

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER / SUPPLIER / CLIA IDENTIFICATION NUMBER <b>145734</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED <b>08/07/2020</b>
NAME OF PROVIDER OF SUPPLIER <b>AVANTARA EVERGREEN PARK</b>		STREET ADDRESS, CITY, STATE, ZIP <b>10124 SOUTH KEDZIE EVERGREEN PARK, IL 60805</b>	
For information on the nursing home's plan to correct this deficiency, please contact the nursing home or the state survey agency.			
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F 0880  <b>Level of harm - Minimal harm or potential for actual harm</b>  <b>Residents Affected - Some</b>	<p><b>Provide and implement an infection prevention and control program.</b> <b>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY**</b> Based on observations, interviews, and record reviews, this facility failed to properly prevent and/or contain the spread of Covid-19 by not following their infection control protocols to include monitoring and assessment every 4 hours of 5 newly admitted residents from the hospital (R2, R3, R4, and R5) residents in a sample of 17 reviewed for monitoring signs and symptoms of COVID19. The facility also failed to follow their infection control protocol to include appropriate hand hygiene while distributing food for 17 residents (R3 - R17) in the sample of 17 reviewed for hand hygiene and infection control practice. Findings include: On 8/6/2020 at 1:45pm, this surveyor observed signage for droplet and contact isolation precautions on the entry door to R3, R4, R5, R6, R7, R8, R9, R10, R11, R12, R13, R14, R15, R16, and R17's rooms. On 8/6/2020 at 3:30pm, V8 CNA (certified nurse aide) was observed entering R5's contact/droplet isolation precaution room without donning appropriate PPE (personal protective equipment) beforehand. R5 is observed lying in bed. V8 is observed standing on the left side of R5's bed near the head of the bed with hands on R5's side rail. On 8/6/2020 at 5:15pm, dietary staff was observed delivering the dinner meal cart to the 300 nursing unit. V8 is observed touching the outside of V8's face mask. No hand hygiene observed. V8 was observed donning gown, gloves, and eye protection. V8 was observed bringing meal tray to R15's room. V8 exited R15's room with full PPE on; gloves not removed. No hand hygiene observed. V8 removed R3's meal tray from cart and brought to R3's room. V8 exited R3's room with full PPE on; gloves not removed. No hand hygiene observed. V8 removed R17's meal tray from cart and brought to R17's room. V8 exited R17's room with full PPE on; gloves not removed. No hand hygiene observed. V8 removed R4's meal tray from cart and brought to R4's room. V8 exited R4's room with full PPE on; gloves not removed. No hand hygiene observed. V8 removed R5's meal tray from cart and brought to R5's room. V8 exited R5's room with full PPE on; gloves not removed. No hand hygiene observed. V8 removed R8's meal tray from cart and brought to R8's room. V8 exited R8's room with full PPE on; gloves not removed. No hand hygiene observed. V8 removed R11's meal tray from cart and brought to R11's room. V8 exited R11's room with full PPE on; gloves not removed. No hand hygiene observed. V8 removed R12's meal tray from cart and brought to R12's room. V8 exited R12's room with full PPE on; gloves not removed. No hand hygiene observed. V8 removed R13's meal tray from cart and brought to R13's room. V8 removed PPE prior to exiting R13's room and performed hand hygiene. On 8/6/2020 at 5:20pm, V7 CNA was observed donning gown, gloves, and eye protection. V7 was observed bringing meal tray to R9's room. V7 exited R9's room with full PPE on; gloves not removed. No hand hygiene observed. V7 removed R16's meal tray from cart and brought to R16's room. V7 exited R16's room with full PPE on; gloves not removed. No hand hygiene observed. V7 removed R10's meal tray from cart and brought to R10's room. V7 exited R10's room with full PPE on; gloves not removed. No hand hygiene observed. V7 removed R6's meal tray from cart and brought to R6's room. V7 exited R6's room with full PPE on; gloves not removed. No hand hygiene observed. V7 removed R7's meal tray from cart and brought to R7's room. V7 exited R7's room with full PPE on; gloves not removed. No hand hygiene observed. V7 removed R14's meal tray from cart and brought to R14's room. V7 removed PPE prior to exiting R14's room and performed hand hygiene. On 8/6/2020 at 1:40pm, V3 LPN (licensed practical nurse) stated that all new admissions/re-admissions are placed in droplet/contact isolation rooms for 14 days. V3 stated that temperature, heart rate, and respirations are monitored every 4 hours for these residents. V3 stated that these residents are also monitored for signs/symptoms of Covid19, such as: cough, sore throat, shortness of breath, loss of taste or smell, nausea/vomiting, body aches, and loss of appetite. On 8/6/2020 at 3:35pm, V6 LPN stated that all newly admitted residents are placed on droplet/contact isolation precautions for 14 days. V6 stated that staff are to don full PPE prior to entering any of these isolation rooms. On 8/6/2020 at 3:45pm, V1 (administrator) stated that all new admission/re-admission residents are placed in droplet/contact isolation precautions for 14 days and monitored for any signs/symptoms of Covid-19. On 8/6/2020 at 5:30pm, V2 DON (director of nursing) stated that staff are expected to perform hand hygiene before entering and upon exiting an isolation room. V2 stated that staff are expected to monitor all residents' vital signs (temperature, heart rate, respirations, and oxygen saturation level) every 4 hours and blood pressure every 8 hours while on droplet/contact isolation precautions. V2 stated that staff are expected to monitor these residents for any signs/symptoms of Covid-19. V2 stated that staff are expected to don full PPE (goggles, face mask, gown, and gloves) prior to entering any resident's room that is currently on droplet/contact isolation precautions due to being recent admission/re-admission to this facility. 