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S 000	Initial Comments Complaint Investigation 2045555/IL124833 2044923/IL124164 2046009/IL125320 2042266/IL121336 2045508/IL124762	S 000		
S9999	Final Observations Statement of Licensure Violations: 300.610a) 300.1210b)4) 300.1210d)4)B) 300.3240a) 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	S9999		

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S9999	Continued From page 1 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. 4)All nursing personnel shall assist and encourage residents so that a resident's abilities in activities of daily living do not diminish unless circumstances of the individual's clinical condition demonstrate that diminution was unavoidable. This includes the resident's abilities to bathe, dress, and groom; transfer and ambulate; toilet; eat; and use speech, language, or other functional communication systems. A resident who is unable to carry out activities of daily living shall receive the services necessary to maintain good nutrition, grooming, and personal hygiene. 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: 4)Personal care shall be provided on a 24-hour, seven-day-a-week basis. This shall include, but not be limited to, the following: B)Each resident shall have at least one complete bath and hair wash weekly and as many additional baths and hair washes as necessary for satisfactory personal hygiene. Section 300.3240 Abuse and Neglect a)An owner, licensee, administrator, employee or agent of a facility shall not abuse or neglect a resident. (Section 2-107 of the Act) These requirements were not met evidencded by:	S9999		

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Based on observation, interview, and record review, the facility failed to provide showers for 4 of 9 residents (R1, R2, R3, R4 & R5), reviewed for Activities of Daily (ADL), in a sample of 20. This failure resulted in Psycho-Social harm, including feelings of social isolation and humiliation to R1, R2, R3, and R5.

Findings Include:

1. Minimum Data Set (MDS), dated 8/9/2020, documents R2 having the following diagnoses: Rheumatoid Arthritis with factor of multiple sites, Hypertension, Congestive Heart Failure, Type 2 diabetes mellitus insulin dependent, Cardiomyopathy, unsteadiness on feet, muscle weakness, Major Depressive Disorder, Coronary Artery Disease, and Anxiety Disorder. R2's MDS further documents having intact cognition. The MDS also shows the following scores under Activity of Daily Living: Bathing self-performance 2 (physical help limited to transfer only), Bathing support provided 2 (one-person physical assist). Under functional limitations in range of motion: upper extremities 1 (impairment one side) and lower extremes 2 (impairment both sides).

R2 Care Plan with a start date of 8/9/2020 areas of focus show the following: "1. R2 is mostly independent with ADLs, requires set up supervision d/t (due to) generalized weakness, and pain. Interventions in part are: Assist (R2) with showers, (R2) upper body, needs assist with lower body and back. 2. The resident has an ADL self -care performance deficit r/t (related to) chronic respiratory failure, septic shock."

Facility shower schedule, from May to August reflect R2 is to receive showers on Mondays and

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Wednesdays, 2 times per week. Documentation in the Electronic Medical Record (EHR) failed to reflect these showers.

Facility's "Documentation Survey Report" documents R2 had the following showers May through August 2020:
May 2020: R2 had a shower on May 18, one shower for the month of May, R2 did not get seven showers in May.
June 2020: R2 had a shower on June 29, one shower for the month of June, R2 did not get 8 showers for the month of June.
July 2020: R2 had a shower on July 25th, 1 shower for the month of July, R2 did not get 8 showers for the month of July.
August 2020: R2 had a shower on August 1st, 10th and 17th and R2 advised they had gotten a shower on August 24th, R2 had 4 showers for the month of August, R2 did not get 4 showers for the month of August up to the time of the survey.

On 8/25/2020 at 12:52 p.m., R2 stated: "No, we don't get showers, we got one yesterday, but that was after we raised hell. The last time we had one before yesterday was 5 days, and then 8 days before that one. We are supposed to get 2 showers a week. We went 3 weeks without one at one point. They say they can't do them because they are short staffed. They get them hired and they work for a day or a week and then quit. It just isn't the CNAs they are short; it is all departments.", "There are no showers on this hall, we go to either E hall or B hall for showers, they are on the outside of both halls before you enter the hall doors."

On 8/26/2020, 11:52 a.m., R2 stated: "I feel disgusted and filthy when they don't get me showers. I feel like everybody can smell me. I get

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yeast infections in my stomach flaps when I don't get showers, it smells, and I feel like people can smell me. They finally got us showers this week, so it is healed up, I used a lotion and it cleared up the area."

