

DEPARTMENT OF PUBLIC HEALTH  
STATE OF ILLINOIS

THE DEPARTMENT OF PUBLIC HEALTH )  
STATE OF ILLINOIS, ) Docket No. NH 15-S0092  
Complainant, )  
v. )  
MULBERRY MANOR, INC. )  
D/B/A MULBERRY MANOR, )  
Respondent. )

NOTICE OF TYPE "B" VIOLATION(S); NOTICE OF FINE ASSESSMENT; NOTICE OF  
PLACEMENT ON QUARTERLY LIST OF VIOLATORS;  
NOTICE OF OPPORTUNITY FOR HEARING

Pursuant to the authority granted by the ID/DD Community Care Act (210 ILCS 47/1-101 et seq.)  
(hereinafter, the "Act"), NOTICE IS HEREBY GIVEN:

NOTICE OF TYPE "B" VIOLATION(S)

It is the determination of the Illinois Department of Public Health, State of Illinois, hereinafter, the "Department") that there has been a failure by Respondent to comply with the Act. This determination is subsequent to a Licensure Investigation for conducted by the Department on January 23, 2015, at Mulberry Manor, 612 East Davie Street, Box 88, Anna, Illinois 62906. On March 12, 2015, the Department determined that such violations constitute one or more Type "B" violations of the Act and the Intermediate Care for the Developmentally Disabled Code, 77 Ill. Adm. Code 350 (hereinafter, the "Code"). The nature of each such violation and sections of the Code that were violated are further described in The Summary of Licensure Violation which is attached hereto and incorporated herein as Attachment A and made a part hereof.

A Type "B" violation may affect your eligibility to receive or maintain a two-year license, as prescribed in Sec. 3-110 of the Act.

**A Plan of Correction is required to be submitted by the facility within two weeks from the date the violation notice was sent. Any previous submissions are considered to be comments to the licensure findings and are not eligible as a plan of correction for this notice.** Please email the Plan of Correction to the following email address: [DPH.LTCQA.POChearing@illinois.gov](mailto:DPH.LTCQA.POChearing@illinois.gov). If your facility does not have email capabilities then you can mail it to the attention of: Leona Juhl, IDPH, Long Term Care/QA, 525 West Jefferson, Springfield, IL 67261.

NOTICE OF FINE ASSESSMENT

Pursuant to Section 3-305 of the Act the Department hereby assesses against Respondent a monetary penalty of **\$750.00**, as follows:

-Type B violation with fine of an occurrence for violating one or more of the following sections of the Code: 350.620a), 350.1210 and 350.3240a).

Section 3-310 of the Act provides that all penalties shall be paid to the Department within ten (10) days of receipt of notice of assessment by mailing a check (note Docket # on the check) made payable to the Illinois Department of Public Health to the following address:

Illinois Department of Public Health  
P.O. Box 4263  
Springfield, Illinois 62708

If the penalty is contested under Section 3-309, the penalty shall be paid within ten (10) days of receipt of the final decision, unless the decision is appealed and stayed by court order under Section 3-713 of the Act.

A penalty assessed under this Act shall be collected by the Department. If the person or facility against whom a penalty has been assessed does not comply with a written demand for payment within thirty (30) days, the Director shall issue an order to do any of the following:

- (A) Direct the State Treasurer to deduct the amounts otherwise due from the State for the penalty and remit that amount to the Department;
- (B) Add the amount of the penalty to the facility's licensing fee; if the licensee refuses to make the payment at the time of application for renewal of its license, the license shall not be renewed; or
- (C) Bring an action in circuit court to recover the amount of the penalty.

#### NOTICE OF PLACEMENT ON QUARTERLY LIST OF VIOLATORS

In accordance with Section 3-304 of the Act, the Department shall place the Facility on the Quarterly List of Violators.

