

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER / SUPPLIER / CLIA IDENTIFICATION NUMBER 145438	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 07/16/2020
NAME OF PROVIDER OF SUPPLIER COLLINSVILLE REHAB & HEALTH CC		STREET ADDRESS, CITY, STATE, ZIP 614 NORTH SUMMIT COLLINSVILLE, IL 62234	
For information on the nursing home's plan to correct this deficiency, please contact the nursing home or the state survey agency.			
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)		
F 0880 Level of harm - Minimal harm or potential for actual harm Residents Affected - Many	<p>Provide and implement an infection prevention and control program. **NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on observation, interview and record review the facility failed to perform hand hygiene, follow isolation precautions, timely dispose of waste/trash from the quarantine unit, clean/sanitize the quarantine unit, and cover clean laundry to prevent the spread of infection. This practice had the potential to affect all 53 residents residing in the facility. Findings include: On 7/14/2020 the facility provided an undated untitled document listing R4, R5, and R7 as currently under quarantine/Isolation and located on the quarantine/Isolation unit. On 7/14/2020 at 8:30 AM, Contact and Droplet Precaution signs were posted on R5's and R7's door with PPE located in plastic bins placed throughout the unit. 1. On 7/14/2020 at 9:00 AM, V11, Certified Nurse Assistant (CNA), exited R4's room and removed her gown and gloves. V11 balled the gown and gloves in her hand. V11 also removed the breakfast tray from R4's room, placing it on top of the personal protective equipment (PPE) supply cart in the hallway. V11 entered R5's room with the used PPE in her hand and assisted R5. V11 exited R5's room, picked up R4's breakfast tray, and placed it on the food cart. The used PPE remained in V11's left hand. V11 entered R7's room and placed the used PPE in the biohazard container in R7's room. V11 exited the room. V11 did not follow the posted contact and droplet precautions. V11 did not apply PPE prior to entering R5's and R7's room. V11 did not perform hand hygiene before entering and exiting residents' rooms. V11 did not dispose of the used PPE upon exiting R4's room. 2. On 7/14/2020 at 9:10 AM, V15, Licensed Practical Nurse (LPN), donned gloves. V15 entered R4's room, performed finger stick blood sugar, and exited the room. V15 removed the gloves and performed hand hygiene. V15 obtained medication from the medication cart, donned gloves and reentered R4's room. V15 exited the room, removed gloves and performed hand hygiene. V15 did not don gown, goggles or face mask prior to entering R4's room. 3. On 7/14/2020 at 9:15 AM, V15, LPN, donned gloves and entered R5's room. V15 administered R5's medication and exited the room. V15 removed gloves and performed hand hygiene. V15 donned gloves, reentered R5's room, and handed her a cup of water. V15 removed gloves and performed hand hygiene. V15 did not don gown, goggles or face mask prior to entering R5's room. 4. On 7/14/2020 at 9:25 AM, R7 was sitting on the side of the bed coughing. V15, LPN, donned gloves and entered R7's room. V15 administered R7's medication and exited the room. V15 removed gloves and performed hand hygiene. V15 did not don gown, goggles or face mask prior to entering R7's room. On 7/14/2020 at 8:15 AM, V11, CNA, stated, I don't have any clue why these residents are on isolation. They don't tell you anything. Not sure what to do. I help everyone. I want them to help me. I was just on another hall helping with what they (residents) needed. On 7/14/2020 at 8:40 AM, V13, CNA, stated, The residents on this hall are on quarantine and isolation. They stay in the room. If they come out, they wear masks. When we go in the rooms, we put on the entire PPE, gloves, gowns mask, and goggles. Every time we go in. On 7/14/2020 at 9:30 AM, V15, LPN, stated, I do not know what these residents are on isolation for. I was not informed of any residents being on isolation. I got somewhat of a report. Was not notified of any positives or anyone on isolation or precautions. I am assigned to more than this hall. I work 300 hall today as well. During a phone interview on 7/16/2020 at 10:36 AM, V2, Interim Director of Nursing, stated, I would expect the staff to wear the required PPE which is gloves, gown, mask, and eye protection when entering a resident's room that is under quarantine or isolation. I expect them (staff) to remove and dispose of the used PPE, in the appropriate receptacle, in that resident's room that it (PPE) was used in. I would expect the staff to perform hand hygiene prior to entering and when exiting a residents room. That is how they were trained and they are to follow the signage on the door. The Facility's undated Droplet Precaution Postings document, Droplet Precautions. Stop. Everyone must clean their hands including before entering and when leaving the room. Make sure their eyes, nose and mouth are fully covered before room entry. Remove face protection before room exit. The Facility's undated Contact Precautions Postings document, Stop. Everyone must clean their hands including before entering and when leaving the room. Providers and staff must also: Put on gloves before room entry. Discard gloves before room exit. Put on gown before room entry. Discard gown before room exit. Do not wear the same gown and gloves for the care of more than one person. Use dedicated or disposable equipment. Clean and disinfect reusable equipment before use on another person. The Facility's COVID 19 Control Measures, dated 4/21/2020, documents Purpose to prevent transmission of the COVID 19 Virus and to control outbreaks. It continues under Droplet Precautions, 4. Wear facemasks, gloves, gowns, goggles, face shields when entering room or when working within 6 feet of residents on droplet precautions. 