



STATE OF ILLINOIS  
**DEPARTMENT OF VETERANS' AFFAIRS**

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TERRY PRINCE  
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December 29, 2023

Illinois State Library  
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300 S. Second Street  
Springfield, IL 62701

RE: Direct Care and Communicable Diseases Report

To whom it may concern:

Pursuant to 20 ILCS 2805/2.07, we have enclosed the Illinois Department of Veterans' Affairs (IDVA) biannual direct care report. This report includes information on:

- The number of staff employed in providing direct patient care at our state veterans' homes (registered nurses, licensed practical nurses, and veterans nursing assistants-certified).
- The compliance or non-compliance with staffing standards established by the United States Department of Veterans Affairs (USDVA) for such care; and
- In the event of non-compliance with such standards, the number of staff required for compliance.

During this reporting period, July 1, 2023, through December 31, 2023, each of the homes performed as follows:

- Illinois Veterans' Home at Anna employed 40 direct care staff and was in compliance with the USDVA staffing standards.
- Illinois Veterans' Home at Chicago employed 56 direct care staff and was in compliance with the USDVA staffing standards.
- Illinois Veterans' Home at LaSalle employed 111 direct care staff and was in compliance with the USDVA staffing standards.
- Illinois Veterans' Home at Manteno employed 165 direct care staff and was in compliance with the USDVA staffing standards.
- Illinois Veterans' Home at Quincy employed 190 direct care staff and was in compliance with the USDVA staffing standards.

Pursuant to 20 ILCS 2805/2.13, we have also enclosed IDVA's biannual communicable diseases report. This report includes information on:

- The number and nature of complaints made by residents.
- Information on any epidemic reported at a veterans' home.
- The number of cases and information on the cases.
- The action taken by the veterans' home to eradicate the spread of communicable disease.

Enclosed are documents which provide the requested information for the Illinois State Veterans' Homes for the reporting period of January 1, 2023, through June 30, 2023.

- Attachment #1 is a table showing the major complaints raised by residents.
- Attachment #2 provides a breakdown of communicable diseases and the actions taken to prevent the spread of the communicable diseases.

If there are any questions about this report, please contact our Legislative Liaison, Sara Augustinas at (217) 685-2334.

Sincerely,

A handwritten signature in black ink that reads "Terry Prince". The signature is written in a cursive style with a large, prominent "P" at the beginning.

Terry Prince  
IDVA Director

**IVH Direct Care Hours and Staffing Report**

	Date	Census	RN	LPN	VNAC	Total Hours	HC Hours	Total Staff			
<b>Anna</b>	11/27/2023	47	6.5	5.0	16.0	196.0	4.17	27.5			
	11/29/2023	47	6.3	5.0	18.0	230.0	4.89	29.3			
	12/5/2023	46	5.8	3.3	13.0	176.0	3.83	22.0	Avg Hours	Avg Staff	Total # RN/LPN/VNAC
	12/7/2023	46	6.5	6.0	16.0	224.5	4.88	28.8	4.44	27	40.0

	Date	Census	RN	LPN	VNAC	Total Hours	HC Hours	Total Staff			
<b>Chicago</b>	11/27/2023	47	7.0	0.0	22.0	245.5	5.22	29.0			
	11/29/2023	48	8.0	0.0	22.0	257.5	5.36	30.0			
	12/5/2023	49	10.0	0.0	18.0	250.0	5.10	28.0	Avg Hours	Avg Staff	Total # RN/LPN/VNAC
	12/7/2023	49	8.0	0.0	22.0	257.0	5.24	30.0	5.23	29	56.0

	Date	Census	RN	LPN	VNAC	Total Hours	HC Hours	Total Staff			
<b>Manteno</b>	11/27/2023	204	34.0	3.0	63.0	750.0	3.68	100.0			
	11/29/2023	203	36.0	5.0	57.5	738.8	3.64	98.5			
	12/5/2023	205	50.0	6.0	63.0	892.5	4.35	119.0	Avg Hours	Avg Staff	Total # RN/LPN/VNAC
	12/7/2023	208	30.5	3.5	71.5	791.3	3.80	105.5	3.87	106	165.0

