

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>IL6003958</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>09/13/2023</b>
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NAME OF PROVIDER OR SUPPLIER  <b>MORGAN PARK HEALTHCARE</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>10935 SOUTH HALSTED STREET CHICAGO, IL 60628</b>
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S 000	Initial Comments  Probationary License/Change of Ownership	S 000		
S9999	Final Observations  Statement of Licensure Violations:  1 of 4  300.615e)  Section 300.615 Determination of Need Screening and Request for Resident Criminal History Record Information  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).  These requirements were NOT met as evidenced by:  Based on interview and record review, the facility failed to conduct resident criminal history background checks within 24 hours after admission of a new resident which affected R213, R216, R222, R223 and R225 in the total sample of 74 residents and has the potential to affect all 215 residents in the facility.	S9999	Attachment A Statement of Licensure Violations	

Illinois Department of Public Health  
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

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S9999	<p>Continued From page 1</p> <p>Findings include:</p> <p>Facility document dated 9/10/23 and titled "MDS (Minimum Data Set) Resident Matrix," documents, in part, that R213, R216, R222, R223 and R225 are new admissions to the facility.</p> <p>On 9/11/23, this surveyor requested criminal history background checks from V1 (Administrator) for R213, R216, R222, R223 and R225 along with their census reports and received the following:</p> <p>R213: Census report documents, in part, that R213 was admitted to the facility on 9/7/23 and is an active resident in the facility. R213's criminal history background check was performed on 9/11/23 with document reading: "Registry search done on 9/11/23."</p> <p>R216: Census report documents, in part, that R216 was admitted to the facility on 9/7/23 and is an active resident in the facility. R216's criminal history background check was performed on 9/11/23 with document reading: "Registry search done on 9/11/23."</p> <p>R222: Census report documents, in part, that R222 was admitted to the facility on 9/6/23 and is an active resident in the facility. R222's criminal history background check was performed on 9/11/23 with document reading: "Registry search done on 9/11/23."</p> <p>R223: Census report documents, in part, that R223 was admitted to the facility on 9/2/23 and is an active resident in the facility. R223's criminal history background check was performed on 9/11/23 with document reading: "Registry search</p>	S9999		

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S9999	<p>Continued From page 2 done on 9/11/23."</p> <p>R225: Census report documents, in part, that R225 was admitted to the facility on 9/3/23 and is an active resident in the facility. R225's criminal history background check was performed on 9/11/23 with document reading: "Registry search done on 9/11/23."</p> <p>On 9/12/23 at 11:07 am, V40 (Admissions Director) stated, V40's responsibility is to perform the resident criminal background checks for new admissions to the facility. When asked when does V40 perform the criminal background checks for residents who are new admissions, V40 stated, "When they get here." V40 stated that when the newly admitted residents arrives, V40 puts their information for criminal background checks into the electronic verification system which checks for history of sex offenders and criminal activity with the state department of correction. V40 stated, "I (V40) try to do it within a week" of the resident's arrival. This surveyor showed V40 the criminal background checks for R213, R216, R222, R223 and R225 who were new admissions and that their criminal background checks were done on 9/11/23 despite being admitted 4 days or greater. V40 stated, "I (V40) didn't pull them right away." When asked the purpose of performing criminal background checks for residents within 24 hours of admission, V40 stated to make sure that the resident is not a sex offender, and if so, the facility would make an adjustment and send to another facility.</p> <p>On 9/12/23 at 1:04 pm, V1 (Administrator) stated, as the abuse coordinator, criminal background checks are expected to be done by V40 for all residents with expectations to "do it consistently,</p>	S9999		

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S9999	Continued From page 3  do it timely, and do it accurately." When asked what the time frame is for V40 performing the resident criminal background checks, V1 stated, "72 hours is the longest we can go." V21 stated that it's 24 to 72 hours, but V1 will have to double check. When asked why the facility performs resident background criminal checks, V1 stated, "We need to know who's in the building. We need to maintain safety and keep the residents and staff safe. And to adequately deny someone who doesn't belong here."  Facility undated job description titled "Admissions Coordinator," documents, in part, "Summary: The Admissions Coordination is responsible for reviewing and preparing for new admissions in accordance with established policies and procedures ... Essential Duties and Responsibilities: ... Admit and prepare identification records for residents in accordance with our established policies and procedures ... Assume the administrative authority, responsibility, and accountability of performing the assigned administrative duties."  Facility policy dated 1/4/2018 and titled "Abuse Prevention Program: Facility Policy and Procedure," documents, in part, "Introduction: Abuse is defined as the willful infliction of injury, unreasonable confinement, intimidation or punishment with resulting physical harm, pain or mental anguish ... Facility Policy and Procedure: ... II. Pre-Admission Screening of Potential Residents: This facility shall check and review of the criminal history background for any resident seeking admission to the facility in order to identify previous criminal convictions. The facility will: Request a Criminal History Background Check within 24 hours after admission of a new resident."	S9999		

