

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

PRINTED: 02/03/2015
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 145465	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____		(X3) DATE SURVEY COMPLETED 01/29/2015
NAME OF PROVIDER OR SUPPLIER JERSEYVILLE NSG & REHAB CENTER, INC			STREET ADDRESS, CITY, STATE, ZIP CODE 1001 SOUTH STATE STREET JERSEYVILLE, IL 62052		
(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
F 000	INITIAL COMMENTS	F 000			
F 441 SS=E	<p>Annual Licensure and Certification Survey 483.65 INFECTION CONTROL, PREVENT SPREAD, LINENS</p> <p>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.</p> <p>(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.</p> <p>(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.</p> <p>(c) Linens Personnel must handle, store, process and transport linens so as to prevent the spread of</p>	F 441			

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

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 441	<p>Continued From page 1 infection.</p> <p>This REQUIREMENT is not met as evidenced by: Based on observation, interview and record review, the Facility failed to prevent the spread of potential infection by following isolation precautions and performing hand hygiene for 4 of 20 residents (R4, R5, R7 and R9) reviewed for infection control in the sample of 20 and three residents (R21,R22 and R23) in the supplemental</p> <p>Findings include:</p> <p>1. R4's Minimum Data Set (MDS) dated 11/14/14, documents that R4 requires extensive assistance of one staff for Activities of Daily Living (ADL). The MDS further documents that R4 has a urinary catheter in place.</p> <p>R4's urine culture laboratory analysis, dated 10/16/14, documents that R4 had Vancomycin Resistant Enterocci (VRE) present in the urine. R4's laboratory analysis, dated 12/18/14, documents that R4's wound culture to the right heel was infected with "many gram negative bacillus, many diptheroids, moderate coagulase positive staphloccoci, and methicillin resistant staph aureus (MRSA) present in wound".</p> <p>R4's Care Plan dated 11/19/14, documents that R4 has MRSA/VRE of the urine and MRSA of a wound to the coccyx. The Care Plan further documents that R4 is on contact isolation and to "Follow contact isolation at all times."</p> <p>On 1/26/15 at 10:50 AM during the initial tour of</p>	F 441			

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F 441	<p>Continued From page 2</p> <p>the Facility, a red sign was noted on R4's door which stated to see nursing staff before entering the room. E14, Registered Nurse, (RN) stated that R4 was in contact isolation for MRSA in the right heel and VRE in the urine.</p> <p>On 1/26/15 at 2:15 PM, E14, RN and E19, Licensed Practical Nurse (LPN) donned gloves and changed the dressings to R's coccyx, ischeum, right heel, and top of the right foot. R4's right heel dressing contained a moderate amount of yellow drainage with scant blood present on the dressing. E19 stated "It's pretty saturated-looks like it", when removing R4's right heel dressing. At no time did E14 and E19 wear a gown while changing R4's dressings. At 2:25 PM, E14 stated that the facility does not require gowns for contact isolation and she only wears gloves.</p> <p>On 1/26/15 at 12:55 PM, E3, Assistant Director of Nursing (ADON) stated that R4 is on contact isolation due to MRSA in the heel wound, is on "comfort measures only" and is not being treated for infections.</p> <p>On 1/28/15 at 9:40AM, E11, CNA, stated that R4 has MRSA in the wounds and staff does not wear gowns when caring for R4. E11 stated R4 has an indwelling catheter. E11 said that when staff empty R4's indwelling catheter bag, they empty it into the toilet located in the bathroom in R4's room. E11 further stated that R4 and R23 share a room, and they share the bathroom. E11 said that R23 uses the toilet in the bathroom. E11 stated she tries to get housekeeping to clean the bathroom after emptying R4's urine into the toilet, but it doesn't always happen. E11 stated R4's MRSA in her coccyx wound could travel and R23</p>	F 441			

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F 441	<p>Continued From page 3</p> <p>uses the bathroom and that's why she would call housekeeping.</p> <p>On 1/28/15 at 9:50PM, E3 ADON stated that staff wears gloves while providing care, emptying urinary catheter bags, and changing dressings for a resident on contact isolation. E3 stated gowns are worn while caring for resident's with infections such as Clostridium difficile "fingerpaint" in their loose stool. E3 further stated that staff's clothing could come in contact with dressing changes if wounds were seeping. E3 stated she did not think that staff would need to wear a gown when changing R4's urinary incontinent bag and they should be using standard precautions. E3 also stated staff should be emptying R4's urine in the hopper in the soiled utility room or properly cleaning the toilet in the resident room if they empty the bag into the toilet.</p> <p>On 1/28/15 at 9:55AM, E2, Director of Nursing (DON), stated she would expect staff to wear gloves when caring for residents on contact precautions, or for changing R4's wound dressings, or changing R4's urinary incontinent bag. E2 stated she would not expect staff to wear gowns - she would expect them to use standard/universal precautions. E2 further stated she expects staff to dump R4's urine in the soiled utility room or if staff use the toilet in the resident room, to properly sanitize the toilet or get housekeeping to clean the bathroom.</p> <p>On 1/28/15 at 9:10AM, E13, Certified Nursing Assistant, CNA, stated R4's roommate R23 uses the shared bathroom with staff assistance. E13 stated staff dumps R4's urine into the toilet and does not wear a gown when caring for R4. E13 further stated R4 does not have any infections.</p>	F 441			

