

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: IL6007272	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED C 01/06/2021
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NAME OF PROVIDER OR SUPPLIER

SHARON HEALTH CARE WILLOWS

STREET ADDRESS, CITY, STATE, ZIP CODE

**3520 NORTH ROCHELLE
PEORIA, IL 61604**

(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) COMPLETE DATE
S 000	Initial Comments A Focused Infection Control Survey/COVID-19 Focused Survey was conducted by Illinois Department of Public Health on January 6, 2021. Complaint Investigation #2029787/IL129527	S 000		
S9999	Final Observations Statement of Licensure Violations: 300.696a)c) 300.1210b) 300.3240a) Section 300.696 Infection Control a) Policies and procedures for investigating, controlling, and preventing infections in the facility shall be established and followed. The policies and procedures shall be consistent with and include the requirements of the Control of Communicable Diseases Code (77 Ill. Adm. Code 690) and Control of Sexually Transmissible Diseases Code (77 Ill. Adm. Code 693). Activities shall be monitored to ensure that these policies and procedures are followed. c) Each facility shall adhere to the following guidelines of the Center for Infectious Diseases, Centers for Disease Control and Prevention, United States Public Health Service, Department of Health and Human Services (see Section	S9999	Attachment A Statement of Licensure Violations	

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

TITLE

(X6) DATE

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S9999	Continued From page 1 300.340): Section 300.1210 General Requirements for Nursing and Personal Care b) The facility shall provide the necessary care and services to attain or maintain the highest practicable physical, mental, and psychological well-being of the resident, in accordance with each resident's comprehensive resident care plan. Adequate and properly supervised nursing care and personal care shall be provided to each resident to meet the total nursing and personal care needs of the resident. Section 300.3240 Abuse and Neglect a) An owner, licensee, administrator, employee or agent of a facility shall not abuse or neglect a resident. (Section 2-107 of the Act) THESE REQUIREMENTS WERE NOT MET EVIDENCED BY: Based on observation, interview, and record review, the facility failed to follow the Centers for Disease Control and Prevention (CDC) guidance to assign dedicated staff to work only in the COVID-19 unit and to exclude symptomatic healthcare personnel from work until a confirmation molecular test (PCR) is performed. The facility also failed to follow the CDC, Federal, and Local Health Department guidance for frequency of testing based on county level positivity rates. These failures have the potential	S9999		

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S9999	Continued From page 2 to affect all 154 residents in the facility. These failures resulted in staff being tested only one time per week instead of two and symptomatic staff who tested negative on a Point of Care (POC) test during a high county level positivity rate greater than 10% (percent) to work preparing food, provide direct resident care and also work in close contact with residents instead of being excluded from work pending a confirmatory PCR test. These failures also resulted in nursing staff providing direct resident care for COVID positive residents and COVID negative residents during the same shift. A CDC Symptoms of Coronavirus guidance dated 5/13/20 states, "People with COVID-19 have had a wide range of symptoms reported," which may include cough, muscle, body aches, congestion or runny nose, fatigue, headache, and fever. A CDC Considerations for Use of SARS-CoV-2 (COVID-19) Antigen Testing in Nursing Homes dated 12/10/20 states, "As the sensitivity of antigen tests is generally lower than RT-PCR (molecular), FDA EUA (Food and Drug Administration Emergency Use Authorization) recommends that negative POC (point of care) antigen tests be considered presumptive (possibly positive or negative)." This guidance also instructs that when testing symptomatic healthcare personnel (HCP), "If an antigen test is presumptive negative, perform RT-PCR immediately (e.g. within 48 hours). Symptomatic residents and HCP should be kept in transmission-based precautions or excluded from work until RT-PCR results return." A CDC Guidance for Expanded Screening Testing to Reduce Silent Spread dated 12/3/20 states, "Persons with asymptomatic and presymptomatic	S9999			

