

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: IL6016901	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 12/21/2020
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NAME OF PROVIDER OR SUPPLIER HEALTHBRIDGE OF ARLINGTON HTS	STREET ADDRESS, CITY, STATE, ZIP CODE 1200 N ARLINGTON HEIGHTS RD ARLINGTON HEIGHTS, IL 60004
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S 000	<p>Initial Comments</p> <p>Complaint Investigation:</p> <p>2019747/IL129485</p> <p>ACOVID-19 Focused Infection Control Survey was conducted by Illinois Department of Public Health on December 21, 2020.</p> <p>Survey Census: 62 Total Sample: 11</p>	S 000		
S9999	<p>Final Observations</p> <p>Statement of Licensure Violations</p> <p>300.610a) 300.696a) 300.696c)6)7) 300.1020a) 300.1020b) 300.3240a)</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. The written policies and procedures 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. 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 this committee, documented by written, signed and dated minutes of the meeting.</p>	S9999	<p style="text-align: center;">Attachment A Statement of Licensure Violations</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>Section 300.696 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 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, United States Public Health Service, Department of Health and Human Services (see Section 300.340):</p> <p>6) Guideline for Isolation Precautions in Hospitals</p> <p>7) Guidelines for Infection Control in Health Care 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>b) A resident who is suspected of or diagnosed as having any communicable, contagious or infectious disease, as defined in the Control of Communicable Diseases Code, shall be placed in isolation, if required, in accordance with the Control of Communicable</p>	S9999		

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S9999	<p>Continued From page 2</p> <p>Diseases Code. If the facility believes that it cannot provide the necessary infection control measures, it must initiate an involuntary transfer and discharge pursuant to Article III, Part 4 of the Act and Section 300.620 of this Part. In determining whether a transfer or discharge is necessary, the burden of proof rests on the facility.</p> <p>Section 300.3240 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> <p>These regulations are not met as evidenced by:</p> <p>Based on observation, interview, and record review the facility failed to separate Coronavirus 19 (COVID-19) positive residents and COVID-19 negative residents The facility failed to wear appropriate PPE (personal protective equipment) to prevent the spread of COVID-19 and the facility failed to ensure newly admitted residents to the facility were put on contact and droplet precautions. The facility also failed to ensure all staff members were tested twice weekly as required by the county's positivity rate. Facility documents at the time of the survey show 44 residents currently have COVID-19 and 15 staff members had contracted COVID-19. These failures had the potential to affect all 62 residents in the facility.</p> <p>The findings include:</p> <p>1. On 12/16/20 at 8:55 AM, V2 Director of Nursing (DON) said as of yesterday we had 40 positive COVID 19 residents in the facility. V2 said we have the second floor is our COVID 19 unit, and</p>	S9999		

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S9999	<p>Continued From page 3</p> <p>the first floor contains a PUI (person under investigation) unit and our non COVID 19 unit. V2 said all COVID 19 and PUI residents are separated from non COVID residents. V2 said if a resident tests positive for COVID 19 they are moved upstairs to the COVID unit.</p> <p>On 12/16/20 at 9:22 AM, on the non COVID 19 unit, V5 Respiratory Therapist stated "there are residents that tested positive in this unit, I just don't know which ones. I just found out this morning."</p> <p>On 12/16/20 at 9:54 AM, on the non COVID 19 unit, V7 Occupational Therapist stated "there are newly positive residents down here, I'm not sure their plan."</p> <p>On 12/16/20 at 10:00 AM on the non COVID 19 unit, V3 Registered Nurse (RN) stated "there are four positive residents (R2 and R8-R10) on this unit, the results came in today. V3 said when residents test positive they are moved upstairs right away. We are waiting for rooms.</p> <p>On 12/16/20 at 10:12 AM, R2 and R8-R10's room (on the non COVID 19 unit) had signs on the door "See nurse before entering" and had carts with PPE outside the door.</p> <p>On 12/16/20 at 1:48 PM, V9 Licensed Practical Nurse said at 6:45 AM she saw the COVID 19 positive test results and emailed the department heads and the DON.</p> <p>On 12/16/20 at 12:30 PM, V2 (DON) said V9, around 6:00 AM, checked the COVID 19 lab results. V2 said V9 emailed her about the COVID 19 positive results for 4 residents. V2 said she called V10 Environmental Service Director and had V10 put the 4 positive residents on isolation and close their room doors. V2 said she arrived at the facility around 8:50 AM.</p> <p>On 12/16/20 at 12:55 PM, V10 said they were at the facility at 4:00 AM and found out about the COVID 19 positive residents from the night nurse.</p>	S9999		

