



# ILLINOIS DEPARTMENT OF VETERANS AFFAIRS

833 SOUTH SPRING STREET, SPRINGFIELD, IL 62704

January 31, 2025

To the members of the Illinois General Assembly:

Pursuant to 20 ILCS 2805/2.07, we have enclosed IDVA's 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, 2024, through December 31, 2024, each of the homes performed as follows:

- Illinois Veterans' Home at Anna employed 43 direct care staff and was in compliance with the USDVA staffing standards.
- Illinois Veterans' Home at Chicago employed 146 direct care staff and was in compliance with the USDVA staffing standards.
- Illinois Veterans' Home at LaSalle employed 108 direct care staff and was in compliance with the USDVA staffing standards.
- Illinois Veterans' Home at Manteno employed 184 direct care staff and was in compliance with the USDVA staffing standards.
- Illinois Veterans' Home at Quincy employed 178 direct care staff and was in compliance with the USDVA staffing standards.

This letter constitutes IDVA's confirmation that each Illinois Veterans' Home had sufficient staff to provide the USDVA required 2.5 hours of care per day and did not require additional staff to meet the minimum standard.

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.

# **IDVA** ILLINOIS DEPARTMENT OF **VETERANS AFFAIRS**

833 SOUTH SPRING STREET, SPRINGFIELD, IL 62704

Enclosed are documents which provide the requested information for the Illinois State Veterans' Homes for the reporting period of July 1, 2024, through December 31, 2024.

- 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 Senior Homes Administrator, Angie Simmons at (618) 697-8128.

Sincerely,



Terry Prince  
Director

**IVH Direct Care Hours and Staffing Report**

|             | Date       | Census | RN  | LPN | VNAC | Total Hours | HC Hours | Total Staff |           |           |                     |
|-------------|------------|--------|-----|-----|------|-------------|----------|-------------|-----------|-----------|---------------------|
| <b>Anna</b> | 11/27/2024 | 50     | 3.0 | 3.4 | 19.0 | 203.2       | 4.06     | 25.4        |           |           |                     |
|             | 11/29/2024 | 50     | 3.0 | 4.0 | 17.0 | 192.0       | 3.84     | 24.0        |           |           |                     |
|             | 12/5/2024  | 50     | 4.0 | 6.0 | 15.0 | 200.0       | 4.00     | 25.0        | Avg Hours | Avg Staff | Total # RN/LPN/VNAC |
|             | 12/7/2024  | 50     | 4.0 | 3.0 | 15.0 | 176.0       | 3.52     | 22.0        | 3.86      | 24        | 43.0                |

|                | Date       | Census | RN   | LPN | VNAC | Total Hours | HC Hours | Total Staff |           |           |                     |
|----------------|------------|--------|------|-----|------|-------------|----------|-------------|-----------|-----------|---------------------|
| <b>Chicago</b> | 11/27/2024 | 57     | 15.5 | 5.0 | 22.0 | 380.8       | 6.68     | 42.5        |           |           |                     |
|                | 11/29/2024 | 56     | 15.0 | 5.0 | 20.0 | 366.0       | 6.54     | 40.0        |           |           |                     |
|                | 12/5/2024  | 56     | 12.0 | 4.0 | 27.0 | 370.5       | 6.62     | 43.0        | Avg Hours | Avg Staff | Total # RN/LPN/VNAC |
|                | 12/7/2024  | 56     | 17.0 | 4.0 | 26.0 | 420.5       | 7.51     | 47.0        | 6.84      | 43        | 146                 |

|                | Date       | Census | RN   | LPN | VNAC | Total Hours | HC Hours | Total Staff |           |           |                     |
|----------------|------------|--------|------|-----|------|-------------|----------|-------------|-----------|-----------|---------------------|
| <b>Manteno</b> | 11/27/2024 | 217    | 26.0 | 7.0 | 64.0 | 727.5       | 3.35     | 97.0        |           |           |                     |
|                | 11/29/2024 | 218    | 26.5 | 9.0 | 60.0 | 716.3       | 3.29     | 95.5        |           |           |                     |
|                | 12/5/2024  | 213    | 25.5 | 8.0 | 60.0 | 701.3       | 3.29     | 93.5        | Avg Hours | Avg Staff | Total # RN/LPN/VNAC |
|                | 12/7/2024  | 214    | 35.5 | 3.0 | 34.0 | 543.8       | 2.54     | 72.5        | 3.12      | 90        | 184.0               |

