

DEPARTMENT OF HEALTH AND HUMAN SERVICES
 CENTERS FOR MEDICARE & MEDICAID SERVICES

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 14G355	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED C 09/05/2007
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NAME OF PROVIDER OR SUPPLIER ORCHARD COURT	STREET ADDRESS, CITY, STATE, ZIP CODE 1430 STATE ROUTE 127 SOUTH JONESBORO, IL 62952
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W9999	<p>Continued From page 10 LICENSURE VIOLATIONS</p> <p>350.620a) 350.1060a) 350.1060c)1)2) 350.1060d)e)h) 350.3240a)</p> <p>Section 350.620 Resident Care Policies 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 350.1060 Training and Habilitation Services a) The facility shall provide training and habilitation services to facilitate the intellectual, sensorimotor, and effective development of each resident in the facility. c) There shall be written training and habilitation objectives for each resident that are: 1) Based upon complete and relevant diagnostic and prognostic data. 2) Stated in specific behavioral terms that permit the progress of the individual to be assessed. d) There shall be evidence of training and habilitation services activities designed to meet the training and habilitation objectives set for every resident. e) An appropriate, effective and individualized program that manages residents' behaviors shall be developed and implemented for residents with aggressive or self-abusive behavior. Adequate, properly trained and supervised staff shall be</p>	W9999		
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W9999	<p>Continued From page 11</p> <p>available to administer these programs.</p> <p>h) There shall be available sufficient, appropriately qualified training and habilitation personnel, and necessary supporting staff, to carry out the training and habilitation program. Supervision of delivery of training and habilitation services shall be the responsibility of a person who is a Qualified Mental Retardation Professional.</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.</p> <p>These Requirements were not met as evidenced by:</p> <p>Based on observation, interview and file review, the facility failed to implement their policy to prevent neglect when they failed to prevent R5, who has a known history of PICA (ingestion of non-edible items), from ingesting inedible objects. The facility failed to put protective measures in place on 05-20-07 when R5 ingested an unknown item that he picked up off the ground outside. Due to the facility's failure to put preventative measures in place after he had ingested an unknown object on 05-20-07, R5 ingested a cigarette butt on 6-30-07. The facility failed to provide adequate supervision to ensure that the potential for R5 to ingest other inedible objects was limited. The facility failed to provide follow up and monitoring after R5 had ingested items on 05-20-07 and 06-30-07.</p> <p>Findings Include:</p> <p>Per review of the facility's face sheet, R5 is a 61</p>	W9999		
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W9999	<p>Continued From page 12</p> <p>year old male who functions at a Profound level of mental retardation.</p> <p>Upon review of R5's Individual Habilitation Plan dated 03-15-07, R5 functions at an age equivalency of 1 year and 1 month. R5 is non-verbal and requires assistance with all activities of daily living.</p> <p>Per review of R5's Individual Habilitation Plan dated 03-16-06, documentation states that R5 is on a behavior program for PICA (Ingestion of inedible objects). Targeted items that R5 has ingested include cigarette butts, yarn and string. Documentation continues to say that R5 requires 24 hour supervision and does not have independent access to the backyard due to PICA.</p> <p>Upon review of R5's Individual Habilitation Plan dated 03-15-07, surveyor noted that R5's behavior program for PICA was discontinued on 03-15-07.</p> <p>Per review of the facility's, "QMRP (Qualified Mental Retardation Professional) Annual Summary" dated 03-15-07, documentation states, "(R5) has 3 incidents of PICA this past year...." Documentation is signed by E5 (Former QMRP).</p> <p>Documentation within R5's Annual Nursing Summary dated 03-19-07 states, "During the past year (R5) has had 7 instances of PICA where he ate cigarette butts and yarn without any distress noted from PICA." Documentation is signed by E4 (Licensed Practical Nurse).</p> <p>During review of R5's medical record, surveyor noted that the facility's, "Environmental Risk Assessment for Determination of Level of</p>	W9999		
