

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>IL6006506</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>C</b> <b>10/25/2021</b>
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NAME OF PROVIDER OR SUPPLIER  <b>ASCENSION NAZARETHVILLE PLACE</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>300 NORTH RIVER ROAD DES PLAINES, IL 60016</b>
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S 000	Initial Comments	S 000		
S9999	<p>Complaint Investigation 2197699/IL139318 - F880G cited</p> <p>Final Observations</p> <p>Statement of Licensure Violations:</p> <p>300.610a) 300.696a) 300.696c)2)6)7) 300.1020a) 300.1210b)</p> <p>Section 300.610 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 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. These policies shall be in compliance with the Act and all rules promulgated thereunder. These written policies shall be followed in operating the facility and shall be reviewed at least annually by this committee, as evidenced by written, signed and dated minutes of such a meeting.</p> <p>Section 300.696 Infection Control</p> <p>a) Each facility shall establish and follow policies and procedures for investigating, controlling, and preventing infections in the facility. The policies and procedures must be</p>	S9999	<p style="text-align: right;"><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>consistent with and include the requirements of the Control of Communicable Diseases Code, and the Control of Sexually Transmissible Infections Code. Each facility shall monitor activities to ensure that these policies and procedures are followed.</p> <p>c) Each facility shall adhere to the following guidelines and toolkits of the Center for Infectious Diseases, Centers for Disease Control and Prevention, United States Public Health Service, Department of Health and Human Services, and Agency for Healthcare Research and Quality (see Section 300.340):</p> <p>2) Guideline for Hand Hygiene in Health-Care Settings</p> <p>6) Guideline for Isolation Precautions: Transmission of Infectious Agents in Healthcare Settings</p> <p>7) Guideline for Infection Control in Healthcare Personnel</p> <p>Section 300.1020 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 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</p>	S9999		
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S9999	<p>Continued From page 2</p> <p>resident to meet the total nursing and personal care needs of the resident.</p> <p>These Regulations were not met as evidenced by:</p> <p>Based on observation, interview, and record review, the facility failed to prevent and/or contain the spread of COVID-19 by failing to follow their policy and procedures for wearing PPE's (Personal Protective Equipment) including universal mask usage and hand hygiene; failed to provide available PPE's to staff as per CDC recommendations; and failed to train all staff including agency personnel on masking and isolation procedures. This failure caused R1 to contract COVID-19 infection who was then emergently transfer to the hospital; and died due to complications related to pneumonia and the COVID-19 virus. This failure also has the potential to affect all 64 residents currently residing in the facility.</p> <p>Findings include:</p> <p>On 10/23/21 at 10:10 AM, V1 (Manager on Duty) provided surveyor with a facility roster showing 64 current residents in the facility. V1 could not respond to the questions pertaining to COVID-19 and was not aware of the number of residents currently on isolation. Surveyor clarified V1's role, V1 stated, "I am the manager on duty today but I'm not clinical so I can't answer any of your questions regarding care but I suppose I should have."</p> <p>On 10/23/21 at 10:20 AM, V4 (RN) stated, "I'm the nursing supervisor on the second floor but I also pass medications on that floor too. I think we have 2 to 3 residents on isolation and they are on</p>	S9999		

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S9999	<p>Continued From page 3</p> <p>droplet precautions so we have to wear full PPE (personal protective equipment), wash our hands, wear gloves, mask, and gown before we go in and care for these residents."</p> <p>On 10/23/21 at 10:40 AM, V6 (CNA) and V7 (CNA) were observed in a small area across from the nurses' station both seated next to each other. V6 had her mask below her chin looking at her phone and V7 wore her mask under her nose and also was staring at her phone. Surveyor approached the two CNA's and asked which side of the hall each worked on. V6 stated while continuing to have her mask below her chin, "We're on our breaks, who are you.?" Surveyor identified self and asked again, V6 stated, "We're on break and I'm from the agency." V7 stated, "I'm with the agency too but not the same as hers (referring to V6)." Surveyor asked about masks and COVID-19 precautions, V6 and V7 both got up, and walked away not answering the surveyor's questions. V6 walked over to V4 (RN) and was overheard telling V4 that she was going to finish her break off the floor. V4 affirmed to the surveyor that both V6 and V7 were contracted out from an agency. V4 stated, "They should both still be wearing masks and the agency should have trained them about infection control."</p> <p>Surveyor asked V4 to accompany surveyor to an isolation room to observe and speak with a resident. V4 approached the isolation room with a PPE cart outside the room. V4 opened the drawer of the isolation bin and could not find any gloves or masks. V4 stated, "There should be PPE's in this drawer but there are only gowns inside but there should be masks and gloves too." Asked how staff were to use full PPE's if the bins had no gloves and masks, V4 stated, "I know, I will get</p>	S9999		
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S9999	<p>Continued From page 4</p> <p>more." Went to another isolation cart for another resident on isolation and found similar absence of PPE's inside the isolation bins."</p> <p>Asked V4 about biohazard bins inside the room of each resident on isolation, V4 stated, "We don't have those red biohazard bins inside the resident isolation rooms. Our corporate office said it's okay to just use the regular garbage bins but we already told them they were too small to fit all the used gowns, gloves, and masks after we take care of the resident. I will let them know your concern though."</p> <p>On 10/23/21 at 10:55 AM, approached the end of the hall where a group activity program was being held. V8 (Activity aide) was seated close to the center of the room, her mask off and was occupied with her phone. Seated next to her were 3 other residents who were not masked or prompted by V8 to wear their masks. 10 other residents were in seated at tables with all residents slouched in their chairs and most were asleep and only 4 residents were observed wearing masks. V8 stated, "I'm the activity person. We're doing puzzles but most of them are just waiting for lunch to be served. Inquired when lunch was, V8 stated, "I know its only 11:00 but sometimes it gets here early." Surveyor asked about masking and COVID-19 infection control procedures, V8 stated, "I know I briefly took my mask off but it should be on. I should be reminding these residents too to wear them."</p> <p>On 10/25/21 at 12:52 PM, V2 (Director of Nurses) stated, "We had a COVID outbreak in December when we had R1 in the facility. I believe there were about 20 or so residents that were positive and sent to the hospital. We also had a lot of staff that were positive too. We did</p>	S9999		

