

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: IL6004212	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 05/27/2016
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NAME OF PROVIDER OR SUPPLIER ILLINI HERITAGE REHAB & HC	STREET ADDRESS, CITY, STATE, ZIP CODE 1315B CURT DRIVE CHAMPAIGN, IL 61820
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S9999	<p>Final Observations</p> <p>LICENSURE FINDINGS:</p> <p>300.2010a)1)</p> <p>Section 300.2010 Director of Food Services</p> <p>a) A full-time person, qualified by training and experience, shall be responsible for the total food and nutrition services of the facility. This person shall be on duty a minimum of 40 hours each week.</p> <p>1) This person shall be either a dietitian or a dietetic service supervisor.</p> <p>Dietetic Service Supervisor - a person who: is a dietitian; or is a graduate of a dietetic technician or dietetic assistant training program, corresponding or classroom, approved by the American Dietetic Association; or</p> <p>is a graduate, prior to July 1, 1990, of a Department-approved course that provided 90 or more hours of classroom instruction in food service supervision and has had experience as a supervisor in a health care institution which included consultation from a dietitian; or</p> <p>has successfully completed a Dietary Manager's Association approved dietary managers course; or</p> <p>is certified as a dietary manager by the Dietary Manager's Association; or</p> <p>has training and experience in food service supervision and management in a military</p>	S9999	<p style="text-align: center;">Attachment A Statement of Licensure Violations</p>	
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Illinois Department of Public Health LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE 06/06/16
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S9999	<p>Continued From page 1</p> <p>service equivalent in content to the programs in the second, third or fourth paragraph of this definition.</p> <p>This requirement is not met as evidenced by the following:</p> <p>Based on interview and record review the facility failed to have a qualified Dietetic Service Supervisor who has completed the required training and works 40 hours per week in the facility. This has the potential to affect all 48 residents.</p> <p>Findings include:</p> <p>On 5-24-16 at 9:50am E15, Dietary Manager indicated she was not yet educationally qualified as a Dietetic Service Supervisor and stated, "I'm currently enrolled in the (Dietary Managers 90 hour) course that was started in May 2015 and I have started one six month extension."</p> <p>On 5-25-16 at 10:55am E8 Regional Administrator, stated the former Dietary Manager (E4) left employment on 6-10-15.</p> <p>According to records provided by E8, the start date for the Dietary Manager Training Program through the University of North Dakota was on 5-7-15.</p> <p>The Resident Census and Conditions of Residents report dated 5-25-16 states 48 residents reside in the facility.</p> <p>(AW)</p> <p>300.1230b) 300.1230d)1)2)</p>	S9999		
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S9999	<p>Continued From page 2</p> <p>300.1230j)5) 300.1230k) 300.1230l)</p> <p>Section 300.1230 Direct Care Staffing</p> <p>b) The number of staff who provide direct care who are needed at any time in the facility shall be based on the needs of the residents, and shall be determined by figuring the number of hours of direct care each resident needs on each shift of the day.</p> <p>d) Each facility shall provide minimum direct care staff by:</p> <p>1) Determining the amount of direct care staffing needed to meet the needs of its residents; and</p> <p>2) Meeting the minimum direct care staffing ratios set forth in this Section.</p> <p>j) Skilled Nursing and Intermediate Care For the purpose of this subsection, "nursing care" and "personal care" mean direct care provided by staff listed in subsection (f).</p> <p>5) Effective January 1, 2014, the minimum staffing ratios shall be increased to 3.8 hours of nursing and personal care each day for a resident needing skilled care and 2.5 hours of nursing and personal care each day for a resident needing intermediate care. (Section 3-202.05(d) of the Act)</p> <p>k) Effective September 12, 2012, a minimum</p>	S9999		