#### NOTICE OF OPPORTUNITY FOR A HEARING

Pursuant to Sections 3-301, 3-303(e), 3-309, 3-313, 3-315, and 3-703 of the Act, the licensee shall have a right to a hearing to contest this Notice of Type "B" Violation(s); Notice of Fine Assessment; and Notice of Placement on Quarterly List of Violators. In order to obtain a hearing, the licensee must send a written request for hearing no later than ten (10) days after receipt by the licensee of these Notices. **Please email the hearing request to the following email address: [DPH.LTCQA.POChearing@illinois.gov](mailto:DPH.LTCQA.POChearing@illinois.gov). If your facility does not have email capabilities then you can mail it to the attention of: Leona Juhl, IDPH, Long Term Care/QA, 525 West Jefferson, Springfield, IL 62761.**

FAILURE TO REQUEST A HEARING WITHIN TEN DAYS OF RECEIPT OF THIS NOTICE WILL CONSTITUTE A WAIVER OF THE RIGHT TO SUCH HEARING.

FINE REDUCTION IF HEARING WAIVED

Pursuant to Sections 3-309 and 3-310 of the Act, a licensee may waive its right to a hearing in exchange for a 35% reduction in the fine. In order to obtain the 35% reduction in the fine, the licensee must send a written waiver of its right to a hearing along with payment totaling 65% of the original fine amount within 10 business days after receipt of the notice of violation. **Please email the waiver to the following email address: DPH.LTCQA.POChearing@illinois.gov. If your facility does not have email capabilities then you can mail it to the attention of: Leona Juhl, IDPH, Long Term Care/QA, 525 West Jefferson, Springfield, IL 67261.**

*Debra D. Bryars* <sup>19</sup>

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Debra D. Bryars  
Designee of the Director  
Illinois Department of Public Health

Dated this 20<sup>th</sup> day of March, 2015.



Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>IL6006472</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>01/23/2015</b>
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NAME OF PROVIDER OR SUPPLIER  <b>MULBERRY MANOR</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>612 EAST DAVIE STREET, BOX 88 ANNA, IL 62906</b>
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Z9999	<p><b>FINDINGS</b></p> <p>State Licensure Violations:</p> <p>350.620a) 350.1210 350.3240a)</p> <p>Section 350.620 Resident Care Policies</p> <p>a) The facility shall have written policies and procedures governing all services provided by the facility which shall be formulated with the involvement of the administrator. The policies shall be available to the staff, residents and the public. These written policies shall be followed in operating the facility and shall be reviewed at least annually.</p> <p>Section 350.1210 Health Services</p> <p>The facility shall provide all services necessary to maintain each resident in good physical health.</p> <p>Section 350.3240 Abuse and Neglect</p> <p>a) An owner, licensee, administrator, employee or agent of a facility shall not abuse or neglect a resident. (Section 2-107 of the Act)</p> <p>These Regulations were not met as evidenced by:</p>	Z9999	<p style="text-align: center;"><b>Attachment A</b> <b>Statement of Licensure Violations</b></p>	
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Illinois Department of Public Health LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
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Z9999	<p>Continued From page 1</p> <p>A. Based on interview and record review, the facility failed to obtain and/or provide preventative cancer screenings for colorectal cancer as per the CDC (Center for Disease Control and Prevention) recommendations for 1 individual 61 years of age who expired on 07/22/14 of complications related to Metastatic Colon Cancer. While living at the facility, R10 did not receive nor was any type of colorectal cancer screening ordered by his primary physician (E7) at the age of 50 - 61 years of age. This failure affects 15 individuals ages 50 - 75 years (R1, R6, R8, R11, R12, R13, R14, R17, R18, R19, R20, R21, R22, R23 and R24) who retain E7 (Facility's Medical Director) as their primary physician. The facility has failed to:</p> <p>1) Develop and implement policy and procedures regarding colorectal cancer screenings for men and women of the facility 50 years of age or older as per CDC recommendations set forth by the U.S. Preventative Services Task Force recommendations for colorectal cancer screening; and</p> <p>2) Inform the individual and/or their guardians as applicable of cancer screenings and interventions available to them for colorectal cancer prevention and control.</p> <p>B. Based on record review and interview, the facility failed to obtain and/or provide cancer screenings for prostate cancer as per the CDC recommendations for 24 males of the facility over the age of 40 (R6, R7, R8, R11 - R22, R25 - R33) who retain E7 (Facility's Medical Director) as their primary physician. The facility has failed to:</p> <p>1) Develop and implement policy and procedures</p>	Z9999		