2. R1's most recent MDS dated 8/05/2020, documents a Brief Interview for Mental Status (BIMS) of 14, indicating cognition intact. R1's MDS fails to reveal bathing assistance for R1 but reflects R1 requires extensive assistance for all other ADLS assist with a 1-person physical assistance.

EHR dated August 2020, documents R1 having a "Displaced spiral fracture of shaft right femur," The EHR further documents, R1 having Encephalopathy, Post-traumatic stress disorder, Bipolar Disorder, Type 2 Diabetes Mellitus, Hypertension, and Chronic Obstructive Pulmonary Disease.

R1's Care Plan dated 8/05/2020 documents the following focus areas: "(R1) has an ADL self-care performance deficit r/t (related to) displaced spiral fx of shaft of right femur with an intervention in place of Restorative CNA (Certified Nursing Assistant): Grooming Program: Wash face and hands, perform oral care, perform peri care, and comb hair with SBA (stand by assist)."

On 8/25/20, 1:15 p.m., R1 stated: "I should have called you guys earlier, but I didn't. I should have called you guys about me, but I didn't. I laid in bed for 4 days straight, it was a Thursday through Sunday. Monday my son finally called (V1/Administrator) and told (V1) to get me out of bed. I haven't had a shower in God knows how long and my hair hasn't been washed for over a

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month." R1's hair was observed to be unkempt, stuck to scalp and oily in appearance.

On 8/26/20, 12:00 p.m., R1 stated, "I still haven't had my hair washed, it's upsetting. This is a really bad time for this to be happening to me. I am trying to cope with things already in my life. My son that died at 11 years old, birthday would have been August 5, and the anniversary of his death is coming up on September 16th. I am depressed enough thinking about that without dealing with being depressed because I can't get showers, or my hair washed." R1's hair observed to be matted and oily in appearance.

Facility submitted only one shower schedule that was for May 6, which documents R1 was to receive a shower on that Wednesdays. Documentation in the Electronic Medical Records failed to reflect that shower.

Facility's "Documentation Survey Report" for R1 documents the following showers May through August 2020:
May 2020: R1 record shows R1 refused shower on May 8, no showers for R1 were noted for the month of May, R1 did not get seven showers in May.
June 2020: V1 advised there is no computer records of R1 getting a shower in June, R1 did not get 9 showers for the month of June.
July 2020: V1 advised there is no computer records of R1 getting a shower for the month of July, R1 did not get 9 showers for the month of July.
August 2020: R1 had a shower on August 28th, R1 had 1 shower for the month of August, R1 did not get 8 showers for the month of August up to through the time of the survey.

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3. Most recent MDS dated 7/20/2020, documents R5 having a BIMS of 15, indicating cognition intact. The MDS further documents, R5 is dependent on staff for bathing, with 2-person physical assistance.

Electronic Health Record (EHS) dated August 2020, documents R5 having the following diagnoses: Displaced fracture of 5th and 6th cervical vertebra, cellulitis right lower limb, Inflammatory reaction internal right knee prosthesis.

R5's care plan dated 7/20/2020 has the following 3 focus areas in part: A.(R5), has a self-care deficit R/T cervical fracture, has exertion with activity, and decreased ROM to BUE's. LUE is mostly flaccid, per resident it is the result of a previous fracture from being hit by a car in 2018; LUE is mostly moved by RUE with RUE noted with limited ROM. (R5) report difficulty donning/doffing clothing, requiring assist x1. (R5) is occasionally incontinent of urine, continent of bowel with assist x1 for BRP and incontinent care after each incontinent episode. (R5) is up ad lib with assist to wheelchair, uses rollator for transfers to and from wheelchair. Has occasional loss of balance, able to self-correct, hx of falls with orientation on use of call light. Intervention listed: Bathing/showering: Avoid scrubbing & pat dry sensitive skin.

B. (R5) has an ADL self-care performance deficit r/t fx of C5 & C6 H, intervention of: RESTORATIVE CNA: Grooming Program: Wash face and hands, perform oral care, and comb hair with SBA.

