

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>IL6005474</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>05/15/2025</b>
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NAME OF PROVIDER OR SUPPLIER  <b>BRIA OF BELLEVILLE</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>150 NORTH 27TH STREET BELLEVILLE, IL 62226</b>
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S 000	Initial Comments  Annual Licensure Survey	S 000		
S9999	Final Observations  Statement of Licensure Violations:  1 of 3  300.610a) 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  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	S9999		

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

TITLE

(X6) DATE  
06/03/25

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S9999	<p>Continued From page 1</p> <p>resident to meet the total nursing and personal care needs of the resident.</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>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.</p> <p>These requirements are not meet as evidenced by:</p> <p>Based on observation, interview, and record review, the facility failed to turn and reposition 1 (R14) of 8 residents investigated for pressure ulcers in the sample of 38. This failure resulted in R14 having re-opened pressure ulcers and new in house acquired pressure ulcers.</p> <p>Findings include:</p> <p>R14's Facesheet documents an admission date of 6/23/2024. Diagnosis include Syringomyelia and Syringobulbia, Ulcerative Colitis, Chronic Embolism, Crohn's Disease, Dorsalgia.</p> <p>R14's Minimum Data Set, MDS, dated 3/24/2025 documents R14 has no cognitive deficits. R14 is dependent for mobility and transfers.</p>	S9999		

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S9999	<p>Continued From page 2</p> <p>R14's care plan with a revision date of 2/10/2025 documents R14 SKIN: R14 has developed a stage III pressure wound to his right back. Interventions include Assist and encourage resident to turn and reposition every one to two hours and PRN. Ensure proper body alignment.</p> <p>R14's Admission Nursing Assessment dated 7/26/2024 documents R14's skin intact. No wounds documented.</p> <p>R14's progress notes dated 11/7/2024 at 1:08PM documents V19 (Wound Care Nurse Practitioner) present to assess right buttock with area having a stage II pressure wound with new order of cleanse right buttock with wound cleanser then apply collagen hydrogel mixed with collagen particles to wound bed and cover with calcium alginate then cover with dry dressing daily.</p> <p>R14's progress notes dated 2/10/2025 at 11:53AM Writer summoned to R14's room by CNA. Upon assessment, observed that R14 has developed an unstageable wound to his right back and an abrasion to his right buttock. Call placed to V19 with new orders of cleanse areas with wound cleanser then apply medi-honey to wound bed cover with calcium alginate and silicone bordered super absorbent dressing daily. R14 notified.</p> <p>R14's progress notes dated 4/2/2025 at 8:10AM documents V14 (Registered Nurse) was present to assess wound with no new orders yet did observe a re-opened stage III pressure wound to right buttock with new order of cleanse right buttock wound with wound cleanser then apply collagen hydrogel mixed with collagen particles then apply to wound bed cover with silicone</p>	S9999		

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S9999	<p>Continued From page 3</p> <p>boarded super absorbent dressing daily. R14 notified.</p> <p>R14's progress notes dated 5/6/2025 at 2:52PM documents V19 present to assess wound with new order of SSD cream to treatment. R14 notified.</p> <p>R14's Skin and Wound Evaluation dated 11/29/2024 documents pressure wound to right gluteal, unstageable, in house acquired. Exact date of discovery 11/7/2024. Slow to heal.</p> <p>R14's Skin and Wound Evaluation dated 3/6/2025 documents new stage 3 pressure ulcer to right gluteal. In house acquired. Exact date of discovery 2/10/2025.</p> <p>R14's Skin and Wound Evaluation dated 4/17/2025 documents new stage 3 pressure ulcer to right gluteal. In house acquired. Exact date of discovery 4/1/2025.</p> <p>R14's Skin and Wound Evaluation dated 5/13/2025 documents stage 3 pressure ulcer right lower back. In house acquired. Exact date of discovery 2/10/2025.</p> <p>On 5/14/2025 at 11:00AM R14 stated I am never turned or pulled up. I have been like this all morning. My care is poor. I haven't been up in a chair in months. I am afraid to get up because I am afraid, they will not put me back to bed and I will be stuck there in pain. My sore on my back was bleeding a lot last night.</p> <p>On 5/14/2025 at 1:55PM V9, Wound Nurse, provided wound care to R14 with assist of V21, Licensed Practical Nurse, LPN. R14's wound draining dark brown fluid and bright red fluid on</p>	S9999		

