

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: IL6007504	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 07/28/2022
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NAME OF PROVIDER OR SUPPLIER PLEASANT VIEW REHAB & HCC	STREET ADDRESS, CITY, STATE, ZIP CODE 500 NORTH JACKSON STREET MORRISON, IL 61270
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S 000	Initial Comments Annual Licensure Survey	S 000		
S9999	<p>Final Observations</p> <p>Statement of Licensure Violations:</p> <p>1 of 3 300.661</p> <p>Section 300.661 Health Care Worker Background Check</p> <p>A facility shall comply with the Health Care Worker Background Check Act and the Health Care Worker Background Check Code.</p> <p>This REQUIREMENT was not met as evidenced by:</p> <p>Based on record review and interview the facility failed to conduct health care worker background checks prior to employment for 11 of 11 records (V6-V15, V19) reviewed.</p> <p>The findings include:</p> <p>On 7/28/22 at 11:00 AM, V5 BOM (Business office manager) said she started the position in February of this year, and just found out yesterday about checking new employees in the portal for a background check. V5 said she had no training or knowledge of the policy or how to conduct the background checks until she was instructed yesterday. V5 said she now knows the registry is checked for background before any employee starting day, and if there are no fingerprints on file in the registry, then the employee is notified of needing them completed</p>	S9999	<p>Attachment A Statement of Licensure Violations</p>	

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
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S9999	<p>Continued From page 1</p> <p>within 10 days of their starting date.</p> <p>On 7/27/22 a list of the last 10 hired CNA's (certified nursing assistant) was provided, and the list of all CNA's and their hire dates. The background registry checks were requested for review.</p> <p>On 7/28/22, the registry checks were provided for V6-V15, and V19. The report for V12 documents she was hired on 7/22/22, and her registry check was completed on 7/28/22. The remainder of the reports show they were printed on 7/27/22. The hire dates dated back to 2/18/22. The records show V19 to have a hire date of 6/3/22, and no fingerprints on file. V8 was hired on 5/31/22, and had no fingerprints completed for the registry.</p> <p>On 7/28/22, at 11:15 AM, V5 said V19 quit the first day he was employed in the facility, and did not even finish a full shift. V5 said V8 remains employed as PRN (as needed) and was not aware of the fingerprints missing from the report. V5 said V8 was notified of the requirement and provided a list of vendors to have her prints completed prior to her returning to the facility.</p> <p>The facility's 2/28/2012 policy for Health care worker background check policy and procedure documents Persons applying for employment will be hired conditioned upon results of the appropriate background check as follows: A fingerprint based criminal history records check will be required of all individuals applying for a direct care position or having access to long-term care residents or the living quarters or financial, medical or personal records of long term care residents. Procedure: 6. The conditional employee shall go to a livescan vendor and have his or her fingerprints collected electronically and</p>	S9999		

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S9999	<p>Continued From page 2</p> <p>transmitted to the Department of State Police with 10 working days. If the applicant does not go to a livescan vendor and have his/her finger prints collected electronically within 10 working days, he/she will be suspended from working, until such time as proof of provided that the individual has had his or her fingerprints collected.</p> <p>(C)</p> <p>2 of 3 300.615e) 300.615f)</p> <p>Section 300.615 Determination of Need Screening and Request for Resident Criminal History Record Information</p> <p>e) In addition to the screening required by Section 2-201.5(a) of the Act and this Section, a facility shall, within 24 hours after admission of a resident, request a criminal history background check pursuant to the Uniform Conviction Information Act for all persons 18 or older seeking admission to the facility, unless a background check was initiated by a hospital pursuant to the Hospital Licensing Act. Background checks shall be based on the resident's name, date of birth, and other identifiers as required by the Department of State Police. (Section 2-201.5(b) of the Act)</p> <p>f) The facility shall check for the individual's name on the Illinois Sex Offender Registration website at www.isp.state.il.us and the Illinois Department of Corrections sex registrant search page at www.idoc.state.il.us to determine if the individual is listed as a registered sex offender.</p>	S9999		