|               | Date       | Census | RN   | LPN  | VNAC  | Total Hours | HC Hours | Total Staff |           |           |                     |
|---------------|------------|--------|------|------|-------|-------------|----------|-------------|-----------|-----------|---------------------|
| <b>Quincy</b> | 11/27/2024 | 253    | 28.3 | 13.0 | 101.0 | 1067.0      | 4.22     | 142.3       |           |           |                     |
|               | 11/29/2024 | 252    | 24.5 | 14.0 | 101.5 | 1050.0      | 4.17     | 140.0       |           |           |                     |
|               | 12/5/2024  | 252    | 31.0 | 13.0 | 97.3  | 1059.8      | 4.21     | 141.3       | Avg Hours | Avg Staff | Total # RN/LPN/VNAC |
|               | 12/7/2024  | 252    | 29.5 | 13.0 | 100.0 | 1068.8      | 4.24     | 142.5       | 4.21      | 142       | 178.0               |

|                | Date       | Census | RN   | LPN | VNAC | Total Hours | HC Hours | Total Staff |           |           |                     |
|----------------|------------|--------|------|-----|------|-------------|----------|-------------|-----------|-----------|---------------------|
| <b>LaSalle</b> | 11/27/2024 | 84     | 11   | 1.5 | 37.8 | 352.1       | 4.2      | 50.3        |           |           |                     |
|                | 11/29/2024 | 86     | 11.5 | 0.5 | 38.5 | 353.5       | 4.1      | 50.5        |           |           |                     |
|                | 12/5/2024  | 85     | 17.5 | 0   | 34.8 | 366.1       | 4.3      | 52.3        | Avg Hours | Avg Staff | Total # RN/LPN/VNAC |
|                | 12/7/2024  | 84     | 16   | 1.5 | 34.3 | 362.6       | 4.3      | 51.8        | 4.23      | 51        | 108.0               |

## Attachment #1

## Resident Grievance Log - Anna

| DATE       | ISSUE | RESOLVED<br>(yes/no) | COMMENTS  |
|------------|-------|----------------------|---|
| 7/1/2024-  | N/A   | N/A                  | No grievance to report for the Anna Home during this reporting period |
| 12/31/2024 | N/A   | N/A                  | (07/01/2024-12/31/2024)   |

\*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 - LaSalle

| DATE      | ISSUE   | RESOLVED<br>(yes/no) | COMMENTS   |
|-----------|---|----------------------|--|
| 7/10/2024 | East Unit resident BB was complaining about his roommate while he was receiving cares. VNAC turned roommate's TV on and BB complained. BB fixed it by turning his TV up louder so that his roommate's TV was drowned out. | Yes                  | Management will talk to resident BB. Management feels that resident BB should get a private room because BB continues to not be nice and civil with his roommates.   |
| 7/10/2024 | NW resident DK was observed writing on a newly painted wall with a pink highlighter.  | Yes                  | Incident was discussed with resident who stated that she will never do this again. Care staff are looking into any medical issues for resident behavior changes.   |
| 7/14/2024 | East resident RW left the building without telling anyone, and when he returned, he said that he went to a local convenience store to buy lottery tickets. Weather was extremely hot.                                     | Yes                  | Resident was informed that he needed to tell someone prior to leaving the building and also was told that residents are encouraged not to go outside in extreme hot weather.   |
| 7/14/2024 | East resident JH was on an outing with his daughter when he dropped and broke his bottom dentures.  | Yes                  | Daughter/POA was present at the time. The dentures were sent to Aspen Dental for repair.   |
| 7/19/2024 | NW resident JS made an inappropriate comment to another residents' family member.   | Yes                  | Incident was discussed with the resident; however, he did not remember making the comment. Will not occur again.   |