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W9999	<p>Continued From page 13</p> <p>Access" form, dated 03-13-07, states that R5 has, "Supervised access only" to the back yard. Documentation also states, "Due to PICA and for safety...." Documentation is signed by E5.</p> <p>Per interview with E1 (Residential Service Director) on 08-24-07 at 11:00 a.m., when asked why R5's behavior program for PICA had been discontinued on 03-15-07, E1 stated that she thought it had been discontinued because R5 had not had any documented episodes of PICA within the last year.</p> <p>E1 confirmed that the Annual Nursing Summary dated 03-19-07 states that R5 had 7 instances of PICA within the past year and that R5's Annual QMRP summary dated 03-15-07 states that he has had 3 instances of PICA within the past year.</p> <p>E1 continued to say that she does not know why R5's PICA program was discontinued during his Annual Interdisciplinary Team Meeting (IDT) 03-15-07, other than it was a recommendation from Z1. E1 also stated that the documentation presented at the IDT meeting 03-15-07 was not accurate as to how many times R5 has had PICA behavior within the last year.</p> <p>Documentation within R5's Nurse's Notes dated 05-20-07 at 4:45 p.m., state, "R5 was noticed picking something off of the ground and putting it in his mouth and swallowing it at 210 pm today. No distress at this time. Vitals 98.4, 76, 130/78, 18, Lungs clear bilateral. No difficulty swallowing at this time...." Documentation is signed by E6 (Licensed Practical Nurse).</p> <p>Documentation within R5's Nurse's Notes continue to say that on 06-30-07 at 9:15 a.m.,</p>	W9999		
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W9999	<p>Continued From page 14</p> <p>"(R5) picked up a cigarette butt that was on the ground before staff could intervene (and) ate it. No (signs or symptoms) of distress." Documentation is signed by E3 (Licensed Practical Nurse).</p> <p>Surveyor found no documentation within R5's file to indicate that additional follow-up by nursing staff has occurred after the PICA incidents of 05-20-07 and 06-30-07. In addition, surveyor found no documentation that protective measures have been put in place to prevent R5 from future PICA episodes.</p> <p>During interview with E3 on 08-29-07 at 3:25 p.m., E3 confirmed that there was no investigation or corrective action taken for R5's PICA incidents of 05-20-07 and 06-30-07. E3 continued to say that nothing has been done to try and identify what object R5 had eaten 05-20-07. E3 stated that there were no x-rays done nor did the facility monitor R5's stools to see if he would pass the object.</p> <p>During same interview with E3 on 08-29-07, E3 stated that usually if it is a PICA behavior or incident without an injury, no follow up is done unless the resident complains or shows signs of distress.</p> <p>During the interview with E1 on 08-24-07 at 11:00 a.m., when asked what she had put in place after R5 had a PICA episode 05-20-07 and 06-30-07, E1 replied, "I didn't, I'm the RSD (Residential Service Director)."</p> <p>E1 confirmed that no safeguards or increased supervision had been put in place after either of R5's PICA behaviors. E1 continued to say that it</p>	W9999		

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W9999	<p>Continued From page 15</p> <p>is up to the QMRP to monitor the incident reports and follow up on them.</p> <p>Per interview with E2, (QMRP) on 08-24-07 at 11:20 a.m., E2 stated that she was not aware of the 2 incidents regarding R5 having PICA behavior and that she has put no safeguards in place to ensure R5 does not put inedible items in his mouth.</p> <p>Upon review of the facility's policy for abuse and neglect, neglect is defined as, "...A failure in a facility to provide adequate medical or personal care or maintenance, which failure results in physical or mental injury to a resident or in the deterioration of a residents' physical or mental condition...."</p> <p>(A)</p> <p>350.690c)1)2)3)</p> <p>Section 350.690 Disaster Preparedness</p> <p>c) Fire drills shall be held at least quarterly for each shift of personnel. Disaster drills for other than fire shall be held twice annually for each shift of facility personnel. Drills shall be held under varied conditions to:</p> <ol style="list-style-type: none"> 1) Ensure that all personnel on all shifts are trained to perform assigned tasks. 2) Ensure that all personnel on all shifts are familiar with the use of the fire fighting equipment in the facility; and 3) Evaluate the effectiveness of disaster plans and procedures. <p>These Requirements were not met as evidenced</p>	W9999		

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W9999	<p>Continued From page 16</p> <p>by:</p> <p>Based on interviews and file review, the facility has failed to ensure that fire drills are held at least quarterly for each shift of personnel. In addition the facility has failed to ensure that disaster drills are held twice annually for each shift of facility personnel. (R1 through R15).</p> <p>Findings Include:</p> <p>During task 2 of the survey process, while reviewing the facility's fire and disaster drills, surveyor noted that there was no documentation of fire drills having been conducted on the midnight shift since 10-12-06. In addition, surveyor noted that there had been a fire drill conducted at 4:30 p.m. on 01-22-07 and no documentation of another fire drill on that shift until 05-19-07.</p> <p>During review of the facility's fire drills, surveyor also noted that there was no documentation as to the type or extent of assistance some residents would require during evacuations.</p> <p>Per interview with E1 (Residential Service Director) on 08-23-07 at 11:20 a.m., E1 stated that there had not been any additional fire drills conducted. E1 also confirmed that the fire drills did not specify what type of assistance was needed to evacuate the residents during the drill. E1 continued to say that, based on the information documented on the fire drill log, the facility could not identify potential problems with evacuating the residents.</p> <p>Per review of the facility's disaster drills for the past year, surveyor noted that there had been tornado</p>	W9999		
