

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 145382	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 03/22/2024
NAME OF PROVIDER OR SUPPLIER Lee Manor		STREET ADDRESS, CITY, STATE, ZIP CODE 1301 Lee Street Des Plaines, IL 60018	

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)
<p>F 0880</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Provide and implement an infection prevention and control program.</p> <p>39781</p> <p>Based on observation, interview, and record review, the facility failed to implement appropriate infection prevention and control practices during medication administration by failure to disinfect medical equipment such as blood pressure (BP) apparatus and oximeter after each resident use. This deficiency affects all four (R65, R82, R124 and R150) residents in the sample of 35 reviewed for infection control during Medication Administration.</p> <p>Findings include:</p> <p>On 3/19/2024 at 10:54AM, V12, RN (Registered Nurse), said she will take vital signs of R150 before giving his medications. V12 placed the BP cuff to R150's left arm and pulse oximeter on left index finger. V12 obtained BP 129/81mmhg (millimeter of mercury) and Oxygen (O2) saturation of 97%. V12 did not disinfect medical equipment (BP cuff and oximeter) used with R150 and prepared his medications.</p> <p>On 3/19/24 at 11:10AM, V12, RN, said that she will take vital signs of R124 before giving her medications. Without disinfecting the medical equipment used from another resident, V12 placed the BP cuff on R124's right arm and placed the pulse oximeter on right index finger. V12 obtained BP 128/76mmhg and O2 saturation of 95%. V12 did not disinfect medical equipment used with R124 and prepared her medications.</p> <p>On 3/19/24 at 11:34AM, R65 requested V12, RN, to take her vital signs. V12 took the same medical equipment, without disinfecting it. V12 placed the BP cuff to R65's left arm and pulse oximeter on left index finger. V12 obtained BP112/66mmhg and O2 saturation of 99%. V12, RN, did not disinfect the medical equipment after using it.</p> <p>On 3/19/24 at 11:38AM, V12, RN, said she will take R82's vital signs before giving her medications. V12 took the same medical equipment, without disinfecting it. V12 placed BP cuff around right arm and pulse oximeter on right index finger. V12 obtained BP 125/83mmhg and O2 saturation of 96%. V12 did not disinfect the medical equipment with R82 and prepared her medications.</p> <p>On 3/19/24 at 12:05PM, V12 said she should disinfect the BP cuff and pulse oximeter after each resident. V12 said she just forgot to disinfect it.</p> <p>(continued on next page)</p>

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.

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
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<p>F 0880</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>On 3/19/24 at 12:35PM, V6, Infection Control Coordinator, said medical equipment such as BP cuff and pulse oximeter should be disinfected after each resident use. V6 added, It is a must to clean it, to prevent spread of infection.</p> <p>Facility's policy on Cleaning and Disinfection of Resident-Care Items and Equipment indicates:</p> <p>Policy statement: Resident care equipment, including reusable items and durable medical equipment will be cleaned and disinfected according to current CDC (Center for Disease Control and Prevention) recommendations for disinfection and the OSHA (Occupational Safety and Health Administration) bloodborne Pathogens Standard.</p> <p>Policy Interpretation and Implementation:</p> <p>1. The following categories are used to distinguish the level of sterilization/disinfection necessary for items used in resident care:</p> <p>c. non-critical resident care items are those that come in contact with intact skin, but not mucous membranes include blood pressure cuffs</p> <p>3. Durable medical equipment (DME) must be cleaned and disinfected before reuse by another resident.</p> <p>7. Intermediate and low-level disinfections for non-critical items include:</p> <p>a. Ethyl or isopropyl alcohol</p> <p>b. Sodium hydrochloride (5.25-6.15% diluted 1:500 or per manufacturer's instructions</p> <p>c. Phenolic germicidal detergents</p> <p>d. Iodophor germicidal detergents and</p> <p>e. Quaternary ammonium germicidal detergents (low level disinfection</p>		