

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: IL6011431	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 06/21/2022
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NAME OF PROVIDER OR SUPPLIER WETHERELL PLACE	STREET ADDRESS, CITY, STATE, ZIP CODE 1026 NORTH MERCHANT STREET EFFINGHAM, IL 62401
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Z 000	COMMENTS ANNUAL CERTIFICATION SURVEY INSPECTION OF CARE	Z 000		
Z9999	<p>FINDINGS</p> <p>Statement of Licensure Violations:</p> <p>350.620a) 350.1084c) 350.1084d)4) 350.1084d)5)</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 350.1084 Emergency Use of Physical Restraints</p> <p>c) If a resident needs emergency care and other less restrictive interventions have proven ineffective, a physical restraint may be used briefly to permit treatment to proceed. The attending physician shall be contacted immediately for orders. If the attending physician is not available, the facility's advisory physician or Medical Director shall be contacted. If a physician is not immediately available, a nurse or QMRP with supervisory responsibility may approve, in writing, the use of physical restraints.</p>	Z9999	<p style="text-align: center;">Attachment A Statement of Licensure Violations</p>	

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 confirming order, which may be obtained by telephone, shall be obtained from the physician as soon as possible, but no later than within eight hours. The effectiveness of the physical restraint in treating medical symptoms or as a therapeutic intervention and any negative impact on the resident shall be assessed by the facility throughout the period of time the physical restraint is used. The resident must be in view of a staff person at all times until either the resident has been examined by a physician or the physical restraint has been removed. The resident's needs for toileting, ambulation, hydration, nutrition, repositioning, and skin care must be met while the physical restraint is being used.</p> <p>d) The emergency use of a physical restraint must be documented in the resident's record, including:</p> <p>4) the action by the resident's physician upon notification of the physical restraint use;</p> <p>5) the new or revised orders issued by the physician;</p> <p>These requirements are not met as evidenced by:</p> <p>Based on interview and record review, the facility failed to ensure a record was kept documenting the application and response to the use of restraints for 1 of 1 individual in the sample, (R3), who was placed in physical hold(s) to manage self-injurious behaviors; the facility failed to ensure resident rights and facility protocols were followed when implementing behavior interventions for 1 of 1 individual in the sample, (R3) who was placed in a physical hold restraint inconsistent with R3's Individual Service Plan (ISP) or R3's Behavior Intervention Program</p>	Z9999		

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Z9999	<p>Continued From page 2</p> <p>(BIP); and the facility failed to demonstrate that less intrusive interventions or positive techniques were employed to manage inappropriate behavior prior to the use of more restrictive techniques for 1 of 1 individual in the sample, (R3) who was being placed in a physical hold restraint.</p> <p>Findings include:</p> <p>R3's ISP (Individual Service Plan) dated 10-2021, documents R3 functions in the Moderate Range of Intellectual Disabilities with additional diagnoses of Aggression, Attention Deficit Hyperactivity Disorder, Anxiety and Autism. Further review of R3's ISP documents, "...COMMUNICATION: Ongoing supports: 1) Staff will remind me to my pig pillow, weighted lab dog, fuzzy wrap ball and wear my compression sleeves to prevent me from self-harm when I get upset..."</p> <p>R3's BIP (Behavior Intervention Program) dated 9-2021 documents, "...How to handle SELF-INJURIOUS BEHAVIOR: When R3 is engaged in SELF-INJURIOUS, he is either trying to escape something, seek attention, or impulse reaction. When R3 is trying to escape a task or feeling uncomfortable about a situation choosing to display self-injurious behavior, staff will first try to block the attempts using a pillow or push his hand away to prevent him from striking a hard surface. Ask R3 if he needs a break. "Do you want a break? We'll do one more and then you can have a break." Be sure to return R3 to the task after the break is over. When R3 is seeking attention through self-injurious behavior, blocking should be done along with ignoring. Attempt to block but say nothing and make no eye contact. Offer no sympathy. Once he is calm, redirect to appropriate activity and offer verbal praise. When</p>	Z9999		