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S9999	<p>Continued From page 4</p> <p>bandage and on gauze used to clean wound. R14 in same position he was in at 11:00AM and was incontinent at this time.</p> <p>V9 stated R14 refuses a pressure reducing mattress. He can turn himself a little. His wound is healing slowly. The staff try to get him to turn.</p> <p>Facility policy with a revision date of 9/2023 states "To prevent or reduce the incident of pressure injuries, standards of practice should be implemented. A pressure injury may be defined as any lesions cause by unrelieved pressure that results in damage to the underlying tissue. Although friction and shear are not primary causes of pressure injuries friction and shear are important contributing factors to the development of pressure injuries.</p> <p>(B)</p> <p>2 of 3</p> <p>300.610a) 300.1210b) 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 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</p>	S9999		

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S9999	<p>Continued From page 5</p> <p>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>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 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 are not meet as evidenced by:</p> <p>Based on observation, interview, and record review the facility failed to follow and implement progressive interventions and perform appropriate supervision to prevent falls for 1 (R24) of 6 residents in the sample of 38. This failure resulted R24 falling and R24 sustaining a fracture.</p> <p>Findings include:</p>	S9999		

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S9999	<p>Continued From page 6</p> <p>R24's Face sheet documents an admission date of 2/7/2024. Diagnosis include Metabolic Encephalopathy, Adult Hypertrophic Pyloric Stenosis, Hypertension, Radiculopathy.</p> <p>R24's Minimum Data Set, MDS, dated 3/31/2025 documents R24 is severely cognitively impaired. R24 requires partial to moderate assist with mobility and transfers. R24's mode of transportation is walker and/or wheelchair.</p> <p>R24's care plan updated 3/28/2025 documents Fall: R24 is at risk for falls Cognitive deficits, Functional Deficits, History of Falls, Poor Balance. Interventions include: 1/10/25 prompt or assist for change in position, toileting, offer fluids, and ensure R24 is warm and dry. Encourage staff to anticipate needs. 6/28/24 Educate R24 to use the call light and wait for staff assist to walk to the bathroom. Fall risk assessment quarterly and as needed.</p> <p>R24's admission fall risk assessments dated 6/28/2024 documents R24 is at high risk for falls.</p> <p>R24's progress notes dated 6/28/2024 at 8:02PM document R24 was found in R24's bathroom on the floor at 7:11pm. This nurse and night nurse with CNA helped R24 up from floor to toilet. R24 had bowel movement. R24 stated " I need to go to the bathroom" this nurse asked what is hurting, R24 pointed to left side of head. R24 noted with red water left eye. this nurse contacted V28 (Physician) over telehealth, V28 recommended this nurse to ask family if they want R24 to be monitored. Contacted V27 (Family). V27 requested for bed alarms and for R24 to be closer to nurse's station. This nurse voiced concerns to V2 (Director of Nursing). Neuros</p>	S9999		

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S9999	<p>Continued From page 7</p> <p>started.</p> <p>R24's fall investigation dated 6/28/2024 at 7:38PM stated Interdisciplinary meeting to discuss fall from 6/28/2024. R24 alert and oriented x2-3. Brief Interview for Mental Status, BIMS, 00. R24 requires 1-2-person physical assist with ADLs and transfers. R24 is incontinent of bowel and bladder at times. RCA, root cause analysis: Attempted to self transfer to toilet and fell onto floor. All previous fall interventions in place adding reeducating R24 to call and await assistance. All parties agree with plan of care. Care Plan reviewed and updated.</p> <p>R24's progress notes dated 1/10/2025 at 6:22AM documents CNA came to this nurse stating that R24 was on the floor when she walked into R24's room to give R24 care and get R24 up for the day. This nurse assessed R24 and noted no open areas or any bleeding and R24 stated she was not in any pain. This nurse and CNA carefully got R24 up on the bed and after talking to R24 she stated she would like to get dressed and get into her chair. This nurse told CNA that R24 was able to get dressed and get into her chair. R24's family (V27), V1 (Administrator), V2, V3 (Assistant Director of Nursing), and V28 were notified.</p> <p>R24's progress notes dated 1/11/2025 at 9:48AM documents Continue monitoring related to fall. R24 x-ray of left hip came back new fracture of left inferior pubis ramus. Contacted V28. New order for outpatient ortho appointment related to fracture. Notified V27, V1, V2, V3.</p> <p>R24's 1/10/25's fall investigation dated 1/11/2025 at 6:22AM documents Root Cause Analysis, R24 got up to use the bathroom and R24 thought she should get up and get ready also. New inventions:</p>	S9999		