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S9999	<p>Continued From page 4</p> <p>V10 said they had to wait for V2 to get the facility in order to come up with a plan to move the residents. V10 said he met with V2 when she got in and it was decided to open up another wing upstairs and install a divider to partition off the wing. V10 said he was finished opening the wing, the divider was up by 9:00 AM and it was ready for residents to be moved at that time.</p> <p>On 12/16/20 at 10:45 AM, V2 stated "we have 10 COVID beds right now. We are going to move them right now. I found out this morning of the positive test results."</p> <p>On 12/16/20 at 12:49 PM, R10 was still in his room on the non COVID unit.</p> <p>On 12/16/20 at 12:59 PM, R10 was still in his room on the non COVID unit with the door to the room wide open.</p> <p>On 12/16/20 at 1:32 PM, R10's door to the room on the non COVID unit was wide open and unclean. R10 was not in the room.</p> <p>R2's COVID 19 lab result shows positive with a reported date: 12/16/20 12:25 AM.</p> <p>R8's COVID 19 lab result shows positive with a reported date: 12/16/20 12:25 AM.</p> <p>R9's COVID 19 lab result shows positive with a reported date: 12/16/20 12:25 AM.</p> <p>R10's COVID 19 lab result shows positive with a reported date: 12/16/20 12:25 AM.</p> <p>2. On 12/16/20 at 10:14 AM, R10's room had a "see nurse before entering" sign on the door and a cart with personal protective equipment (PPE) next to the door. V4 Certified Nursing Assistant (CNA) went into R10's room with a vital sign machine wearing a cloth mask with an N95 mask over it, a face shield, and gloves. V4 did not have a gown on. V4 stated "I'm taking care of 4 residents today, they are positive. I wear my own mask under the N95, a face shield, and gloves to do vitals. I did not wear a gown. I only wear a</p>	S9999		

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S9999	<p>Continued From page 5</p> <p>gown when I'm turning and repositioning or cleaning up a resident."</p> <p>On 12/16/20 at 10:26 AM, V4 went into R9's room (COVID 19 positive) without a gown.</p> <p>On 12/16/20 at 2:07 PM, V2 DON said PPE required to be worn for COVID 10 positive residents is: gown, N95 with a surgical mask over it, goggles or a face shield, and gloves. V2 said they also have hair coverings and booties if the staff want to wear them. V2 said staff should be wearing full PPE to go into the COVID 19 positive rooms on the non COVID 19 unit.</p> <p>On 12/16/20 at 12:56 PM, V4 (after going into 2 COVID 19 positive rooms without wearing a gown over her scrubs) went into R11's room (who is COVID 19 negative) without a gown, wearing the same potentially contaminated scrubs.</p> <p>The facility's Infection Control Policy dated 11/17/20 shows "Strict isolation precautions should be initiated when a resident has an infectious disease or epidemiologically significant pathogen transmission by direct resident contact or by contact."</p> <p>3. On 12/16/20 at 10:00 AM, V3 RN stated "R2 is new she just came in 3 or 4 days ago. She was negative when she came in but she is positive today. R6 is a new admit about 2 or 3 days ago. R6 is not a PUI so she is not on isolation. R7 is also new and she just came back from a procedure at the hospital but she is not on isolation."</p> <p>On 12/16/20 at 9:30 AM, R7 was in a room on the non COVID unit with the room door open.</p> <p>On 12/16/20 at 12:10 PM, V2 said R2 was a new admit on the non COVID 19 unit and was just on standard precautions with symptom monitoring.</p> <p>On 12/16/20 at 12:54 PM, V3 RN said the new admits on the non COVID 19 unit are not on isolation, just standard precautions.</p>	S9999		

