

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>IL6001234</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>01/18/2022</b>
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NAME OF PROVIDER OR SUPPLIER  <b>BRYAN MANOR</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>2150 EAST MCCORD, PO BOX 568 CENTRALIA, IL 62801</b>
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Z 000	<b>COMMENTS</b>  ANNUAL LICENSURE SURVEY	Z 000		
Z9999	<b>FINDINGS</b>  Annual Licensure Survey  <b>STATEMENT OF LICENSURE VIOLATIONS:</b>  1/4 Section 350.610 Management Policies The facility's governing body shall exercise general direction of the facility , and shall establish the broad polices and procedures for the facility related to its purpose, objectives, operation, and the welfare of the residents served.  Based on observation, record review and interview the facility failed to ensure staff are following their COVID policy with the potential to affect all 92 residents (R1-R92).  Findings Include: 4a) Facility Roster dated 10/15/21, identifies R35, R36, R60, R64, R77 and R86 as functioning in the Mild Range of Intellectual Disabilities. R23, R28, R50, R61, R68, R81, R84 and R87 function in the Moderate Range of Intellectual Disabilities. R16, R27, R30, R55, R67, R73, R78 and R83 function in the Severe Range of Intellectual Disabilities. R1-R15, R17-R22, R24-R26, R29, R31-R34, R37-R49, R51-R54, R56-R59, R62, R63, R65, R66, R69-R72, R74-R76, R79, R80, R82, R85, R88, R89, R91 and R92 all function in the Profound Range of Intellectual Disabilities.	Z9999	<b>Attachment A</b> <b>Statement of Licensure Violations</b>	

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
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Z9999	<p>Continued From page 1</p> <p>Facility Policy (undated) titled, "Coronavirus Disease (COVID-19)" documents in part; "Employees/Visitors/Home Visits; 14. Visitors will be required to don a mask, perform hand hygiene, answer a questionnaire, have their temperature obtained, and socially distance."</p> <p>Upon Surveyors entrance on 1/11/22, 1/12/22 and 1/13/22 the surveyors temperature was taken but no questionnaire was completed asked about symptoms of COVID.</p> <p>Interview with E6 (Care Plan Coordinator) on 1/14/21 at 2:39 PM, E6 confirmed surveyor should have been asked about COVID symptoms up entry to facility. (B)</p> <p>2/4 Section 350.1060 Training and Habilitation Services The facility shall provide training and habilitation services to facilitate the intellectual, sensorineural, and effective development of each resident in the facility.</p> <p>These requirements were not met as evidenced by:</p> <p>Based on observation, record review and interview the facility failed to ensure staff were properly trained to provide incontinence care for 1 of 1 in the sample (R1).</p> <p>Findings Include: 5) Review of R1's ISP (Individual Service Plan of 12/12/21, R1 is a non-ambulatory female who functions in the Profound Range of Intellectual Disabilities.</p>	Z9999		

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Z9999	<p>Continued From page 2</p> <p>Facility Policy (dated 9/11/19) titled, "Peri Care-Female" documents in part; "Procedure 7. Gently clean perineal area, including inner thighs; 11. Rinse the entire area, if using soap and pat dry with a towel."</p> <p>Observations on 1/11/21 at 11:08 AM, R1 had been moved from wheelchair to bed by E7, E8 and E9 DSP's (Direct Service Personnel). R1's wet attend was removed and she was left open to air on the bed pad. There was no Peri care provided to R1 by the DSP's.</p> <p>Interview with E4 (Acting Director of Nursing) on 1/12/21 at 1:00 PM, E4 was asked if incontinence care is to be provided after removing a wet attend on R1? E4 stated, "Yes." (C)</p> <p>3/4 Section 350.1610 Resident Record Requirements An ongoing resident record including progression toward and regression from established resident goals shall be maintained.</p> <p>Section 350.1620 Content of Medical Records d)15) Appropriate authorizations and consents.</p> <p>These requirements were not met as evidenced by:</p> <p>Based on observation, record review and interview the facility failed to ensure: to ensure consent for restrictive medication was obtain in timely manner by the Human Rights Committee for 1 of 1 in the sample (R5).</p> <p>FindingsInclude:</p>	Z9999		
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Z9999	<p>Continued From page 3</p> <p>1) Review of R1's ISP (Individual Service Plan) of 12/12/21, R1 is a non-ambulatory female who functions in the Profound Range of Intellectual Disabilities. Review of R1's program objectives and documentation. -To visually attend to her activity daily. In October not documented 24 of 31 times, November not documented 21 of 30 times and December not documented 29 of 31 times. -To hold soapy washcloth in her hand daily before meals. In October not documented 13 of 31 days, November not documented 30 of 30 days and December not documented 27 of 31 times.</p> <p>Review of R2's ISP (Individual Service Plan) of 8/12/21, R2 is a non-ambulatory male who functions in the Profound Range of Intellectual Disabilities. Review of R2's program objectives and documentation. -To cleans the palm of his left hand daily. In October not documented 20 of 30 days, November not documented 26 of 30 times and December not documented 30 of 31 times. -To complete oral care twice daily. In October not documented 30 of 31 days, November not documented 30 of 30 days and December not documented 30 of 31 times.</p> <p>Review of R3's ISP (Individual Service Plan) of 12/9/21, R3 is a non-ambulatory male who functions in the Profound Range of Intellectual Disabilities. Review of R3's program objectives and documentation. -To rinse his right cheek daily. In October not documented 23 of 31 times, November not documented 26 of 30 times and December not documented 25 of 31 times. -To cooperate when staff wash the palm of his left hand. In October not documented 24 of 31 times, November not documented 24 of 30 times and</p>	Z9999		