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S9999	<p>Continued From page 3</p> <p>Thess REQUIREMENTS were not met as evidenced by:</p> <p>Based on record review and interview, the facility failed to submit background checks, check the Illinois Department of Corrections (IDOC) website, and check the Illinois State Police (ISP) website within 24 hours of admission.</p> <p>This applies to 10 of 10 residents (R19, R21, R77, R78, R227, and R230-R234) that were reviewed for criminal backgrounds in the sample of 10.</p> <p>The findings include:</p> <p>The facility provided document titled (facility) Admits showed R19 was admitted to the facility on 7/6/22. the background check for R19 for the Illinois State Police (ISP), Illinois Department of Corrections (IDOC), and National Sex offender registry was not initiated until 7/27/22 (after these documents were requested).</p> <p>The facility provided document titled (facility) Admits showed R21 was admitted to the facility on 5/27/22. The background check for R21 for the Illinois State Police (ISP), Illinois Department of Corrections (IDOC), and National Sex offender registry was not initiated until 7/27/22 (after these documents were requested).</p> <p>The facility provided document titled (facility) Admits showed R77 was admitted to the facility on 7/22/22. The background check for R77 for the Illinois State Police (ISP), Illinois Department of Corrections (IDOC), and National Sex offender registry was not initiated until 7/27/22 (after these documents were requested).</p>	S9999			

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S9999	<p>Continued From page 4</p> <p>The facility provided document titled (facility) Admits showed R78 was admitted to the facility on 7/1/22. The background check for R78 for the Illinois State Police (ISP), Illinois Department of Corrections (IDOC), and National Sex offender registry was not initiated until 7/27/22 (after these documents were requested).</p> <p>The facility provided document titled (facility) Admits showed R227 was admitted to the facility on 6/2/22. The background check for R227 for the Illinois State Police (ISP), Illinois Department of Corrections (IDOC), and National Sex offender registry was not initiated until 7/27/22 (after these documents were requested).</p> <p>The facility provided document titled (facility) Admits showed R230 was admitted to the facility on 6/28/22 and discharged from the facility on 6/30/22. The background check for R230 for the Illinois State Police (ISP), Illinois Department of Corrections (IDOC), and National Sex offender registry was not initiated until 7/27/22 (after these documents were requested).</p> <p>The facility provided document titled (facility) Admits showed R231 was admitted to the facility on 7/1/22 and discharged from the facility on 7/22/22. The background check for R231 for the Illinois State Police (ISP), Illinois Department of Corrections (IDOC), and National Sex offender registry was not initiated until 7/27/22 (after these documents were requested).</p> <p>The facility provided document titled (facility) Admits showed R232 was admitted to the facility on 7/5/22 and discharged from the facility on 7/18/22. The background check for R232 for the Illinois State Police (ISP), Illinois Department of Corrections (IDOC), and National Sex offender</p>	S9999		

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S9999	<p>Continued From page 5</p> <p>registry was not initiated until 7/27/22 (after these documents were requested).</p> <p>The facility provided document titled (facility) Admits showed R233 was admitted to the facility on 5/12/22 and discharged from the facility on 5/17/22. . The background check for R233 for the Illinois State Police (ISP), Illinois Department of Corrections (IDOC), and National Sex offender registry was not initiated until 7/27/22 (after these documents were requested).</p> <p>The facility provided document titled (facility) Admits showed R234 was admitted to the facility on 4/14/22 and discharged from the facility on 5/3/22. The background check for R234 for the Illinois State Police (ISP), Illinois Department of Corrections (IDOC), and National Sex offender registry was not initiated until 7/27/22 (after these documents were requested).</p> <p>The facility provided document titled (facility) Admits showed R19, R21, R77, R78 and R227 were still residing in the facility during this survey.</p> <p>On 7/27/22 at 2:30 PM, V1 (Administrator) said the facility dropped the ball on the background checks. V1 said the background checks were not done for the 10 residents reviewed for the identified offender task. At 3:24 PM, V22 (Corporate) said no background checks were done for residents or staff since the new Business Office Manager started in February 2022.</p> <p>On 7/28/22 at 10:42 AM, V5 (Business Office Manager-BOM) said she started working for the facility in the middle of February 2022. V5 said she took over the position of BOM in the beginning of March. V5 said the first two weeks</p>	S9999		