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S9999	Continued From page 4  Facility policy dated November 2018 and titled "Residents' Rights for People in Long-Term Care Facilities," documents, in part, " ... Your rights to safety: You must not be abused, neglected, or exploited by anyone - financially, physically, verbally, mentally or sexually."  On 9/11/23 at 11:12 am, V50 (MDS Coordinator) confirmed that the facility census of active residents on 9/10/23 at 9:10 am is 215 residents.  (C)  2 of 4  300.1810)  Section 300.1810 Resident Record Requirements  l) All Cook County facilities with Colbert Class Members shall submit to the Colbert Lead Defendant Agency, or successor Colbert Lead Defendant Agency, on a monthly basis, an accurate census of all Medicaid-eligible residents, the previous month's voluntary and involuntary discharges conducted under Section 300.3300, including any voluntary and involuntary discharges scheduled to be conducted within 48 hours after the end of the reporting month. This monthly census must be submitted on the form prescribed by the Colbert Lead Defendant Agency using secure (encrypted) email, no later than the fifth business day of each month.  These requirements were NOT met as evidenced by:	S9999		

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S9999	<p>Continued From page 5</p> <p>Based on interview and record review, the facility failed to submit an accurate census of all Medicaid-eligible residents monthly no later than the fifth business day of each month which has the potential to affect the 204 Medicaid residents in the facility.</p> <p>Findings include:</p> <p>Facility document dated 9/12/23 and titled "Detailed Census Report - By Payer Type," documents, in part, that 204 active Medicaid residents are residing in the facility.</p> <p>On 9/11/23 at 1:55 pm, V13 (Social Services Director, SSD) stated that V13 is responsible for the Colbert community transition program in the facility. This surveyor requested from V13 the past census reports emailed to the state agency from August 2022 to June 2023. V13 stated that V13 was locked out of V13's former email with the facility's change of ownership and can only provide the August 2023 list. V13 printed general email correspondence with the local community transition company and provided to this surveyor no accurate census reports of Medicaid-eligible residents to the state agency being provided.</p> <p>On 9/12/23 at 10:30 am, V13 (SSD) stated that V13 has not emailed a census report to the state agency. V13 stated that V13 will email a facility daily census but, "I (V13) do not email it to the state." V13 stated that only V13 is responsible for the Colbert community transition program residents and that no other person would be emailing the census reports. V13 stated that V13 has been working in the facility for 5 years as SSD and that V13 has not been doing it any other way than what V13 is doing now. V13 stated that V13 sends the emails to the local community</p>	S9999			

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S9999	<p>Continued From page 6</p> <p>transition company as "general" emails and are not encrypted.</p> <p>Facility undated job description titled "Job Description for Social Services Director," documents, in part, " ... Job Summary: To work with the residents in identification of needs and problems, make referrals to community resources."</p> <p>(AW)</p> <p>3 of 4</p> <p>300.2210a) 300.2210b)1)2)3)4)5)6)7)8)9)10)</p> <p>Section 300.2210 Maintenance</p> <p>a) Every facility shall have an effective written plan for maintenance, including sufficient staff, appropriate equipment, and adequate supplies.</p> <p>b) Each facility shall:</p> <p>1) Maintain the building in good repair, safe and free of the following: cracks in floors, walls, or ceilings; peeling wallpaper or paint; warped or loose boards; warped, broken, loose, or cracked floor covering, such as tile or linoleum; loose handrails or railings; loose or broken window panes; and any other similar hazards.</p> <p>2) Maintain all electrical, signaling, mechanical, water supply, heating, fire protection, and sewage disposal systems in safe, clean and functioning condition. This shall include regular inspections of these systems. (A, B)</p> <p>3) Maintain all electrical cords and appliances in a safe and functioning condition.</p> <p>4) Maintain the interior and exterior finishes</p>	S9999		
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S9999	<p>Continued From page 7</p> <p>of the building as needed to keep it attractive and clean and safe (painting, washing, and other types of maintenance).</p> <p>5) Maintain all furniture and furnishings in a clean, attractive, and safely repaired condition.</p> <p>6) Maintain the grounds and other buildings on the grounds in a safe, sanitary and presentable condition.</p> <p>7) Maintain the grounds free from refuse, litter, insect and rodent breeding areas.</p> <p>8) The building and grounds shall be kept free of any possible infestations of insects and rodents by eliminating sites of breeding and harborage inside and outside the building; eliminating sites of entry into the building with screens of not less than 16 mesh screen to the inch and repair of any breaks in construction.</p> <p>9) Maintain all plumbing fixtures and piping in good repair and properly functioning.</p> <p>10) Protect the potable water supply from contamination by providing and properly installing adequate, backflow protection devices or providing adequate air gaps on all fixtures that may be subject to backflow or backsiphonage. (Source: Amended at 14 Ill. Reg. 14950, effective October 1, 1990)</p> <p>These Requirements were NOT MET as evidenced by:</p> <p>Based on observation, interview and record review, the facility failed to ensure that water was not leaking from the ceiling onto resident beds in a room; failed to maintain the integrity of resident room walls, corner guards, closet doors, baseboards, drawer covers, overhead lights, a shower room sink and wall air conditioner unit; failed to repair or replace damaged furniture; failed to ensure that the call light system functioned properly; failed to maintain sanitary</p>	S9999			



