

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER / SUPPLIER / CLIA IDENTIFICATION NUMBER 145309	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 07/02/2020
NAME OF PROVIDER OF SUPPLIER RED BUD REGIONAL CARE		STREET ADDRESS, CITY, STATE, ZIP 350 WEST SOUTH 1ST STREET RED BUD, IL 62278	
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 operationalize their COVID-19 Infection Control Policy by not implementing infection control precautions for residents whose COVID-19 status is unknown, failing to cease group activities, failing to provide social distancing between residents, and failing to limit resident movement in the facility by residents who are not wearing face masks to prevent the potential spread of COVID-19. This failure has the potential to affect all 71 residents in the facility. Findings include: 1. On 7/1/20 at 9:45 AM, there were 14 residents sitting in the dining room for a Bingo activity. None of these residents were wearing masks. One resident, R6, stated she does not remember anyone offering or telling her she should wear a mask when out of her room. Another resident, R7, stated she has a mask and she wears it when she wants; it's optional. R6 stated, We sit in here (dining room) all the time. On 7/1/20 at 9:50 AM, V4, Activity Director, stated the facility does have group activities, but she tries to limit the groups to 15 residents or less. V4 stated face masks are optional for the residents. On 7/1/20 at 1:16 PM, via email, V1, Administrator, provided a resident roster, dated 6/30/20, with 10 AM Bingo Activity written across the top of it, that had the 14 residents who attended the Bingo activity on 7/1/20 at 10:00 AM highlighted. The residents who attended that activity, who did not wear masks, reside on the 100, 200, 300 and 400 halls on the East Wing and the 100, 200 and 400 halls on the West wing. 2. On 7/1/20 at 9:30 AM, V3, Infection Preventionist, stated R3 is being quarantined for 14 days due to recent emergency room visit and potential COVID-19 exposure. On 7/1/20 at 9:46 AM, R3 was sitting outside her room with no face mask on with her breakfast tray in front of her. V3 stated R3 should have eaten in her room. V3 stated only residents who are on 14 day quarantine are encouraged to stay in their rooms, except for going to essential services such as therapy. V3 stated R3 should have a face mask on any time she is out of her room. V3 stated staff should wear a gown, mask and gloves anytime they enter R3's room, but do not need to wear eye protection unless doing an aerosol producing treatment. 3. On 7/1/20 at 10:00 AM, R8 was wheeled down the hall in his wheel chair by V8, Restorative Aide. R8 was not wearing a mask as he was wheeled past other residents who were also not wearing masks. V8 stated she was never educated to encourage residents who are not on isolation to wear a mask and had not attempted to put a mask on R8 before bringing him out of his room. 4. On 7/1/20 at 10:03 AM, V7, Restorative Nurse, was assisting R9 to walk down the hall, holding onto her gait belt and leaning in close to R9. R9 was not wearing a mask. V7 stated she did not offer or encourage R9 to wear a face mask because she knows she has refused a mask in the past when it was offered. 5. On 7/1/20 at 10:06 AM, V8 left R8 sitting in the hall in front of the nurses station. R8 was still not wearing a mask. V5, Certified Nursing Assistant (CNA) and V6, CNA, were both in the hall with V8 and neither offered him a face mask or assisted him to his room. V5 stated only residents who are on isolation or have respiratory problems are encouraged to wear a mask; other residents are not encouraged to wear their masks when they are out of their rooms. V6 stated only residents who are on quarantine or if they left the facility need to wear masks. V6 stated she offers other residents a mask with morning care, but they usually don't want to put one on. 6. On 7/1/20 at 10:20 AM, R4 was propelling self in the hall, not wearing a face mask as he passed other residents on the hall who were also not wearing face masks. R4 stated he was told face masks are optional and there is no COVID-19 in the facility, so he doesn't wear one. R4 stated no staff in the facility encourage him to stay in his room when he is not wearing a mask. On 7/1/20 at 8:50 AM, V3, Infection Preventionist, stated residents' families and alert residents were informed by Social Services that masks are optional. V3 stated all residents have masks in their rooms and can wear them if they want to. V3 stated wearing a mask causes behaviors with some residents, and other residents just don't like to wear them. V3 stated only residents who are on a 14-day quarantine are encouraged to stay in their rooms. V3 stated residents eat in the halls and are supposed to maintain 6 feet apart social distancing, and the facility does continue to have group activities. On 7/1/20 at 10:25 AM, V1, Administrator, stated masks are used for source control and there are currently no COVID-19 positive residents or staff in the building. V1 stated all the residents and all but 10 of her staff were tested for COVID yesterday, and she plans to complete the other 10 staff by tomorrow. V1 stated this was her first whole facility testing for a baseline.</p> <p>7. On 7/1/2020 at 9:00 AM, R1, R2, and R10 were seated along the wall across from the east wing nurse's station, between the 300 and 400 hallway entrances. R1, R2, and R10 were seated 3 to 4 feet apart, and not maintaining social distancing of 6 feet to prevent potential spread of COVID 19. Only R1 had a mask, but it was not covering her nose or mouth. On 7/1/2020 at 9:15 AM, V2, Director of Nursing (DON), stated, Maybe we need to place marks down on the floor so staff would know what 6 feet apart is. 8. On 7/1/2020 at 8:55 AM, R1's door had a sign posted to the outside stating, Quarantined Isolation, and on the sign there was direction for use of the Personal Protective Equipment (PPE) as follows: Gown-reusable, Mask-reusable, Gloves non-reusable. Remove isolation on 7/5/2020. There was no indication to wear eye protection on the sign posted. There was no eye protection set in the PPE outside of her room. On 7/1/2020 at 8:55 to 9:15 AM, R1 was seated outside of her room with a bedside table in front of her at the end of the 300 hall, with her mask hanging below her nose and mouth. Staff did not encourage or assist R1 to mask or offer to take her to her room. On 7/1/2020 at 10:17 AM to 10:25 AM, R1 was brought back from therapy and seated at the end