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S9999	<p>Continued From page 6</p> <p>she was being trained by the previous BOM. V5 said she believes the previous BOM sabotaged her training. V5 said she did not receive any training on background checks for residents or staff. V5 said she knows now that background checks for residents should be started as soon as the facility gets the referral. V5 said she just signed up and got access to the site for background checks and she is working on them now. V5 said it is important to make sure the background checks are completed upon admission or when a new staff person is hired for everyone's safety; staff and residents.</p> <p>The facility's Identified Offender Policy and Procedure with a revision date of 2/16/2012 showed Identifying Offenders: 1. Check for the resident's name on the Illinois Sex Offender Registration website...2. Check for the resident's name on the Illinois Department of Correction sex registrant search page...3. Conduct a Criminal History Background Check within 24 hours of admission.</p> <p>(C)</p> <p>3 of 3</p> <p>300.610a) 300.1210 b)5) 300.1210 c) 300.1210d)6)</p> <p>Section 300.610 Resident Care Policies</p> <p>a) The facility shall have written policies and procedures governing all services provided by the facility. The written policies and procedures shall be formulated by a Resident Care Policy</p>	S9999		
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S9999	<p>Continued From page 7</p> <p>Committee consisting of at least the administrator, the advisory physician or the medical advisory committee, and representatives of nursing and other services in the facility. The policies shall comply with the Act and this Part. The written policies shall be followed in operating the facility and shall be reviewed at least annually by this committee, documented by written, signed and dated minutes of the meeting.</p> <p>Section 300.1210 General Requirements for Nursing and Personal Care</p> <p>b) The facility shall provide the necessary care and services to attain or maintain the highest practicable physical, mental, and psychological well-being of the resident, in accordance with each resident's comprehensive resident care plan. Adequate and properly supervised nursing care and personal care shall be provided to each resident to meet the total nursing and personal care needs of the resident.</p> <p>5) All nursing personnel shall assist and encourage residents with ambulation and safe transfer activities as often as necessary in an effort to help them retain or maintain their highest practicable level of functioning.</p> <p>c) Each direct care-giving staff shall review and be knowledgeable about his or her residents' respective resident care plan.</p> <p>d) Pursuant to subsection (a), general nursing care shall include, at a minimum, the following and shall be practiced on a 24-hour, seven-day-a-week basis:</p> <p>6) All necessary precautions shall be taken to assure that the residents' environment remains</p>	S9999		