	Date	Census	RN	LPN	VNAC	Total Hours	HC Hours	Total Staff			
<b>Quincy</b>	11/27/2023	262	32.0	14.0	88.0	938.0	3.58	134.0			
	11/29/2023	263	31.5	17.0	98.5	1029.0	3.91	147.0			
	12/5/2023	259	31.5	17.0	94.0	997.5	3.85	142.5	Avg Hours	Avg Staff	Total # RN/LPN/VNAC
	12/7/2023	260	36.5	11.5	91.0	973.0	3.74	139.0	3.77	141	190.0

	Date	Census	RN	LPN	VNAC	Total Hours	HC Hours	Total Staff			
<b>LaSalle</b>	11/27/2023	86	15	0	39	378	4.4	54			
	11/29/2023	89	17.3	1	38.5	397.6	4.47	56.8			
	12/5/2023	87	16.5	1	39	395.5	4.55	56.5	Avg Hours	Avg Staff	Total # RN/LPN/VNAC
	12/7/2023	87	15.5	0	37.5	371	4.26	53	4.42	55	111

**Attachment #1 - July - December 2023****Resident Grievance Log - Illinois Veterans Home - ANNA**

DATE	ISSUE	RESOLVED (yes/no)	COMMENTS
07/15/23	NONE		
08/15/23	NONE		
09/15/23	NONE		
10/15/23	NONE		
11/15/23	NONE		
12/15/23	NONE		

\*The above table contains resident complaints received on official grievance forms or major complaints which could not be immediately addressed at the Resident Advisory Council and required follow up by staff at the Veterans Homes.

**Resident Grievance Log - Illinois Veterans Home - LaSALLE**

DATE	ISSUE	RESOLVED (yes/no)	COMMENTS
7/10/2022	Resident HF stated to VNAC that he was missing a \$20 bill. The room was searched, but staff were unable to locate it. Interviews with staff were then conducted.	Yes	HF was encouraged to lock up any money in his dresser drawers. Keys were ordered and kept in the Nurse's Cart. HF was also reminded of 1/7/22 when he was encouraged to put cash in his Trust Account for safe keeping thru Social Services. Staff were advised not to transact with any cash for any of HF's
8/25/2023	NW resident LG was found to have his upper partial dentures missing. The room was searched and Laundry and Housekeeping were notified.	Yes	Resident's wife was contacted. Two days later they were found and returned from Laundry.
8/31/3023	Resident RB on the East Unit came out of his room with the left earpiece of the glasses off. When asked, he said that he must have slept on them.	Yes	Family was contacted. Glasses were repaired.

9/13/2023	Resident PK on the East Unit notified his nurse that he was missing \$5.00. He relayed that he put the money in his shirt pocket, and now it is missing.	No	Staff looked for his missing money in clothes ready to be laundered, his room, and within the Laundry Department. It has not yet been located.
9/27/2023	East resident PK had his cell phone go through the washer and dryer. It was found by Laundry and PK identified it.	Yes	Resident, Nursing Supervisor, and POA for the resident were all notified.
10/7/2023	Found East Unit resident WD had been smoking in his room. He stated that he had completely forgot that he could not do that.	Yes	Resident was educated on where he could and could not smoke. He was also reminded to ensure that he drop his cigarettes and lighter off at the Nurses' Desk as he had been doing in the past.
10/9/2023	East unit JJ was found to have bent frames and a lens that had popped out of his glasses.	Yes	Resident will be getting a new pair of glasses as his prescription is fairly new. Broken glasses were given to scheduling.
10/14/2023	East resident BB relayed that his earbuds were not working. He stated that he put them in his pants pocket and they went through Laundry. He requested staff not to call his POA.	Yes	Resident stated that he would call his sister/POA and explained to her what happened. Resident was letting the earbuds dry out.
10/22/2023	East Unit resident DB was found to have wire cutters in his room that he said he was using to cut his nails and cuticles.	Yes	POA was contacted by Nursing. POA denied giving them to the resident. Wire cutters were disposed of.
11/19/2023	Northwest resident TR relayed that his hearing aids were removed while hospitalized at OSF in Peoria and they were not given to him when he returned here.	No	OSF was contacted and they reported back that they found no hearing aids. They stated that they will continue to look and the resident is wearing an old set.
11/20/2023	East Unit resident had misplaced two pair of glasses that his daughter had brought in a couple of days previous to this.	Yes	Family was contacted and new pair received. Room and Laundry were searched. Resident passed away seven {7} days later.
11/21/2023	Northwest resident GK lost his glasses. He had been taken to Mendota Hospital and when he returned, he did not have them.	Yes	Family was contacted and new pair received. Room and Laundry was searched. Ambulance service and hospital were contacted without success.