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S9999	Continued From page 3 infection are significant contributors to community SARS-CoV-2 (virus causing COVID-19 infection) transmission and occurrence." This guidance also states, "plan for expanded screening testing for SARS-CoV-2 to prevent or reduce silent spread of the virus. Jurisdictions should consider implementing an expanded screening testing strategy to rapidly identify people without symptoms (asymptotically or presymptotically infected with SARS-CoV-2) who are contributing to the silent spread of infection, because they are unaware, they are infectious." A CMS (Centers for Medicare and Medicaid) Updates COVID-19 Testing Methodology for Nursing Homes dated 9/29/20 states, "Under guidance CMS issued on August 26, 2020, nursing homes must test staff at a frequency of once monthly if the facility's county positivity rate is less than five percent (%). Staff testing frequency increases to once weekly if the county positivity rate is between five and ten percent. Finally, testing frequency increases to twice weekly if the county positivity rate exceeds 10 percent." A CDC Responding to Coronavirus (COVID-19) in Nursing Homes guidance dated 4/30/20 states, "Assign dedicated HCP (healthcare professional) to work only on the COVID-19 care unit. At a minimum this should include the primary nursing assistants (NAs) and nurses assigned to care for these residents." A facility Novel Coronavirus/COVID-19 policy (3/13/20) states, "Every attempt will be made to assign designated staff to work with the residents in isolation. Likewise, those in quarantine will have staff members dedicated to work with	S9999			

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S9999	Continued From page 4 them." This same policy documents it was last updated 7/23/20 and includes infection prevention and control processes that are incorrect or outdated based on current CDC guidance. A Resident Room Roster dated 12/21/20 documents there are three hallways on the North wing of the facility with 30 COVID-19 positive residents residing on the North G wing and non-COVID positive residents residing on the North F and H wings. Facility Resident Room Roster's dated 12/21/20, and 12/29/20 and a daily nurse and certified nurse aide (CNA) hall assignment sheets dated 12/1/20, to 12/29/20 documents that the facility is divided in to three resident halls on the North, and five resident halls on the South wing. The resident room rosters indicate one of the three halls (G hall) on the North wing is where the COVID-19 positive residents reside and shows the designated non-COVID halls (F and H hall) assigned to each nurse. The daily nurse and CNA (Certified Nurse Aide) hall assignment sheets document there are only two nurses to provide care for the residents on the COVID-19 G hall and the other two non-COVID halls on the North side of the building. Daily nurse and CNA hall assignments dated 12/1/20, prior to the resident outbreak of COVID-19, to 12/22/20 document no more than two nurses are scheduled on the North hall on days, and evenings; and only one nurse is scheduled to care for all of the North wing COVID and non-COVID residents at night. On 12/21/20 at 10:50a.m. V7 and V8 (CNAs) were seated at the North hall nurses' station. V8 stated that she was assigned to the H hallway where residents are not infected with the COVID-19 virus. V8 stated she and V7, who was	S9999			

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S9999	Continued From page 5 assigned to the F hall, were currently filling in for the CNAs assigned to the COVID-19 unit while they were gone for lunch in addition to caring for the non-COVID residents on their own hallways. V8 stated that all staff working on the North COVID, and non-COVID halls use the same nurses' station, break room, and restroom. V8 stated that staff enter and exit the COVID-19 unit through double doors which open toward the nurses' station from the COVID-19 resident hall. V8 stated that there are two nurses working on the COVID positive G hall. V8 stated that one nurse takes one side of the hall while the other nurse cares for residents on the other side of the G hall. V8 stated that one of those nurses also cares for residents on the non-COVID North F hall and the other nurse cares for residents on the non-COVID North H hall. On 12/21/20 at 11:00a.m. V9 (CNA) was standing behind the nurses' station wearing a surgical mask. V9 stated that she is assigned to care for residents on the North G COVID-19 unit today but helps care for non-COVID positive residents on the North F and H halls during the same shift, as needed. On 12/21/20 at 11:10a.m. V10 (Licensed Practical Nurse/ LPN) exited the double doors where the COVID-19 unit is located. V10 stated there are only two nurses working on the North hallway today, himself and V20 (LPN). V10 stated that he was providing care for residents on one side of the COVID-19 hall and all of the non-COVID residents on the F hall. V10 stated that V20 was providing care for the other half of the COVID positive residents on the G hall and all of the COVID negative residents on the H hallway. V10 also stated the facility is currently testing staff for COVID-19 only one time per week. V10 stated	S9999			

