

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: IL6006472	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED C 08/27/2020
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NAME OF PROVIDER OR SUPPLIER MULBERRY MANOR	STREET ADDRESS, CITY, STATE, ZIP CODE 612 EAST DAVIE STREET, BOX 88 ANNA, IL 62906
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Z 000	<p>COMMENTS</p> <p>Complaints: 2056094/IL125411 2056211/IL125534</p> <p>Condition W102 Governing Body & Management cited</p>	Z 000		
Z9999	<p>FINDINGS</p> <p>Statement of Licensure Violations:</p> <p>350.620a) 350.760a) 350.760c)7) 350.1223a) 350.1230b) 350.1230d)2) 350.3240a)</p> <p>Section 350.620 Resident Care Policies</p> <p>a) The facility shall have written policies and procedures governing all services provided by the facility which shall be formulated with the involvement of the administrator. The policies shall be available to the staff, residents and the public. These written policies shall be followed in operating the facility and shall be reviewed at least annually.</p> <p>Section 350.760 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</p>	Z9999	<p>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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Z9999	<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>c) Depending on the services provided by the facility, 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, as applicable (see Section 350.340):</p> <p>7) Guidelines for Infection Control in Health Care Personnel</p> <p>Section 350.1223 Communicable Disease Policies</p> <p>a) The facility shall comply with the Control of Communicable Diseases Code (77 Ill. Adm. Code 690).</p> <p>Section 350.1230 Nursing Services</p> <p>b) Residents shall be provided with nursing services, in accordance with their needs, which shall include, but are not limited to, the following:</p> <p>d) Direct care personnel shall be trained in, but are not limited to, the following:</p> <p>2) Basic skills required to meet the health needs and problems of the residents.</p> <p>Section 350.3240 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>	Z9999		

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Z9999	<p>Continued From page 2</p> <p>These Regulations were not met as evidenced by:</p> <p>Based on observation, record review, and interview the facility's governing body failed to take actions that identifies and resolves systemic problems, and policy implementation that affected 45 of 46 individuals that resided in the facility during an outbreak of Covid-19 (R1-R25, R27-R46), as evidenced by their failure to:</p> <ol style="list-style-type: none"> 1) Utilize the Covid-19 Focused Survey as a self-assessment tool. Priority areas for self-assessment include all of the following 1. Standard Precautions: a. Hand hygiene b. Use of PPE c. Transmission-Based Precautions 2. Patient Care (including patient placement 3. Infection prevention and control standards, policies and procedures (hand hygiene, PPE, Cleaning and disinfection, surveillance) 4. Visitor entry (i.e., screening restriction, and education. 5. Education, monitoring, and screening of staff and 6. Emergency preparedness staffing in emergencies. 2) Report an outbreak of Covid-19 to State Agency. 3) Ensure staff were informed of the positive Covid-19 cases by placing signage on the residents rooms regarding need for transmission-based precautions. 4) Ensure their Covid-19 Control Measures for Clients and Staff included a procedure for ensuring staffing to meet the needs of residents when needed during an emergency, such as a 	Z9999		
