Supervisor) stated, "For the fourteen day isolation rooms the housekeeper is to apply the gown, gloves, glasses and mask (N95) outside the door. Cleaning wipes are used when the resident is in the room and they are kept in the closet in the room. They are to be cleaning isolation rooms with the disposable wipes. They clean all high touch areas from the top to the bottom. Spray bottles have a cleaning agent. If they are using the spray bottles then they take their PPE off in room and dispose of it in bins in room and wash</p>	S9999		

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S9999	<p>Continued From page 5</p> <p>hands. They are not supposed to go in and out of the room with PPE on. We put a flat mop in the room that stays there so they don't have to go in and out of room. There is a sticky cloth to bottom of flat mop, they dust mop with it and then pull it off and throw it away in the isolation room garbage. They are not supposed to take the mop in and out of the room."</p> <p>The facilities Contact Isolation & Droplet Isolation Room Cleaning Procedures policy (no date) showed, "What goes in stays in! Except for the housekeeper, anything that goes into an isolation room stays in the isolation room, unless it's removed in an isolation bag. Once taken into the isolation room all cleaning supplies will be kept in a locked cabinet. Housekeepers shall wear all prescribed protective clothing and follow all prescribed procedures. Protective coverings may include gloves, masks, gowns, and /or shoe coverings. Daily cleaning: Assemble the following supplies in a disposable bag: 1 package of paper towels (if needed), 1 bottle of liquid hand soap (if needed), 1 bar of soap (if needed), 2 rolls of toilet paper (if needed). Complete procedures #2 through #7 of "initial cleaning" procedures. Place all supplies needed into a bag to take into the isolation room with you. Sanitize your hands, and put on all protective PPE indicated. Knock before entering the room and announce that you are housekeeping. Enter the room with all of the above "isolation room supplies", and explain what you are going to be doing. Starting at the door and working your way around the room to the farthest point and back around to the other side, work your way back to the door wiping all high touch areas (using as many disinfectant wipes as needed). Dispose of the wipes in a trash bag. Using a flat mop head and handle and a tacky cloth, dust mop the floor starting at the farthest</p>	S9999		

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point in the room working your way around the room and back to the door. Dispose of the tacky cloth in your garbage bag. Use a disinfectant wipe to wipe up any soiled areas." The policy stated when cleaning the bathroom use cleaning wipes to wipe down all high touch areas and dispose of those wipes in the trash bag. They are to clean the sink thoroughly using disinfectant wipes and then dispose of the used wipes. There were procedures on how to clean the toilet including using cleaning wipes on the outside of the toilet and disposing of those wipes in the trash bag. A cleaning wipe is to be attached to a flat mop system to clean the floor and the wipe is to be disposed of in a trash bag. Upon completion of cleaning the trash bag is to be closed, sealed and disposed of in the infectious waste container. The "isolation room supplies" in the policy were listed as the following: 1 flat mop system with head and handle, 1 flat mop, 1 bucket of pop up cleaning wipes and 5 disposable tacky cloths in a baggie.

Based on observation, interview and record review, the facility failed to ensure a resident washed their hands after toileting and before eating to prevent cross-contamination for 1 of 5 residents (R33) reviewed for infection control in the sample of 18.

The findings include:

R33's Admission Record provided by the facility on 6/10/21 showed she had diagnoses including Parkinson's disease and dementia. R33's facility assessment dated 4/12/21 showed she had severe cognitive impairment and required staff assistance for toileting and personal hygiene. R33's restorative care plan showed she requires assist with dressing and grooming. The care plan showed "Complete grooming/hygiene: set-up and

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S9999	<p>Continued From page 7</p> <p>break down task into a few manageable tasks.</p> <p>On 6/09/21 at 11:15 AM, V15 (Certified Nursing Assistant-CNA) assisted R33 with toileting. R33 wiped herself. After toileting, V15 did not suggest or encourage R33 to wash her hands. V15 asked R33 if she would like for her to wheel her down to the dining room in her wheel chair. R33 said yes. At 11:20 AM, as they got to the end of the hall, R33 said she needed a tissue. V15 went back to R33's room and got her a tissue. R33 wiped her nose with the tissue. V15 wheeled R33 down to the dining room and pushed her wheel chair up to one of the tables. At 11:25 AM, R33 was sitting at the table and had her hand over her top lip resting her face on her hand. At 11:35 AM, R33 picked up her cup of juice and took a drink. At 11:45 AM, R33 had her right hand on her head and then reached up and adjusted her glasses with her left hand. At 11:55 AM, R33 rested her head on both of her hands, right hand on forehead, left hand on left cheek. At 12:12 PM, R33 started to eat her lunch meal. No handwashing was suggested or provided to R33 prior to eating.</p> <p>On 6/10/21 at 12:12 PM, V16 (CNA) said it is important to encourage residents to wash their hands after toileting, especially when the resident wipes themselves. V16 said it is important to make sure they wash their hands so they do not get sick from bacteria like Ecoli that could be in their urine and so their hands are clean.</p> <p>On 6/10/21 at 12:24 PM, V2 (Director of Nursing) said she expects the CNAs to have the residents wash their hands after toileting for personal hygiene and for infection control.</p> <p>On 6/10/21 at 1:09 PM, V15 said she realized</p>	S9999		

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S9999	<p>Continued From page 8</p> <p>after the fact that she did not have R33 wash her hands after toileting. V15 said she should have had her wash her hands to prevent cross-contamination and prevent infections.</p> <p>The facility's policy and procedure dated 2/18/16 showed "7. Assist resident into a comfortable/safe position following peri-care. Staff member should now wash their hands if unable to complete earlier due to resident safety/dignity. Offer handwashing to the resident, no matter if they participated or not in their own care. Handwashing may be the offering of a warmed wash cloth (soap/rinse) or assisting the resident to their sink for hand hygiene."</p> <p>(B)</p>	S9999		