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F 441	<p>Continued From page 4</p> <p>On 1/28/15 at 9:15AM, R23 stated she uses the shared bathroom - with staff's assistance. R23 further stated she uses her wheelchair and wheels around the room.</p> <p>On 1/28/15 at 9:15AM, E14, RN stated R23 uses the toilet in the bathroom that R4 and R23 share.</p> <p>On 1/28/15 at 9:35AM, E15, Housekeeper, stated she uses bleach in R4's room when she cleans once a day. E15 stated she is not normally called throughout the day to clean R4's room, in addition to her normal cleaning schedule.</p> <p>Facility's Policy entitled "Standard Precautions", dated 2007, document in part, "standard precautions will be used in the care of all resident regardless of their diagnoses, or suspected or confirmed infection status. Standard Precautions presume that all blood, body fluids, secretions, and excretions, non-intact skin and mucous membranes may contain transmissible infectious agent. 1.Standard Precautions shall apply to care of all residents in all situations regardless of suspected or confirmed presence of infectious disease. Standard Precaution include the following practices. 4.Gowns: a. wear a gown (clean and nonsterile) to protect skin and prevent soiling of clothing during procedures and resident care activities that are likely to generate splashes or sprays of blood, body fluids, secretions, or excretions or cause soiling of clothing. 5.Resident Care Equipment; a. ensure that reusable equipment is not used for the care of another resident until it has been appropriately cleaned and reprocessed and single used items are properly discarded. 6.Environmental Control a. Ensure that environmental surfaces, beds, and</p>	F 441			

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F 441	<p>Continued From page 5</p> <p>bedrails, bedside equipment and other frequently touched surfaces are appropriately cleaned.</p> <p>Facility's Policy "Cleaning techniques", undated, documents in part, "B.) Isolation Rooms: Complete all steps included in the resident room description above. Replace the general cleaning disinfectant with the Bleach disinfectant. Clean mop head, clean water, and clean rags should be changed before cleaning other areas".</p> <p>Facility's Policy entitled "Isolation-Categories of Transmission-based Precautions" dated April 2012, documents in part, "Standard Precautions shall be used when caring for residents at all times regardless of their suspected or confirmed infection status. Transmission Based Precautions shall be used when caring for residents who are documented or suspected to have communicable disease or infection that can be transmitted to others.</p> <p>Contact Precautions: In addition to Standard Precaution, implement contact precaution for resident known or suspected to be infected with microorganism that can be transmitted by direct contact with a resident or indirect contact with environmental surfaces or resident care items in the residents environment. Examples of infections requiring Contact Precaution include but are not limited to: 1.) Infection with multi-drug resistant organisms. B.) Resident Placement 1. Place the individual in a private room if possible. 2. If a private room is not available, the infection Preventionist will assess various risks associated with other resident placement options. Gowns during Contact Precautions: Gown 1). Wear a disposable gown upon entering a Contact Precaution room or cubicle. Resident Care of Equipment during Contact Precautions: f.</p>	F 441			

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F 441	<p>Continued From page 6</p> <p>Resident-Care Equipment 2) If use of common items is unavoidable, then adequately clean and disinfect the before use for another residents".</p> <p>2. On 01/27/15 at 12:30 PM, during the lunch meal service, E6, CNA was observed dropping a straw on the floor then picked it up discarded it in the trash. She then went to the serving line and picked up a tray of food for R7 and removed the plate of food, glasses of fluids and the dessert cup off the tray without first washing or sanitizing her hands.</p> <p>On 1/27/2015, at 12:45 PM, E5, CNA was observed feeding R5, R9, R21 and R22 at the same table. E5 was observed readjusting R9's feet underneath the table, then continued to touch the milk carton and straw for R5, and continue feeding R21 and R22 without sanitizing or washing her hands. E5 did not sanitize her hands between touching each residents utensils during the meal service.</p> <p>3. On 1/26/15 at 12:47 PM, E5, CNA, started feeding R21, R22, and R5 in the South Dining Room. At 1:06 PM, E5 noticed R21's blanket had slipped halfway down R21's legs. E5 reached down and rearranged the blanket over R21's lap and legs. E5 then resumed feeding R5, R21, and R22 without washing or sanitizing her hands.</p> <p>On 1/29/15 at 1:00 PM, E17, Reginal Consultant, stated the staff is expected to wash their hands before going back to feed those residents.</p> <p>The facility Policy on Standard Precautions; Hand Hygiene revised 12/07, documents Hands shall be washed with soap and water whenever visibly</p>	F 441			

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F 441	Continued From page 7 soiled with dirt, blood, or body fluids, or after direct or indirect contact with such, and before eating... In the absence of visible soiling of hands, alcohol-based hand rubs are preferred for hand hygiene.	F 441			