

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: IL6003446	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 05/19/2023
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NAME OF PROVIDER OR SUPPLIER ALLURE OF KNOX COUNTY	STREET ADDRESS, CITY, STATE, ZIP CODE 280 EAST LOSEY STREET GALESBURG, IL 61401
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S 000	Initial Comments First Probationary Licensure Survey	S 000		
S9999	Final Observations Statement of Licensure Violations (1 of 2) 300.696b) 300.696c) 300.696d)1)2)6)7)14) Section 300.696 Infection Control b) Written policies and procedures for surveillance, investigation, prevention, and control of infectious agents and healthcare-associated infections in the facility shall be established and followed, including for the appropriate use of personal protective equipment as provided in the Centers for Disease Control and Prevention's Guideline for Isolation Precautions, Hospital Respiratory Protection Program Toolkit, and the Occupational Safety and Health Administration's Respiratory Protection Guidance. The policies and procedures must be consistent with and include the requirements of the Control of Communicable Diseases Code, and the Control of Sexually Transmissible Infections Code. c) A group, e.g., an infection prevention and control committee, quality assurance committee, or other facility entity, shall periodically, but no less than annually, review the measures and outcomes of investigations and activities to prevent and control infections. d) Each facility shall adhere to the following guidelines and toolkits of the Centers for Disease Control and Prevention, United States Public	S9999	<p>Attachment A Statement of Licensure Violations</p>	

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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>Health Service, Department of Health and Human Services, Agency for Healthcare Research and Quality, and Occupational Safety and Health Administration (see Section 300.340):</p> <ul style="list-style-type: none"> 1) Guideline for Prevention of Catheter-Associated Urinary Tract Infections 2) Guideline for Hand Hygiene in Health-Care Settings 6) Guideline for Isolation Precautions: Preventing Transmission of Infectious Agents in Healthcare Settings 7) Infection Control in Healthcare Personnel: Infrastructure and Routine Practices for Occupational Infection Prevention and Control Services 14) Implementation of Personal Protective Equipment (PPE) in Nursing Homes to Prevent Spread of Novel or Targeted Multidrug-resistant Organisms (MDROs) <p>These REQUIREMENTS were Not Met as evidenced by:</p> <p>Based on observation, interview, and record review, the facility failed to change gloves and perform hand hygiene when performing incontinence care for one (R3) of one resident reviewed for incontinence cares in a sample of five.</p> <p>Findings include:</p> <p>Facility "Personal Protective Equipment" policy, copyright 2022, documents "Perform hand hygiene after glove removal. Gloves are not a substitute for hand hygiene. Change gloves and perform hand hygiene between clean and dirty tasks, when moving from one body part to another."</p>	S9999		
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S9999	<p>Continued From page 2</p> <p>Facility "Hand Hygiene and Hand Hygiene Table," copyright 2022, documents "The use of gloves does not replace hand hygiene. If your task requires gloves, perform hand hygiene prior to donning gloves, and immediately after removing gloves. Either soap and water or alcohol-based hand rub is to be used after handling items potentially contaminated with blood, body fluids, secretions, or excretions; and after assistance with personal body functions (elimination)."</p> <p>On 5/19/23 at 9:30am, R3 was in bed, not interviewable, and incontinent of stool. V10 and V11, both Certified Nurse Aides/CNAs, donned gloves without any hand hygiene prior to donning gloves. V11 performed catheter care for R3 and changed her gloves but did not perform any hand hygiene between glove changes. V10 provided incontinence care for R3, who was incontinent of stool. During the duration of incontinence care, V10 wore the same soiled gloves and then completed the following: V10 grabbed R3's left and right arm/shoulder area and turned R3 on her sides; grabbed and put on R3's clean gown; put on R3's clean brief; put on R3's new fitted sheet, and draw sheet; grabbed R3's pillow and put on a clean pillow case; and then lifted R3 under her shoulders and head area to assist with placement of her pillow. At that same time, V10 then grabbed R3's new top sheet and put it on R3, grabbed the bagged soiled linens and garbage, and exited the room.</p> <p>On 5/19/23 at 10:10am, V11 stated, "We needed to do hand hygiene and change our gloves more. I know we messed up and needed to change our gloves. (V10) wore the same soiled gloves the whole time, didn't change them at all, and she should have."</p>	S9999		