5. Remove PPE (personal protective equipment) when leaving residents room and perform hand hygiene. It further documents under Admission and readmission, 2. Quarantine and initiate contact and droplet precautions for new admission and readmission for 14 days.</p> <p>5. On 7/14/2020 from 8:02 AM - 9:45 AM the following were observed at the COVID-19 Unit of the facility: a. Upon entrance to the COVID-19 Unit at 8:02 AM, two red bag-lined cardboard boxes approximately 2 feet cube were both 3/4 filled with used disposable isolation gowns, both uncovered and sat next to the closed double doors that lead out to the main nurses station. On the other end of the hallway near the entrance and exit to the unit from the outside of the building, a third red-bag-lined cardboard box was noted half filled with used disposable isolation gowns, also uncovered. There were 2 wheelchairs next to the 2 makeshift garbage bins and a 3-tier rolling open cart with a wound cleanser bottle, a box of opened gloves, and a face shield on the top shelf. On the middle shelf was a small bag of mini muffins and an opened box of Swiss rolls. b. room [ROOM NUMBER] was empty with one bed. An isolation cart with one drawer halfway open set in the doorway. There was a disposable isolation gown hooked to a peg in the middle of the door, a stripped mattress in place on the bed and a pillow without a case was on top of the mattress and call light on the floor. The television set was on. c. A tall rack against one wall at the activity room/nurses station contained folded hospital gowns, linens, folded reusable incontinent pads which were totally exposed and uncovered. On 7/14/2020 at 9:06 AM, V5, LPN, stated she worked every day from 7/5/20 through 7/10/20 on the day shift on the COVID Unit. V5 stated she worked days and evening shift on 7/5/20, 7/8/20, 7/9/20. V5 stated she did not see any housekeeping staff come into the unit to clean/disinfect during that time period except one time. V5 stated she is the only staff on the unit and she would know if another staff would come in because she has to let them in. V5 stated nobody instructed her to clean and sanitize the unit or dispose of the trash and waste. V5 added she expected housekeeping to do all of that. V5 stated when she reports to work the clean linen and laundry are already stored on the shelves. On 7/14/2020 at 11:39 AM during a phone interview, V8, Housekeeping/Laundry Staff, stated she works 3-4 days a week in the facility and she is regularly assigned to 200 Hall and does laundry duties as well. V8 stated she does not clean the COVID-19 and Isolation units which are located in the 300 Hall and 100 Hall. On 7/14/2020 at 11:49 AM during a phone interview, V9, Housekeeping/Laundry Staff, stated all housekeeping/laundry staff are scheduled to work from 7 AM until 3 PM and two staff, him and V17, work five days a week and one staff, V16, works weekends only and the 4th staff, V8, works 3 days a week. V9 stated there are no housekeeping/laundry staff working after 3 PM and the aides take over. V9 stated the facility currently doesn't have a housekeeping/laundry supervisor. V9 stated he works the 300 Hall and laundry. V9 stated that unless he was told to do deep cleaning on the COVID-19 and Isolation Units that's when he goes there. V9 stated he cleaned and sanitized the rooms in the COVID-19 Unit the day before (7/13/2020)which somehow is</p>		
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 0880 Level of harm - Minimal harm or potential for actual harm Residents Affected - Many	<p>(continued... from page 1)</p> <p>inconsistent with today's observation. V9 stated he made sure everything was nice and organized and used disinfectant wipes on all surfaces. During a phone interview on 7/15/2020 at 9:52 AM, V2, Interim Director of Nursing (DON), stated cleaning and disinfecting of the COVID19 unit surfaces should be done every few hours. V2 stated the staff on the COVID unit is expected to clean and sanitize and they have their own cleaning supply in the unit. V2 stated V9, Housekeeping Staff, is assigned to clean and disinfect the COVID-19 Unit, COVID-19 Step Down Unit, and the Quarantine/Isolation Unit. V2 stated a new Housekeeping/Laundry Supervisor will start working on 7/20/2020. During the same phone interview on 7/15/2020 at 10:15 AM, V18, Regional Maintenance Director, stated there should be a covered clean linen cart with supplies in the COVID-19 unit and any clean stored laundry should be covered. V18 stated the staff on the unit should be responsible for proper disposal of waste and trash as they get off work. The Facility Policy on Routine and Terminal Cleaning of Isolation Rooms dated 5/2014 documents, Procedure: 1. All personnel are to use the same precautions during routine and terminal cleaning of isolation rooms as nursing personnel. 2. Remove all non-disposable resident care items by the double bagging method to bring to the soiled utility room for cleaning and disinfecting. 3. Discard all disposable items in the appropriate trash container in the room. Remove trash by the double bagging method and take to the appropriate biohazard waste container. 4. Any remaining equipment is to be cleaned with the appropriate disinfectant determined to be used by your facility. 5. All horizontal surfaces in residents' rooms are to be cleansed on a regular basis with the appropriate disinfectant as used by your facility and when soiling or spilling occurs, or when the resident is discharged. The Policy further documents, 9. Upon termination of isolation: Remove any signs posted on the door. Clean and remove any cabinet placed outside the room to store supplies. Clean and remove large waste and linen containers from the room. The Facility Policy on Laundry/Linen Handling, dated 12/2018, does not address handling of clean linen/laundry. The Facility's Roster, dated 7/14/2020, documents there are 53 residents living in the facility.</p>		