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S9999	<p>Continued From page 8</p> <p>conditions in the food preparation areas; and failed to secure the lid on the outside garbage dumpster in an effort to prevent pest and rodents from entering into the facility. These failures affected R19, R31, R49, R50, R112, R126, R132, R134, R163, R165, R180, R181, R182 and R197 and has the potential to affect all 215 residents in the facility.</p> <p>Findings include:</p> <p>1) On 9/10/23 at 11:42 am, in the 2 South dining, surveyor observed a chair with a light brown, plastic seat cushion that has 9 gaping tears in the plastic covering exposing the foam cushion underneath. The exposed foam cushion is discolored with black and brown stains. The edges of the plastic seating from the tears are frayed and elevated.</p> <p>On 9/11/23 at 10:07 am, in the 2 South dining, surveyor observed the same chair with the torn and discolored seat cushion.</p> <p>On 9/11/23 at 12:22 pm, surveyor and V21 (Maintenance Director) performed a brief environmental tour and walked into the 2 South dining room. Surveyor and V21 observed the same chair with the torn and discolored seat cushion. V21 stated that it's an old chair. When asked if V21 is viewing facility furniture for condition integrity, V21 stated that V21 "tries to do (V21's) best" and that staff will put a towel on the seat cushion to cover the holes, but that it could become saturated with incontinence. When asked if this chair is considered part of a homelike environment for residents, V21 stated, "No. It's not homelike." V21 stated this is the first time that V21's been made aware of the condition of this chair. When asked how V21 is notified of</p>	S9999		
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S9999	<p>Continued From page 9</p> <p>furniture needing to be repaired, V21 stated that the staff will text or call V21. V21 stated that when V21 comes into the building in the morning, V21 is "flooded with things" from residents and staff. V21 stated that if residents or staff are "complaining of" repairs needed, then V21 will look at it and puts it on list for V44 (Maintenance) to do daily. Surveyor and V21 continue the environmental tour and enter R165 and R182's room. Surveyor and V21 observed the room's wall air conditioner unit. V21 stated, "I (V21) see the facing (cover) is missing." V21 stated that this is not a home like environment having this exposed air conditioning unit with no front cover. When asked how often is V21 checking the status of the room air conditioners, V21 stated that it's per request and that V21 has not been informed of this missing air conditioner front cover. V21 stated that V21 does not have any alternative facing to cover the front of the wall air conditioner.</p> <p>Facility document from the maintenance binder located at the 2 South nurse's station documents, in part, from 8/1/23 to 9/10/23, no entry of this chair needing repaired.</p> <p>2) On 9/10/2023 at 11:45am, surveyor observed R197's left closet door completely detached and standing up against the right-side closet door. Surveyor also observed a large hole in the baseboard, corner guard was broken with sheet rock exposed, and the baseboard detached from the wall.</p> <p>On 9/10/2023 at 12:05pm, surveyor observed the bottom drawers of the clothing wardrobe without door covers on both sides of the clothing wardrobe for R50. R50 has no roommate at this time.</p>	S9999		

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S9999	<p>Continued From page 11</p> <p>Chronic Obstructive Pulmonary Disease with Acute Exacerbation, Pneumonia, Viral Hepatitis C, Hypertension, and Wrist Drop. R180's Brief Interview of Mental Status score of 15 that indicates cognitive intactness.</p> <p>R181 has a diagnosis of but not limited to Unstable Angina, Bilateral Primary Osteoarthritis of Knee, Insomnia, Vitamin D Deficiency, Hypertension, Lack of Coordination and Muscle Wasting and Atrophy. R181's Brief Interview of Mental Status score of 14 that indicates cognitive intactness.</p> <p>R197 has a diagnosis of but not limited to Hemiplegia and Hemiparesis, Epilepsy, Hyperlipidemia, Hypertension, Dysarthria and Dysphagia. R180's Brief Interview of Mental Status score of 13 that indicates cognitive intactness.</p> <p>3) On 9/11/2023 at 10:30am, surveyor observed the pull string to the overhead light above R112's head of bed missing.</p> <p>On 9/11/2023 at 10:32am, R112 stated, "I have made a request to maintenance to have the cord replaced, but maintenance is slow."</p> <p>On 9/12/2023 at 10:43am V21 (Maintenance Director) observed the light above the head of R112's bed with no pull string for R112 to turn the light on. V21 stated the pull strings are obsolete from the supply vendor. V21 stated the company is sending out the twist canopy switches now. V21 stated R112 not having a cord to turn the light on above the head of the bed does not offer R112 a homelike environment.</p> <p>4) On 09/12/2023 at 12:53pm, surveyor and V37</p>	S9999		

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S9999	<p>Continued From page 10</p> <p>On 9/10/2023 at 12:06pm, surveyor observed R134 and R197's wall corner guard hanging from the wall and a large hole in the wall.</p> <p>On 9/10/2023 at 12:25pm, surveyor observed the corner guard hanging off, a large hole in the baseboard and the baseboard not attached to wall by the sink in R180 and R181's room.</p> <p>On 9/12/2023 at 11:03 am, V21 (Maintenance Director) stated No, it is not a homelike environment with closet doors off, missing drawers covers, holes in the walls, baseboards hanging off and missing corner guards. V21 also stated that the detached door could fall and strike the resident, or the door could be used as a weapon.</p> <p>Work order sheet for 3 North (6/01/2023-9/10/2023) does not list any issues with R50, R134, R180, R181 and R197's rooms.</p> <p>R50 has a diagnosis of but not limited to Gout, Hypotension, Bradycardia, Muscle Wasting and Atrophy, Primary Osteoarthritis, Calcaneal Spur, Hypothyroidism, Type 1 Diabetes Mellitus, and Peripheral Vascular Disease. R50's Brief Interview of Mental Status score of 06 that indicates severely impaired.</p> <p>R134 has a diagnosis of Cerebral Infarction, Mood Disorder, Anxiety Disorder, Thoracoabdominal Aortic Aneurysm, Hypocalcemia, Type 2 Diabetes Mellitus and Acute Kidney Failure. R134's Brief Interview of Mental Status score of 12 that cognitive intactness.</p> <p>R180 has a diagnosis of Alcohol Liver Disease,</p>	S9999		

