

Illinois Department of Public Health

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| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: IL6005268 | (X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____ | (X3) DATE SURVEY COMPLETED R-C 05/04/2022 |
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| NAME OF PROVIDER OR SUPPLIER LEBANON TERRACE | STREET ADDRESS, CITY, STATE, ZIP CODE 221 EAST THIRD STREET LEBANON, IL 62254 |
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| {Z 000} | COMMENTS 3rd Follow Up to Complaint Survey 2145520/IL136663 | {Z 000} | | |
| {Z9999} | FINDINGS Statement of Licensure Violations: 350.510 a) 350.760 a) 350.1440 a)e)i) Section 350.510 Administrator a) There shall be an administrator licensed under the Nursing Home Administrators Licensing and Disciplinary Act (Ill. Rev. Stat. 1987, ch. 111, par. 3651 et seq.) full-time for each licensed facility. The licensee will report any change in administrator to the Department, within five days. Section 350.760 Infection Control a) Policies and procedures for investigating, controlling, and preventing infections in the facility shall be established and followed. The policies and procedures shall be consistent with and include the requirements of the Control of Communicable Diseases Code (77 Ill. Adm. Code 690) and Control of Sexually Transmissible Diseases Code (77 Ill. Adm. Code 693). Activities shall be monitored to ensure that these policies and procedures are followed. Section 350.1440 Labeling and Storage of Medications a) All medications for all residents shall be properly labeled and stored at or near the nurses' station in a locked cabinet, in a locked medication room, or in one or more locked mobile medication carts of satisfactory design for such storage. | {Z9999} | Attachment A Statement of Licensure Violations | |

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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>e) The key or access code to the medicine cabinet, medicine room or mobile medication cart shall be the responsibility of, and in the possession of, the persons authorized to handle and administer drugs, at all times.</p> <p>i) The medications of each resident shall be kept and stored in their originally received containers. Medications shall not be transferred between containers, except that a licensed nurse, acting as the agent of the resident, may remove previously dispensed medication from original containers and place it in other containers to be sent with a resident when the resident will be out of the facility at the time of scheduled administration of medication. When medication is sent out of the facility with the resident, it shall be labeled by the nurse with the name of the resident, name and strength of the medication, instructions for administration and any other appropriate information.</p> <p>This REQUIREMENT is not met as evidenced by:</p> <p>Based on observation, record review and interview the facility failed to meet State and Federal regulatory requirements when the Governing Body failed to:</p> <ol style="list-style-type: none"> 1) Have an appointed administrator with a valid Illinois license for the facility, affecting all 14 individuals residing at the facility (R1-R14), 2) Notify Illinois Department of Public Health (IDPH) when the facility administrator resigned, affecting all 14 individuals residing at the facility (R1-R14), 3) Implement Medication Storage Policy, potentially affecting all 14 individuals residing at | {Z9999} | | |

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| {Z9999} | <p>Continued From page 2</p> <p>the facility (R1-R14),</p> <p>4) Implement Medication Administration Policy, affecting 2 of 2 individuals inside the sample (R2, R3) and 1 individual outside the sample (R6) observed during medication pass,</p> <p>5) Develop an Infection Control Policy, affecting all 14 individuals residing at the facility (R1-R14).</p> <p>Findings include:</p> <p>Facility Roster, undated, identifies R1-R11 as individuals who function within the Mild Range for Individuals with Intellectual Disabilities; R12 as an individual who functions within the Moderate Range for Individuals with Intellectual Disabilities; R13 and R14 as individuals who function within the Severe Range for Individuals with Intellectual Disabilities.</p> <p>Section 350.510 documents, "Administrator: a) There shall be an administrator licensed under the Nursing Home Administrators Licensing and Disciplinary Act (Ill. Rev. Stat. 1987, ch. 111, par. 3651 et seq.) full-time for each licensed facility. The licensee will report any change in administrator to the Department, within five days."</p> <p>1) Facility Plan of Correction with completion date of 4/30/22 includes, "Per the Illinois Department of Financial and Professional Regulations (IDFPR), Temporary Administrator's License have been applied for. Upon receipt license shall be displayed in the home."</p> <p>On 5/2/22 at 6:01 am, E8 (Qualified Intellectual Disabilities Professional/QIDP) Temporary Administrator License was hung at the facility.</p> | {Z9999} | | |