| 7/24/2024 | NW resident JS was screaming at care staff that he was not walking enough.  | Yes                  | Resident was informed that he is walking with care staff and therapy every day. Documented visual aid, reviewed and discussed.   |
| 7/24/2024 | NW resident JS was expressing issues with a staff member because he did not appreciate comments she made when he first came to live in the home. He then started swearing and throwing his pen.                           | Yes                  | Incident was discussed with resident and it was explained to him that he is not to swear at the staff and throw things. He agreed.   |
| 7/25/2024 | NW resident JS was verbally loud and upset about his walking program, as he felt he was not walking enough.   | Yes                  | A calendar was made for the resident so that it could be signed off on every day when he walked to that he had a visual cue so help him remember.  |
| 7/27/2024 | East resident RR lost his left hearing aid. He had both in place in the morning, but the resident has no idea where it may be.  | Yes                  | RR's hearing aid was found in the Laundry. Was sent off for repair. POA notified.  |
| 7/29/2024 | NW resident JS was upset that he lost 87 dollars that he took out of the bank.  | Yes                  | The resident's room was searched and eighty dollars was found. It was determined that he spent the other seven dollars on a fishing trip. The resident kept ten dollars and the other seventy dollars was deposited back into the resident's account, a receipt was given to the resident. |
| 7/30/2024 | East resident OP was assaulted while in their shared room by his roommate LG. No indication or similar history of behaviors for LG in his past. OP was minimally injured.   | Yes                  | Residents were separated. OP had his injuries treated by Nursing staff. LG was sent to the hospital. Looking to find psychiatric placement for LG for assessment and treatment plan.   |
| 8/2/2024  | NW unit resident JB perceived to be recording staff while cares were being given.   | Yes                  | Resident was asked if he was recording to which he said no. He was informed that if he would like to record staff he is allowed to, but paperwork needed to be completed.  |
| 8/7/2024  | East unit resident LG exit seeking even after receiving psychotropic medications.   | Yes                  | Will discuss this case at next Room Change Committee meeting; so safety issue currently.   |
| 8/9/2024  | Northeast resident GK complained that while he was in the bathroom, two people came into his room. They never announced themselves prior to coming in.  | Yes                  | Administrator talked with resident GK and then talked with the persons who entered the room. They said they were unaware he was in the bathroom. Education was provided.   |
| 8/13/2024 | East Unit resident BB was witnessed yelling at another resident and cursing at them.  | Yes                  | Situation was discussed with resident, and he was asked to be respectful of other residents.   |
| 8/25/2024 | East resident JJ found that he was missing a photo of him and his brother; photo fell off shelf 3-4 weeks ago, smashing the frame, but the photo was placed on the nightstand.  | Yes                  | Search is on for the photo. The frame is not repairable.   |
| 8/30/2024 | East resident RR was eating in bed and took his top denture out and set it on his bed. Top denture is now missing. Everyone notified.   | Yes                  | Should the top denture not be found, POA stated that it will be replaced ASAP.   |
| 9/1/2024  | East resident JJ rolled over his glasses while he was in his wheelchair, breaking them.   | Yes                  | POA notified, and glasses were sent out for repairs.   |