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Z9999	<p>Continued From page 3</p> <p>self-injury has an automatic function-block all attempts and redirect R3 to a hands on activity. Once he is calmed and engaged in an appropriate activity, offer reinforcement such as verbal praise, high fives."</p> <p>R3's 4-8-22 SST (Support Services Team) notes documents, "Reason for Referral and Rationale for Intervention: R3 was referred to SST for verbal aggression, self-abuse and property destruction. R3 has been living in the home for about seven months and began having more maladaptive behaviors recently around November 2021. Verbal aggression is defined as being vulgar, cursing, and telling others to shut up. Self-injury is defined as hitting his head, biting himself, digging his nails into his skin, and head butting items such as his dresser. He will also bite the inside of his cheeks and they will bleed. Staff will not be aware of this until the bleeding occurs. His property destruction includes pounding his fists on tables and hard furniture and punching holes in walls. He may also have physical aggression, but this is only when staff are doing a hold to prevent him from injury. He does struggle to communicate at times. Many interventions have been tried. The team feels that more visuals could be utilized to assist him in calming, communication and adjusting to the environment..."</p> <p>Further review of R3's SST notes does include interventions or monitoring the use of a physical hold restraint for R3.</p> <p>Review of the facility's, "Behavior Management-Instructor's Manual" (undated) documents, "...PHYSICAL INTERVENTION: Individuals cannot be held longer than 10 minutes...Documentation of Behavior Intervention: Key elements: -Requirements for</p>	Z9999		

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Z9999	Continued From page 4 documentation -Importance of documentation -Notification of appropriate management staff. Documentation takes place following a behavior incident per the individual's behavior program on the GP-2 graph and the use of GP-2a or Therap, to explain the antecedent; Behavior and conclusion to the incident. If no formal program is in place for the individual, a new GP-15 is generated, or a GER (General Event Report) and a T-log is generated in Therap. Documentation must be specific and include date, time, duration behavior displayed, method of intervention success of intervention and adaptive training techniques used...Following an incident of aggression where physical restraint techniques were used, staff must notify the administrator and the RN (Registered Nurse) of the home for proper follow-up. This must occur as soon as possible following the incident Documentation of all incidents...It is also possible for behavior documentation to become a legal document and therefore must be complete, concise and accurate..." "...PHYSICAL INTERVENTION: Physical intervention is used only as a last resort when all other methods have been exhausted. During physical intervention, staff must continue to use verbal skills to help de-escalate the situation...The graduated system of physical intervention is as follows from least to most intrusive: 1. Physical presence 2. Body positioning and stance 3. Physical diversion and re-direction 4. escorting 5. One-arm hold 6. Two-arm hold..." R3's incident report dated 9-1-21 documents, "Location of occurrence: Hospital. State what happened: Staff used two arm hold to prevent R3 from hurting himself in ER tonight...How affected: Held by staff." The incident report is signed by staff E5/DSP (Direct Support Person).	Z9999		

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Z9999	<p>Continued From page 5</p> <p>R3's incident report dated 3-24-22 documents, "Location of occurrence: R3's bedroom. State what happened: Staff heard R3 cussing in his room and also heard hitting. Staff checked on R3 and seen him punching his wall. R3 saw staff then hit his wrist on his bedroom shelf. R3 was biting his arm and staff attempted to pull arms away from face..." The incident report is signed by staff E3/RSD (Residential Service Director).</p> <p>Review of R3's BMC (Behavioral Management Committee) notes dated 10-21-21 and 4-20-22, does not include the use of physical hold restraints.</p> <p>Interview with E3/RSD (Residential Service Director) on 6-16-22 at approximately 2:15PM, E3 was informed that R3's ISP and BIP documents behavioral interventions for self-injurious behavior that does not include the use of physical restraints. E3 stated, "The pillow does not work after a certain point, so we had to put him in a hold to prevent him from hurting himself."</p> <p>Interview with E2/Regional Manager on 6-16-22 at 3:00PM, E2 was informed the use of physical hold restraints is not included in R3's ISP or BIP. E2 confirmed the use of physical restraints is not in R3's ISP or BIP and stated, "We have SST involved to help with his behaviors."</p> <p>Interview with E2/Regional Manager on 6-16-22 at 3:15PM, E2 was asked if there is any other documentation related to the use of physical hold restraints used on R3? E2 stated, "There is no other documentation other than the GP-15/incident report for the physical hold." In the same interview, E2 was asked if R3's physician and guardian were notified after the use of the</p>	Z9999		

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Z9999	<p>Continued From page 6</p> <p>physical hold restraint? E2 confirmed the facility is unable to produce evidence that R3's physician and guardian were notified following the use of the hold restraint.</p> <p>There is no evidence of documentation included in R3's clinical record regarding authorization to implement the use of physical restraints for R3, including a physician order, an updated guardian or Human Rights Committee consent for the use of physical restraints after the situation became stable.</p> <p>There is no evidence of tracking and monitoring of physical holds for R3.</p> <p>The facility failed to provide evidence of less restrictive behavioral interventions or positive techniques being used to manage R3's self-injurious behavior, prior to the use of a physical hold.</p> <p>(B)</p>	Z9999		