**Resident Grievance Log - Illinois Veterans Home - MANTENO**

DATE	ISSUE	RESOLVED (yes/no)	COMMENTS
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7/1/2023	Expressed an interest to Barnes & Nobel as an outing.	Yes	An outing to Barnes & Nobel has been added to the activities calendar.
8/1/2023	Everyone should receive headphones for the TV.	Yes	IVHM's Volunteers Coordinator has added headphones to the donation needs list and the facility is periodically getting them in.
8/17/2023	Evening meal trays are being served later at night, sometimes not until 7pm or later.	Yes	Members were informed that the kitchen is being completely revamped with new Cooks and new food. The Dietary department is aware of this issue and is working to get all meals out at the appropriate times.
8/26/2023	Member stated that, on an outing to Orland Park, they stopped for ice cream and was told that the driver paid for it. Member believes that the Orland Park American Legion gave staff money to buy ice cream, but the driver took credit for it.	Maybe	<p>After looking into this matter, Social Services Director obtained statements from staff who were on the outing stating that the driver purchased ice cream for everyone, assisted member in calling the Orland Park American Legion who stated that they did not give anyone money to purchase ice cream, and obtained the driver's credit card statement to show that he did purchase ice cream in Frankfort with his credit card. Member was provided this information and does not agree with the findings and is not satisfied with the outcome.</p> <p><b>Recommendation:</b> It is recommended that staff not purchase items for residents on outings without prior approval from their supervisor.</p>
9/27/2023	Would like to know when the next casino outing will be.	Yes	Member was informed that a casino outing is planned for 11/7/23.
10/4/2023	Member is requesting a floor lamp for her room.	Ongoing	If member doesn't receive a floor lamp by the first part of December 2023, one will be placed on the member's list as a Christmas gift, per Social Services.
10/25/2023	Asked why there are no bingos on the calendar for November.	Yes	Member was informed that a Thanksgiving bingo is planned.
10/25/2023	Member's wife would like for him to attend the Wilmington Rib outing on Monday, 11/6, and she will meet him there.	Yes	Unit Activity staff notified the member's wife to follow the IVHM bus with her vehicle, and that the member will be added as an attendee to this particular outing.
11/9/2023	Asked when can he have a haircut from the barber.	Yes	<p>Unit Director explained that the barber is not available at this time, and that family is always welcome to take their Veteran for a haircut out in the community.</p> <p><b>11/13/23 Update:</b> Member has since received a haircut.</p>

	If families can come in, why are certain activities being cancelled?		Unit Activity Aide explained to the member that IVHM needs to control the spread of Covid-19 and we cannot bring units together, which is why facility-wide functions have been cancelled.
12/6/2023	When will the members be sampling different meals from Dietary?	Yes	Unit Activity Aide also notified the member that it is IVHM's goal to implement our new menu in 2024, which will offer a variety of different meals.
12/6/2023	Would like a better shower schedule.	Yes	Unit Director spoke to member, and member is good with his shower schedule. He has a preference of who he wants to give his shower. The unit addressed the assignments to meet the member's request.
12/6/2023	Can Dietary do fried eggs?	Yes	Unit Activity Aide explained to the member that part of IVHM's new kitchen transition is to be able to offer fried eggs, and that our goal is to be able to offer this in mid 2024.
*The above table contains resident complaints received on official grievance forms or major complaints which could not be immediately addressed at the Resident Advisory Council and required follow up by staff at the Veterans Homes.			

### Resident Grievance Log - Illinois Veterans Home - QUINCY

DATE	ISSUE	RESOLVED (yes/no)	COMMENTS
7/1/2023	NONE		
8/1/2023	NONE		
9/1/2023	NONE		
10/1/2023	NONE		
11/1/2023	NONE		
12/1/2023	NONE		

\*The above table contains resident complaints received on official grievance forms or major complaints which could not be immediately addressed at the Resident Advisory Council and required follow up by staff at the Veterans Homes.