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Z9999	<p>Continued From page 2</p> <p>regarding prostate cancer screenings for male individuals of the facility, 40 years of age or older since the facility's Medical Director - Primary Physician (E7) does not complete annual Prostate specific antigen (PSA) test or an annual digital rectal exam (DRE); and</p> <p>2) Inform the individual and/or their guardians as applicable of cancer screenings and interventions available to them for prostate cancer prevention and control.</p> <p>C) Based on interview and record review, the facility has failed to provide individuals with nursing services in accordance with their needs by their failure to thoroughly investigate and take corrective action after 1 (R10) expired on 07/22/2014 from complications of Metastatic Colon Cancer. This failure presently affects 15 individuals of the facility (R1, R6, R8, R11, R12, R13, R14, R15, R18, R19, R20, R21, R22, R23 and R24) aged 50 - 75 years of age presently retaining E7 (facility's Medical Director) as their primary physician.</p> <p>The facility failed to:</p> <p>1. Identify that R10 had not received, nor was any type of colorectal cancer screening ordered by his primary physician (E7) at the age of 50 - 61 years of age and take corrective action to ensure colorectal cancer screening is completed for all individuals of the facility aged 50 - 75 years of age;</p> <p>2. Review the hospital reports and identify that the facility's present bowel monitoring record is not accurately documented by staff to identify the</p>	Z9999		

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Z9999	<p>Continued From page 3</p> <p>color of the individual's bowel movement which could indicate blood in the stools and result in nursing action to notify the physician;</p> <p>3. Retrain staff on documenting the size, color and consistency of the bowel movement when documenting on each individual's bowel movement record; and</p> <p>4. Develop and implement policy and procedures for colorectal cancer screenings (in conjunction with the (E7) as per CDC (Center for Disease Control and Prevention) recommendations for individuals of the facility aged 50 - 75 years of age.</p> <p>Findings include:</p> <p>A) The facility's report entitled, Illinois Health Care Facility Report on Resident Death dated 07/22/2014 identifies that R10 expired resultant from, "Metastatic Colon Cancer with obstructing colon mass". R10 was 61 years of age and under Hospice care when he expired at the facility on 07/22/2014.</p> <p>E2 (Director of Nursing (DON) - Registered Nurse) was interviewed on 01/07/2015 at 3:20 P.M. and confirmed that R10 expired on 07/22/2014 from complications related to colon cancer. E2 stated, "R10's guardian (Z1) did not want him to undergo any type of radiation and/or chemotherapy. R10 was placed under Hospice care upon his return to the facility".</p> <p>In continuing interview with E2, she stated that</p>	Z9999		



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Z9999	<p>Continued From page 4</p> <p>during the early part of July, 2014, "R10 began having decreased appetite and difficulty keeping foods and/or liquids down". Review of the Nurse's Notes with E2 identifies that R10 began having emesis on 07/03/2014 and then experiencing difficulty in keeping even liquids down. R10 then began refusing liquids and foods offered. It is also contained within these notes that nursing staff notified the physician (E7) of the change in R10's condition at least four times between 07/03 - 07/08/2014. On 07/08/2014, R10 was sent to the emergency room, "D/T (due to) his inability to keep food or liquids down".</p> <p>R10's hospital report dated 07/08/14 states that he was admitted to a local hospital and then transferred to another hospital due to abdominal pain and positive gastric occult blood. This report goes on to state that R10 had, "... multiple emeses after meals for the last 2 weeks and its has been progressively worsening and more frequent... As per the caregiver he did have some dark stools... So when the CT scan was done... it showed that there is diffuse hepatic metastasis (a malignant tumor in the liver that has spread from another organ affected by cancer) with features commonly seen with gastrointestinal metastasis of adenocarcinoma (cancer which has spread to other parts of the body)". This report goes on to state that R10's case was discussed with his sister (Z1) and it was, "...explained this might be cancer. She (Z1) was surprised. She said that if it is confirmed it is cancer she will not proceed with surgery or chemotherapy..."</p> <p>Further review of the hospital reports identifies that on 07/10/14 an unsuccessful esopagogastoduonoscopy with a colonoscopy was attempted and then switched to a flexible sigmoidoscopy. R10 was diagnosed with</p>	Z9999		

