

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: IL6008510	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED C 05/11/2022
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NAME OF PROVIDER OR SUPPLIER HERITAGE HEALTH-NORMAL	STREET ADDRESS, CITY, STATE, ZIP CODE 509 NORTH ADELAIDE NORMAL, IL 61761
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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
S9999	<p>Final Observations</p> <p>Statement of Licensure Violation</p> <p>300.698e) 300.698f)</p> <p>Section 300.698 COVID-19 Vaccination of Facility Staff EMERGENCY</p> <p>e) Each facility shall post conspicuous signage throughout the facility notifying staff that the facility makes available opportunities for staff to be up to date on COVID-19 vaccinations. The signs shall be on 8.5 by 11-inch white paper, with text in Calibri (body) font and 26-point type in black letters.</p> <p>f) Each facility shall provide its unvaccinated staff a minimum of 90 minutes of clear and accurate instruction covering vaccine education, effectiveness, benefits, risks, common reactions, hesitancy, and misinformation. Records of training shall be made available to the Department upon request.</p> <p>These regulations are not met as evidenced by:</p> <p>Based on observation and interview, the facility did not post signage on white paper with text in Calibri, throughout the facility indicating the facility makes opportunities available for staff to be up to date on the COVID-19 vaccinations, or provide the unvaccinated staff with 90 minutes of education regarding the COVID-19 vaccination. This failure has the potential to affect all 119 residents who reside at the facility.</p> <p>Findings Include:</p> <p>On 5/5/22 from 8:20 am - 3:30 pm, and 4/9/22 from 11:15 am - 4:00 pm there were no signs</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>posted indicating the facility makes opportunities for staff to become up to date on their COVID-19 vaccination.</p> <p>On 5/9/22 at 2:15 pm, V2 DON (Director of Nursing) V2 was not aware of the new state requirements for the 90 minutes of education for unvaccinated staff or the required mandated signage regarding staff vaccinations. V2 verified there is no required signage posted.</p> <p>On 5/11/20 at 8:10 am, V1 Administrator is new to the facility and is unsure if the unvaccinated staff have had the required 90 minutes of education on the COVID-19 vaccine. V1 also stated V1 was not aware of the required posted signage related to the COVID-19 vaccination.</p> <p>On 5/11/22 at 8:45 am, V18 CNA (Certified Nursing Assistant), who has a religious exemption for the COVID-19 vaccination, does not recall receiving the required 90 minutes of education for the vaccination.</p> <p>On 5/11/22 at 11:09 am, V20 CNA, who has a temporary medical exemption for the COVID-19 vaccination, stated V20 never received 90 minutes of education regarding the COVID-19 vaccination.</p> <p>The facility Resident List Report dated 5/5/22 documents 119 residents reside at the facility.</p> <p>(A)</p>	S9999		