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S9999	<p>Continued From page 8</p> <p>as free of accident hazards as possible. All nursing personnel shall evaluate residents to see that each resident receives adequate supervision and assistance to prevent accidents</p> <p>These requirements were not met as evidenced by:</p> <p>Based on observation, interview, and record review, the facility failed to ensure a resident's (R8) safety by having only one staff member in the room while a resident with dementia and a history of falls was sitting on the edge of the bed for 1 of 2 reviewed for falls in the sample of 12. The staff member turned to get clothing for the resident and the resident fell off of the bed. This failure resulted in R9 hitting her face during the fall and being sent to a local hospital with multiple facial fractures.</p> <p>The findings include:</p> <p>R9's 12/7/21 facility assessment showed she had moderate cognitive impairment with long-term and short-term memory problems. The assessment showed R9 required extensive assist from two staff members for bed mobility and transfers. R9's Profile Face Sheet, provided by the facility on 7/28/22 showed she had diagnoses including repeated falls, abnormality of gait and movement and weakness. R9's July 2022 Physician's Orders sheets also showed a diagnosis of dementia. R9's activities of daily living (ADL) care plan provided by the facility on 2/28/22, showed R9 had an alteration in bed mobility: Unable to move independently in bed related to diagnosis of obesity, and dementia, as evidenced by confusion. The care plan showed R9 had severe dementia and is unable to make needs known to staff. The ADL care plan also</p>	S9999		
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S9999	<p>Continued From page 9</p> <p>showed R9 required two staff assist for transfers. R9's fall care plan interventions started on 8/24/20 showed "Resident has been known to attempt to get out of bed unattended."</p> <p>On 7/27/22 at 1:05 PM, R9 was transferred from her geriatric chair to her bed with the assistance of two staff members (V20 and V21/Certified Nursing Assistants-CNAs) using a gait belt and two wheeled walker. V20 and V21 rolled R9 onto her right side to provide incontinence care. R9 seemed anxious and let out a yell when she was rolled near the edge of the bed.</p> <p>R9's Nurse's Notes dated 1/1/22 at 5:30 AM, showed "CNA with resident assisting resident to get up for the day. CNA turned to get her socks. Resident sitting on the side of the bed, stood up and fell hitting the left side of her face causing laceration contusion. Pressure held to resident's face with wash cloth. CNA and nurse got resident off of the floor with (mechanical sling lift). Put resident in bed...Nurse and CNA trying to look at resident's face. Resident resisting. Pulling away and swatting at Nurse and CNA's hands. Day Nurses and CNA's to be on the floor in 5-7 minutes. Nurse attempted to continue to look at resident's face."</p> <p>R9's Nurse's Note dated 1/1/22 at 6:00 AM showed "This Nurse arrived for shift at this time received report from night shift Nurse that resident had fallen out of bed obtaining a laceration to cheek and was unable to properly assess area due to bleeding and resisting. Gauze currently in place to slow bleeding. Resident lying supine in bed at this time...Removed gauze dressing to assess area on left cheek. Observed large deep laceration with surrounding swelling and bruising beginning. Area still bleeding but has</p>	S9999		

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S9999	<p>Continued From page 10</p> <p>slowed. Immediately called 911 for ambulance transport to ER (emergency room) for evaluation and treatment of laceration/contusion to left cheek."</p> <p>R9's documentation from a local hospital dated 1/2/22, showed "CT (computerized tomography) scan of the facial bones is reviewed, which demonstrates a displaced left zygomatic arch (the side of the cheek bone) fracture, and a minimal mandibular coronoid process (jawbone) fracture, and a non-displaced left orbital floor fracture."</p> <p>R9's Nurse's Note dated 1/3/22 showed "Patient arrived at facility at (7:00 PM) via ambulance...Swelling noted to left side of face along with 5 stitches closing laceration. Patient states she was in pain."</p> <p>On 7/28/22 at 9:15 AM, V3 (MDS/Care Plan Nurse) said R9 was sitting on the edge of the bed. The CNA turned to grab clothes and R9 fell. V3 said the CNA could not catch her. V3 said the cause of the fall was the CNA turned to grab clothes.</p> <p>On 7/28/22 at 11:32 AM, V2 (Director of Nursing) said the cause of R9's fall on 1/1/22 was the CNA was not following R9's needs. She left her sitting on the edge of the bed and then turned away. V2 said R9 was a two assist and there was only one staff member in the room. There should have been another staff member in the room. Someone should have been by R9 at all times when she was sitting on the edge of the bed. V2 said the CNA could have gathered supplies beforehand or put R9's socks on in bed before getting her up.</p> <p>The facility's policy and procedure titled Fall</p>	S9999		

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S9999	Continued From page 11 Prevention, with a revision date of 9/3/15 showed "Fall Prevention Interventions: 11. Transfer with proper number of assist and gait belt. (A)	S9999		