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S9999	Continued From page 6 staffing in the North hall was at its usual level or the same as before the outbreak of COVID-19. On 12/21/20 at 2:30p.m. V14 (LPN) stated that she is one of two evening shift nurses on the three North halls. V14 stated that during her current shift she is providing care for one half of the residents on the G COVID-19 unit and all of the non-COVID residents on the H hall located to the right of the North nurses' station. V14 stated that her current resident assignment is what is usual during the evening shift, even before the facility had COVID positive residents. A facility COVID-19 testing schedule dated 12/21/20 documents facility staff have been or will be tested for COVID-19 on 11/18/20, 11/19/20, 11/23/20, 12/1/20, 12/2/20, 12/7/20, 12/14/20, 12/23/20, 12/24/20. A CMS.gov (Centers for Medicare and Medicaid) COVID-19 Test Positivity Rates documents that the facility's county level positivity rate for the week ending 11/18/20 was 12.3%, for week ending 11/25/20 was 11.7%, for week ending 12/2/20 was 11.7%, for week ending 12/9/20 was 11.8%, for week ending 12/16/20 was 11.2%. All of these weekly positivity rates indicate the facility should be testing staff two times weekly. A County Test Positivity Seven (7) Day Rolling Average log, provided by V1 on 12/22/20 to verify the facility has been monitoring the county positivity rate, documents the county in which the facility is located has had a 7-day rolling average above 10% since 11/18/20. On 12/21/20 at 9:25a.m., 3:14p.m., 3:58p.m., 12/22/20 at 1:20p.m., 12/23/20 at 10:48a.m., and 12/24/20 at 1:40p.m. V1 (Administrator) stated	S9999			

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S9999	Continued From page 7 the facility is testing staff one time per week. V1 stated that although the testing schedule shows more than one testing date per week, the extra dates are to make sure all staff can make time to be tested one time during that week. V1 stated the testing schedule is based on direction from the facility's corporate office who has been directing the facility on how many times per week testing should occur. V1 stated the facility performs its own COVID-19 testing and uses both the PCR test, which is sent off to a lab, and a point of care (POC) or antigen test which doesn't require a lab and gives the facility the results very quickly on the same day. V1 stated that usually the PCR test for COVID-19 is performed one time per week on a specific date, and the point of care or the antigen tests are given for the rest of the week or when staff and residents have COVID-19 symptoms requiring immediate testing. V1 stated the only contact he has had with his local health department (LHD) is when he sends in the facility's COVID-19 test results. V1 stated he has also received CDC and State Agency COVID-19 guidance from V30 (LHD contact). V1 stated that although V2 (Director of Nurses) and V34 (Assistant Director of Nurses/ADON) are currently considered the facility's infection control nurses, the facility does not have an infection preventionist on-site who has been trained, but instead, the facility relies on a Corporate Nurse to provide guidance for COVID-19. V1 stated that when staff complain of COVID-like symptoms, they are tested using the facility's point of care or antigen testing. V1 further stated that if a symptomatic staff member tests negative using the POC test, they can remain at work to provide resident care. V1 stated that there is no confirmatory PCR test for symptomatic staff who test negative on the POC test unless the PCR	S9999		

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S9999	Continued From page 8 test happens to be scheduled on the same date they had the POC test. V1 stated there is no log of employee illnesses beside the COVID-19 POC testing sheets which record employee symptoms, when they last worked, and the results of the test. V1 stated that the employee POC testing sheets, which show the employee had symptoms but tested negative, indicates the staff members were allowed to stay at work unless the sheet shows the staff person tested positive. V1 stated the facility currently has COVID positive residents on the G hallway on the North wing of the building. V1 stated those COVID positive residents do not have dedicated staff, but instead, staff may care for COVID positive residents on the North G hall and COVID negative residents on the North F or H halls at the same time. V1 stated the facility's first case of a COVID-19 positive resident was on 12/6/20. V1 stated that based on the facility log of residents who tested positive for COVID-19 dated 12/2020, residents initially began testing positive 12/6/20 with the COVID-19 unit being established 12/9/20 and without dedicated nursing staff assigned to COVID positive residents. V1 stated the facility has continued to have more COVID-19 positive residents which were either identified during weekly testing or using the POC test when those residents had symptoms. V1 stated he has not had enough staff to dedicate nurses only to the COVID-19 unit. V1 stated that V2 (Director of Nurses) has tried to schedule extra nurses from nursing agencies without any success. A facility log of residents who tested positive for COVID-19 dated 12/2020 documents that since 12/9/20, when the COVID-19 unit was established, until 12/20/20 there have been 21 new COVID-19 cases among residents, 20 of whom resided on the North hall where nurses cared for both COVID positive and negative	S9999		