### Resident Grievance Log - Illinois Veterans Home - Chicago

DATE	ISSUE	RESOLVED (yes/no)	COMMENTS
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7/20/2023	Resident lost their wallett	Y	Wallet located behind the bed
8/19/2023	Residett lost their watch	N	Resident's room, laundry, laundry room and room of floor peers all checked, the watch was not located, Family was notified and reminded of the contract details regarding personal items and valuables. Reminded that personal items can be locked in facility safe for safe keeping.
8/21/2023	POA concerned about hearing aids being placed in their loved one's ears and not charged	Y	Residents care plans reviewed and updated, Resident communicated that they prefer not to wear the hearing aids, POA notified of Resident's preference.
8/24/2023	Resident lost their hearing aid	Y	Hearing aide located under Resident's matteress by Nursing staff.
9/5/2023	Resident went to MD appointment in Wheelchair and returned on a stretcher, wheelchair was left at the hospoital.	Y	IVHC staff attempted to locate the wheelchair at the hospital with no success. Wheel chair was replaced with a facilty wheelchair.
10/17/2023	Resident POA expressed frustration regarding communication during a transfer to hospital, IVHC staff communicated a hospital name different than the admitting hospital.	Y	POA was contacted, offered apology for the confusion and informed that the ambulance changed the transfer location while enroute to the hospital due to instructions from their dispatch. Informed family that an update on transfer location was communicated when received by the facility.
10/17/2023	Resident hearing aides not working, assumed to have been damaged in laundry	Y	Resident was scheduled for an audiology appointment to replace hearing aides, new hearing aids were received.
*The above table contains resident complaints received on official grievance forms or major complaints which could not be immediately addressed at the Resident Advisory Council and required follow up by staff at the Veterans Homes.			



**2023 Attachment #2 Report to the General Assembly**

**Illinois Department of Veterans Affairs Veterans Homes Antibiotic Usage Summary**

**COMMUNICABLE DISEASES July - December 2023**

The following list contains the numbers of communicable diseases by month that required treatment with an antibiotic.

Note that the list does not contain information on the following:

- Common Cold
- Influenza (unless the cases meet the Illinois Department of Public Health reporting requirements)
- Urinary Tract Infections (not considered communicable)
- Shingles (Per CDC guidelines, not considered a communicable disease)

Home	Type	July	Aug	Sept	Oct	Nov	Dec (to date)
Anna	Pneumonia	0	2	0	2	1	0
	Bloodstream	0	0	0	0	0	0
	Skin	1	0	0	2	1	1
	Gastrointestinal	0	0	0	0	1	0
	Respiratory	1	1	1	2	2	1
	Ear/Nose/Throat	0	0	0	0	0	0
	Fungal	0	0	0	0	0	2
	MRSA/VRSA/ESBL	5	4	0	2	2	1
	Bone	0	0	0	0	0	0
	Coronavirus Disease (COVID-19)	0	0	0	0	0	0
Chicago	Pneumonia	0	1	0	0	0	1
	Bloodstream	0	1	0	0	1	0
	Skin	1	0	1	0	1	1
	Gastrointestinal	0	0	0	0	0	0
	Respiratory	0	0	0	0	0	0
	Ear/Nose/Throat	0	0	0	2	0	0
	Fungal	1	0	0	0	2	0
	MRSA/VRSA/ESBL	0	0	0	0	1	0
	Bone	0	0	0	0	0	0
	Coronavirus Disease (COVID-19)	0	0	0	3	3	0
LaSalle	Pneumonia	3	2	12	7	1	0
	Bloodstream	0	0	0	0	0	0
	Skin	6	2	5	8	5	2
	Gastrointestinal	0	0	1	0	0	0
	Respiratory	0	0	6	0	2	0
	Ear/Nose/Throat	0	0	0	0	0	1
	Fungal	0	0	0	1	0	0
	MRSA/VRSA/ESBL	2	3	4	0	1	3
	Bone	0	0	0	0	0	0
	Coronavirus Disease (COVID-19)						
Manteno	Pneumonia	4	1	3	2	3	1
	Bloodstream	0	2	2	0	1	1
	Skin	10	10	4	8	6	8
	Gastrointestinal	1	0	2	0	0	2
	Respiratory	2	9		2	1	2
	Ear/Nose/Throat	4	1	0	1	4	0
	Fungal	4	4	6	2	6	2
	MRSA/VRSA/ESBL	2	2	3	4	1	1
	Bone	0	0	0	0	0	0
	Coronavirus Disease (COVID-19)	0	17	0	1	76	18
Quincy	Pneumonia	8	10	6	1	5	4
	Bloodstream	0	0	1	0	0	0
	Skin	3	6	9	5	4	3
	Gastrointestinal	0	1	0	0	0	0