of the 300 hall. R1's mask was hanging below her mouth and nose. No staff encouraged or assisted her to place her mask back on her face or redirected her back to her room. Resident was not observed to be in her room during the time of the survey. On 7/1/2020 at 8:45 AM V2, DON, stated, (R1) is a new admission and is on 14-day quarantine. On 7/1/2020 at 9:20 AM, V10, CNA, stated, We use a gown, mask, and gloves to care for (R1); we don't use eye protection. On 7/1/2020 at 9:25 AM V3, Infection Prevention Nurse, stated, (R1) would not need to use eye protection, unless positive for COVID 19. On 7/1/2020 at 9:50 AM, V14, CNA, stated, To take care of (R1), I wear my mask, my gown that is hanging up, and gloves. No eye shields. On 7/1/2020 at 10:00 AM, V12, CNA, stated, As far as I know, there is no mask policy for residents outside of their rooms. They all have masks in their rooms, but they are not required to wear them. On 7/1/2020 at 10:05 AM, V15, LPN, stated, If residents want to wear a mask, they can. We don't have many who will wear one. They all get brought out for meals and are spaced apart. After meals, they are redirected back to their rooms. It's hard to keep them in their rooms. R1's Physician Orders, dated 6/24/2020, documents, quarantine x's 14 days related to Covid19 precautions per facility protocol. The Facility's undated COVID-19 Testing Plan and Response Strategy policy and procedure documents: C. Cessation of group activities: Group activities, as they were conducted prior to COVID-19, will not be held. Any group activities will be held in small groups with residents 6 feet or more apart. Masking of residents will be encouraged for these groups. If an outbreak should occur, all group activities will cease until the Facility has been declared recovered. It continues, F. Universal source control: Universal source control (masking) for HCP (Health Care Providers), and any persons entering building including visitors for [MEDICATION NAME] care will be practiced. Residents will be encouraged to wear masks while care is being provided and while out of their rooms. Exceptions may be made for those residents for whom a mask may be deemed hazardous, i.e. those who may chew on or attempt to swallow the mask. Should a COVID-19 case be detected in the Facility residents will be required to wear masks as described above or be</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>on strict quarantine in their room. G. Social distancing (at least 6 feet between individuals): Social distancing will be practiced in the Facility. The policy also includes: Cohorting and managing care for new admissions/readmissions with unknown COVID19 status: B. Cohorting and managing care for new/readmissions with unknown COVID19 status Cohorting of new or readmissions will not be permitted. Instead, asymptomatic residents will be placed on quarantine for 14 days and monitored for any symptoms. Symptomatic new admissions will not be accepted. Symptomatic readmissions will be placed in a private room on the Isolation wing for 14 days and tested for COVID-19. B. Asymptomatic new admissions/readmissions will be placed in a private room, monitored for 14 days for symptoms of COVID-19 and placed on TBP (transmission based precautions). Masks, gowns and gloves shall be worn by staff while providing care. For these asymptomatic residents, a cloth gown may be used to preserve PPE, but only under circumstances which present a minimal chance for exposure (transfers, etc.). These gowns may be hung just inside the door to the resident's room and reused by the individual for the entire shift, or until soiled. Masks are required at all times. https://www.cdc.gov/coronavirus/2019-ncov/hcp/nursing-homes-responding.html Responding to Coronavirus (COVID-19) in Nursing Homes Considerations for the Public Health Response to COVID-19 in Nursing Homes under Considerations for new admissions or readmissions to the facility documents, Create a plan for managing new admissions and readmissions whose COVID-19 status is unknown. Options include placement in a single room or in a separate observation area so the resident can be monitored for evidence of COVID-19. All recommended COVID-19 PPE should be worn during care of residents under observation, which includes use of an N95 or higher-level respirator (or facemask if a respirator is not available), eye protection (i.e., goggles or a disposable face shield that covers the front and sides of the face), gloves, and gown. Testing residents upon admission could identify those who are infected but otherwise without symptoms and might help direct placement of asymptomatic [DIAGNOSES REDACTED]-CoV-2-infected residents into the COVID-19 care unit. However, a single negative test upon admission does not mean that the resident was not exposed or will not become infected in the future. Newly admitted or readmitted residents should still be monitored for evidence of COVID-19 for 14 days after admission and cared for using all recommended COVID-19 PPE. Testing should not be required prior to transfer of a resident from an acute-care facility to a nursing home. New residents could be transferred out of the observation area or from a single to a multi-resident room if they remain afebrile and without symptoms for 14 days after their last exposure (e.g., date of admission). Testing at the end of this period could be considered to increase certainty. The CDC's guidance, Preparing for COVID-19 in Nursing Homes, updated May 19, 2020, documents: Implement Source Control Measures. Residents should wear a cloth face covering or facemask (if tolerated) whenever they leave their room. Responding to Coronavirus (COVID-19) in Nursing Homes Considerations for the Public Health Response to COVID-19 in Nursing Homes, Updated April 30, 2020, Considerations for new admissions or readmissions to the facility documents, Create a plan for managing new admissions and readmissions whose COVID-19 status is unknown. Options include placement in a single room or in a separate observation area so the resident can be monitored for evidence of COVID-19. It continues, All recommended COVID-19 PPE should be worn during care of residents under observation, which includes use of an N95 or higher-level respirator (or facemask if a respirator is not available), eye protection (i.e., goggles or a disposable face shield that covers the front and sides of the face), gloves, and gown. On 7/1/20 at 8:25 AM, V1, Administrator, stated there are 71 residents residing in the facility.</p>		