|            |  |     |   |
|------------|--|-----|---|
| 9/3/2024   | East resident KT told staff that his hearing aid was on his bed. Staff went to look for the hearing aid but could not find it.                       | Yes | Notification sent to Laundry and staff continue to look for it. POA was notified.   |
| 9/16/2024  | NW resident CR was seen spraying room spray into his breifs.   | Yes | Room spray was removed from the resident's room and his breifs were changed.  |
| 9/19/2024  | East residents RD and RW had an incident in the Canteen where they both lunged for the TV remote aggressively with lots of name calling and yelling. | Yes | Administrator was called to the Canteen; resident RW was asked to leave the Canteen as he was there sleeping and is not a smoker compared to RD who was there at his allotted smoking time.   |
| 10/31/2024 | East resident RD stated that whoever drew his blood that day knocked over his iPad and broke it {glass}.   | Yes | Resident died on 11-07-24 after being admitted to the hospital on 11-05-24. Family collected his belongings. They donated the broken iPad and an iPad that was still in working order to the home. Said iPads were taken by the Administrator for distribution. |

### Resident Grievance Log - Manteno

| DATE       | ISSUE   | RESOLVED (yes/no) | COMMENTS   |
|------------|---|-------------------|--|
| 7/8/2024   | Member's daughter concerned with the local hospital's blood draw readings.  | Yes               | On 7/8/24, Administrator spoke to the member's daughter (who is also the POA) regarding the member's lab results, and explained that this is an issue with Riverside Healthcare's lab. Explained that IVHM has to respond to the results that are given to us. Administrator asked the POA to follow up with Riverside Medical Center lab director, Alison Paglin, and also gave the POA the hospital's address. POA was satisfied with the conversation.  |
| 8/1/2024   | Member stated that he wants to go to a real baseball game.  | Yes               | Activity staff notified member that a White Sox game is slated for September 11th, which the member did in fact attend this game.  |
| 8/27/2024  | Member expressed a desire to carve pumpkins.  | Yes               | Pumpkin carving was added to the Unit Activity Calendar for 10/25/24.  |
| 9/25/2024  | Fairly new member asked why an outside service has to test him on his power chair.  | Yes               | Nursing Supervisor explained the process that is done here at IVHM.  |
| 10/15/2024 | Member stated that his appointments to get his shots has been constantly cancelled, and wants to know why he cannot go on his own. He stated that there is a transportation service called OWL, and wants to know why we are not using this service.  | Yes               | Nursing Supervisor responded that the member's eye shots have never been rescheduled...it is other appointments that have been rescheduled. The member previously had his own transportation through the VA. The member chose to have IVHM transport him because he did not like having to wait for the transport. Nursing Sup discussed the appointment issue with the facility physician as well as the member, and they both believe the member can go by himself to his appointments; therefore, staffing will no longer be an issue. The member's Social Worker has contacted Hines' scheduler for transportation services for the member as well. Nursing Sup contacted the facility's appointment scheduler, and informed her that the member may go without staff to his appointments. The Social Services Director has also spoken to Hines VA transportation, as another member has services through them as well. |
| 10/28/2024 | Member has not been able to drive his electric wheelchair for a very long time. He has not had any issues lately with blacking out and has been cleared by a doctor. He has been accused of groping a nurse and is no longer able to attend outside trips unless there is a male nurse present. There is no proof of these accusations. | Yes               | Resident will be re-evaluated for use of a power motorized device. -- 10/29/24<br><br>Per EmpowerMe Wellness Clinic Director, member has had two (2) hospitalizations, which has kept him from being re-evaluated. EMW Clinic Director indicated that the member's order for PT/OT (which includes PMD) will expire on 1/9/25, and will expedite this order due to his circumstances. -- 12/19/24<br><br>Restorative RN notified Administration on 12/20/24 that retraining the member of his power wheelchair will take place on Tuesday, 12/24/24.   |
| 11/11/2024 | Member expressed his desire for more time with his dining experience. Stated that he is tired of feeling rushed.  | Yes               | Activity Therapist Aide II told member that he is encouraged to take his time with eating, and that it is perfectly fine if he needs his meal tray taken back to the unit. ATA added that she will let the Nursing staff know his frustrations as well.  |
| 11/21/2024 | Member expressed during a Town Hall meeting that his hats keep disappearing from his room.  | Yes               | Activity Director indicated that a few hats were missing, and that some were just misplaced (found in his closet) - this could be due to the hats not being labeled with his name/unit. Suggestion for the future is to have all hats marked with the member's name and unit number.   |
| 11/21/2024 | Member stated during a Town Hall meeting that he would like a copy of the Home's rules and regulations.   | Yes               | Activity Director confirmed that the member was provided a copy of IVHM's rules and regulations shortly after the meeting was held.  |
| 12/2/2024  | Member requested an electric door opener for the smoking room be added, because the door is too heavy.  | Yes               | Member's suggestion was brought to the Engineering Department, but request was denied due to the Fire Code.  |
| 12/2/2024  | Member stated that his room is extremely cold.  | Yes               | Member's room temperature was adjusted, and he is comfortable now.   |

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### Resident Grievance Log - Chicago

| DATE       | ISSUE  | RESOLVED (yes/no) | COMMENTS                           |
|------------|--|-------------------|------------------------------------|
| 7/19/2024  | Requested staff assistance; did not receive                  | Yes               | Staff education provided           |
| 7/29/2024  | Duocolax box opened (not in his presence) product missing    | Yes               | Replaced and opened in presence    |
| 7/30/2024  | Blanket missing  | Yes               | Located and returned               |
| 7/30/2024  | Was not escorted to bible study as requested                 | Yes               | Staff education provided           |
| 8/7/2024   | Unable to reach call light                                   | Yes               | Staff education provided           |
| 8/11/2024  | Missing Red Plaid button down shirt; requesting compensation | Yes               | Located and returned               |
| 10/17/2024 | POA reported Resident was wearing wrinkled clothing          | Yes               | Educated POA on clothing situation |
| 10/23/2024 | Resident believes nurse was rude                             | Yes               | Educated Staff                     |
| 10/29/2024 | Resident can not reach call light                            | Yes               | Educated Staff                     |
| 11/1/2024  | Resident waited 30 minutes for toileting assistance          | Yes               | Educated Staff                     |
| 11/15/2024 | Requested suppository not received                           | Yes               | Educated staff                     |
| 11/25/2024 | Resident believes he is missing items                        | Yes               | Located not lost or taken          |
| 11/26/2024 | Resident believe he ate late due to staffing                 | Yes               | Educated resident                  |
| 12/16/2024 | Requested not to have certain nurse                          | Yes               | Educated resident and staff        |

