

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: IL6015481	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED C 11/23/2020
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NAME OF PROVIDER OR SUPPLIER ILLINOIS VETERANS HOME AT LASALLE	STREET ADDRESS, CITY, STATE, ZIP CODE 1015 O'CONNOR AVENUE LA SALLE, IL 61301
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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 Original Complaint #2028974 / IL#128683	S 000		
S9999	Final Observations Statement of Licensure Findings 340.1300 a) 340.1335 a) Section 340.1300 Facility Policies a) The facility shall have written policies and procedures governing all services provided by the facility. The written policies and procedures shall be formulated with the involvement of the administrator. 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 the facility's advising physician or the medical advisory committee, as evidenced by a dated signature. Section 340.1335 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. These REQUIREMENTS are not met as evidenced by: Based on observation, interview, and record review, the facility failed to disinfect monitoring	S9999		

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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>equipment in between resident use for three residents (R3, R4, and R5) of five reviewed for infection control in a sample of five.</p> <p>Finding include:</p> <p>The facility's Infection Control Policy and Procedure, dated 10-20-15, documents "Resident Care Equipment: Handle resident care equipment soiled with blood, body fluids, secretions, and excretions in a way that prevents skin and mucous membrane exposures, contamination of clothing, and transfers of microorganisms to other residents and environment. Ensure that reusable equipment is not used for the care of another resident until it has been appropriately cleaned. Appropriate CDC (Center for Disease Control) guideline cleansers and disinfectants are to be used on all resident care equipment after use. Vitals carts (blood pressure cuffs, stethoscopes, pulse oximeters, and thermometers) are to be wiped down after each use."</p> <p>On 11-19-2020, at 11:10am, V12, VNAC (Veteran's Nursing Assistant Certified), wheeled a rolling monitor into R5's room on the Covid unit and took R5's vital signs including temperature, oxygen saturation level, respiratory rate, and blood pressure. V12 then wheeled the rolling monitor into R3 & R4's room across the hall. V12 took R4's and then R3's same vital signs. V12 wheeled the rolling monitor out the R3 and R4's room and continued up the hall towards other resident rooms to do the same. No disinfecting of the equipment was performed in between uses.</p> <p>R3, R4, and R5's current Care Plans document they are at risk for Covid-19, and include an intervention of, "Resident care equipment to be appropriately cleaned, disinfected, or sterilized</p>	S9999		

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S9999	<p>Continued From page 2</p> <p>according to facility protocol."</p> <p>On 11-19-2020, at 11:15am, V12, VNAC, stated V12 was working her way up the hall doing resident vitals and was told by management to, "Wipe down the monitor and equipment when done, but not in between since they are all Covid positive."</p> <p>On 11-19-2020, at 12:07pm, V2, Director of Nursing, stated the staff should be wiping equipment off between residents on the Covid unit or any unit. V2 stated, "It is basic infection control even without Covid."</p> <p>On 11-19-2020, at 12:57pm, V3, Registered Nurse/Infection Control Preventionist, stated, "The blood pressure cuff and oximeter should be wiped down between residents. There should be bleach wipe packets on the rolling vital sign cart. They are to take alcohol to the thermometer in between residents."</p>	S9999		