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NAME OF PROVIDER OR SUPPLIER  <b>MORGAN PARK HEALTHCARE</b>		STREET ADDRESS, CITY, STATE, ZIP CODE <b>10935 SOUTH HALSTED STREET CHICAGO, IL 60628</b>		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
S9999	<p>Continued From page 12</p> <p>(Wound Care Director/LPN) went inside R126's and 163's room to check on residents. Upon entry, R163 stated can you help change my sheets? I (R163) am wet. Surveyor inquired what happened. R163 stated the ceiling is leaking and my bed is wet. It bothers me. Surveyor and V37 looked up R126's and R163's ceiling and observed water was dripping from the ceiling to R126's and R163's mattresses.</p> <p>On 09/12/2023 at 12:54pm, R126 stated my sheets are wet and it bothers me too.</p> <p>On 09/12/2023 at 12:56pm, V37 stated I (V37) don't know what is going on. I (V37) think one of the residents on 3rd floor overflowed the sink or the toilet.</p> <p>On 09/12/2023 at 1:11pm, V43 (Certified Nursing Assistant) stated I (V43) already paged for the (V21) to come here. I (V43) paged for him (V21) around 11am - 12pm. The water leak was on and off. I (V43) noticed it around the time I (V43) paged for the maintenance.</p> <p>On 09/12/2023 at 1:14pm, V27 (RN/Nurse Supervisor) stated I (V27) already told maintenance about the leak. This (referring to the water dripping from the ceiling) should not happen because that is a discomfort to the residents.</p> <p>On 09/12 at 1:16pm, surveyor pointed out to V21 (Maintenance Director) the water dripping from the ceiling. V21 stated I (V21) don't know what is going on. I (V21) have to check what is wrong. There should be no leaking from the ceiling because it will not create a home like environment to residents.</p>	S9999		

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S9999	<p>Continued From page 13</p> <p>R126's (Active Order As Of: 09/12/2023) Order Summary Report documented, in part "Diagnoses: (include but not limited to) muscle wasting, hypertension, and adult failure to thrive."</p> <p>R126's (06/16/2023) Minimum Data Set documented, in part "Section C. Cognitive Patterns. C0500. BIMS (Brief Interview for Mental Status) Summary Score: 15." Indicating 126's mental status as cognitively intact.</p> <p>R163's (Active Order As Of: 09/12/2023) Order Summary Report documented, in part "Diagnoses: (include but not limited to) heart failure, muscle wasting, and acute kidney failure."</p> <p>R163's (08/03/2023) Minimum Data Set documented, in part "Section C. Cognitive Patterns. C0500. BIMS (Brief Interview for Mental Status) Summary Score: 15." Indicating R163's mental status as cognitively intact.</p> <p>The (09/12/2023) email correspondence with V1 (Administrator) documented the facility do not have a policy for homelike environment.</p> <p>5) On 9/10/23 at 11:42 am, in the 2 South dining, surveyor observed a brown wooden chair with a maroon and green flowered cloth seat cover with the left chair arm detached from the frame of the back of the chair. The chair arm is hanging down towards the floor exposing a gray screw approximately one inch with the sharp end of the exposed screw is pointing outwards.</p> <p>On 9/11/23 at 10:07 am, in the 2 South dining, surveyor observed the same chair with the chair arm hanging down exposing a gray screw approximately one inch with the sharp end of the exposed screw is pointing outwards.</p>	S9999		