1. R2: Review of the medical record notes R2 was admitted to this facility on 7/30/2020. Review of R2's POS (physician order [REDACTED]). If noted with any of the above, place on isolation, place mask on resident if with respiratory symptom(s) and if tolerated, keep resident in room, serve meals in room and do not bring resident out for group activities. If resident has oxygen saturation level below 92%, count that as a sign of SOB as well and send resident out immediately. Observe for abnormal respirations/heart rate as well. Every 4 hours for Covid-19 monitoring and every day shift monitor blood pressure once daily. If resident is tested positive for Covid-19 or is a PUI (person under investigation) (with fever and or signs/symptoms of respiratory illness indicated above), monitor blood pressure every 8 hours. On 7/31/20, an order for [REDACTED]. pressure was documented daily on 7/30, 8/2, 8/4, 8/5, and 8/6. Blood pressure was documented twice daily on 7/31, 8/1, and 8/3. 2. R3: Review of the medical record notes R3 was admitted to this facility on 7/27/2020. Review of R3's POS, dated 7/27/20, notes an order to monitor every 4 hours: fever (temperature at or above 99.6 degrees Fahrenheit), presence of new cough, sore throat, SOB (shortness of breath), chills, headache, muscle pain, loss of taste/smell, fatigue, congestion/runny nose, nausea/vomiting, diarrhea. If noted with any of the above, place on isolation, place mask on resident if with respiratory symptom(s) and if tolerated, keep resident in room, serve meals in room and do not bring resident out for group activities. If resident has oxygen saturation level below 92%, count that as a sign of SOB as well and send resident out for group activities. If resident has oxygen saturation level below 92%, count that as a sign of SOB as well and send resident out for group activities. If resident is tested positive for Covid-19 or is a PUI (person under investigation) (with fever and or signs/symptoms of respiratory illness indicated above), monitor blood pressure every 8 hours. Contact/droplet 14 days isolation precaution for new admit. On 7/31/20, an order for [REDACTED]. signs (temperature, heart rate, respirations, and oxygen saturation level) and signs/symptoms monitoring was not documented on 7/28/20 at 10:00pm or on 8/1, 8/3, 8/4, and 8/5 at 10:00am or 2:00pm. R3's blood pressure was not documented on 8/1, 8/4, or 8/5. 3. R4: Review of the medical record notes R4 was admitted on [DATE]. R4 was transferred to the local hospital on [DATE] and returned to this facility on the same day. Review of R4's POS, dated 7/17/2020, notes an order for [REDACTED]. If noted with any of the above, place on isolation, place mask on resident if with respiratory symptom(s) and if tolerated, keep resident in room, serve meals in room and do not bring resident out for group activities. If resident has oxygen saturation level below 92%, count that as a sign of SOB as well and send resident out immediately. Observe for abnormal respirations/heart rate as well. Every 4 hours for Covid-19 monitoring and every day shift monitor blood pressure once daily. If resident is tested positive for Covid-19 or is a PUI (person under investigation) (with fever and or signs/symptoms of respiratory illness indicated above), monitor blood pressure every 8 hours. Contact/droplet 14 days isolation precaution for new admit. R3's Covid-19 monitoring documentation, dated July 2020, was reviewed. It does not note</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  <b>Level of harm - Minimal harm or potential for actual harm</b>  <b>Residents Affected - Some</b>	<p>(continued... from page 1)</p> <p>any documentation of vital signs on 7/17/20 at 6:00pm or 10:00pm; on 7/18 at 10:00am or 2:00pm; or on 7/21 at 6:00pm or 10:00pm. 4. R5: Review of the medical record notes R5 was readmitted to this facility on 8/5/2020 at 5:24pm. Review of R5's POS, dated 8/6/20, notes an order for [REDACTED]. If noted with any of the above, place on isolation, place mask on resident if with respiratory symptom(s) and if tolerated, keep resident in room, serve meals in room and do not bring resident out for group activities. If resident has oxygen saturation level below 92%, count that as a sign of SOB as well and send resident out immediately. Observe for abnormal respirations/heart rate as well. Every 4 hours for Covid-19 monitoring and every day shift monitor blood pressure once daily. If resident is tested positive for Covid-19 or is a PUI (person under investigation) (with fever and or signs/symptoms of respiratory illness indicated above), monitor blood pressure every 8 hours. Contact/droplet 14 days isolation precaution for new admit. On 7/31/20, an order for [REDACTED]. signs (temperature, heart rate, respirations, and oxygen saturation level) were monitored once a day on 8/5 and 8/6. There is no documentation found for any vital signs or signs/symptoms monitoring on 8/7 prior to 1:55pm. This facility's resident Covid-19 exposure testing and isolation guidance policy, undated, notes residents exposed to Covid-19, with or without symptoms, Covid-19 testing is required and isolation for 14 days even if tested negative. Review of this facility's infection prevention and control policy, revised 7/31/2019, notes a sign will be provided outside the room for residents on transmission-based precaution indicating the type of precaution (contact, droplet). Handwashing for 15-20 seconds will be required for all staff after direct resident contact and after each situation that necessitates handwashing. Alcohol-based rubs may also be used in place of handwashing and prior to leaving the isolation room. Contact precautions are intended to prevent transmission of infectious agents spread by direct or indirect contact with the resident or the environment. Use gown and gloves is necessary for all infections. Droplet precautions are intended to prevent transmission through close respiratory or mucous membrane contact with respiratory secretions. This facility's Covid-19 guidelines and emergency preparedness plan policy, revised 7/22/2020, was reviewed. It notes healthcare personnel entering the room should use standard precautions, contact precautions, droplet precautions, and use gown, gloves, mask or N95, and eye protection (goggles or face shield). The facility may extend the droplet and contact isolation for 14 days as an added precaution when the resident is readmitted or admitted at the facility in abundance of caution.</p>		