STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	IL6012058	A. BUILDING: _____ B. WING _____	07/02/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
JOSHUA MANOR	120 WEST LOCUST STREET HOYLETON, IL 62803

(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
Z 000	COMMENTS Annual Licensure Survey	Z 000		
Z9999	FINDINGS Statement of Licensure Violations: 350.2010 a)1) 350.2010 a)5) 350.2010 a)8) 350.2020 a)1) 350.2020 a)3) 350.2020 d) Section 350.2010 Maintenance a) Every facility shall have an effective written plan for maintenance, including sufficient staff, appropriate equipment, and adequate supplies. Each facility shall: 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 windowpanes; and any other similar hazards. 5) Maintain all furniture and furnishings in a clean, attractive, and safely repaired condition. 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 to the inch and repair of any breaks in construction. Section 350.2020 Housekeeping a) Every facility shall have an effective plan for housekeeping including sufficient staff,	Z9999		

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Z9999	Continued From page 1	Z9999		

appropriate equipment, and adequate supplies. Each facility shall:

1) Keep the building in a clean, safe, and orderly condition. This includes all rooms, corridors, attics, basements, and storage areas.

3) Control odors within the housekeeping staff's areas of responsibility by effective cleaning procedures and by the proper use of ventilation systems. Deodorants shall not be used to cover up persistent odors caused by unsanitary conditions or poor housekeeping practices.

d) All cleaning compounds, insecticides, and all other potentially hazardous compounds or agents shall be stored in locked cabinets or rooms.

These requirements were not met as evidence by:

Based on observation, record review, and interview, the facility failed to ensure the building was clean, failed to ensure the building was in good repair, furniture and furnishings were in safe condition, and free from insects, impacting all 13 individuals at the facility (R1-R13).

Findings include:

Facility roster, undated, identifies 13 individuals reside at the facility.

1. On 6/25/24 at 9:30 a.m. R5's bed was observed with blood and feces smeared on his sheets.

On 6/25/ 24 at 9:39 a.m. in the community shower room a black/green substance was observed in the joints of the shower room paneling, orange rings observed on the shower bench, and hair in the drain.

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Z9999	Continued From page 2 On 6/25/24 at 9:41 a.m. dead bugs were observed in the corner of the hallway floor. On 6/25/24 at 9:48 a.m. the biohazard room was observed unlocked and cleaning chemicals where present. On 6/25/24 at 9:53 a.m. R4's room had a very strong odor of urine coming from her bed. On 6/25/24 at 4:28 p.m. the biohazard room was observed unlocked and cleaning supplies where present: Glass cleaner with ammonia, toilet bowl cleaner, and other cleaning supplies. A sign was taped on the inside of the door stating, "Mop closet needs to be locked at all times." On 6/25/24 at 5:05 p.m. R5's bed was observed to have the same sheet that had blood and feces smeared on it. On 6/25/24 at 5:17 p.m. dead flies were observed in the floor behind the tv stand in the resident's common area. On 6/26/24 at 6:10 a.m. R5's bed was observed with blood and feces smeared on the same areas that was observed on 6/25/24. On 6/26/24 at 7:57 a.m. E1 Administrator verified the biohazard closet should not be unlocked. On 6/26/24 at 8:02 a.m. E1 Administrator confirmed the floors in the facility need to be cleaned better, the community shower room was dirty and that these issues should not occur. On 6/26/24 at 8:10 a.m. E1 Administrator confirmed there should not be dead bugs or flies in the floor.	Z9999		

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Z9999	Continued From page 3 Housekeeping policy dated October 2022, states, "The staff will ensure that all housekeeping supplies are stored properly and in a locked area." "All common and personal areas are clean and free from offensive odors." 2. On 6/25/24 at 9:34 a.m. a bathroom that is shared by R11/R12 and R5/R12 was observed with missing tile next to the toilet and missing trim pieces in the bathroom. A vanity light was exposed with no protective covering. R11's personal box fan had no protective covering exposing the plastic fan blades. On 6/25/24 at 9:44 a.m. a cabinet in the laundry room was observed with one door off the hinge, when opened the door hung down. On 6/25/24 at 4:42 p.m. R12's wheelchair was observed with ripped/tore arm pads. On 6/25/24 at 5:50 p.m. the front door of the facility was observed not closed all the way. The front door does not close automatically all the way. On 6/26/24 at 7:34 a.m. R12's wheelchair was observed with ripped/tore arm pads. On 6/26/24 at 8:02 a.m. E1 Administrator stated there should be tile in the floor next to the toilet and there should be trim pieces on the wall in the bathroom. On 6/28/24 at 10:48 a.m. E1 Administrator stated R12's wheelchair arm pads should not be ripped or torn. (B)	Z9999		

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