C. (R5) is at risk for skin issues, r/t inability to

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reposition self in bed or in chair, incontinence, and anti-depressant use. Intervention is part: Keep skin clean and dry, use lotion on dry skin.

On 8/25/20 at 11:27 a.m., R5 stated R5 had knee surgery recently and had been on the quarantine hall (B Hall) for 17 days. R5 stated: "The whole time I was there I didn't get shaved and only got one shower. I just got back to this hall."

8/26/20 11:58 a.m.; R5 stated: "When I was on the B hall there were days, they didn't even wipe me off, it was humiliating."

Facility shower schedule for R5 dated May through August of 2020, reflects R5 is to receive showers on Tuesdays and Thursdays, 2 times per week. Documentation in the Electronic Medical Records failed to reflect these showers.

Facility "Documentation Survey Report" for R5 had the following showers May through August 2020:
May 2020: R5 had a shower on May 12, one shower for the month of May, R5 did not get seven showers in May.
June 2020: R5 had a shower on June 5th & 16th, two showers for the month of June, R5 did not get 7 showers for the month of June.
July 2020: R5 had a shower on July 22nd, 1 shower for the month of July, R5 did not get 8 showers for the month of July.
August 2020: R5 had a shower on August 5th & 6th, 2 showers for the month of August, R5 did not get 5 showers in August at time of survey.

4. Electronic Health Record (EHR), dated August 2020, documents R4 has the following diagnosis:

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Cerebral infarction, dementia, osteoarthritis, Chronic kidney disease state 3, depressive disorder, Congestive Heart Failure, and Type 2 diabetes mellitus.

R4's most recent MDS, dated 7/27/2020, documents R4 having a BIMS score of 15, indicating intact cognition. The MDS also documents R4 requiring 1-person physical assistance for bathing.

R4 Care Plan dated 7/29/2020, documents the following: "1. (R4) requiring assist 1 staff with bathing/showering twice weekly and as necessary. 2. The resident has an ADL self-care performance deficit r/t generalized anxiety with intervention of Restorative CNA: Grooming Program: Wash face and hands, perform oral care, and comb hair with SBA. (stand by assist)."

Facility shower schedule, dated May through August of 2020, documents R4 is to receive showers on Mondays and Wednesdays, 2 times per week. Documentation in the Electronic Medical Records failed to reflect these showers.

Facility's "Documentation Survey Report" in medical record shows R4 had the following showers May through August 2020:
May 2020: V1 advised there is no computer records showing R4 had a shower in May, R4 had 0 showers for the month of May, R4 did not get 8 showers in May.
June 2020: R4 had a shower on June 29, one shower for the month of June, R4 did not get 8 showers for the month of June.
July 2020: R4 had a shower on July 20th & 25th, 2 showers for the month of July, R4 did not get 7 showers for the month of July.
August 2020: R4 had a shower on August 1st,

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S9999	Continued From page 9 10th and 17th, R4 did not get 4 showers in August at time of survey. On 8/25/2020 at 1:00 pm., R4 stated R4 had gone if 3 weeks at one time without a shower. R4 agreed with R2 that they are not getting showers twice a week and sometimes not at all through the week. R4 agreed with R2 that they are going at this time anywhere between 5- 8 days without a shower. R4 stated that if R4 doesn't get showers regularly R4 has problems with yeast infections under skin folds. 5. Electronic Health Record (EHS) dated August 2020, documents R3 having Atrial Fib, Coronary Artery Disease, and Alzheimer's Disease. R3 most recent MDS dated 6/8/2020, documents BIMS score of 12, indicating intact cognition. The MDS also documents R3 requiring 1-person physical assistance for bathing. R3 Care Plan dated 6/12/20, documents the following: 1. R3 is at risk for self-care deficit d/t (due to) cognitive impairment, and dx of Dementia. R3 has short term memory loss. Requires cues-setup for hygiene upkeep. 2.The resident has an ADL self-care performance deficit r/t (related to) dementia with an intervention of Restorative CNA: Grooming Program: Wash face and hands, perform oral care, and comb hair independently. Facility shower schedule dated May through June of 2020, documents R3 is to receive showers on Tuesdays and Thursdays, 2 times per week. Documentation in the Electronic Medical Records failed to reflect these showers.	S9999		

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Review R3's "Documentation Survey Report" in medical record shows R3 had the following showers May through August 2020:

May 2020: V1 advised there is no computer records showing R3 had a shower in May 2020. R3 had no showers out of 8 for the month of May 2020.
June 2020: V1 advised there is no computer records showing R3 had a shower in June 2020. R3 had no showers out of 9 for the month of June 2020.
July 2020: V1 advised there is no computer records showing R3 had a shower in July 2020. R3 had no showers out of 9 for the month of July 2020.
August 2020: V1 advised there is no computer records showing R3 had a shower in August 2020. R3 had no showers out of 8 showers for the month of August.