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W9999	<p>Continued From page 17</p> <p>drills conducted on 03-29-07 and 04-11-07. Surveyor observed documentation that a "Missing Residents Drill," had been done on 04-29-07. No other disaster drills were presented to surveyor for review.</p> <p>Per review with E1 on 08-23-07 at 11:20 a.m., E1 stated that there had not been any additional disaster drills for the past year.</p> <p>Per review of the facility's resident roster, ages of residents who reside at this facility range from 25 to 75 years old. The facility has 1 resident that functions at a Mild level of mental retardation, 2 that function at a Severe level of mental retardation and 12 that function at a Profound level of mental retardation.</p> <p>In addition, there are 2 blind residents living at this facility and 1 resident that requires a walker with staff assistance for ambulation.</p> <p style="text-align: center;">(B)</p> <p>350.1050a) 350.1050g) 350.1050h)2)5)</p> <p>Section 350.1050 Recreational and Activities Services</p> <p>a) The facility shall provide an ongoing program of activities to meet the interests and the physical, mental and psychological well-being of each resident, in accordance with the resident's comprehensive assessment. The recreational and activity services shall be coordinated with</p>	W9999		
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W9999	<p>Continued From page 18</p> <p>other services and programs to make use of both community and facility resources and to benefit the residents.</p> <p>g) The facility shall provide a specific, planned program of individual (including self-initiated) and group activities that are aimed at improving, maintaining, or minimizing decline in the resident's functional status, and at promoting well-being. The program shall be designed in accordance with the individual resident's needs, based on past and present lifestyle, cultural/ethnic background, interests, capabilities, and tolerance. Activities shall be daily and shall reflect the schedules, choices, and rights of the residents (e.g., morning, afternoon, evenings and weekends). The residents shall be given opportunities to contribute to planning, preparing, conducting, concluding and evaluating the activity program.</p> <p>h) The activity program shall be multifaceted and shall reflect each individual resident's needs and be adapted to the resident's capabilities. The activity program philosophy shall encompass programs that provide stimulation or solace; promote physical, cognitive and/or emotional health; enhance, to the extent practicable, each resident's physical and mental status; and promote each resident's self-respect by providing, for example, activities that support self-expression and choice. Specific types of activities may include:</p> <p>2) Cognitive stimulation/intellectual/educational activity (e.g., discussion groups, guest speakers, films, trivia, quizzes, table games, puzzles, writing, spelling, newsletter);</p> <p>5) Sensory stimulation (e.g., tactile, olfactory,</p>	W9999		
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W9999	<p>Continued From page 19 auditory, visual and gustatory).</p> <p>These regulations are not met as evidenced by:</p> <p>Based on observation, interview and file review the facility has failed to ensure that each resident is provided an ongoing program of activities to meet the interests and the physical mental and psychological well-being of each resident by failing to provide adequate activities as based on the residents assessments for 4 of 4 residents in the sample. (R1, R2, R3 and R4).</p> <p>Findings Include:</p> <p>Per review of the facility's face sheets:</p> <p>R1 is a 36 year old male who functions at a Mild level of mental retardation.</p> <p>Per review of R1's Annual Activity/Leisure Assessment dated 02-02-07, activities that R1 enjoys include: Video games, television and listening to music.</p> <p>R2 is a 49 year old male who functions at a Severe level of mental retardation.</p> <p>Per review of R2's Annual Activity/Leisure Assessment dated 05-14-07, activities that R2 enjoys for in-house leisure time is documented as being time alone and music.</p> <p>R3 is a 59 year old male who functions at a Profound level of mental retardation.</p> <p>Per review of R3's Annual Activity/Leisure Assessment dated 12-29-06, activities that R3 enjoys include: Painting, doing puzzles, playing</p>	W9999		
