

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

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FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 145367	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 04/21/2016
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NAME OF PROVIDER OR SUPPLIER HERITAGE HEALTH-GILLESPIE	STREET ADDRESS, CITY, STATE, ZIP CODE 7588 STAUNTON ROAD GILLESPIE, IL 62033
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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) COMPLETION DATE
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F 000 F 312 SS=D	<p>INITIAL COMMENTS</p> <p>Annual Licensure and Certification Survey 483.25(a)(3) ADL CARE PROVIDED FOR DEPENDENT RESIDENTS</p> <p>A resident who is unable to carry out activities of daily living receives the necessary services to maintain good nutrition, grooming, and personal and oral hygiene.</p> <p>This REQUIREMENT is not met as evidenced by: Based on observation, interview and record review the facility failed to provide complete incontinent care for 3 of 8 residents (R6, R7, R12) reviewed for incontinent care in the sample of 15.</p> <p>Findings include:</p> <p>1. On 4/20/16 at 9:25 AM, E3, Certified Nursing Assistant (CNA), performed incontinent care using a single basin of water with rinsable soap. E3 washed R12 with soapy washcloths and used the same water to rinse R12. E3 then dried R12.</p> <p>R12's Minimum Data Set (MDS), dated 3/1/16, documents that R12 is always incontinent of bladder and that R12 needs extensive assist of 2 or more persons for toileting.</p> <p>2. On 4/20/16 at 10:45 AM, E4, CNA, performed incontinent care using a single basin of water with rinsable soap. E4 washed R7 with soapy washcloths and used the same water to rinse R7. E4 then dried R7.</p>	F 000 F 312		
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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
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Any deficiency statement ending with an asterisk (*) denotes a deficiency which the institution may be excused from correcting providing it is determined that other safeguards provide sufficient protection to the patients. (See instructions.) Except for nursing homes, the findings stated above are disclosable 90 days following the date of survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosable 14 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.

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F 312	Continued From page 1 R7's MDS, dated 1/21/16, documents that R7 is always incontinent of bladder and that R7 needs extensive assist of 2 or more persons for toileting. On 4/20/16 at 9:45 AM, E2, Director of Nursing (DON), stated that the CNA's should use two basins of water to wash and rinse while performing incontinent care. The Facility's policy on Incontinent Care-Male & Female, dated 8/27/12, documents at #8, "Rinse area well." 3. On 4/19/16 at 9:50 AM, E2 and E3 placed R6 on the toilet using the sit to stand mechanical lift. E2 touched R6's adult diaper and stated, "Her diaper is a little wet." R6 urinated in the toilet. E3 washed R6's perineal area with soap and water while R6 was sitting on the toilet. R6 was raised from the toilet with the use of the sit to stand mechanical lift, incontinent brief was applied and R6 was removed from the bathroom. R6's buttocks and posterior bilateral thighs were not washed. The Facility's policy on Incontinent Care Male-Female, dated 8/27/12, documents, "7. Cleanse area well with soap and water on wash cloth. 8. Rinse area well. 9. Pat dry with a towel." It also documents "11. Repeat above procedure 7, 8, 9, & 10 when cleansing rectal area. ****Please note: Perineal care may be provided in bathroom or shower room if needed and may be provided on the sit to stand if appropriate for resident."	F 312			
F 441 SS=E	483.65 INFECTION CONTROL, PREVENT SPREAD, LINENS	F 441			

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F 441	Continued From page 2 The facility must establish and maintain an Infection Control Program designed to provide a safe, sanitary and comfortable environment and to help prevent the development and transmission of disease and infection. (a) Infection Control Program The facility must establish an Infection Control Program under which it - (1) Investigates, controls, and prevents infections in the facility; (2) Decides what procedures, such as isolation, should be applied to an individual resident; and (3) Maintains a record of incidents and corrective actions related to infections. (b) Preventing Spread of Infection (1) When the Infection Control Program determines that a resident needs isolation to prevent the spread of infection, the facility must isolate the resident. (2) The facility must prohibit employees with a communicable disease or infected skin lesions from direct contact with residents or their food, if direct contact will transmit the disease. (3) The facility must require staff to wash their hands after each direct resident contact for which hand washing is indicated by accepted professional practice. (c) Linens Personnel must handle, store, process and transport linens so as to prevent the spread of infection.	F 441			

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F 441	<p>Continued From page 3</p> <p>This REQUIREMENT is not met as evidenced by: Based on observation, interview and record review the facility failed to do correct handwashing, changing gloves from dirty to clean linens while providing incontinent care and to prevent cross contamination from dirty linens for 4 of 8 residents (R1, R6, R7, R11) reviewed for incontinent care in the sample of 15.</p> <p>Findings include:</p> <p>1. On 4/20/16 at 10:45 AM, E4, Certified Nursing Assistant (CNA) began incontinent care on R7. E4 put a clean incontinent pad on the end of R7's bed and used it to put the dirty linen he used to clean R7. When E4 turned R7 from side to side while providing incontinent R7's feet were laying on the incontinent pad with the dirty linen on it.</p> <p>R7's Minimum Data Set (MDS) dated 1/21/16 documents that R7 is always incontinent of urine and needs staff assist for incontinent care. R7 also needs total assist of transfers and turning side to side.</p> <p>The Facilities policy: Linen Handling-Soiled Linen dated 3/21/14 documents, "Place the soiled linen in a container or bag and double bag as necessary to prevent soaking through."</p> <p>On 4/20/16 at 2:00 PM E2, Director of Nursing (DON) stated that the CNA's should be using bags set on top of the garbage cans to put dirty linen in for incontinent care.</p> <p>2. On 4/19/16 at 11:00 AM, E5, CNA and E6, CNA, assisted R1 to the toilet using a walker and a gaitbelt. E5 removed R1's soiled incontinent</p>	F 441			

