

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>IL6012637</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>03/14/2022</b>
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NAME OF PROVIDER OR SUPPLIER  <b>FREEBURG TERRACE</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>#4 HILL MINE ROAD FREEBURG, IL 62243</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
Z000	<b>COMMENTS</b>  ANNUAL LICENSURE SURVEY ANNUAL CERTIFICATION SURVEY-FULL	Z 000		
Z9999	<b>FINDINGS</b>  Statement of Licensure Violations:  350.620a) 350.760a) 350.760c)7) 350.1210  Section 350.620 Resident Care Policies  a) The facility shall have written policies and procedures governing all services provided by the facility which shall be formulated with the involvement of the administrator. The policies shall be available to the staff, residents and the public. These written policies shall be followed in operating the facility and shall be reviewed at least annually.  Section 350.760 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.  c) Depending on the services provided by the facility, each facility shall adhere to the	Z9999	<b>Attachment A</b> <b>Statement of Licensure Violations</b>	

Illinois Department of Public Health LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
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Z9999	<p>Continued From page 1</p> <p>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, as applicable (see Section 350.340):</p> <p>7) Guidelines for Infection Control in Health Care Personnel</p> <p>Section 350.1210 Health Services</p> <p>The facility shall provide all services necessary to maintain each resident in good physical health.</p> <p>These Regulations were not met as evidenced by:</p> <p>COVID-19 Vaccination of Facility Staff was not met when, 1) based on observation, record review and interview, the facility failed to develop and implement their policy and procedure for Covid-19. 2) Based on record review and interview the facility failed to ensure staff training for the Covid-19 policy and procedures. 3) facility failed to follow their Covid-19 policy by their failure to ensure staff were offered the Covid-19 vaccine potentially affecting all 15 individuals who reside at the facility (R1-R15).</p> <p>-Identify all staff working in the facility who are unvaccinated. -Ensure an exemption was in place for unvaccinated staff with the Covid-19 vaccine series. -Develop a process to ensure all staff have obtained recommended Covid-19 doses. -Ensure staff training for the Covid-19 policy.</p> <p>Findings include:</p>	Z9999		

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Z9999	<p>Continued From page 2</p> <p>Resident Roster (provided 3-1-22), identifies: R1, R4, R6-R8, R10 and R12 function in the Mild Range of Intellectual Disabilities, R2, R5, R6, R9, R13 and R14 function in the Moderate Range of Intellectual Disabilities and R3, R11 and R15 function in the Severe Range of Intellectual Disabilities.</p> <p>The facility's policy titled, "Covid-19" dated 1-2022, documents in part, "PROCEDURE: B. Vaccinations: 1. Homes must ensure that staff are vaccinated in accordance with CMS, IDPH, OSHA, and Illinois Administrative Codes applicable to each respective licensure. 2. Staff are required to provide a copy of their proof of vaccination to the administrator to verify compliance. Home administrator will securely document each staff vaccination status and maintain copy of vaccination record in the medical section of the employee file. 4. Staff seeking exemption for the Covid-19 vaccination requirement for certain medical contraindication reason, or sincerely held religious beliefs will complete a request for accommodation form and submit the form to the administrator for review and response regarding approval status."</p> <p>Interview with E2/QIDP (Qualified Intellectual Disabilities Professional) on 3-2-22 at 9:15 AM: E2 stated all staff were vaccinated except for 3 staff that were unvaccinated, those being E4/DSP (Direct Support Person), E6/DSP and E2/QIDP. E2 was then asked for employee exemptions? E2 stated, "I emailed my administrator and told her you were asking for the Covid-19 exemptions. Just waiting on her for that."</p> <p>Review of employee list for vaccination status provided 3-3-22 at 2:15 PM, revealed 2 additional</p>	Z9999		

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Z9999	<p>Continued From page 3</p> <p>staff that were unvaccinated: E5/Clerk and E8/DSP. The list also identified E2/QIDP and DSP's E2, E3, E4, E6-E9 as being in direct contact with residents.</p> <p>Interview with E2/QIDP on 3-3-22 at 2:20 PM: E2 was asked for the exemptions forms for the additional staff that were unvaccinated? E2 then stated, "I don't know how I missed E8 not getting vaccinated. And we'll make sure E5 gets an exemption." E2 was then asked what are the reasons for E5 and E8 not being vaccinated? E2 then stated, "For E5, its religious and I don't know why E8 is not vaccinated."</p> <p>Interview with E2/QIDP on 3-3-22 at 2:20 PM: E2 was asked if staff training was conducted for all staff regardless of vaccine status? E2 stated, "Let me get you that training."</p> <p>Review of In-Service training sheet for Covid-19 education dated 9-17-21, documents DSP's, E4, E6-E8 and E2/QIDP received training. The training instructor line is signed off by E12/QIDP</p> <p>Review of In-Service training sheet for the unvaccinated staff regarding vaccine protection dated 10-15-21, documents unvaccinated staff E2, E4 and E6 received training. The training instructor line is signed off by E12/QIDP</p> <p>Review of In-Service training sheet for the facility's Covid-19 policy dated 1-13-22, documents DSP's, E4, E6 and E7 received training. The training instructor line is signed off by E2/QIDP.</p> <p>Interview with E2/QIDP on 3-3-22 at 2:30 PM: E2 stated the Covid-19 staff training that was presented to the surveyor were altered by</p>	Z9999		

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Z9999	Continued From page 4  E12/QIDP to make it appear that all staff received training regarding the Covid-19 policy and training for the unvaccinated staff. E2 then stated, "I had given my exemption to the previous administrator, but now that she is gone and we can't find it. We also couldn't find E4 or E6's exemptions. So, E12 made them up along with altering the training sheets."  (A)	Z9999		