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Z9999	<p>Continued From page 3</p> <p>Covid-19 outbreak.</p> <p>5) Ensure Personal Protective Equipment including Biohazard containers are available for disposal of contaminated items.</p> <p>6) Ensure their Covid-19 Control Measures for Clients included a procedure was in place for proper disinfecting reusable Personal Protective Equipment.</p> <p>7) Ensure staff were trained on the proper use of Personal Protective Equipment.</p> <p>These failures affected 45 of 46 residents residing in the facility that tested positive for Covid-19 or presumed positive for Covid-19 (R1-R25, R27-R46) which resulted in 5 Covid-19 related hospitalizations (R5, R8,R34,R40 and R45) and two deaths (R45 and R46) that had comorbidities and on comfort measures.</p> <p>Findings Include:</p> <p>Resident roster, dated 7/17/2020, documents 9 residents that function within the Mild Level of Individuals with Intellectual Disabilities (R3, R6, R12, R13, R15, R16, R23, R41 and R42) 12 residents that function within the Moderate Level of Individuals with Intellectual Disabilities (R1, R10, R14, R17, R18, R33, R35, R36, R37, R38, R43 and R44) 10 residents that function within the Severe Level of Individuals with Intellectual Disabilities (R2, R4, R9, R21, R24, R25, R28, R34, R39, R40 R45 and R46) 13 residents that function within the Profound Level of Individuals with Intellectual Disabilities (R5, R7, R8, R11, R19, R20, R22, R26, R27, R29, R30, R31, and R32)</p>	Z9999		

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Z9999	<p>Continued From page 4</p> <p>1) Record review documents the facility was provided a Covid-19 Focused Infection Control Survey: on 5/21/2020 that documents in detail specific guidelines related to Covid-19 which includes staff education, Emergency Preparedness-staffing in Emergencies, Policy development and implementation, Standard and Transmission-Based Precautions, Hand Hygiene, Personal Protective Equipment.</p> <p>On 8/6/2020 at 12:15 PM, When asked if the facility was utilizing the Covid-19 Focused Infection Control Survey that was provided to her on 5/21/2020 from the Department of Public Health E1 Assistant Administrator stated " No, I put it in a folder and forgot I had it." E1 further stated " We underestimated what was going to happen."</p> <p>2) The facility's Covid-19 Control Measures for Facility Clients and Staff, dated 4/9/2020 documents: "Reporting individuals who have tested positive for Covid-19." "Notify the following people if an individual tests positive for Covid-19."... Z3, Field Supervisor, Illinois Department of Public Health/Office of Health Care Regulations/Individuals with Intellectual Disabilities."</p> <p>The facilities Covid-19 Illness log beginning on 3/22/2020-8/7/2020 documents: 7/11/2020, E11, Direct Support Personnel (DSP) tested positive for Covid-19. 7/15/2020, R6 began showing signs and symptoms of Covid-19. On 7/18/2020 facility wide testing was completed on residents and staff with results coming in 7/19/2020 and 7/20/2020 that document 19 residents testing positive (R4, R5, R6, R8, R10, R11, R12, R13, R16, R17, R20, R21, R22, R23, R24, R27, R28, R30, and R45) and 9 additional staff members E3 Assistant</p>	Z9999		
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Z9999	<p>Continued From page 5</p> <p>Director of Nurses, E9 Housekeeping, E13 DSP, E25 DSP, E28 DSP, E29 DSP, E30 DSP, E34 Housekeeping, and E36 Licensed Practical Nurse.</p> <p>On 8/5/2020 at 8:45 AM, E2 Director of Nurses stated "I did not notify Z3 of E11 DSP testing positive for Covid-19 on 7/11/2020 or of the results of the residents and staff Positive results that came in on 7/19/ and 7/20/2020."</p> <p>3) The Covid-19 Focused Infection Control Survey: Acute and Continuing Care provided to facility on 5/21/2020 documents " Signage on the patients's room regarding need for transmission based precautions."</p> <p>On 8/5/2020 between 6:00 AM-6:30 AM, There were no signage of transmission based precautions on the doors of R1, R2, R3, R15, R35 and R40 to alert staff on what precautions were to be implemented before going in the rooms.</p> <p>On 8/5/2020 at 7:00 AM, E1 Assistant Administrator stated, "Currently we have 6 residents (R1 and R15) A-wing, (R2) B-wing, (R3, R35 and R40 C-wing) that are on Isolation for COVID-19."</p> <p>On 8/5/2020 at 6:00 AM, on the C wing, E30 DSP was asked what residents on the unit were on precautions related to Covid-19, E30 stated, "I am really not sure."</p> <p>On 8/5/2020 at 6:10 AM, on the A Wing, E4 DSP was asked what residents on the unit were on precautions related to Covid-19, E4 stated " I think (R4 and (R10)."</p>	Z9999		