On August 25, 2020, at 1:00 p.m. R3 stated R3 has trouble getting staff to help R3 with showers. R3 stated: "You have to ask for them, like right now, I want one, it has been a week, and I hate feeling like this without a shower. It has been as long as ten days I have had to go without a shower and I just hate not having a shower." R3's hair was observed to be disheveled and oily in appearance.

On 8/27/2020, 8:47 a.m. V11, Ombudsman, stated that V11 first got complaints about showers not getting done the end of May from resident Council president, R2. I talked to V1 quite a few times regarding the showers not being done. V11 stated the first complaint to me was end of May, so my first email to V1 was 6/1/2020. V11 stated that V1, Administrator, was informed in the email residents were complaining they had gone a full

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14 days without bed baths, showers or even a wipe down. V1, Administrator, replied V1 would address the situation and that V1 was un-aware of the situation and V1 was disappointed to hear. V11, Ombudsman, stated V11 waited a couple weeks to give V1 time to address the situation. V11 stated V11 talked to R2 regarding showers and R2 stated they still had not had a shower or been bathed. V11 states at that point R2 stated they were having trouble with rashes and yeast infections under skin folds. V11 stated after talking to R2 on June 15, 2020, V11 called V1, Administrator, the same day and put the first complaint in with the state on behalf of R2. V11 stated V1 thanked V11 for bringing the situation to V1's attention again. V1, Administrator, advised V11 the facility was very short staffed and the person who normally does showers is now a CNA and no longer just showers. V1 advised V11 that V1 would again investigate the situation and assured there would be a shower schedule put in place.

V11, Administrator, stated on June 29, 2020, V11 facetimed with R2 and R2 advised they all got showers after the June 15, 2020, phone call. However, on June 29, 2020, when they talked, it had been eight days since last shower. V11 stated V11 called V1 again and stated the problem of showers continued and was told again that V1 would investigate the situation and handle showers issue. V11 stated on July 6, 2020, V11 talked to R2 again in reference to showers and at that point, it had been 8 days again since last shower. V11 stated on that day I sent another email to V1 about the shower issue continuing and reported again to the state on behalf of R2 on July 8th, 2020. V11 stated I followed up with R2 at the end of July 2020 and was told by R2 they continued to go 8 - 10 days without showers and

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had to beg for showers when they did get them. I then talked to R2 last on August 18, 2020, and R2 stated they continue to not get their weekly showers. V11 stated on August 18, 2020, I again emailed V1 and advised the shower issue continued and V1 again stated they would look into showers.

On 8/25/2020 at 12:46 PM, R15 stated her call light has taken as long as an hour to be answered, but she thinks it's because staff are answering someone else's call light on the unit. She said she does not always get a shower weekly and is "hoping to get one this Friday (8/28/2020).

On 8/26/2020 at 12:50 PM, R14 stated she can't even recall last time she received a shower. R14 stated, "I need two a week," but denies receiving two showers per week. She said she wasn't even aware of when she is to get a shower. She said call lights "take a long time" to answer.

On 8/26/2020 at 12:55 PM, R16 stated she does not get two showers per week and stated she may get a shower at least weekly.

On 8/26/2020 at 1:00PM, R17 stated today she received a shower, but can't recall getting one twice weekly, but she said she would love to see that take place.

On 09/01/2020, at 1:50 p.m. V2 stated that facility does not have a shower policy.

2.Based on observation, interview, and record review, the facility failed to offer dining assistance to 3 of 7 residents (R18, R19, and R20), reviewed for Activities of Daily Living (ADL), in the sample of 20.

