

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: IL6000871	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 08/04/2022
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NAME OF PROVIDER OR SUPPLIER BETHANY HOME	STREET ADDRESS, CITY, STATE, ZIP CODE 4950 NORTH ASHLAND CHICAGO, IL 60640
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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	S 000		
	Annual Licensure Survey			
S9999	Final Observations	S9999		
	<p>Statement of Licensure Violations:</p> <p>330.340 a)4)G) 330.340 a)4)I) 330.790 a)</p> <p>Section 330.340 Incorporated and Referenced Materials EMERGENCY a) The following standards and guidelines are incorporated in this Part: 4) 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 may be obtained from the National Technical Information Services (NTIS), U.S. Department of Commerce, 5285 Port Royal Road, Springfield, Virginia 22161: G) Interim Infection Prevention and Control Recommendations to Prevent SARS-CoV-2 Spread in Nursing Homes, available at: https://www.cdc.gov/coronavirus/2019-ncov/hcp/ongtermcare.html (February 2, 2022) I) Interim Infection Prevention and Control Recommendations for Healthcare Personnel During the Coronavirus Disease 2019 (COVID-19) Pandemic, available at https://www.cdc.gov/coronavirus/2019-ncov/hcp/infectioncontrolreco</p>		<p>Attachment A Statement of Licensure Violations</p>	

Illinois Department of Public Health LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X8) DATE
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S9999	<p>Continued From page 1 mmendations.html (February 2, 2022)</p> <p>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.</p> <p>This requirement was NOT MET as evidenced by:</p> <p>Based on observations, interviews and record reviews, the facility failed to follow their policy and screen all employees, residents, and visitors upon entering the facility and properly wear a facial mask while indoors. These failures have the potential to affect all 46 residents residing in the facility.</p> <p>Findings include:</p> <p>On 08/02/2022 at 9:38 AM, survey team entered the facility through the main entrance. V3's (Front Desk Attendant) surgical mask was underneath V3's jaw. It was not covering V3's nose or mouth. Surveyors signed in on the Visitors log. Log asked for visitor's name, resident name, apartment number, time in and time out. Surveyors asked if they needed to fill additional questionnaire or screening. V3 stated, "No."</p> <p>At 10:15 AM, V4 (Charge Nurse) stated 3 of the 46 residents of the facility have Covid-19. V4</p>	S9999		

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S9999	<p>Continued From page 2</p> <p>stated R5, R6 and R7, who are Covid-19 positive, are on isolation.</p> <p>At 11:38 AM, V3's surgical mask was under V3's jaw, not covering the nose or mouth. V3 did not pull it up when surveyor approached.</p> <p>On 08/03/2022 at 7:25 AM, surveyor entered the facility. V7 (Front Desk Attendant) did not ask surveyor screening questions for COVID-19 symptoms.</p> <p>At 9:02 AM, V3's surgical mask was under V3's jaw not covering the nose or mouth. V3 did not pull it up when surveyor approached.</p> <p>At 9:19 AM, V2 (Chief Nursing Officer) stated it is mandatory to wear a surgical mask in the facility. V2 stated facility stopped screening visitors for COVID-19 symptoms.</p> <p>During a follow-up interview at 10:51 AM, V2 stated the facility stopped screening visitors on 06/11/2022. V2 stated facility received guidance from either Centers for Disease Control and Prevention (CDC) or Chicago Public Health (CPH). V2 provided surveyor with a hard copy of a policy titled "Covid-19 Health and Safety Plan", dated January 2022. Policy printed under [Hospital Name] letterhead. V2 stated it is the same policy the facility uses. On page 5 of the policy, it documents in part for Retirement Center: "All employees, patients and visitors are screened upon entering [Hospital Initials] and are everyone is required to wear a facial mask." On page 6 of the policy, it documents in part for Personal Protective Equipment: "Facemasks must be worn by employees over the nose and mouth when indoors."</p>	S9999		

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S9999	<p>Continued From page 3</p> <p>At 11:20 AM, V3's surgical mask was under V3's jaw, not covering the nose or mouth. There were four residents in the lobby. V3 did not pull it up when surveyor approached.</p> <p>At 11:39 AM, V4 stated the COVID-19 policy provided to the team is the most recent policy the facility has printed. V4 stated facility shares policies with the [Hospital Name].</p> <p>During a follow-up interview at 11:41 AM, V2 stated facility can't produce the memo or guidance that stated facility can stop screening visitors. V2 stated the provided COVID-19 policy was last revised January 2022.</p> <p>Long-Term Care Facilities Guidance, which also applies to Sheltered Care Facilities, documents in part for Universal Screening: "Establish a process to identify anyone entering the facility, regardless of their vaccination status, who has any of the following criteria so that they can be properly managed:</p> <ul style="list-style-type: none"> - a positive viral test for SARS-CoV-2, - symptoms of COVID-19, or - persons who meet criteria for quarantine, isolation, or exclusion from work <p>Options could include (but are not limited to): individual screening on arrival at the facility or implementing an electronic monitoring system in which individuals can self-report any of the above before entering the facility."</p> <p>Source: https://dph.illinois.gov/covid19/community-guidance/long-term-care.html</p> <p>(B)</p>	S9999		
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