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S9999	<p>Continued From page 14</p> <p>On 9/11/23 at 12:22 pm, surveyor and V21 (Maintenance Director) performed a brief environmental tour and walked into the 2 South dining room. Surveyor and V21 observed the same chair with the chair arm hanging down exposing a gray screw approximately one inch with the sharp end of the exposed screw pointing outwards. V21 stated, "Oh, I (V21) will get rid of this (the chair)." V21 stated that staff will tell V21 when furniture is broken and that V21 will get rid of this chair. When asked if V21 was made aware by staff of this broken chair with the exposed nail, V21 stated, "No." When asked if this chair in the 2 South dining room is a hazard for residents on 2 South floor, V21 stated, "Yes. That screw. There's a risk of injury from the screw."</p> <p>On 9/12/23 at 12:37 pm, V2 (Director of Nursing, DON) stated that if nursing staff would see a broken chair in the dining room with a one inch nail sticking out of the chair, what should they do, and V2 stated that the staff should remove the chair immediately from the resident area. When asked why, V2 stated, "Because it could cause injury."</p> <p>Facility document from the maintenance binder located at the 2 South nurse's station documents, in part, from 8/1/23 to 9/10/23, no entry of this damaged chair noted.</p> <p>6) On 9/11/2023 at 10:05 am, surveyor observed an electrical plate covering hanging off the wall behind R64's head of bed.</p> <p>On 9/11/2023 at 10:30 am, surveyor observed the electrical outlet plate cover missing from the wall behind R112's head of bed.</p>	S9999		
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S9999	<p>Continued From page 15</p> <p>On 9/12/2023 at 10:41am, V21(Maintenance Director) observed the electrical plate detached from the wall behind the head of R64's bed. V21 stated maintenance is responsible for replacing the plates. V21 stated, "I have not received a work order for this."</p> <p>On 9/12/2023 at 10:43 am, V21(Maintenance Director) observed the missing electrical outlet plate on the wall behind the head of R112's bed. V21 stated that having the outlet plate cover off the electrical outlet does pose a safety risk for the residents and staff.</p> <p>7) On 9/10/2023 at 12:30 pm, surveyor observed the electrical outlet just above R9's bed missing an outlet cover. R9 stated that this is dangerous, and it's been that way since he moved into this room.</p> <p>R9 has a diagnosis of but not limited to Atrial Fibrillation, Depression, Hypertension, and Systolic (Congestive) Heart Failure. R9's Brief Interview of Mental Status score is 13 that indicates cognitive intactness.</p> <p>On 9/11/2023 at 11:03 am, V21 (Maintenance Director) stated that a missing outlet cover is not safe, and it is not homelike.</p> <p>On 9/13/2023 at 10:46 am, via email, V2 (Director of Nursing, DON) stated the nurse is to first assess the safety of the resident and remove them, if necessary and notify maintenance verbally as well as complete a work order and notify administration.</p> <p>8) On 9/10/23 at 11:56 am, R165 stated that R165 cannot use R165's call light because it does not work. R165 stated, "I told them (staff) about it."</p>	S9999		



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S9999	<p>Continued From page 16</p> <p>It don't work." R165 pressed the call light button, and no green button was activated on the call light panel in R165's room. Surveyor pressed R165's call light button, and no green light was activated on the call light panel in R165's room. Surveyor then looked outside of R165's room and did not see the call light bulb lighting up above R165's door in the hallway. Surveyor reentered R165's room. R165 stated, "I been told them this (R165's call light not functioning)." When asked how R165 gets help when in the bed in the room if R165 needs staff assistance, R165 stated, "I call out because it (call light) don't work."</p> <p>R165's Admission Record documents, in part, diagnoses of hemiplegia affecting the left dominant side, idiopathic peripheral autonomic neuropathy, hypertension, dysphagia, difficulty in walking, cognitive communication deficit, lack of coordination, contracture left knee and muscle wasting and atrophy.</p> <p>R165's Minimum Data Set (MDS), dated 8/12/23, documents, in part, a Brief Interview for Mental Status (BIMS) score of 12 which indicates that R165 has moderate cognitive impairment.</p> <p>R165's Care Plan, dated 5/30/23, documents, in part, that R165 has an alteration in musculoskeletal status related to diagnoses of muscle wasting and atrophy, left knee contracture, difficulty walking and lack of coordination with an intervention of "Anticipate and meet needs. Be sure call light is within reach and promptly respond to all requests for assistance."</p> <p>Facility document from the maintenance binder located at the nurse's station on R165's unit documents, in part, from 8/1/23 to 9/10/23, no</p>	S9999		