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W9999	<p>Continued From page 20 bingo and board games.</p> <p>R4 is a 65 year old male who functions at a Profound level of mental retardation.</p> <p>Per review of R4's Annual Activity/Leisure Assessment dated 02-14-07, activities that R4 enjoys include: Playing bingo, arts/crafts, looking at magazines and holding objects.</p> <p>During observations on 08-23-07 from 3:30 p.m. until 4:40 p.m., surveyor observed the residents in the facility to return home from day training at 3:30 p.m.. All residents were taken to the dining room where a snack of a deviled egg and red colored drink.</p> <p>After the snack, coloring pages and crayons were put on the table. R1 left the facility to visit the sister facility. R2 and R4 were observed to sit at the table and began coloring on a coloring page. R3 was noted to finish his snack, and go out the back door to the fenced in back yard and sit in a chair.</p> <p>At 3:40 p.m., R2 was observed to leave the dining room and go into the activity room where he sat in a chair. R6 was observed several times to go into the activity room and open the door to the activity closet and close it without getting anything out.</p> <p>At 3:45 p.m. on 08-23-07, surveyor observed R4 to leave the dining area and go to the living room and sat in a chair by the door. No staff interaction or activity was offered to R4.</p> <p>During continuing observations on 08-23-07 at 4:35 p.m., surveyor observed R2 standing at the kitchen door and looking into the kitchen. No staff</p>	W9999		
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W9999	<p>Continued From page 21 intervention or activity was offered to R2.</p> <p>Also at 4:35 p.m., R3 was noted to be standing outside of the facility looking in the kitchen window watching staff prepare dinner.</p> <p>From 3:30 until 4:40 p.m. on 08-23-07, surveyor noted that no activities were offered to the residents except for the coloring pages.</p> <p>Per review of the facility's activity closet on 08-24-07 at 2:10 p.m., surveyor noted that there was 1 box of crayons, 1 box of colored pencils, 1 box of small wooden blocks, 3 soft balls, several pieces of puzzles, a box of musical instruments, an abacus and a large floor tic tac toe set.</p> <p>Per interview with E1 on 08-24-07 at 2:10 p.m., E1 confirmed that there were very few activities available for the residents. E1 continued to say that R6 takes all the activities to his room and hides them and that, "Every so often, we have to go in his room and gather them back up."</p> <p>(B)</p> <p>350.1060a)d)</p> <p>350.1060 Training and Habilitation Services</p> <p>a) The facility shall provide training and habilitation services to facilitate the intellectual, sensorimotor, and effective development of each resident in the facility.</p> <p>d) There shall be evidence of training and habilitation services activities designed to meet the training and habilitation objectives set for</p>	W9999			

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WV9999	<p>Continued From page 22 every resident.</p> <p>These Requirements were not met as evidenced by:</p> <p>Based on observation, interviews and file review the facility has failed to ensure that all residents receive training and habilitation services to facilitate the intellectual, sensorimotor and effective development of each resident by not ensuring that objectives are functional for 2 of 4 clients in the sample (R2, R3). In addition the facility failed to run self medication programs for 8 of 8 residents observed to receive medication on 08-23-07. (R3, R4, R5, R8, R9, R11, R13, R14).</p> <p>Findings Include:</p> <p>A. Non Functional Objectives:</p> <p>1. Per review of the facility roster R2 is a 49 year old male who functions at a Severe level of mental retardation.</p> <p>Upon review of R2's Individual Habilitation Plan dated 05-17-07, surveyor noted that R2 is on a Recreation/Leisure objective. Objective states, "Given verbal prompts, and a choice of two or three activities, (R2) will participate in an activity 10 minutes.</p> <p>During observation on 08-23-07 when the residents returned home from day training, coloring pages and crayons were put on the table. R2 was prompted by direct care staff to sit and color. R2 was observed to color on a coloring page until 3:40 p.m..</p> <p>No choice of activity was noted to be offered to</p>	WV9999		
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WV9999	<p>Continued From page 23</p> <p>R2 as per his Individual Habilitation Plan.</p> <p>At 3:40 p.m., R2 was observed to leave the dining room and go into the activity room where he sat in a chair.</p> <p>During continuing observations on 08-23-07 at 4:35 p.m., surveyor observed R2 standing at the kitchen door and looking into the kitchen. No staff intervention or activity was offered to R2.</p> <p>R2 sat in the chair in the activity room or wandered around inside of the facility without staff interaction or activity offered to him from 3:40 p.m. until 4:50 p.m., when surveyor left the area.</p> <p>2. A. Per review of the physician's order sheet, dated 08-15-07, R3 is a 59 year old male who functions at a Profound level of mental retardation. Documentation on the physician's order sheet continues to say that R3 is on a pureed diet.</p> <p>Upon review of R3's Individual Habilitation Plan dated 01-18-07, surveyor noted that R3 is on a Eating objective. Eating objective states, "Uses fork appropriately to spear applicable food...".</p> <p>Per interview with E2 (Qualified Mental Retardation Professional) on 08-29-07 at 2:50 p.m., E2 stated that R3's eating objective is not functional since he is on a pureed diet.</p> <p>B. Self Medication Objectives not ran:</p> <p>Per review of the facility roster:</p> <p>R3 is a 59 year old male who functions at a Profound level of mental retardation.</p>	W9999		