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Z9999	<p>Continued From page 6</p> <p>On 8/5/2020 at 6:15 AM, on the B wing, E7 DSP was asked what residents on the unit were on precautions related to Covid-19, E7 stated "I don't know."</p> <p>4)The Covid-19 Focused Infection Control Survey: Acute and Continuing care provided to facility on 5/21/20 documents " Facilities should utilize the Covid-19 Focused Survey as a self-assessment tool. Priority areas for self-assessment include all of the following: 6. Emergency preparedness staffing in emergencies." The facility's Covid-19 Control Measures for Facility Clients and Staff dated 4/9/20 document: "If clients have been tested and their respiratory screen is positive for Covid-19 or if client have signs/symptoms of a respiratory viral infection: b) Private room or cohort with another symptomatic/positive patient. d) An attempt should be made that staff caring for a positive or symptomatic client do not care for negative or asymptomatic clients. Certain staff will be designate staff to care for positive clients and other staff to care for everyone else."</p> <p>A. The facility's July/August 2020 staffing schedule were reviewed and compared to the facility's illness log and documents several employees that had been tested positive did work Covid-19 units during the time of the Covid-19 outbreak time period July 18th-August 15th. E8 Direct Support Staff (DSP) tested positive on 8/1/2020, called in sick 8/2/2020 and returned to work on 8/4/2020-8/8/2020. E6 DSP, tested positive for Covid-19 on 7/22/2020. E6 worked Covid-19 unit 7/30. The facility's illness log documents E6 displayed signs and symptoms of fever and fatigue on 7/30/2020.</p>	Z9999		
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Z9999	<p>Continued From page 7</p> <p>On 8/5/2020 at 12:15 PM, E1 Assistant Administrator stated that during the Covid-19 outbreak the facility was working at a critical staffing level because so many staff had also tested positive for Covid-19. E1 confirmed that 32 staff members had tested positive (E2 Director of Nurses, E3 Assistant Director of Nurses, E6 DSP, E7 DSP, E8 DSP, E9 Housekeeping, E11 DSP, E12 DSP, E13 DSP, E14, Kitchen, E15 Kitchen, E16 DSP, E17 Kitchen, E18 DSP, E19 DSP, E20 DSP, E21 DSP, E22 DSP, E23 Qualified Intellectual Disabilities Professional, E25 DSP, E26 DSP, E27 DSP, E28 DSP, E29 DSP, E30 DSP, E31 Laundry, E32 DSP, E33 DSP, E34 Housekeeping, E35 DSP, E36 Licensed Practical Nurse, and E37 Kitchen).</p> <p>On 8/6/2020 at 11:40 AM, E8 DSP stated " I did test positive for Covid-19 on 8/1/2020, I called in sick 8/1 and 8/2. 8/3 was my day off and I returned to work 8/4/2020. E8 further stated that I did have a cough on 8/4/2020 and told E23 Qualified Intellectual Disabilities Professional/ Staff Scheduler, but I was instructed to come to work."</p> <p>On 8/10/2020 at 10:00 AM, E1 Assistant Administrator stated " E8 has not been released to come back to work yet. She should not have been at work sick."</p> <p>On 8/4/2020 at 9:41 AM, Z1 Local Health Department Manager and Z2 Local Health Department Community Nurse per conference call stated " We do know that the facility was working in a critical staffing shortage related to the outbreak of Covid-19. "</p> <p>On 8/6/2020 at 12:15 PM, E1 Assistant Administrator stated " Our Covid-19 Control</p>	Z9999		
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Z9999	<p>Continued From page 8</p> <p>Measures did not include a plan to ensure staffing during an Covid-19 outbreak.</p> <p>B. The facility's Covid-19 Illness log dated 3/22/2020-8/7/2020 confirms the positive/presumed Covid-19 cases of (R1-R25, R26-R46) residing the facility during the outbreak beginning on 7/19-8/7/2020 including Covid-19 related hospitalizations of (R5, R8, R34, R40 and R45) along with the deaths of R45 on 8/3/2020 and R46 on 8/1/2020. The illness log also documents the Positive cases of the 32 employees.</p> <p>On 8/5/2020 at 12:15 PM, E1 stated, " C wing did not have any positive Covid-19 cases until (R3) was sent to the emergency room on 7/26/2020 and tested. (R3) was not admitted but we received his positive Covid-19 result on 7/29/2020. E1 further stated that two more residents on C-wing (R35 and R40) tested positive on 8/1/2020.