Respiratory	11	30	3	5	6	2
Ear/Nose/Throat	0	0	0	2	1	0
Fungal	0	0	0	1	1	1
MRSA/VRE/ESBL	2	1	1	2	1	1
Bone	0		0	0	0	0
Coronavirus Disease (COVID-19)	2	24	2	25	5	59

## **RESPONSE**

The following steps are taken in IDVA homes for non-epidemic communicable diseases. For steps taken in response to the SARS-CoV-2 COVID-19 Global Pandemic see COVID-19 Tab.

- Quarantine the resident and institute appropriate isolation precautions.
- Treat the resident as needed; ensure antibiotic stewardship protocols are followed.
- Identify and Isolate the case(s) in question.
- Map the disease location(s) to determine if the disease is spreading.
- If the disease appears to be spreading, determine if it is due to cross-contamination or cohabitation.
- Provide additional staff training on infection prevention and response, if appropriate.
- Housekeeping department briefed to implement cleaning enhancements, if appropriate.

Attachment #2 Report to the General Assembly - Coronavirus Disease (COVID-19)

July - December 2023 - Illinois Department of Veterans Affairs Veterans Homes

Anna	Date(s) <u>resident(s)</u> showed symptoms	Date(s) of confirmed <u>resident</u> diagnosis	Date(s) <u>staff</u> showed symptoms	Date(s) of confirmed <u>staff</u> diagnosis	TTL # of positive residents for month	TTL # of positive <u>staff</u> for month	Action taken by Veterans Home to eradicate spread of COVID-19
July	NA	NA	NA	NA	0	0	
August	NA	NA	NA	NA	0	0	
Sept	NA	NA	NA	NA	0	0	
Oct	NA	NA	NA	NA	0	0	
Nov	NA	NA	NA	NA	0	0	
Dec	12/27/23	12/27/23	12/12,12/15,12/26	12/13,12/15,12/26	1	3	Rapid/PCR testing every 3-7 days until no further positives for 14 days. PPE source control implemented. Resident is in the DOM and able to self isolate. Employees excluded from work 7-10 days per IDVA policy.
LaSalle	Date(s) <u>resident(s)</u> showed symptoms	Date(s) of confirmed <u>resident</u> diagnosis	Date(s) <u>staff</u> showed symptoms	Date(s) of confirmed <u>staff</u> diagnosis	TTL # of positive residents for month	TTL # of positive <u>staff</u> for month	Action taken by Veterans Home to eradicate spread of COVID-19
July	NA	NA	NA	NA	0	0	No cases.
August	NA	NA	8/16, 8/19, 8/20	8/16/ 8/19, 8/20	0	3	All staff work in different units., No resident exposure reported. Staff were excluded from work for 7 days and all tested negative upon return to work. No further cases identified amongst staff or residents.
Sept	9/24 (2), 9/26 (2), 9/27 (3), 9/28 (1),. 9/29 (2), and 9/30 (1).	9/24 (2), 9/26 (2), 9/27 (3), 9/28 (1),. 9/29 (2), and 9/30 (1).	9/14 (1)	14-Sep	10	1	Residents were isolated using Special Precautions in their rooms alone. Staff wore N95 respirators, gowns and gloves. Treated with Paxlovid. Ad Hoc sent on all covid cases to DVA. Cases were mapped, education was provided for all staff on PPE and environmental cleaning, and 6 foot social distancing. Rapid testing of all other residents and staff was done twice weekly until no further positive cases for 14 days, per IDVA policy. NW outbreak ended 10/14/2023.

