

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>IL6014948</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>03/16/2022</b>
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NAME OF PROVIDER OR SUPPLIER  <b>ILLINOIS VETERANS HOME AT MANTENO</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>ONE VETERANS DRIVE MANTENO, IL 60950</b>
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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 Survey	S 000		
S9999	<p>Final Observations</p> <p>Statement of Licensure Violations:</p> <p>340.1335a) 340.1335c)2</p> <p>Section 340.1335</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 Diseases Code (77 Ill. Adm. Code 693). Activities shall be monitored to ensure that these policies and procedures are followed.</p> <p>c) Each facility shall adhere to the following guidelines of the Center for Infectious Diseases, Centers for Disease Control and Prevention, U.S. Public Health Service, Department of Health and Human Services (see Section 340.1010):</p> <p>2) Guideline for Hand Hygiene in Health-Care Settings.</p> <p>This requirement was not met as evidenced by:</p> <p>Based on observation, interview and record review the facility failed to follow infection control guidance with regards to hand hygiene and gloving during provision of care. The facility also failed to disinfect the blood glucose machine per</p>	S9999	<p style="text-align: center;"><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>policy and procedure, and per germicidal wipe directions.</p> <p>This applies to 4 of 12 residents (R1, R7, R13 and R14) reviewed for infection control in the sample of 12.</p> <p>The findings include:</p> <p>1. On 3/15/22 at 10:20 AM, R1 was in bed sleeping. V4 (Treatment Nurse) provided treatment to R1's pressure injury while being assisted by V15 (VNAC/Veterans assistant nursing certified) with repositioning the resident. R1 had an eschar formation on the left heel with dried skin around the pressure injury. V4 cleaned R1's left heel using a gauze wet with saline wound wash. Using the same gloves that she used to clean R1's left heel pressure injury, V4 then applied the Alginate with antibacterial silver on the left heel pressure injury, then covered the area with a foam dressing. During the same treatment observation, V4 cleaned R1's right lateral malleolus using a new pair of gloves. V4 used a gauze wet with saline wound wash to clean R1's right lateral malleolus that had a dried hardened skin with dried flaky skin surrounding the area. Using the same gloves V4 wiped the skin prep on the right lateral malleolus and covered the area with foam dressing.</p> <p>On 3/15/22 at 10:53 AM, V16 (unit nursing manager) stated that from a dirty to a clean procedure, she expects the nursing staff to remove gloves, perform hand hygiene (either use a hand sanitizer or wash hands) then re-gloved before applying treatment to prevent cross contamination.</p> <p>The facility's hand hygiene policy and procedure</p>	S9999		

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S9999	<p>Continued From page 2</p> <p>last revised by the facility on 7/2021 shows the purpose, "Effective hand hygiene reduces the incidence of healthcare-associated infections." Under the policy it shows, "All members of the healthcare team will comply with current Centers for Disease Control and Prevention (CDC) hand hygiene guidelines. Further review of the same policy and procedure shows under gloves and hand hygiene, "Gloves reduce hand contamination by 70-80 percent, prevent cross-contamination and protect patients and health care personnel from infection. However, the use of gloves does not eliminate the need for hand hygiene." "2. Change gloves during patient care if moving from a contaminated body site to a clean body site. 3. Remove gloves promptly after use, before touching non-contaminated items and environmental surfaces, and before caring for another patient and 4. Decontaminate hands after removing gloves."</p> <p>2. On 3/15/22 at 11:06 AM, V17 (Registered Nurse) used the unit blood glucose monitoring machine to check R13's blood sugar level. After performing the procedure, V17 used a packet of germicidal disposable wipe, wiped the used blood glucose monitoring machine one time and discarded the used germicidal disposable wipe immediately and then placed the said blood glucose monitoring machine on top of the medication cart to air dry. At 11:20 AM, V17 used the same blood glucose monitoring machine that was on top of the medication cart (last used for R13) to check R14's blood sugar. After performing the procedure, V17 used another packet of germicidal disposable wipe, wiped the used blood glucose monitoring machine one time and discarded the used germicidal disposable wipe immediately and then placed the blood glucose monitoring machine on top of the</p>	S9999		

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S9999	<p>Continued From page 3</p> <p>medication cart to air dry. Review of the germicidal disposable wipe directions for use printed on the front of the packet shows, "To disinfect and deodorize: To disinfect nonfood contact surfaces only: unfold a clean wipe and thoroughly wet surface. Allow treated surface to remain wet for a full two (2) minutes. For heavily soiled surfaces, use a wipe to pre-clean prior to disinfecting. Let air dry."</p> <p>Review of the facility's policy and procedure regarding blood glucose monitoring last reviewed by the facility on 6/2021 shows in-part under the procedure, "Clean and disinfect meter per manufacturer guidelines."</p> <p>Review of the blood glucose monitoring machine guidelines shows, "Cleaning and disinfecting your meter and lancing device is very important in the prevention of infectious disease. Cleaning is the removal of dust and dirt from the meter and lancing device surface, so no dust or dirt gets inside. Cleaning also allows for subsequent disinfection to ensure germs and disease causing agents are destroyed on the meter and lancing device surface."</p> <p>On 3/16/22 at 10:16 AM, V2 (Director of Nursing) stated that she expects the nurses to follow the contact time of two (2) minutes as directed on the instructions written on the packet of the germicidal disposable wipe to ensure that the equipment and/or surfaces are disinfected properly. V2 added that if the instruction is not followed, the equipment and/or surfaces was not disinfected.</p> <p>3. R7 was admitted to the facility September 22, 2016. According to ERs face sheet his diagnoses included multiple sclerosis, chronic pain syndrome, quadriplegia, osteoarthritis, and stage</p>	S9999		
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S9999	<p>Continued From page 4</p> <p>2 pressure ulcer of the right buttock. R7's most recent BIMs documented he was cognitively intact.</p> <p>On 3/15/22 at 11:25 AM, V4 (Wound Care Nurse) was observed rendering wound care to R7's pressure ulcer at the right gluteal region. V4 explained the process, adding that it was necessary to cut the dressing which she noted was "jellyfiber opticell" to fit inside the tissue of R7's pressure ulcer. It was noted that V4 opened the jellyfiber opticell dressing package, and then stated she needed a pair of scissors to cut the jellyfiber opticell. V4 then used her gloved hand to open the top drawer of R7's bedside table and picked up a pair of bandage scissors. V4 did not use the scissors, and put them back in the drawer stating, "I will use mine." V4 then opened the drawer of the treatment cart and picked up a pair of bandage scissors. V4 then used alcohol wipes from the treatment cart to wipe the scissors. Wearing the same gloves, V4 used the scissors to cut the jellyfiber opticell dressing and placed the cut portion inside the R7's pressure ulcer.</p> <p>On 3/16/22 at 11:50 AM V2 (Director of Nursing) stated, "Gloves should be changed anytime you're breaking clean from dirty ...Anytime you're touching dirty you have to change gloves."</p> <p>(C)</p>	S9999		