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Z9999	<p>Continued From page 5</p> <p>Metastatic colon cancer (cancer that has spread beyond the colon to other parts of the body) with obstructing left colon mass.</p> <p>During the interview with E2 (DON), on 01/07/2015 at 3:20 P.M., when asked if R10 had received a colonoscopy or another preventative screening test for colorectal cancer, she stated, "No, E7 (Facility's Medical Director - primary Physician) was R10's physician and he (E7) does not routinely order colonoscopy or stool cultures for any of his patients.</p> <p>Z1 (R10's sister and guardian) was interviewed by telephone on 01/08/2015 at 12:41 P.M. and stated, "No one from the facility ever talked with me about my brother's need for a colonoscopy... I fault the doctor for not telling me that he needed this cancer screening. He has an annual meeting that everyone signs off as attending, why wasn't this needed screening information discussed at the meeting?".</p> <p>Z2 (R10's Oncologist/Hematologist during his July, 2014 hospital course) was interviewed by phone on 01/08/2015 at 3:36 P.M. regarding R10 and his diagnosis of Metastatic Colon Cancer. When Z2 was asked if he would have expected R10 to have had some form of colorectal screening as based on his age (61 years old), he (Z2) stated, " Yes, I would have. Everyone, 50 years of age and older should have a colonoscopy or another preventative screening tests for colorectal cancer as per CDC guidelines. I would have expected R10 to have had at least a baseline colonoscopy completed at about the age of 50 or 51. As based on the results of the test, the number of polyps found, his physician would then determine when he would order the next colonoscopy. This frequency could range from</p>	Z9999		

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Z9999	<p>Continued From page 6</p> <p>two years to seven years from the date of the first colonoscopy as based on the results. Colorectal cancer screenings assist in the prevention and in the early detection of colorectal cancer. It is possible that if R10 would have had a colonoscopy, his cancer may have been prevented or detected sooner...".</p> <p>The CDC.gov website regarding Colorectal (Colon) Cancer states, "... Colorectal cancer affects men and women of all racial and ethnic groups, and is most often found in people aged 50 years or older... Colorectal cancer screening saves lives. Screening can find precancerous polyps-abnormal growths in the colon or rectum-so that they can be removed before turning into cancer. Screening also helps find colorectal cancer at an early stage, when treatment often leads to a cure...".</p> <p>When E2 (DON) was interviewed on 01/07/2015 at 3:20 P.M., she stated, "E7 (Physician) doesn't routinely order or complete a colonoscopy or stool cultures for any of his patients (R1, R6, R8, R11, R12, R13, R14, R15, R18, R19, R20, R21, R22, R23 and R24) who are 50 - 75 years of age". E2 stated, "No" when asked if the facility has policy and procedures addressing colorectal cancer screening.</p> <p>During the required (telephone) interview with Z4 (Office of State Guardianship and Advocacy representative for R6 and R8) on 01/08/15 at 3:10 P.M., Z4 confirmed that R6 and R8 both have E7 (Facility's Medical Director) as their primary physician. When asked if she knew if R6 or R8 had a colonoscopy or another colorectal screening, Z4 stated, "E7 doesn't do routine colonoscopy. He will only do one if there is a problem". When Z4 was asked if she had been</p>	Z9999		