<b>Oct</b>	NA	NA	10/11, 10/13, 10/17, 10/29	10/11, 10/13, 10/17, 10/29	0	4	3 Staff working on same unit (East). No resident exposure reported. Staff were excluded from work for 7 days and all tested negative upon return to work. Conducted testing on all residents and staff working on the unit twice weekly until there were no additional cases. Outbreak precautions ended No further cases identified amongst staff or residents. Outbreak ended 11/13/2023.
<b>Nov</b>	NA	NA	11/6, 11/10, 11/17, 11/20, 11/28, 11/29	11/6, 11/10, 11/17, 11/20, 11/28 (2), 11/29	0	7	All staff work in different areas and related to community exposure., No resident exposure reported. Staff were excluded from work for 7 days and all tested negative upon return to work. No further cases identified amongst staff or residents.
<b>Dec</b>	NA	NA	12/6, 12/7	12/6, 12/7, 12/23, 12/24	0	5	All staff work in different areas and related to community exposure., One had family household illness and one related to travel. Due to time since last worked for one of these, NW unit testing conducted until no further cases for 14 days. Outbreak was not established. Staff were excluded from work for 7 days and all tested negative upon return to work. No further cases identified amongst staff or residents.

<b>Manteno</b>	<b>Date(s) <u>resident(s)</u> showed symptoms</b>	<b>Date(s) of confirmed <u>resident</u> diagnosis</b>	<b>Date(s) <u>staff</u> showed symptoms</b>	<b>Date(s) of confirmed <u>staff</u> diagnosis</b>	<b>TTL # of positive <u>residents</u> for month</b>	<b>TTL # of positive <u>staff</u> for month</b>	<b>Action taken by Veterans Home to eradicate spread of COVID-19</b>
<b>July</b>	NA	NA	7/24/2023	7/25/2023	0	1	Employees instructed to stay home for 7 -10 days and needs to be symptom free x 24 hours. F/U routinely with + staff. Contact tracing and followed up with Unit/Building PCR and rapid testing. Exposure POC (rapid) testing on exposed members on day 1, 3 and 5. Staff POC (rapid) daily x 3 days
<b>Aug</b>	8/6, 8/13, 8/16, 8/17, 8/18, 8/21, 8/23/2023	8/7, 8/13, 8/14, 8/15, 8/16, 8/17, 8/18, 8/21, 8/23, 8/25/2023	8/11, 8/14, 8/15, 8/19, 8/20, 8/22, 8/25, 8/27, 8/28/2023	8/13, 8/14, 8/15, 8/16, 8/22, 8/23, 8/25, 8/28, 8/29/2023	17	17	routinely with + staff. Contact tracing and followed up with Unit/Building PCR and rapid testing. POC (rapid) testing performed on all members 24 hours after exposure, then POC testing every 3-7 days for 14 days with no more new positives . Staff POC daily for 14 days until no more new positives. Positive member in TBP on home unit, this was a dementia unit and TBP was not able to be safely obtained. Moved positive members to the dedicated Covid unit. Source control on outbreak unit implemented.
<b>Sept</b>	NA	NA	9/4, 9/7, 9/9, 9/21, 9/24/2023	9/5, 9/7, 9/9, 9/21, 9/24/2023	0	5	Employees instructed to stay home for 7 -10 days and needs to be symptom free x 24 hours. F/U routinely with + staff. Contact tracing and followed up with Unit/Building PCR and rapid testing. Exposure POC (rapid) testing on exposed members on day 1, 3 and 5. Staff POC (rapid) daily x 3 days
<b>Oct</b>	10/2/23	10/2/23	10/1, 10/13, 10/14/2023	10/1, 10/13, 10/14/2023	1	3	Employees instructed to stay home for 7-10 days and need to be symptom free x 24 hours. F/U routinely with + staff. Contact tracing and followed up with Unit/Building PCR and rapid testing. POC (rapid) testing performed on all members 24 hours after exposure, then POC testing every 3-7 days for 14 days with no more new positives . Staff POC every 3-7 days until no more new positives x 14 days. Positive member in TBP on home unit. Masking implemented on outbreak unit. Activities limited on outbreak unit.