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| {Z9999} | <p>Continued From page 3</p> <p>E8's Temporary Administrator License identifies another facility in Springfield on the license. E8's Temporary Administrator License has an expiration date of 4/13/22.</p> <p>On 5/2/22 at 6:26 am, E6 (Cook) E6 was asked who the facility Administrator was. E4 stated, "E8."</p> <p>On 5/2/22 E1 (Program Specialist) gave surveyors papers including a letter to IDFPR, undated, with a request for E7 (Staff Development) to receive an extension to her Temporary Administrator License and to issue it for the facility. A Certification of Acceptance Form (CA-NHA) with date of 3/18/22 including E7 requesting a temporary Administrator License for facility. Along with a Money Order, dated 3/18/22, with nothing typed or wrote on who the Money Order is for.</p> <p>E7's Temporary Administrator License identifies another facility in Springfield on the license and expired 11/6/21.</p> <p>On 5/2/22 at 8:36 am, Z1 (IDFPR-Office Coordinator) was asked if E8 has obtained her Administrator License. Z1 stated, "No." Z1 was asked if E7 had obtained a Temporary Administrator License. Z1 stated, "Yes, but it expired 11/21."</p> <p>On 5/2/22 an email from Z1 includes, "We have not received E7's application for extension of the license."</p> <p>On 5/2/22 at 9:45 am, E1 stated that she was on the phone with E7 and that E7 stated, "She has applied for an extension on her license, and it is for the facility." E1 stated, "E7 has not received</p> | {Z9999} | | |

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| {Z9999} | <p>Continued From page 4</p> <p>anything yet." E1 was asked if E7 sent the request certified mail. E1 stated, "E7 said no because it was a PO Box that it was sent to."</p> <p>On 5/2/22 an email from Z1 documented that if the request for a Temporary Administrator License extension and request for change of facility was sent from E7 it could be waiting for the fees and documents to be keyed in the system. An email was sent back to Z1 asking how long that information takes to be keyed in, if E7 sent the request in on the documented date in 3/22, should it be keyed in the system by now. Z1 sent an email back documenting, "I honestly don't know. I have forwarded your question to Z2 (IDFPR-PSA)."</p> <p>On 5/2/22 at 3:22 pm, Z2 was told that E7 said she mailed in the request for Temporary Administrator License to be extended and for the facility on 3/18/22 and that she did not send it certified because it was a PO Box. Z2 was asked if E7's application should have been keyed in the system by now. Z2 stated, "We sign for certified mail all the time for that PO Box. E7's application should have been processed by now if it was sent in 3/18/22."</p> <p>2) On 5/2/22 at 8:36 am, Z1 was asked who is documented as the Administrator of the facility. Z1 stated, "E9 (Former Administrator)."</p> <p>On 5/2/22 at 1:09 pm, E1 gave surveyors paperwork that documented E9's Administrator License expired 2/28/22. E1 was asked if the facility notified IDPH when E9 left the facility. E1 stated, "No, E7 thought when E8 applied for a Temporary Administrator License that was the notification."</p> <p>On 5/2/22 an email from E1 verified E9 left as</p> | {Z9999} | | |

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| {Z9999} | <p>Continued From page 5</p> <p>Administrator of the facility 9/20.</p> <p>3) Facility Medication Storage Policy dated 7/1/16 includes, "The facility shall provide for the storage of medications in accordance with prevailing standards. Procedure: 1. The Health Service Director shall ensure that all medications administered by the facility staff are: A. Stored under lock and key and otherwise secured as required by federal and state regulations."</p> <p>Section 116.80 includes, "b) Access to medications shall be limited to licensed personnel and authorized direct care staff."</p> <p>On 5/2/22 at 6:45 am, the medication room key was hung outside the medication room on a hook. No staff was near or insight of the keys. R1, R4, R6, R10 and R11 were sitting at the table near the medication room.</p> <p>On 5/2/22 at 6:47 am, E4 (Direct Support Person/DSP) was asked if he was medication certified. E4 stated, "No."</p> <p>On 5/2/22 at 7:03 am, E3 (DSP) hung the medication room key on a hook outside the medication room.</p> <p>On 5/2/22 at 7:12 am, E4 hung the medication room key on a hook outside the medication room.</p> <p>On 5/2/22 at 12:50 pm, E1 was asked if the medication room key should be hung outside the medication room. E1 stated, "No."</p> <p>4) Section 116.80 includes, "d) All medications shall be stored in their original containers." a) R6's Physician's Order (PO) dated 5/2/22 includes, "7:00 am medications: Cryselles-28</p> | {Z9999} | | |