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S9999	<p>Continued From page 17</p> <p>entry for R165's call light not functioning properly.</p> <p>On 9/10/23 at 12:41 pm, this surveyor requested to V8 (Licensed Practical Nurse, LPN) that V21 (Maintenance Director) be called to come to check R165's call light. V21 did not come to R165's floor.</p> <p>On 9/10/23 at 1:56 pm, when asked about available maintenance staff being present in facility, V1 (Administrator) stated that V21 is out of the facility and will return later today.</p> <p>On 9/11/23 at 12:22 pm, surveyor and V21 (Maintenance Director) performed a brief environmental tour and went to R165's room. When asked about V21 being informed of R165's call light not working, V21 stated that the floor nurse notified V21 yesterday (9/10/23) and that it was the first time that V21 was made aware it. V21 said that the floor nurse switched out the call light cord and, then it worked. Surveyor informed V21 of R165's and surveyor's attempts of pushing the call light button without it being activated outside the room for staff assistance on 9/10/23. V21 stated, "With this particular call light button, it can malfunction with each drop to the floor, or the prongs can be pulled out at the wall." V21 stated that V21 gets notified of repairs need by "word of mouth" and can "only handle what I can handle." Surveyor and V21 viewed the maintenance logbook at R165's nurse's station with the entry on 9/11/23 of "call light system malfunction." When asked about this call light system malfunction entry, V21 stated that there is a "gait way failure" with the call light system, is an ongoing issue and that call light system company has been made aware. When asked how often V21 checks the floors' maintenance logbooks, V21 stated, "When I can." V21 stated, "It's a lot of</p>	S9999		
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S9999	<p>Continued From page 18</p> <p>work when I am by myself" to cover all the floors maintenance needs.</p> <p>9) On 09/10/23 at 12:39 pm, R126's call device was located at the right side of R126's bed. R126 stated it doesn't work for a month now. R126's pressed the call light. Surveyor checked the overhead call device indicator outside of R126 room. The indicator was not lit.</p> <p>On 09/10/23 12:51 pm, V12 (Certified Nursing Assistant) stated when the resident pressed the call light, the green light on the call light switch should be lit if it is working. It is not lit. (R126)'s call light is not working.</p> <p>On 09/11/2023 at 11:42am, V2 (Director of Nursing) stated residents should have a working call light so they can call for assistance, and so we can address their need.</p> <p>On 09/11/2023 at 3:16pm, V21 (Maintenance Director) checked R126's call device. V21 stated it is not working. It is a gateway failure.</p> <p>On 09/11/2023 at 3:19pm, V21 showed surveyor the master access point and power supply of all the call device throughout the building. V21 stated it is managed and serviced by N***S (call light system company). They are supposed to come here 2 times a week or as needed. N***s (call light system company) is not coming here since the change of ownership, and the new owner is still negotiating with N***S (call light system company), still working on the contract.</p> <p>On 09/11/2023 at 3:23pm, surveyor showed V21 the maintenance log sheet. V21 stated that it is a N***S (call light system company) issue. It means the issue of (R126)'s call light was noted on</p>	S9999		
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S9999	<p>Continued From page 19</p> <p>08/02/2023, and the issue was not resolved up to this time.</p> <p>R126's (Active Order As Of: 09/12/2023) Order Summary Report documented, in part "Diagnoses: (include but not limited to) muscle wasting, hypertension, and adult failure to thrive."</p> <p>R126's (06/16/2023) Minimum Data Set documented, in part "Section C. Cognitive Patterns. C0500. BIMS (Brief Interview for Mental Status) Summary Score: 15." Indicating 126's mental status as cognitively intact.</p> <p>The (undated) 2North Maintenance Log documented that R126 call device was noted not working on 8/2/23.</p> <p>10) On 9/12/23 at 2:14 pm, V21 stated that it's not every room with the call light malfunctions and that it somehow affects the phone system too on the 2nd floor units. V21 stated that it's "in (call light system company's) hands" because if V21 does any repair on the wiring of the call light system, then the "(call light system company's) contract is void." When asked the last time that the call light system company has come to check the call light system in the facility, V21 stated that it's been a while, and that V21 has to get approval from the facility's new corporate department to have the call light system company come on-site to check the call light system.</p> <p>Facility document from the maintenance binder located at 2 South, documents, in part, an entry on 9/11/23 for "Call Light System Malfunction" with the "date completed" line empty.</p> <p>11) On 9/12/23 at 2:21 pm, surveyor and V21 observed in 2 South Bath/Shower room the back</p>	S9999		

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S9999	<p>Continued From page 20</p> <p>of the sink disconnected from the wall approximately 3 inches and leaning down and away from the wall. When ask what this is, V21 stated that it's mounted on a bracket in the wall and that the residents are trying to stand up from a wheelchair position and are using the sink itself to push themselves up to a standing position to see in the mirror. When asked if this is a safety issue for residents with the sink not bolted completely to the wall, V21 said, "Yes, but it can be put back." V21 then lifted the sink up higher on the bracket to be approximately 1/2 inch away from wall and that V21 would caulk the 1/2 inch gap.</p> <p>12) On 9/10/2023 at 8:31am, surveyor observed the lid to one of the garbage dumpsters open from overflowing garbage bags.</p> <p>On 9/10/2023 at about 9:30am, surveyor observed the lid to one of the garbage dumpsters open from overflowing garbage bags.</p> <p>On 9/13/2023 at 10:43am, via email V21 (Maintenance Director) stated the dumpster lids should be closed when not in use to prevent and deter rodent activity. Housekeeping is responsible for ensuring the dumpster lids are closed after use.</p> <p>13) On 9/10/2023 at 9:50 am, surveyor observed a wet bath blanket on the floor in front of the ice machine in the kitchen. V7 stated that the ice machine makes ice very slowly, but it is leaking or something.</p> <p>On 9/11/2023 at 10:04 am, surveyor observed 4 bath blankets covering the floor drains in the food preparation area of the kitchen that were completely soaked with a water and water pooling</p>	S9999		

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S9999	<p>Continued From page 21 in the area.</p> <p>On 9/11/2023 at 10:05am V33 (Dietary Aide) stated that the water backs up in the drains and spills out onto the floor and that when the sinks are turned on the water backs up in the drains in the backs up into the kitchen.</p> <p>On 9/11/2023 at 11:41am, V6 (Dietary Manager) stated that the drains have been leaking for over a month, and management has been made aware and nothing has been done about it yet.</p> <p>On 9/12/2023 at 2:25pm, V34 (Dietary Aide/Cook) stated that the water keeps backing up in the drains has been a problem for the last two years.</p> <p>On 9/12/2023 at 2:30pm V6 stated that the water coming up from the drains is definitely a hazard and safety issue.</p> <p>On 9/13/2023 at 10:43 am, via email V21 (Maintenance Director) stated that water pooling in the kitchen increases the chances of staff slipping (safety) and the presence of airborne insects.</p> <p>Facility policy titled Waste Management with a date of 5/14 documents, in part, to prevent the spread of infection, dumpster lid kept closed and maintenance and housekeeping personnel shall assure the dumpster area is kept clean and all trash bags are inside the dumpster, and dumpster lids closed.</p> <p>Facility policy dated March 2015 and titled "Supervision and Safety," documents, in part, "Policy: Our Policy strives to make the environment as free from hazards as possible. Resident safety and supervision are facility-wide</p>	S9999		