</p> <p>On 8/7/2020 at 9:50 AM, E1 stated "The repeat Covid-19 testing completed on 8/5/2020 documents that all the remaining residents (R33, R34, R36, R37, R38, R39, R41, R42, R43 and R44) that had been negative on the C-wing tested positive."</p> <p>On 8/7/2020 at 8:00 AM, Z2 Nurse from Local Health Department assisting the facility, stated "The facility should have moved the 3 positive residents off of the C-wing once they tested Positive for Covid-19."</p> <p>On 8/7/2020 at 9:45 AM, E3 Assistant Director of Nurses was asked why (R3) who tested positive for Covid-19 on 7/29/2020, (R35 and R40) who tested positive on 8/1/2020 were not moved off</p>	Z9999		
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Z9999	<p>Continued From page 9</p> <p>the C-wing? E3 stated "I wondered that myself, I don't know why we did not do that."</p> <p>On 8/6/2020 at 2:00 PM, E41 DSP working on the C-wing stated "I am taking care of all the residents on the C-wing, both Covid -19 positive and negative."</p> <p>5) The facility's Covid-19 control Measures for Clients and Staff dated 4/9/20 document "Ensure adequate supplies of Personal Protective Equipment are easily accessible to staff."</p> <p>On 8/5/2020 at 6:00 AM, on the C- wing, with three Covid-19 positive residents, R3, R35 and R40, there were no biohazard bins on the unit or in their rooms.</p> <p>On 8/5/2020 at 6:10 AM, E4 DSP working on the A-wing with Positive Covid-19 residents. There were no gowns, masks or face shields located in the Personal Protective Equipment bin located on the unit. There were no biohazard bins for trash located in the rooms of the Covid-19 positive rooms of R1 and R15.</p> <p>On 8/5/2020 at 6:15 AM, on the B- wing that currently has one remaining resident with Covid-19 (R2) diagnosed on 8/1/2020. There were no gowns, masks or face shields located in the Personal Protective Equipment bin located in the hallway. There were no biohazard bins located in R2's room or in the hallway.</p> <p>On 8/5/2020 at 6:15 AM, E4 DSP stated, "We are low on supplies right now. We have had to sanitize and reuse our masks and gowns."</p> <p>On 8/5/2020 at 6:20 AM, E7 DSP working the B-wing was noted on the unit wearing an N95</p>	Z9999		
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Z9999	<p>Continued From page 10</p> <p>mask. E7 was asked about the PPE bin and why it was not stocked with supplies? E7 stated " We have ran out of masks and gowns." E7 further stated "There are no biohazard bins on the unit, I am using a regular trash can."</p> <p>On 8/6/2020 at 1:00 PM, E2 Director of Nurses stated " We do have Personal Protective Equipment in the building, The staff should have asked for it." E2 further stated that the units should have biohazard bins accessible for staff to throw contaminated waste in after caring for Covid-19 residents. The staff should have thrown the dirty items in the biohazard bin and laundry bin before leaving the room." E2 further stated that there should be biohazard bins for trash and laundry in the rooms of R1, R2, R3, R8, R35 and R40 that the staff can dispose of before leaving the rooms."</p> <p>6) The facilities Covid-19 Control Measures for clients and staff, dated 4/9/20, does not address sanitizing or reusing Personal Protective Equipment.</p> <p>The Centers for Disease Control (CDC) and Prevention web site at (www.cdc.gov/noish/topics/hcwcontrols/recommended_guidance_extuse.html) documents "Recommended Guidance for Extended Use and Limited Reuse of N95 filtering Face piece Respirators in Healthcare Settings documents " If reuse of N95 respirators is permitted, respiratory protection program administrators should ensure adherence to administrative and engineering controls to limit potential N95 respirator surface contaminations. and consider additional training and/or reminders for staff to reinforce the need to minimize unnecessary contact with the respirator surface. Healthcare facilities should develop</p>	Z9999		

