

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: IL6008775	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 02/23/2022
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NAME OF PROVIDER OR SUPPLIER SPANISH OAKS CENTER	STREET ADDRESS, CITY, STATE, ZIP CODE 223 WEST VIENNA, P.O. BOX 118 ANNA, IL 62906
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S 000	Initial Comments Annual Licensure Survey	S 000		
S9999	<p>Final Observations</p> <p>Statement of Licensure Violations I. of II.: 330.790 a) 330.794 c)1)2)3)4)5)6)7)</p> <p>Section 330.790 Infection Control (EMERGENCY) a) Each facility shall establish and follow policies and procedures for investigating, controlling, preventing, and testing for infections in the facility. The policies and procedures must be consistent with and include the requirements of the Control of Communicable Diseases Code and Control of Sexually Transmissible Disease Code. All staff shall be trained on the policies and procedures, and training records maintained for three years. Activities shall be monitored to ensure that these policies and procedures are followed. Infection Control policies and procedures shall be maintained in the facility and made available upon request to the facility staff, the resident and the resident's family or resident's representative, the Department, and the certified local health department.</p> <p>Section 330.794 COVID-19 Vaccination of Facility Staff (EMERGENCY) c) Beginning September 19, 2021, except as provided in subsection (c)(7), each facility shall require its staff who are not fully vaccinated against COVID-19 to undergo testing for COVID-19, weekly, at a minimum. If staff who are not fully vaccinated against COVID-19 are not tested as required by this subsection, the staff shall not be permitted to enter or work at the</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 facility.</p> <p>1) The COVID-19 test shall either have Emergency Use Authorization by the FDA or be operated pursuant to the Laboratory Developed Test requirements of the U.S. Centers for Medicare and Medicaid Services</p> <p>2) Testing for staff who are not fully vaccinated against COVID-19 must be conducted on-site at the facility, or the facility must obtain proof or confirmation from the staff member of a negative test result obtained elsewhere.</p> <p>3) A laboratory RT-PCR test is the preferred test for COVID-19 infection; however, point-of-care (POC) antigen testing is acceptable. For a facility to conduct these tests with their own staff and equipment, the facility must have, at a minimum, a Clinical Laboratory Improvement Amendments (CLIA) Certificate of Waiver.</p> <p>4) If a staff person tests positive for COVID-19, the facility shall exclude the staff person from the facility, and the staff person shall be subject to all applicable isolation and quarantine rules and facility policies.</p> <p>5) In the event COVID-19 RT-PCR or POC antigen testing is not available, staff may use at-home or self-tests if the tests are observed and verified by a health care provider, and reportable as required in subsection (g).</p> <p>6) Staff who are not fully vaccinated may be permitted to enter or work at the facility while they are waiting to receive the results of their weekly test.</p> <p>7) When the facility is located in a county of high or substantial transmission, as indicated by the CDC COVID 19 Integrated County View, available at https://covid.cdc.gov/covid-data-tracker/#county-view, the facility shall require its staff who are not fully vaccinated against COVID-19 to undergo testing for COVID-19, twice weekly, with tests</p>	S9999		

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S9999	<p>Continued From page 2</p> <p>administered at least two days apart as long as the county in which the facility is located remains in a high or substantial transmission status.</p> <p>This requirement is not met as evidenced by:</p> <p>Based on interview and record review the facility failed to ensure unvaccinated staff were tested for Covid-19 per the current CDC (Center for Disease Control) guidelines. This has the potential to affect all 31 residents currently residing at the facility.</p> <p>Findings Include:</p> <p>The undated, not labeled facility room roster documents 31 residents currently reside at the facility.</p> <p>The handwritten, undated, not labeled list of Covid-19 vaccinated and unvaccinated facility staff provided to this surveyor on 2/23/22 by V2 (Assistant Administrator) documents 5 (V4, V6, V8, V9 and V10) of 11 facility staff are not vaccinated against Covid-19.</p> <p>The undated facility Covid-19 policy provided to the surveyor on 2/23/22 by V1 (Administrator) does not address testing unvaccinated staff for Covid-19.</p> <p>The Interim Guidance for Nursing Homes and Other Licensed Long-Term Care Facilities dated 1/18/22 documents, "The facility must test unvaccinated staff at a minimum of weekly in accordance with COVID-19 EXECUTIVE ORDER NO. 87, or more frequently according to the community transmission level or if required by local health departments ..."</p>	S9999		

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S9999	<p>Continued From page 3</p> <p>The "Infection Control (Emergency Amendments to Emergency Rule) (Effective 11/5/21; Expires 2/11/22) EMERGENCY - 45 Ill. Reg. 14569" documents, " The rule also requires certified facilities to comply with recently updated federal requirements for COVID-19 testing under 42 CFR 483.80(h)."</p> <p>The facility was not able to provide reproducible evidence unvaccinated staff are routinely tested for Covid-19.</p> <p>On 2/23/22 at 10:45 AM, V1 (Administrator) stated they do not test staff for Covid-19.</p> <p>"A"</p> <p>Statement of Licensure Violations II. Of II.:</p> <p>330.1310 a) 330.1310 i) 330.1310 j)</p> <p>330.1310 Activity Program</p> <p>a) The facility shall provide an ongoing program of activities to meet the interests and preferences and the physical, mental and psychosocial well-being of each resident, in accordance with the resident's comprehensive assessment. The activities shall be coordinated with other services and programs to make use of both community and facility resources and to benefit the residents.</p> <p>i) If residents participate in regularly scheduled therapeutic programs outside the facility (e.g., school, employment, or sheltered workshop), the residents' needs for activities while they are in the facility shall be met.</p> <p>j) Residents' participation in and response to the</p>	S9999		