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S9999	<p>Continued From page 8</p> <p>Frequent rounding and prompt or assist R24 in position change, toileting, offer fluids and ensure R24 is warm or dry. Obtain labs to rule out acute change in condition. Neurology consults to monitor disease progression. Care plan updated as appropriate.</p> <p>R24's radiology report dated 1/10/2025 documents Fracture of the left inferior pubic ramus.</p> <p>On 5/14/2025 at 10:00AM R24 sitting at nurse's station. R24's room at end of the hall away from nurse's station.</p> <p>On 5/14/2025 at 2:00PM V20, Certified Nursing Assistant, CNA, assisted R24 from wheelchair to bed. R24 was not toileted prior to going to bed. R24 stated I wasn't working in January when R24 fell and hurt herself. She can stand but that's it. We try to have her at the nurse's desk during the day. She is in her room right now because she is ready for a nap.</p> <p>Facility policy with a revision date of 7/2024 states "This facility is committed to maximizing each resident's physical, mental, and psychosocial wellbeing. While preventing all falls is not possible, the facility will identify and evaluate those residents at risk for falls, plan for preventative strategies, and facilitate as safe an environment as possible. All residents' falls shall be reviewed, and the resident's existing plan of care shall be evaluated and modified as needed.</p> <p>(A)</p> <p>3 of 3</p> <p>300.661</p>	S9999		

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S9999	<p>Continued From page 9</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 is NOT MET as evidence by:</p> <p>Based on interview and record review, the facility failed to conduct pre-employment screening to determine if employees had a prior criminal history which would disqualify them for employment. This had the potential to affect all of the 108 residents living in the facility.</p> <p>Findings include:</p> <p>The Abuse Policy and Prevention Program, dated 10/2022, documents the following: Prior to a new employee starting a work schedule, the facility will not knowingly employ any individual convicted by a court of law of resident abuse, neglect, exploitation, mistreatment, or misappropriation of resident property. This facility will not knowingly employ any staff convicted of any of the crimes listed in the Illinois/Wisconsin Healthcare Worker Background Check Act or with findings of abuse, neglect, exploitation, mistreatment or misappropriation of resident property listed on the Illinois Healthcare Care Worker Registry. Prior to a new employee starting a work schedule, this facility will check the Illinois Healthcare Worker Registry on any individual being hired for prior reports of abuse, neglect, or misappropriation of resident property, previous fingerprint check results, and the offender website links on the Registry.</p>	S9999		

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S9999	<p>Continued From page 10</p> <p>On 5/14/25, three employee files were reviewed for pre-employment screening. The following was documented:</p> <p>V16, Certified Nurse's Assistant with a hire date of 4/18/25 and a start date of 4/24/25 did not have the Healthcare registry check completed and the offender website links were not completed until 5/13/25.</p> <p>V17, Dietary, with a start date of 5/1/25, did not have the Healthcare registry check completed and the offender website links were not completed until 5/13/25.</p> <p>V18, Dietary, with a start date of 5/1/25, did not have the Healthcare registry check completed and the offender website links were not completed until 5/13/25.</p> <p>On 5/14/25 at 02:18 PM V15, Human Resources Director, stated she just started in her position a month ago, she does all of the employee background checks, and they are supposed to be completed before they are hired.</p> <p>The Resident Census and Conditions of Residents, CMS (Centers for Medicaid and Medicare Services) form 671, dated 5/14/25, documents that the facility has 108 residents living in the facility.</p> <p>(C)</p>	S9999		