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S9999	<p>Continued From page 22</p> <p>priorities ... 2. Safety risks and environmental hazards are identified on an ongoing basis ... 9. Staff to decrease safety risk factors as much as possible."</p> <p>The (9/19) Call Light Policy and Procedure documented, in part "Purpose: To respond to residents' request and needs in a timely and courteous manner ... Equipment: Functioning Nurse Call System."</p> <p>Facility policy dated November 2018 and titled "Residents' Rights for People in Long-Term Care Facilities," documents, in part, " ... Your facility must be safe, clean, comfortable and homelike."</p> <p>Environmental Services Schedule (undated) documents, in part, to report all fire and electrical hazards, (i.e., exposed wires, broken receptacles, etc.) and to report any leaking drains.</p> <p>Facility undated job description titled "Job Description of Maintenance Supervisor," documents, in part, "Purpose: The primary purpose of your job position is to direct the overall operation of the maintenance department in accordance with current applicable federal, state and local requirements, and as directed by the Administrator, to assure that a successful maintenance program is maintained at all times. Responsibilities: 1. Assist in the planning, developing, organizing, implementing, evaluation and directing of the maintenance department (Included department policies, procedures, job descriptions, etc. (and other things). 2. Assist in the development and implementation of departmental policies and procedures to assure that the maintenance of the premises, facility and equipment is current and all times. 3. Develop and maintain a good working rapport with</p>	S9999		

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S9999	<p>Continued From page 23</p> <p>inter-department personnel in other departments of the facility, to assure that maintenance programs can be properly planned and maintained to meet the needs of the facility. 4. Assure that the plant and equipment is properly maintained for resident comfort and convenience. 5. Supervises/monitors work department supervisors/personnel to ensure compliance of directives and established procedures ... 9. Ensure that resident's rights to ... privacy, property ... are well established and followed by all department personnel. 10. Perform administrative requirements, such as completing necessary forms, reports, etc., and submitting such to the Administrator as required ... 13. Implement written policies that will effectively maintain equipment and supplies for the facility ... 15. Inspect the facility, on a regular basis, to ensure that the grounds, facility and equipment are maintained in accordance with established policies and procedures and all hazardous areas are properly identified ... 17. Establish an effective preventative maintenance program for cleaning, painting, maintaining facility equipment, etc., as necessary/approved ... 34. Ensure outside services are properly completed/supervised in accordance with contracts/work orders."</p> <p>Facility job description titled "Job Description of Housekeeping Supervisor" (undated), documents, in part: "Purpose: The primary purpose of your job position is to direct the overall operation of the Housekeeping Department in accordance with current applicable federal, state, and local requirements, and as directed by the Administrator to assure that the highest degree of cleanliness and sanitation is maintained at all times ... 4. Assure that the facility is maintained in a clean and safe manner for resident comfort and</p>	S9999		



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S9999	<p>Continued From page 24</p> <p>convenience by assuring that necessary equipment and supplies are maintained/operable to perform such duties/services. 15. Inspect the facility, on a daily basis, to ensure that cleanliness and sanitary standards are maintained at all times."</p> <p>(B)</p> <p>4 of 4</p> <p>300.2230a)1)2)A)B)</p> <p>Section 300.2230 Laundry Services</p> <p>a) Every facility shall have an effective means of supplying an adequate amount of clean linen for operation, either through an in-house laundry or a contract with an outside service.</p> <p>1) An adequate supply of clean linen shall be defined as the three sets of sheets, draw sheets, and pillowcases required to provide for the residents' needs. Additional changes of linen may be required in consideration of the time involved for laundering and transporting soiled linens.</p> <p>2) If an in-house laundry service is provided then the following conditions shall exist:</p> <p>A) The laundry area shall be maintained and operated in a clean, safe and sanitary manner. No part of the laundry shall be used as a smoking or dining area.</p> <p>B) Written operating procedures shall be developed, posted and implemented which provide for the handling, transport and storage of clean and soiled linens.</p>	S9999		