### Resident Grievance Log - Quincy

| DATE       | ISSUE   | RESOLVED (yes/no) | COMMENTS   |
|------------|---|-------------------|--|
| 7/1/2024   | Cognitive residents complaining of living with residents with dementia and behaviors at Markword.   | Yes               | Nursing PSA meet with members and explained in skilled nursing we meet the needs of individuals of all cognitive and physical abilities. Nursing PSA educated staff to redirect members that are going down the wrong hall way or entering the wrong room to the correct hallway/room. Signs with names were placed to assist members in remembering what hall and room they are in. |
| 8/1/2024   | None  |                   |  |
| 9/13/2024  | Resident had pool exercise on 9/9/24 and was told by restorative staff to get out of the pool early by five minutes. Resident was told by restorative staff 9/12/24 to get out of the pool 12 minutes early. Residents exercise is 1 hour in length. Resident is scheduled weekly to attend water exercise Mondays and Thursdays for 1 hour. Resident was given no reason for time to end early. Resident cannot complete land walking exercise. PT recommend water exercise until resident can have hip replacement and knee surgery. Additionally resident's exercise was ended 30 minutes early on 8/22/24 without reason. | Yes               | Restorative staff were educated that pool time is 50 minutes in water. Pool therapy is part of the PRAII job description, staff that have the resident on their unit/team is the one who will be in the water with that resident, and staff must be available to get in the pool on any schedule day due to call-in vacations, etc.  |
| 10/1/2024  | WIFI not reaching all locations of Markword building.   | Yes               | Dolt installed WIFI extenders to further support extended building needs for WIFI.   |
| 11/1/2024  | Resident complained of staff being more task oriented vs. person centered care. Staff being complacent.   | Yes               | Nursing PSA sent out education to all staff.   |
| 12/15/2024 | Family members complaining of cold temperatures in rooms on unit.   | Yes               | HVAC department resolved issue.  |
| 12/24/2024 | Family complained their family member's teeth have not been brushed daily.  | Yes               | Nursing PSA sent out education to all staff concerning dental hygiene.   |

\*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.

**Attachment #2**

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

**COMMUNICABLE DISEASES July - December 2024**

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 | August | Sept | Oct | Nov | Dec |
|----------------|--------------------------------|------|--------|------|-----|-----|-----|
| <b>Anna</b>    | Pneumonia                      | 1    | 0      | 0    | 0   | 1   | 2   |
|                | Bloodstream                    | 0    | 0      | 0    | 0   | 0   | 1   |
|                | Skin                           | 10   | 4      | 3    | 2   | 1   | 1   |
|                | Gastrointestinal               | 0    | 0      | 0    | 0   | 0   | 0   |
|                | Respiratory                    | 0    | 1      | 1    | 1   | 2   | 0   |
|                | Ear/Nose/Throat                | 0    | 0      | 0    | 0   | 0   | 1   |
|                | Fungal                         | 5    | 0      | 3    | 0   | 0   | 1   |
|                | MRSA/VRSA/ESBL                 | 2    | 2      | 0    | 1   | 1   | 1   |
|                | Bone                           | 0    | 0      | 0    | 0   | 0   | 0   |
|                | Coronavirus Disease (COVID-19) | 1    | 0      | 31   | 1   | 0   | 0   |
| <b>Chicago</b> | Pneumonia                      | 0    | 0      | 0    | 0   | 1   | 1   |
|                | Bloodstream                    | 0    | 0      | 0    | 0   | 0   | 0   |
|                | Skin                           | 4    | 2      | 2    | 2   | 2   | 4   |
|                | Gastrointestinal               | 0    | 0      | 0    | 1   | 2   | 0   |
|                | Respiratory                    | 1    | 0      | 0    | 1   | 1   | 1   |
|                | Ear/Nose/Throat                | 0    | 0      | 0    | 0   | 0   | 0   |
|                | Fungal                         | 2    | 1      | 0    | 0   | 0   | 0   |
|                | MRSA/VRSA/ESBL                 | 1    | 0      | 0    | 0   | 1   | 0   |
|                | Bone                           | 0    | 0      | 0    | 0   | 0   | 0   |
|                | Coronavirus Disease (COVID-19) | 0    | 0      | 0    | 0   | 0   | 0   |
| <b>LaSalle</b> | Pneumonia                      | 2    | 1      | 9    | 0   | 5   | 3   |
|                | Bloodstream                    | 0    | 0      | 0    | 0   | 0   | 0   |
|                | Skin                           | 3    | 3      | 7    | 1   | 1   | 0   |
|                | Gastrointestinal               | 0    | 0      | 0    | 0   | 0   | 0   |
|                | Respiratory                    | 0    | 6      | 0    | 0   | 6   | 5   |
|                | Ear/Nose/Throat                | 0    | 0      | 0    | 0   | 0   | 0   |
|                | Fungal                         | 0    | 0      | 0    | 1   | 2   | 2   |
|                | MRSA/VRSA/ESBL                 | 1    | 0      | 3    | 0   | 0   | 1   |
|                | Bone                           | 0    | 0      | 0    | 0   | 0   | 0   |
|                | Coronavirus Disease (COVID-19) | 0    | 4      | 0    | 1   | 6   | 0   |
| <b>Manteno</b> | Pneumonia                      | 2    | 3      | 2    | 2   | 2   | 0   |
|                | Bloodstream                    | 1    | 1      | 2    | 1   | 0   | 1   |
|                | Skin                           | 12   | 8      | 5    | 10  | 10  | 9   |
|                | Gastrointestinal               | 1    | 1      | 3    | 4   | 0   | 0   |
|                | Respiratory                    | 3    | 1      | 3    | 5   | 7   | 2   |
|                | Ear/Nose/Throat                | 1    | 1      | 1    | 1   | 0   | 1   |
|                | Fungal                         | 5    | 6      | 6    | 3   | 2   | 4   |
|                | MRSA/VRSA/ESBL                 | 3    | 2      | 2    | 2   | 2   | 5   |
|                | Bone                           | 0    | 2      | 0    | 0   | 0   | 0   |
|                | Coronavirus Disease (COVID-19) | 0    | 10     | 20   | 0   | 9   | 3   |
| <b>Quincy</b>  | Pneumonia                      | 7    | 5      | 5    | 3   | 3   | 1   |
|                | Bloodstream                    | 0    | 2      | 1    | 4   | 1   | 1   |
|                | Skin                           | 5    | 4      | 9    | 3   | 1   | 6   |
|                | Gastrointestinal               | 0    | 0      | 0    | 0   | 0   | 3   |