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	IL6010227	A. BUILDING: _____ B. WING _____	09/02/2020

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
CASEYVILLE NURSING & REHAB CTR	601 WEST LINCOLN AVENUE CASEYVILLE, IL 62232

(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	Continued From page 13	S9999		

6. On 8/25/2020 at 11:22 AM, R19 sat in her wheelchair next to her over bed table. Her hair was matted to the back of her head, wasn't combed, and appeared disheveled. On her left foot was a non-skid sock, but her right foot didn't have a sock, nor did she have on shoes. At 11:23AM, R19 's tray was placed on her over bed table by V16, CNA. On her tray was puree chicken and noodles, broccoli, bread, pineapple bar. Also, on the tray was a cup of yogurt, milk and water. During direct observation from 11:22AM until 12:22PM, R19 moved her wheelchair away from her over bed table and was not helped, cueing or encouragement to eat. At 12:23PM, V16, CNA, offered to give R19 a drink of milk, but did not help with eating. At 12:24PM, left on R19's tray were 100% of her puree chicken and noodles, broccoli, bread, and pineapple bar. Also remaining on R19's tray were 50% of yogurt.

R19's Face Sheet dated 8/27/2020, documents R19 having the following diagnoses: Dysphagia, blindness in the left eye, lack of coordination, and Alzheimer's Disease.

MDS dated 6/5/2020, documents R19 having severely impaired cognition, requiring supervision with eating, and extensive assistance with all other ADLs.

R19's Care Plan, undated, documents R19 having the potential for impaired nutritional status due to fair intake, having a "choking/swallowing" issues and pocketing of food. Listed as interventions for R19 are to assist R19 with meals as needed and encourage resident to eat 80-100% of meals.

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	IL6010227	A. BUILDING: _____ B. WING _____	09/02/2020

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
CASEYVILLE NURSING & REHAB CTR	601 WEST LINCOLN AVENUE CASEYVILLE, IL 62232

(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	Continued From page 14	S9999		

7. On 8/25/2020 at 11:25AM, R18 was served her noon meal tray. At 12:25PM, R19's meal tray was placed back into the serving cart. Remaining on her tray were 100% of her puree chicken and noodles, broccoli, bread, and pudding. Also, on her tray was orange sherbet with the lid still intact. V14, CNA, removed the sherbet lid and noted was 100% of thawed sherbet.

R18's Face Sheet dated 8/27/2020, documents R18 having Dysphagia, Dementia, and muscle weakness.

MDS dated 8/6/2020, documents R18 having impaired cognition, with total dependence of 1-person physical assistance with eating.

R18's Care Plan, undated, documents R18 having potential for impaired nutritional status, requiring staff assistance with meals, and to encourage R18 to eat 80 to 100% of her meals.

8. On 8/25/2020 at 11:25AM, R20 received his noon meal tray that consisted of chicken and noodles, broccoli, bread and margarine, pineapple bar, and water. At 12:21PM, R20's meal tray consisted of 100% of his chicken and noodles, 100% of broccoli, and 50% of the bread and butter. No encouragement to eat was provided to R20 during the meal observation.

R20's Face Sheet dated 8/27/2020, documents R20 having Alzheimer's Disease and Dementia.

MDS dated 6/30/2020 documents R20 having impaired cognition and supervision with eating.

R20's Care Plan, undated, documents R20

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	IL6010227	A. BUILDING: _____ B. WING _____	09/02/2020

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
CASEYVILLE NURSING & REHAB CTR	601 WEST LINCOLN AVENUE CASEYVILLE, IL 62232

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S9999	Continued From page 15 having the potential for impaired nutritional status related to "fair intake." The Care Plan further documents interventions as follows: Assist R20 with meals as needed, encourage to eat 80 to 100% of meals, and to monitor his appetite, food texture tolerance. On 8/26/2020 at 1:30PM, V1, Administrator, stated he would expect residents to be cued during meal service and helped. Facility Policy entitled Activities of Daily Living Approaches in Dementia, dated 07/2016, documents: "Policy: Activities of Daily Living (ADL) for residents with dementia will be provided in a way that enhances dignity and self-esteem and diminishes the possibility of creating anxiety and agitation." The Policy also documents that residents will be prompted and guided in a way that maintains their independence considering their level of cognition and ability to carry out tasks. The Policy further documents: "Throughout encourage, reassure and praise the resident as appropriate." " B "	S9999		