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W9999	<p>Continued From page 24</p> <p>R4 is a 65 year old male who functions at a Profound level of mental retardation.</p> <p>R5 is a 61 year old male who functions at a Profound level of mental retardation.</p> <p>R8 is a 73 year old male who functions at a Severe level of mental retardation.</p> <p>R9 is a 49 year old male who functions at a Profound level of mental retardation.</p> <p>R11 is a 64 year old male who functions at a Profound level of mental retardation.</p> <p>R13 is a 41 year old male who functions at a Profound level of mental retardation.</p> <p>R14 is a 71 year old male who functions at a Profound level of mental retardation.</p> <p>During observation of the 5:00 p.m. medication pass on 08-23-07, surveyor observed R3 to come into the medication room at 4:50 p.m.. Z2 was noted to punch out a Depakote 125 milligram tablet. Z2 then crushed the tablet and fed it to R3 in chocolate pudding. R3 then left the room.</p> <p>Continuing observation of the 5:00 p.m. medication pass on 08-23-07, surveyor noted that at 5:45 p.m., R4 came into the medication room. Z2 punched out R4's 5:00 p.m. medication which consisted of: Remeron 15 milligrams, Ativan 1 milligram and Lactulose 15 milliliters. R4 took the medication with water and left the room.</p> <p>At 5:26 p.m. R14 came into the medication room to receive his medication. Z2 punched out R14's</p>	W9999		
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W9999	<p>Continued From page 25</p> <p>medication which were Buspar 15 milligrams, Paxil 15 milligrams and Risperdal 2 milligrams. Z2 handed R14 his medications and a cup of water. R14 took the medicine and left the room.</p> <p>In addition to R3, R4 and R14's self medication objectives not being ran, surveyor observed that R5, R8, R9, R11 and R13 have self medication objectives to wash their hands prior to taking their medications. The handwashing objectives were observed not to be done for any of the residents.</p> <p>Per interview with Z2, on 08-23-07 at 6:10 p.m., Z2 stated that she had not ran any self medication objectives because; "The med programs are ran Monday, Wednesday and Friday here."</p> <p>Per interview with E7, (Licensed Practical Nurse) on 08-29-07 at 11:15 a.m., E7 stated that the self medication objectives should be ran every time that medication is passed.</p> <p style="text-align: center;">(B)</p> <p>350.3210b)</p> <p>350.3210 Resident's Rights</p> <p>b) A resident shall be permitted to retain and use or wear his personal property in his immediate living quarters, unless deemed medically inappropriate by a physician and so documented in the resident's clinical record.</p> <p>These Requirements are not met as evidenced by:</p>	W9999		
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W9999	<p>Continued From page 26</p> <p>Per review of the facility roster, R1 is a 36 year old male who functions at a Mild level of mental retardation. Per R1's Inventory for Client Agency Planning (ICAP), dated 06-26-06, R3 functions at an overall age equivalency of 8 years and 5 months.</p> <p>During observation on 08-24-07 at 8:15 a.m., surveyor noted R1 to be sitting outside the facility smoking a cigarette.</p> <p>Per interview with R1 on 08-24-07 at 8:15 a.m., R1 informed surveyor that he carries his own cigarettes but is not allowed to have a cigarette lighter. When asked why he could not have a lighter, R1 told surveyor that it was just the policy that no one can have a lighter or razor. R1 continued to say that sometimes he wants to shave but the razors are kept locked in the nurse's station and he has to wait until a nurse is in the facility to ask for one and that the staff have to sign one out to him.</p> <p>Per review of the facility's, "Environmental Risk Assessment for Determination of Level of Access", documentation states that R1 has no access to lighters/matches. Documentation also states that R1 has supervised access only to disposable razors.</p> <p>Rationale for the restrictions state, "Per our contract with the facility, we do not allow residents to possess lighters/matches ...". Documentation is signed by E5 (Former Qualified Mental Retardation Professional).</p> <p>Per interview with E1 (Residential Service Director) on 08-24-07 at 1:20 p.m., when asked about R1's restriction for his lighter and razor, E1</p>	W9999		
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W9999	<p>Continued From page 27</p> <p>stated that it has always been facility policy to keep razors and lighters locked up.</p> <p>Per interview with E2 (Qualified Mental Retardation Professional) on 08-29-07 at 2:50 p.m., when asked if R1 was on a program to regain access to his lighter and disposable razor, E2 stated that he was not.</p> <p style="text-align: right;">(B)</p>	W9999		
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