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S9999	Continued From page 9 residents during the same shift. V18's (Dietary Aide) POC testing sheet dated 12/14/20 documents V18 had the COVID-like symptoms of headache and body aches on 12/14/20 and was tested by the facility on that date using a POC rapid test which was negative. V18's timecard documents V18 worked at the facility on 12/15/20, 12/16/20, 12/18/20, 12/19/20, 12/20/20. On 12/23/20 at 10:00a.m. V5 (Assistant Dietary Manager) stated that V18 also worked on 12/21/20 but was sent home when she tested positive on a POC test administered on that date, while she was at work. V5 stated V18's kitchen duties include all aspect of food preparation for all facility residents. V19's (CNA) POC testing sheet dated 12/13/20 documents V19 had the COVID-like symptoms of congestion and headache on 12/12/20 and was tested by the facility on 12/13/20 which was negative. This same document shows that V19 was administered the POC test on 12/13/20 while she was at work. V19's PCR test which was not administered until 12/17/20 with results reported on 12/19/20 showed V19 was positive for COVID-19. V19's timecard documents V19 worked at the facility providing resident care following COVID-like symptoms on 12/13/20, 12/15/20, and on 12/17/20. On 12/23/20 at 9:05a.m. V19 stated that she resigned from the facility after she last worked on 12/17/20. V19 stated the facility did not notify V19 of her positive PCR test results and only found out today, 12/23/20, when she was interviewed by a State Agency Surveyor. V19 verified working at the facility providing direct care to residents on	S9999			

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S9999	Continued From page 10 12/13, 12/15, and 12/17/20 after having new onset of COVID-like symptoms on 12/12/20 and after being tested as negative by the facility using a POC antigen test on 12/13/20. V19 stated she continued to have symptoms after she tested negative on the POC test but, since the facility told her she was negative, V19 thought she was "stressing" over COVID-19. V2's POC testing sheet dated 12/18/20 documents V2 had the COVID-like symptoms of congestion and a headache on 12/18/20 and was tested by the facility on that date which was negative. V2's PCR test dated 12/17/20 shows V2 was administered the test on 12/17/20 with results reported to the facility 12/19/20. V2's timecard documents V2 worked at the facility on 12/17 and 12/18/20 following complaints of COVID-like symptoms. On 12/21/20 at 10:15a.m., 3:34p.m. and on 12/23/20 at 1:05p.m., V2 verified that on 12/18/20 V2 had the COVID-like symptoms of congestion and headache, V2 was tested as negative using the POC test at the facility, and V2 remained at work while having symptoms on that date. V2 stated that she is performing the COVID-19 POC and PCR testing in the facility. V2 verified that staff are tested one time per week either with the PCR or the POC test. V2 also verified that there is no on-site trained infection preventionist. V2 stated the lab results for the PCR testing is currently taking approximately two to three days to provide the facility with results. V2 stated she has reached out to some contracted nursing agencies in the past but that V25 (Human Resources) has taken over that role. V21's (Housekeeping) POC testing sheet dated 12/17/20 documents V21 had the COVID-like	S9999		

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S9999	Continued From page 11 symptoms of headache and body aches on 12/17/20 and was tested by the facility on 12/17/20 which was negative. V21's PCR test results document V21 was tested on 12/17/20 with the results not reported to the facility until 12/19/20. V21's timecard documents V21 continued to work while waiting for the PCR test results on 12/17, 12/18, and 12/19/20. On 12/23/20 at 9:31a.m. V21 stated that on 12/17/20 he reported to V2 that during his days off he had been exposed to two different people who tested positive for COVID-19 from the previous weekend and from the previous day. V21 stated that he was also having a new onset of COVID-like symptoms of body aches and an upset stomach. V21 stated he also had a runny nose which is not uncommon for him. V21 stated he asked V2 to provide him with a POC test. V21 stated that, initially, V2 refused because V2 said V21 didn't have enough symptoms to justify getting a POC test. V2 stated he continued performing his work as a housekeeper cleaning residents' rooms and hallways until the facility finally gave him a POC COVID-19 test later in the day 12/17/20 which was negative. V21 stated he continued to work with symptoms after the negative POC test on 12/17, 12/18, and 12/19/20, and without being sent home to quarantine related to his COVID-19 exposure. On 12/23/20 at 1:11p.m. V25 (Human Resources) stated she has been setting up contracts with nursing agencies for the facility since 12/18/20. V25 stated the facility had only one previous contract with a nursing agency, but that V25 has signed additional contracts with four other agencies over the last few days. V25 stated the latest nursing agency contract was signed today, 12/23/20. V25 stated the facility notified her with a	S9999		