<b>Nov</b>	11/5, 11/6, 11/7, 11/8, 11/9, 11/10, 11/11, 11/12, 11/13, 11/14, 11/15, 11/16, 11/18, 11/19, 11/20, 11/21, 11/22, 11/23, 11/24, 11/27, 11/28/2023	11/6, 11/7, 11/8, 11/9, 11/10, 11/11, 11/13, 11/14, 11/15, 11/16, 11/18, 11/19, 11/10, 11/21, 11/22, 11/23, 11/24, 11/27, 11/28/2023	11/1, 11/5, 11/6, 11/7, 11/8, 11/10, 11/11, 11/12, 11/13, 11/14, 11/15, 11/16, 11/17, 11/18, 11/20, 11/21, 11/22, 11/23, 11/24, 11/25, 11/27, 11/29/2023	11/1, 11/6, 11/7, 11/8, 11/9, 11/10, 11/11, 11/12, 11/13, 11/14, 11/16, 11/17, 11/19, 11/20, 11/21, 11/22, 11/23, 11/24, 11/25, 11/26, 11/27, 11/30/2023	76	50	Employees instructed to stay home for 7-10 days and need to be symptom free x 24 hours. F/U routinely with + staff. Contact tracing and followed up with Unit/Building PCR and rapid testing. POC (rapid) testing performed on all members 24 hours after exposure, then POC testing every 3-7 days for 14 days with no more new positives . Staff POC every 3-7 days until no more new positives x 14 days. Positive member in TBP on home unit. With increase in member positives, dedicated Covid unit opened. N-95 Masking implemented with direct care. Activities and paused. All in person meetings paused. Members strongly encouraged to wear mask when out of room and stay on home unit. New RSV vaccine offered.
<b>Dec</b>	12/5, 12/9, 12/18/2023	12/1, 12/4, 12/5, 12/8, 12/9, 12/11, 12/15, 12/18/2023	12/1, 12/2, 12/4, 12/6, 12/7, 12/11, 12/13, 12/14, 12/20, 12/21, 12/24, 12/16,	12/2, 12/4, 12/6, 12/7, 12/11, 12/13, 12/14, 12/21, 12/26, 12/27/2023	18	16	Employees instructed to stay home for 7-10 days and need to be symptom free x 24 hours. F/U routinely with + staff. Contact tracing and followed up with Unit/Building PCR and rapid testing. POC (rapid) testing performed on all members 24 hours after exposure, then POC testing every 3-7 days for 14 days with no more new positives . Staff POC every 3-7 days until no more new positives x 14 days. Positive members moved to dedicated Covid unit. Covid PPE followed on Covid unit. N-95 masking implemented with direct care. Surgical mask in all other areas. Strongly encourage visitors to wear a mask. Activities and paused. All in person meeting paused. Members strongly encouraged to wear mask when out of room and stay on home unit. New 2023-2024 Covid vaccine offered.
<b>Quincy</b>	<b>Date(s) resident(s) showed symptoms</b>	<b>Date(s) of confirmed resident diagnosis</b>	<b>Date(s) staff showed symptoms</b>	<b>Date(s) of confirmed staff diagnosis</b>	<b>TTL # of positive residents for month</b>	<b>TTL # of positive staff for month</b>	<b>Action taken by Veterans Home to eradicate spread of COVID-19</b>
<b>July</b>	7/19, 7/24	7/19, 7/24	7/26, 7/27	7/26, 7/27	2	2	Employees instructed to remain off work and get tested when showing signs and symptoms, contact tracing/outbreak testing followed up with rapid and or PCR testing. Positive residents moved to COVID unit and placed in droplet/contact precautions. Testing done every 3 to 7 days until no positive cases for 14 days. PPE source control implemented. Attempt to stagger meal times, limit group activities, and masking of residents in communal areas. COVID booster vaccines offered.
<b>August</b>	8/1-8/29	8/1-8/29	8-11 to 8-29	8-11 to 8-29	24	17	Employees instructed to remain off work and get tested when showing signs and symptoms, contact tracing/outbreak testing followed up with rapid and or PCR testing. Positive residents moved to COVID unit and placed in droplet/contact precautions. Testing done every 3 to 7 days until no positive cases for 14 days. PPE source control implemented. Attempt to stagger meal times, limit group activities, and masking of residents in communal areas. COVID booster vaccines offered.
<b>Sept</b>	9/24, 9/26	9/24, 9/26	9/25-9/27	9/25-9/27	2	6	Employees instructed to remain off work and get tested when showing signs and symptoms, contact tracing/outbreak testing followed up with rapid and or PCR testing. Positive residents moved to COVID unit and placed in droplet/contact precautions. Testing done every 3 to 7 days until no positive cases for 14 days. PPE source control implemented. Attempt to stagger meal times, limit group activities, and masking of residents in communal areas. COVID booster vaccines offered.
<b>Oct</b>	10-1--10/28	10-1--10-28	10-11---10-26	10-11---10-26	25	14	Employees instructed to remain off work and get tested when showing signs and symptoms, contact tracing/outbreak testing followed up with rapid and or PCR testing. Positive residents moved to COVID unit and placed in droplet/contact precautions. Testing done every 3 to 7 days until no positive cases for 14 days. PPE source control implemented. Attempt to stagger meal times, limit group activities, and masking of residents in communal areas. COVID booster vaccines offered.