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F 441	<p>Continued From page 4</p> <p>brief. R1 urinated and had a bowel movement. R1 then took some toilet paper and wiped her bottom. E5 then assisted R1 to stand up. R1 held on to her walker while E5 cleansed, rinsed and dried R1's rectal area and buttocks. E5 then cleansed R1's perineal area without changing her gloves and washing her hands. E5 did not offer R1 a washcloth or access to the sink to wash her hands after she wiped herself.</p> <p>On 4/20/16 at 9:45 AM, E2 stated, "Yes, I would expect staff to offer residents access to the sink to wash their hands after toileting, and staff should change gloves after cleansing a residents rectal area."</p> <p>The facility Policy and Procedure for Hand-Hygiene Technique, dated 3-1-10, documented, "Purpose: 1. To prevent the spread of infection. 2. To decrease the risk of transmission of infection from person to person or from object to person. Indications for Hand Washing: 2. Before eating and after using a restroom. Antimicrobial or non-antimicrobial soap and water may be used."</p> <p>3. The admission face sheet dated 3/28/16 documents that R11 has diagnoses which include stage 3 sacral pressure ulcer, dysphagia, urinary tract infection, and muscle wasting. The Minimum Data Set dated, 4/4/16 documents that R11 requires extensive assistance for activities of daily living and is severely cognitively impaired.</p> <p>On 4/20/16 at 9:30 AM, R11 was incontinent of a moderate amount of soft/liquid stool. E8 Certified Nurses Aid, (CNA) cleaned R11 and completed catheter care. E8 placed the soiled washcloths, covered with stool, on the incontinent pad on</p>	F 441			

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F 441	<p>Continued From page 5</p> <p>which R11 was laying. The wash cloths were then rolled up in the incontinent pad, and R11 had to roll over them to finish the incontinent care. E8 cleansed R11 of more stool, rolled the soiled bundle of laundry and placed it on R11's overbed table. E8 then dressed R11. E8 the took off her gloves, washed her hands and proceeded to pick up the bundle of spoiled laundry and carry it to the soiled utility room. E8 held the linens close to her uniform and touched multiple surfaces including door knobs on her way to the soiled utility room.</p> <p>On 4/20/16 at 2 PM, E2 Registered Nurse, DON stated, "(E8) should not have been carrying the soiled linen in her arms and touching her uniform.</p> <p>The facility policy, titled Linen Handling-Soiled Linen, dated, 3/21/14 documents; The purpose of preventing the spread of infection. Under the area titled Policy, it documents; "Soiled Linen shall be handled and transported in a manner that prevents cross contamination and should be handled as little as possible. Contaminated laundry shall be bagged at the location it is used." Under Procedure, bullet point #3, "Place soiled linen in a container or bag and double bag as necessary to prevent soaking through."</p> <p>4. On 4/19/16 at 9:50 AM, E2 and E3, CNA, transferred R6, with the use of the sit to stand mechanical lift, onto the toilet. R6 wiped her perineal area after urinating in the toilet. R6 touched the surface of the toilet paper used to wipe urine from her perineal area. R6 was never provided the opportunity to wash or use alcohol based rub to cleanse her hands.</p> <p>E3 performed incontinent care on R6 while she</p>	F 441			

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F 441	<p>Continued From page 6</p> <p>was sitting on the toilet. E2 touched R6's urine adult diaper with ungloved hands. E2 used the sit to stand to remove R6 from the bathroom and lowered her into her wheelchair. E2 left R6's bathroom and room without washing her hands or using alcohol-based rub. E2 and E3 left R6's room without cleaning the sit to stand.</p> <p>During incontinent care, E3 was always standing in front of the sink. E2 was standing on the far side of the sit to stand on the far side of the bathroom away from the sink or inside resident's room where no sink is available.</p> <p>On 4/19/16 at 10:00 AM, R6 stated as she was touching the toilet paper surface she used to wipe her perineal area, "This is too nice to use and then throw it in the toilet."</p> <p>On 4/21/16 at 10:05 AM, E2 stated, "I know I washed my hands at sometime when I was in that room."</p> <p>The Facility policy on Hand-Hygiene Technique, dated 3/1/10, documents, "Purpose: 1. To prevent the spread of infection. 2. To decrease the risk of transmission of infection from person to person or from object to person. Indications for Decontamination using Alcohol-Bases Rub: 4. After contact with a resident's intact skin i.e. when taking a pulse or blood pressure or lifting a resident. 5. After contact with body fluids or excretions, membranes, non-intact skin, and wound dressings if hands are not visibly soiled. 6. If moving from a contaminated-body site during resident care."</p>	F 441			