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S9999	<p>Continued From page 5</p> <p>contact tracing and the results came back that the source of the outbreak were mostly the CNA (certified nursing aides) who worked multiple jobs and facilities and more than likely brought the virus into the facility. We also traced it back to an event that happened when there was a dietary party and it ended up as a 'COVID-spreader' event. I will provide you with the contact tracing information and give you the details of all the residents and staff with COVID."</p> <p>Facility contact tracing records provided to surveyor show in part (but not limited to):</p> <ol style="list-style-type: none"> <li>1.) 21 total residents tested positive for COVID-19 including (R1 tested positive 12/18/20)</li> <li>2.) 4 out the 21 residents died of COVID-19. R1 was one of the four that died.</li> <li>3.) 32 facility staff were found to test positive for COVID-19.</li> </ol> <p>Hospital records dated 12/21/2020 reads in part (but not limited to): "91 year old female with a past medical history of dementia, diabetes, depression, who presented to the hospital on 12/21 for further evaluation of worsening lethargy. She resides at a nursing home where she was being treated for a bacterial infection with defapime and vancomycin and a Urinary Tract infection from e. Coli. She originally tested positive for COVID on 12/18/20 . Patient found to be septic due to COVID-19 pneumonia. Patient has been treated for COVID-9 pneumonia and possible aspiration pneumonia without much improvement in pulmonary functioning and encephalopathy."</p> <p>R1's death certificate shows:</p> <ol style="list-style-type: none"> <li>1.) Date of death: December 31, 2020</li> <li>2.) Cause of death: Acute hypoxic respiratory failure, pneumonia, Novel Corona (COVID-19)</li> </ol>	S9999		

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S9999	<p>Continued From page 6</p> <p>viral infection.</p> <p>Facility policy and procedures dated 5/2020 titled "COVID-19 Infection and Prevention Guidelines" state in part (but not limited to): "Perform hand hygiene at a minimum before starting the shift; before and after contact with a resident; Whenever putting on or taking off gloves; When hands are visibly soiled; Prior to leaving shift. Universal masking: Keep mask on at all times, covering the nose and mouth; Do not hang mask around the neck; Replace mask if wet, soiled or damaged. The purpose of universal masking is that the CDC has identified that there are people who carry COVID-19 and do not have symptoms. The residents that we serve live in a communal environment, the highest risk comes from associates and visitors entering the community. Universal masking limits the risk of transmission to the residents. Transmission-Based Precautions: Covid Positive: Droplet and Contact Precautions + Eye protection upon entry to the community and already initiated for current residents when they were a Person Under Investigation (PUI). PUI/Symptomatic Resident: Droplet precautions + Eye Protection initiated with any observation of a positive respiratory observation; Admission/Readmission and frequently out of the building for treatment (e.g. hemodialysis).</p> <p>Universal Masking: Used to prevent transmission from asymptomatic or pre symptomatic residents and healthcare personnel. Keep well fitting mask at all times, covering the nose and mouth, while in the community including break rooms or other spaces where coworkers are encountered. Remove only to eat or drink when physically distanced.</p>	S9999		

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S9999	Continued From page 7  Activities: Group activities may occur while adhering to the core principles of Covid-19 Infection Prevention for residents not requiring transmission based precautions. Social distancing, hand hygiene, and use of well-fitting face coverings are practiced.  Dining: Residents that are capable of eating and feeding themselves without assistance. Provide in-room meal service using trays, plate covers, and normal china and silverware. Associates perform hand hygiene prior to picking up the food tray and prior to leaving the resident's room. Associates perform hand hygiene prior to donning PPE and after removing. When assisting residents with meals, change gloves and perform hand hygiene between residents."  (A)	S9999		