<b>Nov</b>	11-6--11-30	11-6--11-30	11-22--11-28	11-22--11-28	5	4	Employees instructed to remain off work and get tested when showing signs and symptoms, contact tracing/outbreak testing followed up with rapid and or PCR testing. Positive residents moved to COVID unit and placed in droplet/contact precautions. Testing done every 3 to 7 days until no positive cases for 14 days. PPE source control implemented. Attempt to stagger meal times, limit group activities, and masking of residents in communal areas. COVID booster vaccines offered.
<b>Dec</b>	12-1 to 12-21	12-1--12-21	12-1 to 12-21	12-1--12-21	59	69	Employees instructed to remain off work and get tested when showing signs and symptoms, contact tracing/outbreak testing followed up with rapid and or PCR testing. Positive residents moved to COVID unit and placed in droplet/contact precautions. Testing done every 3 to 7 days until no positive cases for 14 days. PPE source control implemented. Attempt to stagger meal times, limit group activities, and masking of residents in communal areas. COVID booster vaccines offered.
<b>Chicago</b>	<b>Date(s) resident(s) showed symptoms</b>	<b>Date(s) of confirmed resident diagnosis</b>	<b>Date(s) staff showed symptoms</b>	<b>Date(s) of confirmed staff diagnosis</b>	<b>TTL # of positive residents for month</b>	<b>TTL # of positive staff for month</b>	<b>Action taken by Veterans Home to eradicate spread of COVID-19</b>
<b>July</b>	N/A	N/A	N/A	N/A			
<b>August</b>	N/A	N/A	8/24/23, 8/26/23,8/30/23 &8/31/23	8/24/23, 8/26/23,8/30/23 &8/31/23	N/A	4	Covid s/s signage posted in visible areas. Monitored employees for any s/s of covid infections. Hand hygiene and PPD usage reinforced as needed. Residents are screened appropriately after encounter of hospital admission. Covid vaccines made available for residents and employees. ongoing inservices conducted regarding prevention of covid infections. Family and visitors well informed regarding covid s/s with pamphlets and leaflets.
<b>Sept</b>	N/A	N/A	9/1/23, 9/5/23, 9/8/23, 9/18/23&9/22/23	9/1/23, 9/5/23, 9/8/23, 9/18/23&9/22/23	N/A	5	
<b>Oct</b>	10/19/23, 10/22/23 &10/23/23	10/19/23, 10/22/23 &10/23/23	10/2/23, 10/17/23&10/25/23	10/2/23, 10/17/23&10/25/23	3	3	Continues with transmission - based precautions. Rapid testing for all Staff and Residents. All employees required to wear mask till further order. All residents eat in the room.
<b>Nov</b>	11/13/23, 11/14/23 &11/16/23	11/13/23, 11/14/23 &11/16/23	11/14/23, 11/16/23, 11/20/23, 11/20/23 & 11/27/23	11/14/23, 11/16/23, 11/20/23, 11/20/23 & 11/27/23	3	5	
<b>Dec</b>	N/A	N/A	12/5/23 & 12/7/23 , 12/15/23, 12/19/23&12/20/23	12/5/23 & 12/7/23 , 12/15/23, 12/19/23&12/20/23	N/A	5	Transmission precautions reinforced. Continued vigilant observation of infection prevention strategies