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Z9999	<p>Continued From page 4</p> <p>December not documented 28 of 31 times.</p> <p>Review of R4's ISP (Individual Service Plan) of 1/6/21, R4 is a non-ambulatory male who functions in the Profound Range of Intellectual Disabilities. Review of R4's program objectives and documentation. -To complete passive range of motion 7 days a week. In October not documented 23 out of 31 times, November 22 out of 30 times and December 25 out of 31 times. -To wash his face after meal, In October, Program not documented 14 out of 31 times. In November, 11 out of 30 times and December 12 out of 31 times.</p> <p>Review of R5's ISP (Individual Service Plan) of 5/13/21, R5 is an ambulatory male who functions in the Profound Range of Intellectual Disabilities. Review of R5's program objectives and documentation: -To complete handwashing task daily before all meals. Program not documented 22 out of 31 times i October, In November, 23 out of 30 times not documented and In December, 22 out of 31 times not documented. -Toothbrushing to be completed daily, In October, 29 out 31 times not documented, November, 28 out of 30 times not documented and In December, 29 out of 31 times not documented.</p> <p>Review of R6's ISP (Individual Service Plan) of 12/7/21, R6 is a non-ambulatory female who functions in the Profound Range of Intellectual Disabilities. Review of R6's program objectives and documentation. -Will cooperate with handwashing. Program to be documented daily. In October, program was not documented 16 out of 31 times. In November, program not documented 20 out of 30 times and</p>	Z9999		

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Z9999	<p>Continued From page 5</p> <p>December no documentation completed. -To complete Passive Range of Motion. Program to be complete 5 times a day. In October, program not documented 25 out of 31 times. In November. 21 out of 30 times. December no documentation for the program.</p> <p>Interview with E2 (Assistant Administrator) on 1/12/22 at 1:45 pm, E2 sated there is a issues with the DSP (Direct Support Person) completed the necessary documentation on the individuals program.</p> <p>2). Review of R5's ISP (Individual Service Plan) of 5/13/21, R5 is an ambulatory male who functions in the Profound Range of Intellectual Disabilities.</p> <p>Review of R5's Annual Dental Screening of 6/11/21, " Dr. here for at facility for dental exam. Attempted exam resident uncooperative. Sedation needed for cleaning. Ativan 2mg given."</p> <p>Review of Human Rights Committee (HRC) Minutes. The HRC did not consent until R5's medication until 7/29/21.</p> <p>Interview with E5 (Social Worker) on 1/12/22, This is our most current Human Rights Consent concerning R5's Ativan. (AW) 4/4 Section 350.3220)h)2) h)2) Cancer screening: Cancer screening for women shall include the following: Mammography: The frequency shall be according to the guidelines set forth in the Guidelines for Women's Health Care.</p> <p>These requirements were not met as evidenced</p>	Z9999		

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Z9999	<p>Continued From page 6</p> <p>by:</p> <p>Based on observation, record review and interview the facility failed to ensure ensure an annual mammogram was completed for 2 of 2 in the sample (R1 and R6).</p> <p>Findings Include:</p> <p>3) Review of R1's ISP (Individual Service Plan of 12/12/21, R1 is a non-ambulatory female who functions in the Profound Range of Intellectual Disabilities.</p> <p>Review of R1's last Mammogram was 4/3/2019, with recommendation for routine annual screening.</p> <p>Interview with E4 (Acting Director of Nursing) on 1/13/21 at 3:00 pm, E4 confirmed R1's mammogram had been canceled due to COVID and R1's fracture in November.</p> <p>Review of R6's ISP (Individual Service Plan) of 12/7/21, R6 is a non-ambulatory female who functions in the Profound Range of Intellectual Disabilities.</p> <p>Review of R6's Mammogram of 4/6/20, The consultation sheet indicates R6's appointment had been canceled.</p> <p>Interview with E6 (Care Plan Coordinator) on 1/12/22 at 9:30 am, E6 confirmed R6's mammogram was canceled on 4/6/20 due to COVID and the appointment had not been rescheduled.</p> <p>(AW)</p>	Z9999		