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Z9999	<p>Continued From page 7</p> <p>given information regarding colorectal screenings for any of her residents from E7 or the facility, she stated, "No". Z4 stated, "E7 has never discussed with me the pros and cons of any type of colorectal cancer screening test for R6, R8 nor for any of my wards. I have never refused any preventative screening test for cancer. No one has ever offered or discussed with me the need for preventative screening tests for cancer. If I would have had a discussion with the facility or E7 about colorectal cancer screenings, I would have written it down in my files".</p> <p>Per continuing interview with Z4 on 01/13/2015 at 4:00 P.M. while present in the facility, she stated, "I checked my files and there is no documentation that I was ever notified by E7 or the facility of the need for colorectal cancer screenings or given the opportunity to refuse the screenings for my wards".</p> <p>Z3 (Representative for the local county Health Department) was interviewed by telephone at 11:10 A.M. on 01/08/2015 regarding their department's Community Guide (to Community Preventative Services) recommendations for colorectal cancer screenings in the community. During this interview Z3 stated, "We (the Health Department) follow CDC guidelines regarding recommendations for colorectal cancer screenings".</p> <p>E7 (Facility's Medical Director) was interviewed on 01/09/15 at 8:05 A.M. regarding the lack of colorectal cancer screenings for the individuals (R1, R6, R8, R11, R12, R13, R14, R17, R18, R19, R20, R21, R22, R23 and R24) he provides medical care for. E7 stated, "No, I don't order or perform a routine colonoscopy for our special</p>	Z9999		
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Z9999	<p>Continued From page 8</p> <p>populations. They are a very difficult population when you are having them complete the preparation for a colonoscopy". When E7 was asked if he completes a fecal occult blood test, he stated, "No. I feel that it's the guardian's responsibility to request a colonoscopy or another test if they want it for their individuals". E7 was informed of Z1's interview and her statement that she faulted her brother's (R10's) physician (E7) of not notifying her of his need of colorectal screening. E7 then replied, "I think it's the guardian's responsibility to request a colonoscopy". E7 was then informed of Z4's interview and he stated, "If Z4 wanted her people to have a colonoscopy she should have asked. She has never been shy about asking for anything else. I still say the responsibility falls on the guardians to request these screenings".</p> <p>Per continued interview with E7, E7 stated that he follows the, "recommendations set forth by the U.S. Preventative Services Task Force for colorectal cancer screening" for his patients in the private sector. E7 did not identify how he follows the Task Force recommendations for the individuals (R1, R6, R8, R11, R12, R13, R14, R17, R18, R19, R20, R21, R22, R23 and R24) of the facility who retain him (E7) as their personal physician.</p> <p>The CDC. gov website regarding Colorectal (Colon) Cancer states, "The U.S. Preventative Services Task Force recommends colorectal cancer screening for men and women ages 50 -75 using high sensitivity fecal occult blood testing (FOBT), sigmoidoscopy, or a colonoscopy". This website goes on to state that, "Each screening test (for colorectal cancer) has advantages and disadvantages and each individual should talk with their doctor about the pros and cons of each</p>	Z9999		

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Z9999	<p>Continued From page 9</p> <p>test and how often to be tested".</p> <p>In continuing interview with E7, when asked if the physician is ultimately responsible for ensuring that the individual and/or their guardian(s) have been informed of the risk, benefits and alternatives to colorectal cancer screenings, he stated, "No, its the guardian's responsibility to ask for these tests... Since this has come up, we now are in the process of drafting a letter that will go to the individual and/or their guardian(s) informing them of the cancer screening tests available to them and their options". When E7 was asked if this system was in place prior to the surveyor's entrance to the facility on 01/06/2015, he stated, "No, but we will move forward and make an extra effort to remind them (the individuals and/or guardians) of the cancer screening tests available for colorectal cancer."</p> <p>As based upon review, the facility has failed to provide or obtain preventative cancer screening test for colorectal cancer for R10 and fifteen individuals of the facility (R1, R6, R8, R11, R12, R13, R14, R15, R18, R19, R20, R21, R22, R23 and R24) aged 50 - 75 years of age who retain E7 as their primary physician. R10 expired on 07/22/2014 at the age of 61 years of age from complications related to Metastatic Color Cancer. While living at the facility, R10 did not receive any type of colorectal cancer screening during the ages of 50 - 61 years of age prior to his hospitalization on 07/08/2014. Interview with E7 (facility's Medical Director and primary physician) confirms that he (E7) does not follow the U.S. Preventative Services Task Force recommendations for colorectal cancer screening for the fifteen men and women ages 50 -75 presently living in the facility with diagnosis of intellectual disabilities. After R10's death, the</p>	Z9999		