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S9999	<p>Continued From page 4</p> <p>activity program shall be documented at least quarterly and included in the clinical record. The facility shall maintain current records of resident participation in the activity program.</p> <p>This requirement is not met as evidenced by:</p> <p>Based on observation, interview, and record review the facility failed to ensure residents were allowed to continue to work at day training work sites and to ensure residents could leave the facility grounds to shop for 4 of 6 (R1, R4, R5, and R6) residents reviewed for resident rights in the sample of 6.</p> <p>Findings Include:</p> <p>R1's facility Admission Sheet documents R1 was admitted to the facility on 12/15/2004 with diagnoses that include borderline personality disorder, hypertension, depressive disorder, gastroesophageal reflux and diabetes.</p> <p>R4's facility Admission Sheet documents R4 was admitted to the facility on 1/11/2007 with diagnoses that include personality disorder, alcohol abuse, and hypertension.</p> <p>R5's facility Admission Sheet documents R5 was admitted to the facility on 2/8/2006 with diagnoses that include schizoaffective disorder, borderline personality disorder, and hypertension.</p> <p>R6's facility Admission Sheet documents R6 was admitted to the facility on 11/25/1996 with diagnoses that include paranoid schizophrenia.</p> <p>On 2/22/22 at 12:20 PM, R1 stated R1 will be glad when things get back to normal so they can go out and go shopping for themselves.</p>	S9999		

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S9999	<p>Continued From page 5</p> <p>On 2/23/22 at 11:38 AM, R4 stated they used to walk to the grocery stores all the time, but they can't right now. R4 stated the facility won't let them go. When asked if R4 still wanted to go R4 responded, "Yes."</p> <p>On 2/22/22 at 12:55 PM, R5 stated R5 used to work at the rest area and would like to go back to work. R5 stated it has been nearly three years since R5 got to work. When asked when they were going back to work R5 stated they would as soon as they got released.</p> <p>On 2/23/22 at 11:32 AM when the surveyor asked R5 who told R5 that R5 couldn't work R5 stated, V1 had R5 staying at the facility because of Covid-19. R5 stated, "She (V1) was trying to keep me safe." When asked if R5 ever went shopping or to any of the local restaurants R5 stated, "No." When asked if R5 wanted to go out of the facility on outings R5 stated R5 did. When asked why R5 hadn't done that R5 stated, "Because of Covid. They told us we had to stay here."</p> <p>On 2/23/22 at 1:40 PM, R6 stated R6 used to work but has been laid off from the rest area. R6 stated R6 worked there for 21 years until they shut it down with Covid. R6 stated R6 would like to go back to work. When asked if they ever got to go out of the facility R6 stated, "Not in a long time." R6 stated R6 went to the local store by self in June or July but hasn't been out since. R6 stated R6 was able to finally get R6's hair cut this year and to see R6's doctor. R6 stated R6 would like to go back out. When asked why R6 hadn't been stated "Covid." When asked if it was R6's choice to not go out R6 stated it was the facility choice.</p>	S9999		

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S9999	<p>Continued From page 6</p> <p>R1, R4, R5, and R6 were observed in the facility and not going to work or to the local stores on 2/22/22 and 2/23/22.</p> <p>On 2/23/22 at 11:15 AM, V6 (Personal Care Provider) stated the residents used to walk to the local gas station, fast food restaurants, and grocery stores but they haven't been able to do that since Covid hit. V6 stated the residents have been asking to go on these trips.</p> <p>On 2/23/22 at 11:50 AM, V6 (Personal Care Provider) stated R5 and R6 were working outside of the facility prior to Covid-19 but haven't been to work since. V6 stated R5 and R6 ask when they will be able to go back to work.</p> <p>On 2/22/22 at 3:24 PM, V1 (Administrator) stated they closed the rest stops where R5 and R6 worked down when Covid first started then opened them up for a while, but she thinks they are closed again. V1 stated R5 and R6 are the only two residents residing at the facility who work outside of the facility. V1 stated they work through a local day training site, and she hasn't heard from the sites supervisors to let her know they could go back to work.</p> <p>On 2/23/22 at 1:00 PM, V2 (Assistant Administrator) stated since Covid-19 started she does all the shopping for the residents, and no one is allowed out of the facility to go to the local stores.</p> <p>On 2/23/22 at 10:45 AM, V1 confirmed the residents had not been to local stores and restaurants but they were going to be starting that again.</p> <p>On 2/23/22 at 11:02 AM, V5 (Director of Day</p>	S9999		

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S9999	<p>Continued From page 7</p> <p>Training (DT) work program) stated R5 and R6 have never returned to work since the beginning of Covid. V5 stated they never had to quit working and they would love to have them back. V5 stated they were notified by V1 (Administrator) R5 and R6 couldn't work. V5 stated they reach out quarterly or every six months to the facility. V5 stated it is a janitorial contract that never closed so R5 and R6 could have been working this whole time.</p> <p>On 2/23/22 at 1:21 PM, V7 (Qualified Intellectual Disability Professional-Day Training work program) stated R5 and R6 worked with the DT work program but haven't been to work in approximately two years. V7 stated they stopped coming to work at the beginning of Covid. V7 stated he has talked with V1 every so many months and she would say R5 and R6 couldn't work due to the high Covid numbers.</p> <p>The facility was unable to provide reproducible evidence residents were being allowed to go to local stores and restaurants and/or attend the day training work sites.</p> <p>The Updated Interim Guidance for Nursing Homes and Other Licensed Long-Term Care Facilities dated 1/18/22 documents, "Facilities must permit residents to leave the facility as they choose. Should a resident choose to leave, the facility should remind the resident, and any individual accompanying the resident, to wear a well-fitting mask, physically distance, and perform frequent hand hygiene, and to encourage those around them to do the same."</p> <p>"B"</p>	S9999		