

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER / SUPPLIER / CLIA IDENTIFICATION NUMBER 145878	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 06/24/2020
NAME OF PROVIDER OF SUPPLIER ST PATRICK'S RESIDENCE		STREET ADDRESS, CITY, STATE, ZIP 1400 BROOKDALE ROAD NAPERVILLE, IL 60563	
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 - Some	<p>Provide and implement an infection prevention and control program.</p> <p>Based on observation, interview and record review, the facility failed to follow standard infection control practices related to hand hygiene, glove changing, garbage disposal and doffing of personal protective equipment (PPE) during provisions of housekeeping services to residents who are on droplet and contact isolation precautions for Covid-19. This applies to 4 of 5 residents (R2, R3, R4, R5) reviewed for infection control practices related to Covid-19 protocol in the sample of 5. The findings include: Per facility's resident list, R2, R3, R4, and R5 are residents who were placed on droplet and contact precautions related to Covid-19. 1. On 6/23/2020 at 11:20 AM, V15 (Housekeeper) was in R2's bedroom. V15 cleaned the toilet, mopped the floor and emptied garbage bins into the tall plastic bag attached to the housekeeping cart which was located outside R2's bedroom. After V15 completed her task, she (V15) removed her cloth gown in the hallway while wearing her soiled gloves causing her to touch her hair. Then V15 removed her soiled gloves and without hand hygiene, left R2's bedroom to proceed to another bedroom. 2. On 6/23/2020 at 11:25 AM, without hand hygiene, V15 donned gown and gloves and entered R3's bedroom. V15 emptied R3's garbage bins and changed garbage lining bags on top of the housekeeping cart which was in the hallway. With the soiled gloved hands, V15 took her cart's keys from her pocket to get a rag from her locked cart. V15 proceeded to clean R3's bathroom and mopped bedroom floor. After completing task, V15 removed her gown in the hallway while wearing her soiled gloves causing her to touch her hair. V15 then proceeded to another bedroom without hand hygiene. 3. On 6/23/2020 at 11:35 AM, without hand hygiene, V15 donned gown and gloves and entered R4's bedroom. V15 emptied R4's garbage bins and changed plastic garbage lining bags in the hallway. Wearing the same soiled gloves, V15 proceeded to fold R4's comforter and throw blanket then she placed it back on R4's couch. V15 proceeded to clean the bathroom and mopped the floors. After completing her task, V15 removed her gown in the hallway while wearing her soiled gloves causing her to touch her hair. V15 was about to move to another room without hand hygiene when suddenly V5 (Housekeeping Manager) came and told V15 to wash of her hands. 4. On 6/23/2020 at 11:50 AM, V15 went into R5's bedroom and donned gloves and gown. V15 emptied garbage bins and changed the garbage plastic lining bag on top of the housekeeping cart which was in the hallway. After V15 emptied the garbage bins, she proceeded to clean R5's bathroom, wiped the sink and mirror with a rag. While wearing the same gloves and using the same soiled rag, V15 proceeded to wipe the bladder scanner, R5's bedside table, telephone, walker and overbed rolling table. V15's housekeeping cart has 2 tall plastic bags which was wide open where she disposed her used PPEs and floor mop rag. On 6/23/2020 at 12:05 PM, V5 (Housekeeping Manager) gave the following statement: When housekeeping staff enters an isolation room in the Covid-19 unit they must wear appropriate PPE such as gloves, mask, eye/face shield and gown. Housekeeper must perform hand hygiene before entering and leaving a resident's bedroom. Staff must change gloves and do hand hygiene in between task. The garbage bins are to be emptied or bagged inside the resident's room. If the housekeeper mopped the floor, the soiled mop should be bagged inside resident's room prior to disposing it to the housekeeping cart. The housekeeper must use different rags in between cleaning different surface areas of a resident's bedroom (Example: Between bathroom and bedroom) area. When task is completed in a bedroom, the housekeeper must follow doffing procedure by removing the soiled gloves first prior to other PPEs to prevent potential cross contamination. The PPE should be removed in the bedroom not in the hallway. Staff must remove gloves or change gloves before touching a clean surface or touching self. Facility's Hand Hygiene Policy and Procedure with revised date of 11/26/2019 showed: Policy: The facility considers hand hygiene the primary means to prevent the spread of infections. The facility ensures that personnel follow the hand hygiene procedures to help prevent spread of infections to other personnel, residents and visitors, through education, competencies and audits. Procedure: - All personnel shall follow the hand hygiene procedures to help prevent the spread of infections to other personnel, residents and visitors. - Hand hygiene is always the final step after removing gloves and disposing personal protective equipment. - The use of gloves does not replace hand hygiene. Facility's PPE Doffing Procedure showed: There are variety of ways to safely remove PPE without contaminating your clothing, skin, or mucous membranes with potentially infectious materials. Here is one example; Remove all PPE before exiting the resident's room except a respirator, if worn. Remove PPE in the following sequence: 1. Gloves - Outside of gloves are contaminated. - If your hands get contaminated during glove removal immediately wash your hands or use an alcohol-based hand sanitizer. 2. Goggles or face shield 3. Gown 4. Mask 5. Wash hands or use alcohol-based hand sanitizer immediately after removing all PPE.</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.