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S9999	<p>Continued From page 3</p> <p>of 25% of nursing and personal care time shall be provided by licensed nurses, with at least 10% of nursing and personal care time provided by registered nurses. Registered nurses and licensed practical nurses employed by a facility in excess of these requirements may be used to satisfy the remaining 75% of the nursing and personal care time requirements. (Section 3-202.05(e) of the Act)</p> <p>l) To determine the numbers of direct care personnel needed to staff any facility, the following procedures shall be used:</p> <ol style="list-style-type: none"> 1) The facility shall determine the number of residents needing skilled or intermediate care. 2) The number of residents in each category shall be multiplied by the overall hours of direct care needed each day for each category. 3) Adding the hours of direct care needed for the residents in each category will give the total hours of direct care needed by all residents in the facility. 4) Multiplying the total minimum hours of direct care needed by 25% will give the minimum amount of licensed nurse time that shall be provided during a 24-hour period. Multiplying the total minimum hours of direct care needed by 10% will give the minimum amount of registered nurse time that shall be provided during a 24-hour period. 5) Additional Direct Care Hours Equal to at Least 75% of the Minimum Required The remaining 75% of the minimum required direct care hours may be fulfilled by other staff identified in subsection (f) as long as it can be 	S9999		
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S9999	<p>Continued From page 4</p> <p>documented that they provide direct care and as long as nursing care is provided in accordance with the Nurse Practice Act.</p> <p>6) The amount of time determined in subsections (l)(4) and (5) is expressed in hours. Dividing the total number of hours needed by the number of hours each person works per shift (usually 7.5 or 8 hours) will give the number of persons needed to staff each shift. Calculations shall not include time for scheduled breaks or scheduled in-service training. The number of residents used to calculate staff ratios shall be based on the facility's midnight census.</p> <p>These requirements are not met as evidenced by the following:</p> <p>Based on record review and interview the facility failed to meet minimum staffing requirements for personal care on three of fourteen days and to have 10% of nursing and personal care time provided by a Registered Nurse for five of fourteen days reviewed. This has the potential to affect all 48 residents residing in the facility.</p> <p>Findings include:</p> <p>The undated spread sheet provided by E2, Administrator in Training (AIT) on 3:30 PM on 5/24/16 documents the period of time reviewed for staffing was from 5/8/16 to 5/21/16. The spread sheet documents 5.87 skilled care residents and 43.21 intermediate care residents for that time period, which calculates to 130.33 hours of minimum direct care staff. The total hours of direct care calculated (130.33) times 10% equals the minimum number of RN (Registered Nurse) time which equals 13.03 hours. The following are the days direct care</p>	S9999		
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S9999	<p>Continued From page 5</p> <p>hours and RN hours did not meet requirements:</p> <p>5/14/16 - Direct care hours were 125.25 shortage of 5.08 hours. 5/15/16 - Direct care hours were 117.50 shortage of 12.03 hours. 5/21/16 - Direct care hours were 125.25 shortage of 5.08 hours.</p> <p>5/12/16 - RN hours were 4.0 shortage of 9.03 hours. 5/14/16 - RN hours were 8.0 shortage of 5.03 hours. 5/15/16 - RN hours were 8.0 shortage of 5.03 hours. 5/18/16 - RN hours were 12.0 shortage of 1.03 hours. 5/20/16 - RN hours were 4.0 shortage of 5.03 hours.</p> <p>E2, AIT and E3, Director of Nurses confirmed the shortage of hours was correct on 5/26/16 at 10:09 AM.</p> <p>According to the facility's Resident Census and Conditions of Residents report dated 5/25/16 48 residents reside at the facility.</p> <p>(AW)</p> <p>300.670c)</p> <p>Section 300.670 Disaster Preparedness c) Disaster drills for other than fire shall be held twice annually for each shift of facility personnel. These REQUIREMENTS are not met as evidence by: Based on interview and record review, the facility failed to conduct semi-annual disaster drills for all staff. This failure has the potential to affect all 48</p>	S9999		
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S9999	<p>Continued From page 6</p> <p>residents living in the facility. Findings include: The facility's last disaster drill records document that tornado drills were performed on the following dates: 7/25/14 and 9/15/14. No further disaster drill documentation could be provided by the facility. On 5/27/16 at 10:05 a.m., E16 (Maintenance Supervisor) stated, "We haven't performed any actual disaster drills since I've started here...I found record of disaster drills that were performed in July and September of 2014. When I started working here in November, 2015, it was not conveyed to me that we needed to perform actual disaster drills per shift for all staff. We have just done in-service education related to disaster procedures and policies." On 5/26/16 at 11:05 a.m., E2 (Administrator in Training/AIT) stated, "We have not completed the two actual drills for disaster procedures. We have discussed disaster policies and the steps to perform for the different kinds of disasters, but we never performed the actual drills for any disaster procedure." The Centers for Medicare and Medicaid form, 672, "Resident Census and Conditions of Residents," dated 5/25/16, documents 48 residents live in the facility.</p> <p>(B)</p>	S9999		