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S9999	<p>Continued From page 3</p> <p style="text-align: center;">(C)</p> <p>Statement of Licensure Violations (2 of 2)</p> <p>300.2030 300.2100</p> <p>Section 300.2030 Hygiene of Dietary Staff</p> <p>Food service personnel shall be in good health, shall practice hygienic food handling techniques, and good personal grooming.</p> <p>Section 300.2100 Food Handling Sanitation</p> <p>Every facility shall comply with the Department's rules entitled "Food Service Sanitation" (77 Ill. Adm. Code 750).</p> <p>These REQUIREMENTS were Not Met as evidenced by:</p> <p>Based on observation, interview, and record review, the facility failed to ensure kitchen staff restrained hair in a sanitary manner while preparing food and failed to ensure food items were stored and labeled with dates and identification. This failure has the potential to affect all residents who consume food in the facility except R3 and R6 who are NPO (Nothing by Mouth).</p> <p>Findings include:</p> <p>The facility's Dietary and Nursing Employee</p>	S9999		

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S9999	<p>Continued From page 4</p> <p>Personal Hygiene Policy, Undated, documents "It is the policy of this facility to utilize the following as guidelines for employee personal hygiene to prevent contamination of food by foodservice and nursing employees. 4. Hair Restraints: a. All dietary staff must wear hair restraints (e.g., hairnet, hat and/or beard restraint) to prevent hair from contacting food."</p> <p>On 5/18/23 at 10:50am, V8 (Cook) and V9 (Dietary Aide) prepared food in the kitchen. V8 and V9's hair restraints did not completely cover V8 or V9's hair. V8 and V9's hairnets did not cover hair at front, top and sides of V8 and V9's head, and hair along the neck areas of both staff were not covered.</p> <p>At this same time, V4 (Dietary Manager), V8 (Cook) and V9 (Dietary Aide) stated that all V8 and V9's hair should be covered with a hairnet at all times while in the kitchen.</p> <p>On 5/18/23 at 10:50am, a large bin containing sugar and a large bin containing thickener in the kitchen were not labeled or dated. V4 (Dietary Manager) stated that these containers should have been labeled and dated. V4 stated, "It is the responsibility of all dietary staff to make sure they were done. (Internet Data 5/19/23 documents: Thickener--A thickening agent or thickener is a substance which can increase the viscosity of a liquid without substantially changing its other properties.)</p> <p>On 5/18/23 at 10:50am, in the facility's Dry Goods Room, three bowls were filled with dry cereal, stacked within each other, were not labeled, or dated; one large clear plastic half full bag of noodles and one medium sized clear plastic half full bag containing noodles were not labeled or</p>	S9999		
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S9999	<p>Continued From page 5</p> <p>dated. V4 (Dietary Manager) stated that these should have been labeled and dated. V4 stated, "The dietary staff know that; did they do it, obviously not."</p> <p>On 5/18/23 at 10:50am, in the walk-in freezer, two individually wrapped meat items laying on a shelf were not labeled or dated. V4 Dietary Manager stated that these were pork chops and that they should have been labeled. V4 stated, "I am taking these out and throwing them away."</p> <p>On 5/19/23 at 9:50am, two open bags of (potatoes) in the walk-in freezer were not labeled or dated. V4 stated these items should have been labeled and dated; and V4 took the bags out of the freezer. V4 stated, "My night cook used this last night; and she knows that they should be labeled and dated after opening."</p> <p>The facility's Dietary and Nursing Employee Personal Hygiene Policy, Undated, documents "It is the policy of this facility to utilize the following as guidelines for employee personal hygiene to prevent contamination of food by foodservice and nursing employees. 4. Hair Restraints: a. All dietary staff must wear hair restraints (e.g., hairnet, hat and/or beard restraint) to prevent hair from contacting food."</p> <p>The facility's Date Marking for Food Safety Policy, Undated, documents "2. The food shall be clearly marked to indicate the date or day by which the food shall be consumed or discarded. 3. The individual opening or preparing a food shall be responsible for date marking the food at the time the food is opened or prepared."</p> <p>The facility's Food and Nutrition Services Inservice-Labeling and Dating Foods, Updated</p>	S9999		
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S9999	<p>Continued From page 6</p> <p>July 2018, documents "Why label? Foods are labeled for food safety. Information on the label tells staff when food is approaching dates from when it would be removed from service. Labels include the name of the item, date it was prepared or opened and a date the item should be used by."</p> <p>The facility's Midnight Census Report, dated 5/17/23, documents 58 residents currently residing in the facility.</p> <p>(C)</p>	S9999		