|                                |    |    |   |   |   |   |
|--------------------------------|----|----|---|---|---|---|
| Respiratory                    | 14 | 8  | 1 | 1 | 1 | 1 |
| Ear/Nose/Throat                | 0  | 0  | 0 | 0 | 0 | 0 |
| Fungal                         | 0  | 0  | 1 | 0 | 1 | 0 |
| MRSA/VRE/ESBL                  | 0  | 3  | 0 | 1 | 0 | 1 |
| Bone                           | 0  | 0  | 0 | 1 | 0 | 1 |
| Coronavirus Disease (COVID-19) | 0  | 15 | 1 | 0 | 0 | 6 |

## **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.

**Report to the General Assembly - Coronavirus Disease (COVID-19)**

**July - December 2024 - Illinois Department of Veterans Affairs Veterans Homes**

| <b>Anna</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 residents 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  | NA  | NA   | 0  | 0   | No cases   |
| <b>August</b> | NA  | NA  | 8/12/24                                     | 8/13/24  | 0  | 1   | Employee instructed to stay home for 7-10 days.  |
| <b>Sept</b>   | 9/17, 9/19, 9/20, 9/21, 9/23, 9/24,               | 9/17, 9/18, 9/20, 9/21, 9/22, 9/23,                   | Unknown                                     | 9/12, 9/14, 9/15, 9/17, 9/18, 9/20,                | 31   | 23  | testing. POC (rapid) testing performed on all members 24 hours after exposure, then on days 3 and 5 after exposure. POC and/or PCR testing every 3-7 days for 14 days until no more new positives . Staff POC and/or PCR every 3-7 days until no more new positives x 14 days. Special droplet/contact Isolation |
| <b>Oct</b>    | Asymptomatic                                      | 10/10/24  | Unknown                                     | 10/2, 10/3   | 1  | 2   | testing. POC (rapid) testing performed on all members 24 hours after exposure, then on days 3 and 5 after exposure. POC and/or PCR testing every 3-7 days for 14 days until no more new positives . Staff POC and/or PCR every 3-7 days until no more new positives x 14 days. Special droplet/contact Isolation |
| <b>Nov</b>    | NA  | NA  | NA  | NA   | 0  | 0   | No cases   |
| <b>Dec</b>    | NA  | NA  | NA  | NA   | 0  | 0   | No cases   |

| <b>LaSalle</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 residents 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  | NA  | NA   | NA   | 0   | No cases   |