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| {Z9999} | <p>Continued From page 6 tablet."</p> <p>On 5/2/22 at 6:13 am, E3 was inside the medication room and there were three medication cups with medications already in the cups. Nothing wrote on the side of the medication cups. R6 entered the room and E3 handed R6 one of the already filled medication cups with one pill in the cup. R6 took the medication.</p> <p>E3 was asked if she pre-popped the medications. E3 stated, "Yes, because they leave early for workshop."</p> <p>b) R3's PO dated 5/2/22 includes, "7:00 am medications: Amlodipine 5 mg, Atorvastatin 10 mg, Clozapine 100 mg, Glimepiride 2mg, Glimepiride 4mg, Hydrochlorothiazide 12.5 mg, Januvia 100 mg, Metoprolol 100 mg, Metoprolol 50 mg, Multivitamin, Omeprazole 40 mg."</p> <p>On 5/2/22 at 6:15 am, E3 grabbed one of the medication cups with medication already in it, handed it to R3 and R3 took the medications in the cup.</p> <p>c) R2's PO dated 5/2/22 includes, "6:00 am medication: Levothyroxine 125 mcg."</p> <p>On 5/2/22 at 6:18 am, E3 grabbed a medication cup with a medication in the cup, handed it to R2 and R2 took the medication.</p> <p>5) On 5/2/22 at 6:32 am, E6 sat a plastic container of silverware on the table where R6 was reading a book and R10 was coloring. The table was not wiped off before R1, R3, R4, R6 sat down and began eating breakfast. R1, R3, R4, and R6 were not prompted to wash hands before eating.</p> | {Z9999} | | |

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| {Z9999} | <p>Continued From page 7</p> <p>On 5/2/22 at 12:50 pm, E1 was asked if tables should be wiped off before meals. E1 stated, "Yes." E1 was asked if individuals should wash hands before meals. E1 stated, "Yes."</p> <p>On 5/2/22, facility was unable to produce evidence of a policy addressing wiping off the tables before meals and individuals washing hands before meals.</p> <p>"B"</p> | {Z9999} | | |

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| {Z9999} | <p>Continued From page 3</p> <p>E8's Temporary Administrator License identifies another facility in Springfield on the license. E8's Temporary Administrator License has an expiration date of 4/13/22.</p> <p>On 5/2/22 at 6:26 am, E6 (Cook) E6 was asked who the facility Administrator was. E4 stated, "E8."</p> <p>On 5/2/22 E1 (Program Specialist) gave surveyors papers including a letter to IDFPR, undated, with a request for E7 (Staff Development) to receive an extension to her Temporary Administrator License and to issue it for the facility. A Certification of Acceptance Form (CA-NHA) with date of 3/18/22 including E7 requesting a temporary Administrator License for facility. Along with a Money Order, dated 3/18/22, with nothing typed or wrote on who the Money Order is for.</p> <p>E7's Temporary Administrator License identifies another facility in Springfield on the license and expired 11/6/21.</p> <p>On 5/2/22 at 8:36 am, Z1 (IDFPR-Office Coordinator) was asked if E8 has obtained her Administrator License. Z1 stated, "No." Z1 was asked if E7 had obtained a Temporary Administrator License. Z1 stated, "Yes, but it expired 11/21."</p> <p>On 5/2/22 an email from Z1 includes, "We have not received E7's application for extension of the license."</p> <p>On 5/2/22 at 9:45 am, E1 stated that she was on the phone with E7 and that E7 stated, "She has applied for an extension on her license, and it is for the facility." E1 stated, "E7 has not received</p> | {Z9999} | | |

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| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: IL6005268 | (X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____ | (X3) DATE SURVEY COMPLETED R 05/04/2022 |
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| NAME OF PROVIDER OR SUPPLIER LEBANON TERRACE | STREET ADDRESS, CITY, STATE, ZIP CODE 221 EAST THIRD STREET LEBANON, IL 62254 |
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| {Z9999} | <p>Continued From page 4</p> <p>anything yet." E1 was asked if E7 sent the request certified mail. E1 stated, "E7 said no because it was a PO Box that it was sent to."</p> <p>On 5/2/22 an email from Z1 documented that if the request for a Temporary Administrator License extension and request for change of facility was sent from E7 it could be waiting for the fees and documents to be keyed in the system. An email was sent back to Z1 asking how long that information takes to be keyed in, if E7 sent the request in on the documented date in 3/22, should it be keyed in the system by now. Z1 sent an email back documenting, "I honestly don't know. I have forwarded your question to Z2 (IDFPR-PSA)."</p> <p>On 5/2/22 at 3:22 pm, Z2 was told that E7 said she mailed in the request for Temporary Administrator License to be extended and for the facility on 3/18/22 and that she did not send it certified because it was a PO Box. Z2 was asked if E7's application should have been keyed in the system by now. Z2 stated, "We sign for certified mail all the time for that PO Box. E7's application should have been processed by now if it was sent in 3/18/22."</p> <p>2) On 5/2/22 at 8:36 am, Z1 was asked who is documented as the Administrator of the facility. Z1 stated, "E9 (Former Administrator)."</p> <p>On 5/2/22 at 1:09 pm, E1 gave surveyors paperwork that documented E9's Administrator License expired 2/28/22. E1 was asked if the facility notified IDPH when E9 left the facility. E1 stated, "No, E7 thought when E8 applied for a Temporary Administrator License that was the notification."</p> <p>On 5/2/22 an email from E1 verified E9 left as</p> | {Z9999} | | |