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S9999	Continued From page 12 needs list indicating the facility needed agency CNA staff for 12/25/20. V25 stated that an agency offered staff to fill those openings but V25 had to decline the agency because the facility filled those openings with their own staff. V25 stated that during the previous week, the facility asked her to fill six to eight shifts for nurses needed from 12/18/20 to 12/23/20. V25 stated that she ended up not needing to call the agencies because those nurses' shifts were filled internally. V25 stated the facility also asked her to fill another nurse's shift for 12/31/20 but it also was filled internally when a nurse agreed to work a double shift for that date. V25 stated that the facility did not ask for nursing staff to fill any opening for 12/21/20, when observations were made of non-dedicated nursing staff working on the North hall COVID-19 and non-COVID halls. V25 stated the facility had requested another agency nurse for 12/23/20 but that request was also removed from the staffing needs list by the facility. V25 stated she presumed the 12/23/20 nursing shift was filled internally. On 12/23/20 at 1:52p.m. V26 (Helping Hands Staffing Agency Director of Nurses) stated the facility signed a contract with them 10/2020 and had used some of their agency staff for a limited period. V26 stated her agency had not been contacted by the facility for additional staff until the week of 12/21/20. On 12/23/20 at 1:57p.m. V27 (Horizon's Healthcare Staffing Agency) stated the facility reached out to her agency for nursing staff for the first time on 12/21/20. On 12/23/20 at 2:07p.m. V29 (Staff of Life Staffing Agency) stated the facility just finalized a contract with them 12/18/20. V29 stated the	S9999		

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: IL6007272	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____		(X3) DATE SURVEY COMPLETED C 01/06/2021
NAME OF PROVIDER OR SUPPLIER SHARON HEALTH CARE WILLOWS			STREET ADDRESS, CITY, STATE, ZIP CODE 3520 NORTH ROCHELLE PEORIA, IL 61604		
(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) COMPLETE DATE
S9999	Continued From page 13 facility's staffing needs list only included one nurse on one shift for 12/25/20, and multiple CNAs. On 12/23/20 at 12:07p.m., V30 (Local Health Department) stated the facility should have been testing staff two times weekly for as long as the county positivity rate has been above 10%, which has been since 11/2020. V30 stated the facility should have sent home any symptomatic staff pending a confirmatory PCR test following a negative POC test. V30 stated the facility should have dedicated staff on their COVID-19 unit who do not also care for non-COVID residents during the same shift. V30 stated that the facility has not requested assistance with staffing from the local health department. V30 stated that V31 (Facility Chief Operating Officer) contacted him today, 12/23/20, and mentioned their staffing concerns are related to not having extra staff to enter PCR/POC test results into the computer and because of this the facility is only going to test staff one time per week instead of the required two times per week based on the county positivity rate being above 10%. V30 stated that V31 gave as another reason for not testing staff two times per week as the facility's lab was taking too long to return the PCR test results. V30 stated the facility is only testing staff one time per week but should be able to test two times per week because they also have the ability to use the POC test to supplement the PCR test. V30 stated he instructed the facility they could use the POC rapid antigen test in addition to the PCR tests so they could perform two tests per week. V30 stated he has provided the facility with CDC and State Agency guidance for COVID-19 for nursing homes multiple times, including testing based on positivity rates, the steps for mitigating staffing shortages, how to use POC testing during	S9999			

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STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: IL6007272	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED C 01/06/2021
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NAME OF PROVIDER OR SUPPLIER

STREET ADDRESS, CITY, STATE, ZIP CODE

SHARON HEALTH CARE WILLOWS

**3520 NORTH ROCHELLE
PEORIA, IL 61604**

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S9999	Continued From page 14 high county positivity levels including presumptive negative results for symptomatic staff. V30 stated he sent the facility guidance which specifically states to follow up a negative POC test for symptomatic employees with a PCR test and to send that employee home until the PCR results are known. V30 stated his primary contact with the facility has been through V31 instead of V1 or the facility's infection preventionist. A Facility Census and Condition of Residents form dated 12/23/20 and signed by V1 (Administrator) documents that at the time of the survey 154 residents resided in the facility. " A"	S9999		