|                |  |  |  |  |  |  |   |
|----------------|--|--|--|--|--|--|---|
| <b>August</b>  | 8/15,8/21,<br>8/23,8/25                    | 8/15,8/21,<br>8/23,8/25                        | 8/3,8/16,8/17,<br>8/19,8/20,8/2<br>1,8/22,8/23,8/<br>24,8/25 | 8/3,8/16,8/17,8<br>/20,8/21,8/23,8<br>/24,8/25 | 4  | 12                                       | Employees instructed to stay home for 7-10 days. F/U with + staff. Contact tracing and follow up with Unit PCR and rapid testing. POC (rapid) testing performed on all staff/residents 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. Residents/staff masked when out of room. |
| <b>Sept</b>    | NA   | NA   | 9/20.  | 9/18,9/20                                      | 0  | 2  | Employees instructed to stay home for 7-10 days. F/U with + staff. Contact tracing and follow up with Unit PCR and rapid testing. POC (rapid) testing performed on all staff/residents 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. Residents/staff masked when out of room. |
| <b>Oct</b>     | 10/4.                                      | 10/4.  | NA   | NA   | 1  | 0  | Employees instructed to stay home for 7-10 days. F/U with + staff. Contact tracing and follow up with Unit PCR and rapid testing. POC (rapid) testing performed on all staff/residents 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. Residents/staff masked when out of room. |
| <b>Nov</b>     | 11/21,11/19,1<br>1/22,11/23,11<br>/24      | 11/21,11/22,<br>11/24                          | 11/18,11/22,1<br>1/30  | 11/18,11/23,11<br>/25,11/30                    | 6  | 4  | Employees instructed to stay home for 7-10 days. F/U with + staff. Contact tracing and follow up with Unit PCR and rapid testing. POC (rapid) testing performed on all staff/residents 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. Residents/staff masked when out of room. |
| <b>Dec</b>     | NA   | NA   | 12/14,12/21,1<br>2/22,12/27,12<br>/29,12/30                  | 12/15,12/21,12<br>/27,12/29,12/3<br>0,12/31    | 0  | 9  | Employees instructed to stay home for 7-10 days. F/U with + staff. Contact tracing and follow up with Unit PCR and rapid testing. POC (rapid) testing performed on all staff/residents 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. Residents/staff masked when out of room. |
| <b>Manteno</b> | <u>Date(s) resident(s) showed symptoms</u> | <u>Date(s) of confirmed resident diagnosis</u> | <u>Date(s) staff showed symptoms</u>                         | <u>Date(s) of confirmed staff diagnosis</u>    | <u>TTL # of positive residents for month</u> | <u>TTL # of positive staff for month</u> | <b>Action taken by Veterans Home to eradicate spread of COVID-19</b>  |
| <b>July</b>    | NA   | NA   | NA   | NA   | 0  | 0  | No cases  |

|             |  |  |  |  |    |    |  |
|-------------|--|--|--|--|----|----|--|
| <b>Aug</b>  | 8/12, 8/13,<br>8/14, 8/16/24   | 8/12, 8/13,<br>8/14, 8/16/24   | 8/7, 8/14,<br>8/19, 8/22/24  | 8/8, 8/14, 8/17,<br>8/18, 8/19,<br>8/20/24                               | 10 | 7  | Employees instructed to stay home for 7-10 days. F/U routinely with + staff. Contact tracing and follow 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. Members strangly encouraged to wear mask when out of room and stay on home unit.  |
| <b>Sept</b> | 9/9, 9/10,<br>9/11, 9/14,<br>9/15, 9/17,<br>9/18, 9/19,<br>9/20/, 9/22,<br>9/25/24 | 9/9, 9/11,<br>9/14, 9/15,<br>9/17, 9/18,<br>9/19, 9/20,<br>9/22, 9/25/24 | 9/5, 9/9, 9/11,<br>9/12, 9/14,<br>9/17, 9/18,<br>9/19, 9/22/24           | 9/7, 9/10, 9/11,<br>9/12, 9/13,<br>9/16, 9/18,<br>9/19, 9/20,<br>9/22/24 | 20 | 15 | Employees instructed to stay home for 7-10 days. F/U routinely with + staff. Contact tracing and follow 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. Members strangly encouraged to wear mask when out of room and stay on home unit. New 2024-2025 Covid Vaccine offered and given. |
| <b>Oct</b>  | NA   | NA   | 10/25/24   | 10/26/24   | 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 follwed 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 5 days. Implment outbreak testign if more cases arise.   |
| <b>Nov</b>  | 11/8, 11,11,<br>12/12,11/14,<br>11/29,<br>11/30/24                                 | 11/8, 11,11,<br>12/12,11/14,<br>11/29,<br>11/30/24                       | 11/13, 11/14,<br>11,17, 11/19,<br>11/20, 11/22,<br>11/29,<br>11/30/24    | 11/13, 11/14,<br>11,17, 11/19,<br>11/20, 11/22,<br>11/29,<br>11/30/24    | 9  | 16 | Employees instructed to stay home for 7-10 days. F/U routinely with + staff. Contact tracing and follow 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. Members strangly encouraged to wear mask when out of room and stay on home unit. New 2024-2025 Covid Vaccine offerec and given. |
| <b>Dec</b>  | 12/10,<br>12/13/24,  | 12/10,<br>12/13/24,  | 12/3, 12/5,<br>12/12, 12/20,<br>12/21, 12/23,<br>12/26, 12/27,<br>12/29, | 12/3, 12/5,<br>12/12, 12/20,<br>12/23, 12/24,<br>12/26, 12/27,<br>12/29, | 3  | 12 | Employees instructed to stay home for 7-10 days. F/U routinely with + staff. Contact tracing and follow 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. Members strangly encouraged to wear mask when out of room and stay on home unit. New 2025-2025 Covid Vaccine offered and given. |