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Z9999	Continued From page 11 clearly written procedures to advise staff to take the following steps to reduce contact transmission. If no manufacturer guidance is available, preliminary data suggest limiting the number of reuses to no more than five uses per device to ensure an adequate safety margin." On 8/5/2020 at 6:15 AM, E4 DSP stated "I have had to reuse my N95 mask, I sprayed it down with disinfectant spray, and put it in a paper bag at the end of my shift, store it in my locker and use it for my next shift. I don't know how many times it can be reused I did not have any training on reusing the mask, another coworker told me to do that." On 8/7/2020 at 9:45 AM, E3 Assistant Director of Nurses stated " E2 Director of Nurses told us that we could reuse our N95 masks by spraying each side with alcohol spray, placing it in a paper bag overnight and we could use it up to 12 times." E3 further stated "I doubt we have a policy on that." On 8/7/2020 at 9:55 AM, E8 DSP stated "I have had to reuse my N95 mask, I spray it down with disinfectant spray at the end of the shift, put it in a paper bag and reuse it on the next shift, I think we can reuse it up to 10 times." E8 further stated "I have not had any training on reusing the mask." On 8/7/2020 at 12:01 PM, E1 stated "We do not have a policy on reusing the N95 masks." 7) The facility's Covid-19 Control Measures for Clients and Staff, dated 4/6/2020, documents "isolation for clients who have been diagnosed with Covid-19 or those who have not been tested but have a temperature of 100 degrees F and have respiratory symptoms 2. Gloving, 3. Wear a surgical mask while in the room, 4. Wear eye	Z9999			

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: IL6006472	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED C 08/27/2020
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Z9999	<p>Continued From page 12</p> <p>protection, 5. Gowning. 6. Keep door closed at all times. 9. Appropriate handling of laundry-handle,transport, and process used linen to avoid contamination of air, surfaces and persons.</p> <p>The facility's illness log dated 8/1/2020 documents: "R2 Positive for Covid-19."</p> <p>On 8/5/2020 at 7:00 AM, There was one clean linen cart uncovered and one dirty linen bin uncovered located on the hallway of B-wing.</p> <p>On 8/5/2020 at 7:10 AM, E7 DSP and E8 DSP were observed providing care to R2 on the B-wing . R2's door was open to the hallway. E7 was only wearing an N95 mask, no gloves, gown or eye protection, E8 was wearing an N95 and gloves no gown or eye protection. E7 and E8 were observed changing R2's clothing, R2's shirt was saturated with urine, and cleaning up a bowel movement. Once care was provided, E7 grabbed up the dirty linen and wipes used to clean R2's bowel movement with no gloves, walked out of the room and threw the soiled linens in an uncovered dirty laundry bin in the hallway and threw the soiled wipes in the common use bathroom used by the residents on the unit.</p> <p>On 8/5/2020 at 1:00 PM. E2 Director of Nurses stated " E7 DSP and E8 DSP were both recent positive Covid-19 cases. E7 further stated that the local health department told them that once staff tested positive they only had to wear a mask, and gloves, no gown or eye protection."</p> <p>On 8/6/2020 at 9:00 AM, Z2 Local Health Department Infectious Disease Nurse stated "I told the facility that all staff that are working on Covid-19 units and providing direct care to</p>	Z9999		

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STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: IL6006472	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED C 08/27/2020
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Z9999	<p>Continued From page 13</p> <p>Covid-19 residents should be wearing N95 mask, gowns, gloves, and eye shields even if the staff themselves have tested positive for Covid-19."</p> <p>On 8/6/2020 at 1:00 PM, E2 Director of Nurses stated "R2 should have had biohazard bin in his room, accessible for staff to throw contaminated waste in after caring for R2. E2 also stated that R2's linen should have also been placed in a separate laundry bag prior to exiting R2's room." E2 further stated "The clean laundry carts and dirty laundry bins on the hallways should have been covered to prevent cross contamination."</p> <p>(A)</p>	Z9999		
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