

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: IL6005185	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 05/24/2024
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NAME OF PROVIDER OR SUPPLIER LAKELAND REHAB & HEALTHCARE CENTER	STREET ADDRESS, CITY, STATE, ZIP CODE 800 WEST TEMPLE STREET EFFINGHAM, IL 62401
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S 000	Initial Comments Annual Certification and Licensure	S 000		
S9999	Final Observations Statement of Licensure Violation 300.610)a 300.1210b) 300.1230a) 300.1230b)1) 300.3210a) 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 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	S9999		

Illinois Department of Public Health
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE
Electronically Signed

TITLE

(X6) DATE
06/12/24

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S9999	<p>Continued From page 1</p> <p>care needs of the resident. Restorative measures shall include, at a minimum, the following procedures:</p> <p>Section 300.1230 Direct Care Staffing</p> <p>a) For purposes of the minimum staffing ratios in Section 3-202.05 of the Act and this Section, all residents shall be classified as requiring either skilled care or intermediate care. (Section 3-202.05(b-5) of the Act)</p> <p>b) For the purposes of this Section, the following definitions shall apply:</p> <p>1) "Direct care" - the provision of nursing care or personal care as defined in Section 300.330, therapies, and care provided by staff listed in subsection (i). Direct care staff are those individuals who, through interpersonal contact with residents or resident care management, provide care and services to allow residents to attain or maintain the highest practicable physical, mental and psychosocial well-being. Direct care staff does not include individuals whose primary duty is maintaining the physical environment of the facility (e.g., housekeeping).</p> <p>Section 300.3210 General</p> <p>a) No resident shall be deprived of any rights, benefits, or privileges guaranteed by law, the Constitution of the State of Illinois, or the Constitution of the United States solely on account of his or her status as a resident of a facility. (Section 2-101 of the Act)</p> <p>These regulations were not met as evidenced by:</p> <p>Based on interview and record review the facility</p>	S9999		

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S9999	<p>Continued From page 2</p> <p>failed to ensure timely assistance was provided for toileting needs for 1 (R56) of 6 reviewed for Activities of Daily Living in the sample of 51. This failure resulted in R56 expressing undue feelings of frustration, embarrassment, and neck pain.</p> <p>Findings Include:</p> <p>R56's "Admission Record" documented an original admission date to the facility as 7/1/22. R56 is documented as being a 73 year old female with diagnoses including but not limited to: Secondary Parkinsonism, Unspecified; End Stage Renal Disease; Nontraumatic Subarachnoid Hemorrhage, Unspecified, etc.</p> <p>R56's Minimum Data Set (MDS) with an Assessment Reference Date of 2/27/24 documented a Brief Interview for Mental Status Score of 13, indicating she's cognitively intact. The same MDS documented in Section GG0130, Dependent care for toileting hygiene. Section GG0170 also documented a dependent status for toileting transfer. Section H0300 documented R56 as being frequently incontinent.</p> <p>R56's Plan of Care documented a focus area of ADL (Activities of Daily Living) Self Care Performance Deficit with a date initiated as 7/2/23. Interventions listed for this focus area document, "The resident requires 2 staff participation to use toilet."</p> <p>On 05/21/24 at 09:53 AM, R56 was observed sitting in her wheelchair in her room, with a mechanical lift sling underneath her. R56 was observed being alert and oriented to person, place, and time. R56 stated her only concern with the facility is the amount of time it takes staff to answer call lights, specifically to use or get off the</p>	S9999		

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S9999	<p>Continued From page 3</p> <p>toilet. R56 stated that the average time it takes for call lights to be answered is 30 minutes she would say, but up to 2 hours. R56 stated she can confirm these times by the use of the clocks in her room, where were visualized during this interview. R56 stated this seems to be the worst first thing in the morning, and then after lunch and around 2 PM. R56 stated she has experienced incontinence episodes waiting for staff to take her to the restroom, as well as neck pain, waiting so long for staff to get her off the commode. R56 stated she finds it frustrating and embarrassing when she experiences incontinence and must be changed out of wet clothes and cleaned up.</p> <p>On 5/23/24 at 1:55 PM, R56 was alert and oriented to person, place and time. R56 again confirmed that she utilizes a commode for toileting needs. R56 stated that when left on the commode for prolonged periods of time, waiting for staff to come back and tend to her after being placed on the commode, she will experience a pain level in her neck she rates as a 7 on a 10 point scale, with 10 being the worst. R56 stated that she does not receive pain medication at these times for her neck, as the pain is relieved once repositioned off the commode. R56 confirmed that she does experience incontinence, but stated she knows when she is experiencing incontinence for the most part, and the incontinence stems from waiting for staff assistance.</p> <p>On 5/23/24 at 2:00 PM, V6 (Certified Nurse Assistant) stated that she worked the 2 PM - 10 PM shift, frequently on the 200 hall. V6 stated that R56 does utilize a commode for toileting needs and can appropriately utilize her call light. V6 stated that R56 is frequently incontinent by the time staff answer her call light. V6 stated that R56</p>	S9999		

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S9999	<p>Continued From page 4</p> <p>has previously had a stroke so she isn't sure if R56 doesn't push her call light early enough for staff to get to her before she's incontinent but confirms there are times R56 is continent on the commode, even after experiencing incontinence. V6 stated although she cannot give specific resident names, she acknowledges she has had residents complain to her regarding call light answer times and recognizes staff response times could be improved. V6 stated that on the 200 hall for the 2 PM- 10 PM shift, there are usually 3 CNA's scheduled and one nurse. V6 stated that 200 hall has heavy care resident's that require a lot of staff time.</p> <p>On 5/22/24 at 12:31 PM, V3 (Certified Nurse Assistant, CNA) stated that she works from 6 AM - 2 PM at the facility, usually on 200 hall. V3 stated that she feels like the facility has enough staff, as there are generally 4 CNA's and a nurse staffed on 200 hall. V3 stated that 200 hallway is just heavy care with several residents requiring the assistance of two staff at a time for tasks. V3 stated she answers the call lights in the order she sees them illuminate, and as quickly as possible. V3 stated at times residents are having to wait for staff assistance, it is because staff are busy working with other residents.</p> <p>On 5/22/24 at 12:38 PM, V4 (CNA) stated that he normally works from 6 AM - 2 PM on the 200 hall. V4 stated that he feels like the facility has enough staff. V4 stated that there are just times when multiple heavy care residents needs assistance, which takes up time and the amount of staff available to assist others. V4 stated when residents are having to wait for assistance, it is due to staff being with other resident's, not that they are just standing around.</p>	S9999		

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S9999	<p>Continued From page 5</p> <p>On 5/22/24 at 12:54 PM, V1 (Administrator) stated that the facility does not have a staffing policy, and the facility follows regulatory guidelines for staffing needs. V1 stated that there have been concerns presented to her on and off, stemming from resident council meetings regarding long call light wait times. V1 stated that the facility will go through periods where the times will be reported as being better, then worse again. V1 stated the facility has explored different options to try and improve call light wait times, including dispersing heavy care residents on different halls in the facility, looking at the staffing needs, staff productivity, etc.</p> <p>On 5/23/24 at 1:50 PM, V1 stated that her expectation is that call light be acknowledged by staff within 5 minutes.</p> <p>On 05/23/24 at 02:51 PM, V7 (Medical Director) agreed that his expectations would be for staff to tend to call light answer times as soon as possible. V7 acknowledges that a commode could potentially be uncomfortable and if a resident was expressing discomfort and unsatisfactory wait times, those concerns would need addressed and evaluated.</p> <p>(B)</p>	S9999		
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