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S9999	<p>Continued From page 6</p> <p>On 12/16/20 at 2:07 PM, V2 said starting in December, all new admits are considered PUI (person under investigation) and staff should use full PPE when caring for them.</p> <p>R2's Face sheet shows R2 was admitted on 12/10/20 (to the non COVID 19 unit)with diagnoses of malignant neoplasm of the colon, secondary malignant neoplasms of the liver, right and left lungs, pleural effusions, atrial fibrillation, type 2 diabetes, and anemia.</p> <p>R6's Face sheet shows R6 was admitted on 12/12/20 to the non COVID 19 unit.</p> <p>R7's Face sheet shows R7 was admitted on 12/9/20 to the non COVID 19 unit.</p> <p>R2's COVID 19 lab result shows positive with a reported date: 12/16/20 12:25 AM.</p> <p>The facility's Infection Control Policy dated 11/17/20 shows "enhanced droplet isolation is implemented for newly admitted asymptomatic and COVID 19 negative residents for 8-10 days since their admission."</p> <p>4. On 12/17/20 at 2:08 PM, V2 Director of Nursing (DON) confirmed the facility's Census for 12/16/20 was 62 residents. V2 stated 44 out of those 62 residents are positive for COVID-19 and 15 staff members have contracted COVID-19.</p> <p>On 12/16/20 at 8:55 AM, V2 DON said the facility has been doing twice weekly COVID 19 testing for staff since October when the county positivity rate was over 10%. V2 said staff testing is on Tuesdays and Fridays.</p> <p>The facility could not provide COVID-19 test results for V11 Registered Nurse (RN) from 11/20/20 to 12/4/20, V4 Certified Nursing Assistant from 11/24/20 to 12/1/20, and V12 from 11/24/20 to 12/4/20. V11 (according to twice weekly schedule) should have been tested on</p>	S9999		
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S9999	<p>Continued From page 7</p> <p>11/20/20, 11/24/20, 11/27/20, 12/1/20, and 12/4/20. V11 tested positive for COVID 19 on 12/8/20. V4 should have been tested on 11/24/20, 11/27/20, and 12/1/20. V4 tested positive for COVID 19 on 12/4/20. V12 should have been tested on 11/24/20, 11/27/20, 12/1/20, and 12/4/20. V12 tested positive for COVID 19 on 12/8/20.</p> <p>The facility's resident testing list shows residents have tested positive on 11/22/20, 12/2/20, 12/3/20, and 12/7/20.</p> <p>The facility's Infection Control Policy dated 11/17/20 shows "all staff, visitors, contractors will mandatorily be offered COVID testing. In accordance to IDPH guidelines will be determined per county positivity rate."</p> <p>The CDC's Interim Guidance on Testing Healthcare Personnel for SARS-CoV-2 updated on 7/17/20 shows, " Testing asymptomatic HCP without known or suspected exposure to SARS-CoV-2 for early identification in special settingsCurrently, testing asymptomatic HCP without known or suspected exposure to SARS-CoV-2 is recommended for HCP working in nursing homes is part of the recommended reopening processIn this situation, initial viral testing of all HCP in nursing homes, along with weekly viral testing thereafter is recommended. State and local officials may adjust the recommendation for weekly viral testing of HCP based on the prevalence of the virus in their community; for example, performing weekly testing in areas with moderate-to-substantial community transmission and less frequent testing in areas with minimal-to-no community transmissionHealthcare personnel (HCP): HCP refers to all paid and unpaid persons</p>	S9999		
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S9999	<p>Continued From page 8</p> <p>serving in healthcare settings who have the potential for direct or indirect exposure to patients or infectious materials, including body substances (e.g., blood, tissue, and specific body fluids); contaminated medical supplies, devices, and equipment; contaminated environmental surfaces; or contaminated air. HCP include, but are not limited to, emergency medical service personnel, nurses, nursing assistants, physicians, technicians, therapists, phlebotomists, pharmacists, students and trainees, contractual staff not employed by the healthcare facility, and persons not directly involved in patient care, but who could be exposed to infectious agents that can be transmitted in the healthcare setting (e.g., clerical, dietary, environmental services, laundry, security, engineering and facilities management, administrative, billing, and volunteer personnel)."</p> <p style="text-align: center;">A</p>	S9999		