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STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>IL6006472</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>01/23/2015</b>
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NAME OF PROVIDER OR SUPPLIER  <b>MULBERRY MANOR</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>612 EAST DAVIE STREET, BOX 88 ANNA, IL 62906</b>
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Z9999	<p>Continued From page 10</p> <p>facility did not thoroughly investigate, nor take action by developing and implementing policy and procedures for colorectal cancer screenings. This failure affects fifteen individuals of the facility (R1, R6, R8, R11, R12, R13, R14, R15, R18, R19, R20, R21, R22, R23 and R24) aged 50 - 75 years of age, presently retaining E7 as their primary physician.</p> <p>B. The CDC.gov website states, "Cancer screening means looking for cancer before it causes symptoms. However most prostate cancers grow slowly or not at all. Two test are commonly used to screen for prostate cancer"</p> <p>* Digital rectal exam (DRE): A doctor or nurse inserts a gloved, lubricated finger into the rectum to estimate the size of the prostate and feel for lumps or other abnormalities.</p> <p>* Prostate specific antigen (PSA) test: Measures the level of PSA in the blood. PSA is a substance made by the prostate. The levels of PSA in the blood can be higher in men who have prostate cancer..."</p> <p>In review of the individual's records and laboratory tests for six males in the sample over the age of 40 (R3, R4, R6, R7, R8 and R9), E2 (DON) stated during the interview on 01/07/2015 at 3:20 P.M. that Z5 (physician) is R3's, R4's, and R9's primary physician. E2 confirmed that E7 (facility's Medical Director) is R6's, R7's and R8's primary physician. R3's, R4's and R9's records were noted to have annual PSA tests as ordered by their physician (Z5). The laboratory tests from January 2014 to present were reviewed for R6 , R7 and R8 and no PSA test(s) were located.</p>	Z9999		

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Z9999	<p>Continued From page 11</p> <p>During the interview with E2 on 01/07/2015 at 3:20 P.M., when asked if R6, R7 or R8 had a PSA test she stated, "E7 (Physician) doesn't routinely order or complete PSA test or prostate checks for any of his patients. At this time, E2 confirmed that there are twenty four males over the age of 40 (R6, R7, R8, R11 - R22, R25 - R33) who retain E7 (Facility's Medical Director) as their primary physician.</p> <p>Further review of R6's annual physical dated 01/05/2015, R7's annual physical dated and R8's annual physical dated 03/11/2014, there is no documentation that a digital rectal exam has been completed by E7 as per CDC recommendations.</p> <p>The January, 2015 Physician's Order (P.O.) sheets for R6, R7 and R8 were reviewed and the following information was noted:</p> <ul style="list-style-type: none"> <li>- R6's P.O. sheet identifies that he is 53 years of age and that there are no orders to screen him for prostate cancer by means of a PSA test or by digital rectal exam;</li> <li>- R7's P.O. sheet identifies that he is 42 years of age. No orders are contained on this sheet for R7 to have an annual PSA test or a digital rectal exam; and</li> <li>- R8's Physician's Order sheet for January 1-31, 2015 identifies that he is 58 years of age. No orders are contained on this sheet for R7 to have an annual PSA test or a digital rectal exam.</li> </ul> <p>The facility's policy for PSA (Prostate Specific Antigen) Testing has an 11/28/11 revision which states, "PSA's will not be drawn routinely D/T (due to) the reliability issue of false positives and</p>	Z9999		