| <b>Quincy</b> | <b>Date(s) resident(s) showed symptoms</b> | <b>Date(s) of confirmed resident 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 residents 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>    | N/A  | NA   | 7-16 to 7-25                         | 7-17 to 7-25                                | 0  | 9  | 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. Updated COVID vaccine offered. |
| <b>August</b>  | 8-11 to 8-28                               | 8-11 to 8-28                                   | 8-11 to 8-29                         | 8-11 to 8-29                                | 15   | 26                                       | 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 COd 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. Updated COVID vaccine offered.                   |
| <b>Sept</b>    | 9/16/24                                    | 9/16/24  | 9/- to 9-12                          | 9-2 to 9-12                                 | 1  | 9  | 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. Updated COVID vaccine offered. |
| <b>Oct</b>     | N/A  | N/A  | 10/26/24                             | 10/27/24                                    | 0  | 1  | 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. Updated COVID vaccine offered. |
| <b>Nov</b>     | N/A  | N/A  | 11-2 to 11-13                        | 11-2 to 11-13                               | 0  | 3  | 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. Updated COVID vaccine offered. |
| <b>Dec</b>     | 12-27 to 12-31                             | 12-27 to 12-31                                 | 12-13 to 12-30                       | 12-13 to 12-30                              | 6  | 10                                       | 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. Updated COVID vaccine offered. |
| <b>Chicago</b> | <u>Date(s) resident(s) showed symptoms</u> | <u>Date(s) of confirmed resident diagnosis</u> | <u>Date(s) staff showed symptoms</u> | <u>Date(s) of confirmed staff diagnosis</u> | <u>TTL # of positive residents for month</u> | <u>TTL # of positive staff for month</u> | <b>Action taken by Veterans Home to eradicate spread of COVID-19</b>  |

|               |                    |                    |                                |                                |   |    |   |
|---------------|--------------------|--------------------|--------------------------------|--------------------------------|---|----|---|
| <b>July</b>   | na                 | na                 | na                             | na                             | 0 | 0  | No cases  |
| <b>August</b> | 8/15, 21, 23,25    | 8/15, 21, 23,25    | 8/3,16, 17, 20,21,23,24, 25,26 | 8/3,16, 17, 20,21,23,24, 25,26 | 4 | 11 | Employees instructed to remain off workwhen tested positive and to see doctor about other potential resp infectiton, contact tracing/outbreak testing followed up with rapid testing. Positive residents placed inspecial droplet/contact precautions. Testing done every 3 to 7 days until no positive cases for 14 days. PPE source control implemented. Continued resident activities for negative and symptom free with mmasking and 6 ft seperation. Congregate meals for the same residents as noted. |
| <b>Sept</b>   | na                 | na                 | 8/19, 20                       | 8/19, 20                       | 0 | 2  | Employees instructed to remain off workwhen tested positive and to see doctor about other potential resp infectiton, contact tracing/outbreak testing followed up with rapid testing. Testing done every 3 to 7 days until no positive cases for 14 days. PPE source control implemented. Continued resident activities for negative and symptom free with mmasking and 6 ft seperation. Congregate meals for the same residents as noted.  |
| <b>Oct</b>    | 10/4/25            | 10/4/25            | na                             | na                             | 1 | 0  | Contact tracing/outbreak testing followed up with rapid testing. Positive residents placed inspecial droplet/contact precautions. Testing done every 3 to 7 days until no positive cases for 14 days. PPE source control implemented. Continued resident activities for negative and symptom free with mmasking and 6 ft seperation. Congregate meals for the same residents as noted.  |
| <b>Nov</b>    | 11/21, 22. 23, 245 | 11/21, 22. 23, 245 | 11/18, 22, 23, 30              | 11/18, 23, 25, 30              | 6 | 4  | Employees instructed to remain off workwhen tested positive and to see doctor about other potential resp infectiton, contact tracing/outbreak testing followed up with rapid testing. Positive residents placed inspecial droplet/contact precautions. Testing done every 3 to 7 days until no positive cases for 14 days. PPE source control implemented. Continued resident activities for negative and symptom free with mmasking and 6 ft seperation. Congregate meals for the same residents as noted. |
| <b>Dec</b>    | na                 | na                 | 12/14, 21, 22, 27,28, 29, 30   | 12/15, 21, 27, 29, 30, 31      | 0 | 7  | Employees instructed to remain off workwhen tested positive and to see doctor about other potential resp infectiton, contact tracing/outbreak testing followed up with rapid testing. Testing done every 3 to 7 days until no positive cases for 14 days. PPE source control implemented. Continued resident activities for negative and symptom free with mmasking and 6 ft seperation. Congregate meals for the same residents as noted.  |