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| {Z9999} | <p>Continued From page 5</p> <p>Administrator of the facility 9/20.</p> <p>3) Facility Medication Storage Policy dated 7/1/16 includes, "The facility shall provide for the storage of medications in accordance with prevailing standards. Procedure: 1. The Health Service Director shall ensure that all medications administered by the facility staff are: A. Stored under lock and key and otherwise secured as required by federal and state regulations."</p> <p>Section 116.80 includes, "b) Access to medications shall be limited to licensed personnel and authorized direct care staff. "</p> <p>On 5/2/22 at 6:45 am, the medication room key was hung outside the medication room on a hook. No staff was near or insight of the keys. R1, R4, R6, R10 and R11 were sitting at the table near the medication room.</p> <p>On 5/2/22 at 6:47 am, E4 (Direct Support Person/DSP) was asked if he was medication certified. E4 stated, "No."</p> <p>On 5/2/22 at 7:03 am, E3 (DSP) hung the medication room key on a hook outside the medication room.</p> <p>On 5/2/22 at 7:12 am, E4 hung the medication room key on a hook outside the medication room.</p> <p>On 5/2/22 at 12:50 pm, E1 was asked if the medication room key should be hung outside the medication room. E1 stated, "No."</p> <p>4) Section 116.80 includes, "d) All medications shall be stored in their original containers." a) R6's Physician's Order (PO) dated 5/2/22 includes, "7:00 am medications: Cryselfe-28</p> | {Z9999} | | |

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| {Z9999} | <p>Continued From page 6 tablet."</p> <p>On 5/2/22 at 6:13 am, E3 was inside the medication room and there were three medication cups with medications already in the cups. Nothing wrote on the side of the medication cups. R6 entered the room and E3 handed R6 one of the already filled medication cups with one pill in the cup. R6 took the medication.</p> <p>E3 was asked if she pre-popped the medications. E3 stated, "Yes, because they leave early for workshop."</p> <p>b) R3's PO dated 5/2/22 includes, "7:00 am medications: Amlodipine 5 mg, Atorvastatin 10 mg, Clozapine 100 mg, Glimepiride 2mg, Glimepiride 4mg, Hydrochlorothiazide 12.5 mg, Januvia 100 mg, Metoprolol 100 mg, Metoprolol 50 mg, Multivitamin, Omeprazole 40 mg."</p> <p>On 5/2/22 at 6:15 am, E3 grabbed one of the medication cups with medication already in it, handed it to R3 and R3 took the medications in the cup.</p> <p>c) R2's PO dated 5/2/22 includes, "6:00 am medication: Levothyroxine 125 mcg."</p> <p>On 5/2/22 at 6:18 am, E3 grabbed a medication cup with a medication in the cup, handed it to R2 and R2 took the medication.</p> <p>5) On 5/2/22 at 6:32 am, E6 sat a plastic container of silverware on the table where R6 was reading a book and R10 was coloring. The table was not wiped off before R1, R3, R4, R6 sat down and began eating breakfast. R1, R3, R4, and R6 were not prompted to wash hands before eating.</p> | {Z9999} | | |
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| {Z9999} | <p>Continued From page 7</p> <p>On 5/2/22 at 12:50 pm, E1 was asked if tables should be wiped off before meals. E1 stated, "Yes." E1 was asked if individuals should wash hands before meals. E1 stated, "Yes."</p> <p>On 5/2/22, facility was unable to produce evidence of a policy addressing wiping off the tables before meals and individuals washing hands before meals.</p> <p>"B"</p> | {Z9999} | | |