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Z9999	<p>Continued From page 12</p> <p>false negative results. If the resident's guardian request a PSA notify E7 (physician/medical director) for lab orders..." There is no further documentation within this policy identifying what other screening test will be used by the facility to screen for prostate cancer.</p> <p>During the interview with E2 (DON) on 01/07/2015 at 3:20 P.M., E2 stated, "E7 (Physician) doesn't complete PSA tests or prostate checks for any of his patients. Review of the facility's roster presented to the surveyors on 01/06/2015 and as confirmed per interview with E2, there are twenty four males in the facility over the age of 40 (R6, R7, R8, R11 - R22, R25 - R33) who retain E7 (facility's Medical Director) as their primary physician.</p> <p>E7 (Facility's Medical Director) was interviewed on 01/09/15 at 8:05 A.M. regarding the lack of digital rectal exams and/or PSA testing for R6, R7 and R8 and stated, "No, I am not doing digital exams during the individuals annual physical if there are no complaints. The PSA is not proven to be reliable and it is no longer recommended in asymptomatic individuals. I do not do PSA testing or a digital rectal exam unless requested by the guardian. I discuss PSA testing information with my private patients and allow them to make the decision". When E7 was asked if he discusses the PSA testing and/or digital rectal exam as a screening test for the early detection of prostate cancer with individuals of the facility with intellectual disabilities and/or their guardian(s) per CDC recommendations, he stated, "No, that falls back on the guardian to request the prostate cancer screening test..."</p> <p>The CDC. gov website does states that the U.S.</p>	Z9999		

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Z9999	<p>Continued From page 13</p> <p>Preventative Services Task Force does not recommend PSA based screening(s) for men who do are asymptomatic. However this website does states, "...CDC encourages all doctors to have open conversations with their patients who have questions about prostate cancer and PSA screening... Understanding that men and their doctors may continue to screen for prostate cancer, the CDC continues to support informed decision making. Informed decision making occurs when a man:</p> <ul style="list-style-type: none"> <li>*Understands the nature and risk of prostate cancer.</li> <li>*Understands the risks of, benefits of, and alternatives to screening.</li> <li>*Participates in the decision to be screened or not at a level he desires.</li> <li>*Makes a decision consistent with his preferences and values..."</li> </ul> <p>In continued interview with E7 he stated, "We now are in the process of drafting a letter that will go to the individual and/or their guardian(s) informing them of the cancer screening tests available to them and their options". When E7 was asked if this system was in place prior to the surveyor's entrance to the facility on 01/06/2015, he stated, "No, but we will move forward and make an extra effort to remind them the (individuals and/or guardians) of the screening tests available for the early detection of cancer."</p> <p>As based upon review and as confirmed per interviews with E2 (DON) and E7 (Facility Medical Director and primary physician) the facility has failed to obtain and/or provide cancer screenings for prostate cancer as per CDC recommendations for twenty four males of the facility over the age of 40 (R6, R7, R8, R11 - R22,</p>	Z9999		
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Z9999	<p>Continued From page 14</p> <p>R25 - R33) who retain E7 as their primary physician.. The facility's present policy and procedures does not address alternatives for prostate cancer screening since the facility's Medical Director does not complete PSA testing or digital rectal exams as confirmed per interview with E2. During the interview with E7, E7 stated that he does not complete nor discuss the risks, benefits and alternatives of PSA testing and/or the digital rectal exam with individuals of the facility with intellectual disabilities and/or their guardian(s) but does discuss this information with his private patients. This failure presently affects 24 of 24 males of the facility over the age of 40 (R6, R7, R8, R11 - R22, R25 - R33) who retain E7 (Facility's Medical Director) as their primary physician.</p> <p>C) E2 (DON) was again interviewed on 01/08/2015 at 11:40 A.M. in regards to the hospital report (07/08/14) identifying that R10 had, "some dark stools" as stated by a staff of the facility. When asked if the facility monitors the individual's bowel movements, E2 stated, "Yes". E2 then presented the survey team with R10's bowel movement record sheets for the months of May, June and July 2014. These sheets identify whether R10 had a bowel movement and the size of his bowel movement. An additional coding is noted at the top of the sheet to indicate the color and consistency of the bowel movement. Per review of the three bowel movement sheets and as confirmed per interview with E2, R10's bowel movement record sheets do not identify the color of his bowel movements which could be an indicator that R10 had blood in his stools. During this interview, E2 stated that she did not interview, nor know who the staff person was who had taken R10 to the hospital and had talked with</p>	Z9999		
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Z9999	Continued From page 15  the physician about the color of R10's bowel movements. E2 also stated that she had not reviewed the facility's present system for monitoring bowel movements. While reviewing these bowel movement sheets with and the absence staff's documentation of the color and the consistency of the individual's bowel movements, E2 stated that she needed to retrain staff on documenting complete information on the bowel movement records.  (B)	Z9999		