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S9999	<p>Continued From page 25</p> <p>These Requirements were NOT MET as evidenced by:</p> <p>Based on observation, interview and record review, the facility failed to provide an adequate supply of linens for residents' beds which affected R19, R31, R49 and R132 and has the potential to affect all 215 residents in the facility.</p> <p>Findings include:</p> <p>On 09/10/23 at 11:07 am, surveyor toured the facility's third floor south unit and observed R19, R31, R49 and R132 beds without a pillow or linen on the residents' beds. Surveyor then observed two linen carts on the third-floor south unit without linen. Surveyor inspected the third-floor linen room and observed two blankets, no pillows, no pillowcases, no flat sheets or fitted sheet in the linen closet.</p> <p>On 09/10/23 at 12:52 pm, surveyor brought this observation to V45 (Certified Nursing Assistant, CNA) and V45 stated, "There is not enough linen in the building. We (referring to the CNA's) ran out of linen."</p> <p>On 09/10/23 at 1:14 pm, surveyor questioned V45 (CNA) regarding linen in the facility and V45 stated, "I (V45) ran out of linen so I (V45) could not make the resident bed. When V45 was asked how often does V45 not have linen to make residents beds V45 stated, "Every day." V45 stated that V45 went to the laundry room and the laundry room on 09/10/23 around 10:00 am and did not have linen for V45 to make all the residents' beds on the third-floor south unit.</p>	S9999		
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S9999	<p>Continued From page 26</p> <p>On 09/10/23 at 1:17 pm, surveyor questioned V47 (CNA) regarding linen in the facility and V47 stated, "I (V47) ran out of linen so I (V47) could not make all the residents bed. When V47 was asked how often does V47 not have linen to make residents beds V47 stated, "Every day." V47 stated that the CNA's have a problem with receiving enough linen to make residents beds every day in the facility.</p> <p>On 09/10/23 at 1:18 pm, surveyor questioned V46 (CNA) regarding linen in the facility and V46 stated, "There is no linen. We (referring to CNA's) ran out of linen. I (V46) went to the laundry room and there is no linen. I (V46) made the residents beds with what linen I (V46) had."</p> <p>On 09/12/23 at 10:19 am, V2 (Director of Nursing, DON) stated that the CNA's are responsible for making the residents beds every day in the facility. V2 explained that if a resident does not have linen on the bed, it is not a homelike environment for the resident. V2 also explained that the housekeeping department is responsible for providing linen to the staff. V2 stated that the housekeeping department brings linens to units once a shift for staff. When V2 was asked if there is enough linen for the residents' beds, V2 stated that the staff complain regarding not having enough linen and V2 has taken this concern to V39 (Housekeeping Director).</p> <p>On 09/12/23 at 11:31 am, V39 (Housekeeping Director) stated V39 has worked at the facility for about two weeks. When V39 was asked regarding linen for the facility V39 stated, "There is not enough linen in the facility to make all the residents' beds. The company give us what they think we deserve. The CNAs don't drop the linen so we can wash the linen. What is taken up to the</p>	S9999		
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S9999	<p>Continued From page 27</p> <p>floors we (referring to the housekeeping department) don't get back." When V39 was asked regarding how often linen is taken to the units V39 stated that linen is brought to the units once a shift. V39 also stated that CNAs at the facility complain about not having enough linen to make the residents beds daily. When V39 was asked regarding the importance of the resident having linen for the residents' beds, V39 stated that it is very important.</p> <p>On 09/12/23 at 11:38 am, surveyor and V39 inspected the facility laundry room and observed 13 flat sheets, 10 fitted sheets, 3 pillowcases, and 9 bath blankets in the laundry room. V39 stated, "This is all the linen we have right now until the Certified Nursing Assistants, (CNA's) drop more linen to be washed." V39 stated that the facility is challenged with linen on Monday, Wednesday, and Friday when the laundry department has to send 20 sheets and 20 blankets to the dialysis unit. V39 stated that V39 ordered linen for the facility one week ago and the linen that was received was not enough linen for the residents in the facility.</p> <p>R19's Minimum Data Set (MDS), dated 05/22/23, documents, in part, a Brief Interview of Mental Status (BIMS) score of 14 which indicates that R19 is cognitively intact.</p> <p>R19's face sheet show that R19 has a diagnosis which includes but not limited to cardiomegaly, Parkinson's, and schizophrenia.</p> <p>R31's Minimum Data Set (MDS), dated 7/17/23, documents, in part, a Brief Interview of Mental Status (BIMS) score of 03 which indicates that R31 is cognitively impaired.</p>	S9999		

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S9999	<p>Continued From page 28</p> <p>R31's face sheet show that R31 has a diagnosis which includes but not limited to lack of coordination, history of falling and diabetes 2 without complication.</p> <p>R49's Minimum Data Set (MDS), dated 8/12/23, documents, in part, a Brief Interview of Mental Status (BIMS) score of 10 which indicates that R49 has a moderate cognitive impairment.</p> <p>R49's face sheet show that R49 has a diagnosis which includes but not limited to essential hypertension, chronic kidney disease, and cerebellar ataxia.</p> <p>R132's Minimum Data Set (MDS), dated 07/10/23, documents, in part, a Brief Interview of Mental Status (BIMS) score of 04 which indicates that R132 is cognitively impaired.</p> <p>R132's face sheet show that R132 has a diagnosis which includes but not limited to cirrhosis of the liver, alcohol abuse and latent syphilis.</p> <p>The facility's job description titled "Job description of Housekeeping Supervisor" documents, in part: "Purpose: The primary purpose of your job position is to direct the overall operation of the Housekeeping Department in accordance with current applicable federal, state, and local requirements, and as directed by the Administrator to assure that the highest degree of cleanliness and sanitation is maintained at all times ... 4. Assure that the facility is maintained in a clean and safe manner for resident comfort and convenience by assuring that necessary equipment and supplies are maintained/operable to perform such duties/services. 15. Inspect the facility, on a daily basis, to ensure that cleanliness</p>	S9999		

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S9999	<p>Continued From page 29</p> <p>and sanitary standards are maintained at all times ... 19. Requisition, control and maintain adequate level of required housekeeping supplies and equipment."</p> <p>On 9/11/23 at 11:12 am, V50 (MDS {Minimum Data Service} Coordinator) confirmed that the facility census of active residents on 9/10/23 at 9:10 am is 215 residents.</p> <p>(C)</p>	S9999		