STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	IL6014401	A. BUILDING: _____ B. WING _____	C 07/09/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
LA BELLA OF EDWARDSVILLE	6277 CENTER GROVE ROAD EDWARDSVILLE, IL 62025

(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
S 000	Initial Comments Complaint Investigation 2445122/IL175000	S 000		
S9999	Final Observations Statement of Licensure Violations 300.610a) 300.1210a) 300.1210b) 300.1210d)5) Section 300.610 Resident Care Policies 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 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. Section 300.1210 General Requirements for Nursing and Personal Care a) Comprehensive Resident Care Plan. A facility, with the participation of the resident and the resident's guardian or representative, as applicable, must develop and implement a comprehensive care plan for each resident that	S9999		

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S9999	Continued From page 1 includes measurable objectives and timetables to meet the resident's medical, nursing, and mental and psychosocial needs that are identified in the resident's comprehensive assessment, which allow the resident to attain or maintain the highest practicable level of independent functioning, and provide for discharge planning to the least restrictive setting based on the resident's care needs. The assessment shall be developed with the active participation of the resident and the resident's guardian or representative, as applicable. (Section 3-202.2a of the Act) 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. 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: 5) A regular program to prevent and treat pressure sores, heat rashes or other skin breakdown shall be practiced on a 24-hour, seven-day-a-week basis so that a resident who enters the facility without pressure sores does not develop pressure sores unless the individual's clinical condition demonstrates that the pressure sores were unavoidable. A resident having pressure sores shall receive treatment and services to promote healing, prevent infection, and prevent new pressure sores from developing.	S9999		

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S9999	Continued From page 2 These requirements were not met as evidenced by: Based on observation, interview and record review, the facility failed to provide timely and complete incontinence care for 1 of 3 (R4) residents reviewed for improper nursing care. This failure resulted in R4 feeling sad, and unsafe in the facility and experiencing pain to buttocks during incontinent care and obtaining open areas. Findings include: R4's Care Plan, dated 4/30/21, documents (R4) has bowel incontinence cognitive status. It continues, Provide pericare after each incontinent episode, Check resident Q (every) 2-3 hrs (hours) and PRN (as needed) for incontinent episodes. It also documents 4/27/24 (R4) has urinary incontinence. It continues, Provide incontinent/peri-care PRN, Check every 2-3 hours and/or as required for incontinence. Provide incontinent care as needed. R4's Minimum Data Set, dated 4/13/2024, documents that R4 is cognitively intact, occasionally incontinent of urine and always incontinent of bowel. It also documents that R4 is dependent on staff for toileting. R4's Progress note, dated 7/2/2024 at 3:27 PM, documents "Health Status Note, Note Text: Noted open sheared areas to right gluteal fold and to back of left thigh. incontinent care provided and skin protected cream applied. (V10) notified and guest requested to notify son because unable to contact daughter." On 7/20/2024 at approximately 11:24 AM, observed R4 lying in bed on her back, in her	S9999		

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S9999	Continued From page 3	S9999		

room. A strong foul-smelling odor in room. R4's top sheet was wet and soiled with a brown stain. Observed brown liquid dripping onto the floor. R4 stated that she needed to be changed and had been waiting since 7pm last night. R4 then pressed the call light button. V11, Certified Nurses Assistant (CNA), answered the call light. V11 pulled back the top sheet and covered R4 up and left the room. At 11:29 AM, V11 and V13, CNA, returned to R4's room with supplies. V11 pulled back the urine and stool-soaked top sheet revealing a heavily soiled and soaked incontinent brief. R4 was lying on top of a fitted sheet, a draw sheet and an incontinent pad. R4 was soaked through each layer of linen. R4's fitted sheet was soaked and had a large brown ring ranging from the back of R4's knees up to the back of R4's neck. V11 then opened R4's incontinent brief and a large amount of soft stool observed covering R4's peri area and lower abdominal fold. V11 then cleansed R4's peri area and abdominal fold. R4 had facial grimacing and yelled out "it hurt" when being cleaned. V11 and V13 then turned R4 onto her left side that revealed a heavily soaked and saturated incontinent brief stuck to R4's back and buttocks. The incontinent pad, draw sheet and fitted sheet were heavily soaked through with urine and stool. V11 removed the incontinent brief and revealed a large amount of soft foul-smelling stool ranging from R4's buttocks up to the middle of R4's back. V11 then cleansed the stool from R4's buttocks. R4 yelling in pain with each wipe. V11 attempted to calm R4 and paused between wipes. V11 cleansed R4's buttocks and revealed multiple deep red and brown creases in R4 skin that did not fade during incontinent care, and multiple open areas were observed to R4's buttocks and thighs. R4 stated that it was painful when being cleaned.

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On 7/2/2024 at 11:24 AM, R4 stated that she does not feel safe at the facility and would feel better at home. When asked why does she say that? R4 responded that they leave you alone here. R4 stated that "They don't take care of me here. I have been dirty since 7pm last night. I have asked for help and no one helps. They say they will be back and don't come." R4 continued "I am alone here, my son works and is not able to take care of me at home. They think its better here but its not. It makes me sad, no one wants to help me."

On 7/2/2024 at 11:29 AM, V11 stated that this is unacceptable. V11 stated that (R4) should have been cleaned before now. V11 stated that she was not aware of (R4) having any open areas. V11 stated that (R4) is alert and able to verbalize her needs. V11 stated that she came in the room prior to this and (R4) was sleeping. V11 stated that they got (R4's) roommate up and then proceeded to the other residents. V11 stated that she was not aware that (R4) was in this condition. V11 stated that she prides herself on the care she gives and that this looks like (R4) had been like this for a long time.

On 7/3/2024 at approximately 8:28 AM, V12, Licensed Practical Nurse (LPN) stated that she was made aware of (R4's) condition on yesterday. V12 stated that it was unacceptable the condition (R4) was in. V12 stated that she expects the staff to perform incontinent care after each episode of incontinence. V12 stated that the (R4) should have been checked on and if (R4) notified someone that she was incontinent then she expects them to change her. V12 stated that (R4) is alert and tells the staff when she has become incontinent. V12 stated that after the incontinent care was completed she assessed

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S9999	Continued From page 5 (R4's) skin and applied some cream to it. V12 stated that the areas to (R4's) body are new. V12 stated that the physician and family were notified. V12 stated that (R4) has been changed and repositioned and cream has been applied to (R4's) skin. The facility's Perineal/Incontinent Care Standards and Guidelines, dated 10/24/22, documents Standard: It will be the standard of this facility to provide cleanliness and comfort to the resident, to prevent infections and skin irritation, and to observe the resident's skin condition and provide appropriate care and services required to maintain functional levels while providing perineal/incontinence care. It continues Guidelines: 4. Provide perineal/incontinence care In accordance with physician orders or resident's plan of care, while ensuring to maintain resident preferences as indicated and resident privacy/dignity. (B)	S9999		