

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

PRINTED: 11/03/2009
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 145924	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____		(X3) DATE SURVEY COMPLETED C 05/15/2009
NAME OF PROVIDER OR SUPPLIER HELIA HEALTHCARE OF CHAMPAIGN			STREET ADDRESS, CITY, STATE, ZIP CODE 1915 SOUTH MATTIS STREET CHAMPAIGN, IL 61821		
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F 333 F9999	Continued From page 19 insulin was given at 4:00am, instead of 6:00am as ordered. When asked what time breakfast was served, E2 stated, "8:00 am". FINAL OBSERVATIONS LICENSURE VIOLATIONS 300.1210a) 300.1210b)6) 300.2900d)2) Section 300.1210 General Requirements for Nursing and Personal Care a) The facility must 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 assessment and plan of care. Adequate and properly supervised nursing care and personal care shall be provided to each resident to meet the total nursing and personal care needs of the resident. Restorative measures shall include at a minimum the following procedures: b) General nursing care shall include at a minimum the following and shall be practiced on a 24-hour, seven day a week basis: 6) All necessary precautions shall be taken to assure that the residents' environment remains as free of accident hazards as possible. All nursing personnel shall evaluate residents to see that each resident receives adequate supervision and assistance to prevent accidents. Section 300.2900 General Building Requirements	F 333 F9999			

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F9999	<p>Continued From page 20</p> <p>d)2) All exterior doors shall be equipped with a signal that will alert the staff if a resident leaves the building. Any exterior door that is supervised during certain periods may have a disconnect device for part-time use. If there is constant 24 hour a day supervision of the door, a signal is not required.</p> <p>These Regulations were not met as evidenced by:</p> <p>Based on observation, record review and interview the facility failed failed to provide constant visual supervision of an exit door while the door alarm was turned off and the door was propped open. This allowed R3, one of two facility residents assessed at risk for elopement, to leave the building without staff knowledge. R3 was found standing in a lane of traffic.</p> <p>Findings include:</p> <p>1. The facility submitted an IDPH (Illinois Department of Public Health) Information Fax Sheet- Incident Report Form to the Department on 5/07/09 pertaining to an incident for R3. The report documented on 5/06/09 at 3:45PM, "Resident went out A hall door which was propped open (due to) maintenance sanding. Res has (electronic monitoring bracelet). Res returned to facility by staff. No injuries noted."</p> <p>R3's May 2009 Physician's Orders (POS) lists an admission date of 4/20/09. R1 has diagnoses which includes; Psychosis, Alzheimer's Disease, Anxiety, Depression, Congestive Heart Failure, Hypertension, and Chest Pain. The Nursing Admission Assessment dated 4/21/09 documented R3 as "alert, not oriented, walks</p>	F9999			

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F9999	<p>Continued From page 21</p> <p>around, does have a (electronic monitoring device) which is functioning and (it) does turn him around when alarm sounds..." The initial Social Service Assessment dated 4/27/09 documented that "Res (resident) transferred here from (another facility) as it is closing. He has had many tearful episodes but responds well to TLC (tender loving care), reassurance..." The Discharge Plan dated 4/27/09 indicated that this was a permanent placement. The assessment documented R3 "needs constant care due to Dementia. He does wander. He has good family support but feel he needs more care than they can give."</p> <p>R3's Admission Minimum Data Set (MDS) dated 5/01/09 identifies R3 as having long and short term memory problem, moderate impairment in decision making, had indicators of periodic disordered thinking/awareness including; easily distracted, episodes of disorganized speech, periods of restlessness, and mental function varies over course of day. The Disease Diagnosis section identified an additional diagnosis of Panic Disorder. R3's Communication ability was identified as sometimes able to make self understood, unclear speech, and sometimes understands others. Assessed behaviors included; wandering, socially inappropriate/disruptive behavior and resists care. The Psychosocial assessment identified that R3 does not adjust easily to change in routine. Physically, R3 was assessed as independent with supervision for ambulation on the unit. R3's Behavior Resident Assessment Protocol (RAP) Module dated 4/30/09 documents "Resident wanders halls day and night if not sleeping, Can not find his room without direction, (Electronic monitoring device in place) as he has</p>	F9999			

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F9999	<p>Continued From page 22</p> <p>history of elopement. Wants to go home, doesn't know where it is, attracted to doors..."</p> <p>R3' s "Elopement Assessment" dated 4/26/09 assessed R3 at High Risk of Elopement due to being physically able to leave the building on his own, being disoriented to place, having impaired decision making ability, having a history of wandering, and having a current behavior of wandering and impaired safety awareness and a diagnosis of dementia or a related disorder.</p> <p>The police dispatch notes document on 5/06/09 at 15:52 (3:52 PM) a 911 call was received from a passerby from South Mattis Avenue. The comments document; "SUBJ (Subject) Stumbling in Traf (Traffic), NB (North Bound), WM(White Male)..." The report documents at (3:57 PM) another call came in said the subject belonged at the nursing home and they are getting him now. The report documented that subject was returned home at (4:03 PM).</p> <p>On 5/12/09 during telephone interview at 11:20 AM, witness Z1 stated she had been traveling North on Mattis when she saw a van stopped in the road with lights flashing that was blocking the far east lane. She saw a man walking in the middle of the road. Z1 stopped and went up to (R3) who was crying and he put his arms around her and said he was looking for (his wife). Z1 stated the resident was getting frustrated and did not know what to do. Z1 stated that traffic was busy and it was around 4:00 PM. Z1 stated that the man in the van was calling the police and Z1 told him to also call the nursing home. Z1 stated, "What scared me so bad was that no one from the nursing home knew he was there!" Z1 estimated that she had R3 sitting in her car for 5</p>	F9999			

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F9999	<p>Continued From page 23</p> <p>minutes before staff from the nursing home arrived. Z1 stated no one from the nursing home asked her name or what happened. Z1 stated that she left when the resident and the nursing home employee said they would ride in the van.</p> <p>On 5/12/09 at 10:30 am Administrator E1 stated that they had one elopement incident for (R3). E1 stated that R3 apparently went out the A Hall door, and was brought back by staff with no injuries. Assistant Administrator E5 who was also present stated that R3 was found approximately a block North on Mattis Avenue. E1 stated that R3 has been upset with the move and because his wife and daughter have not been able to come or call that often. E1 stated that R3 does not open closed doors, but the Maintenance staff had the door propped open with the door alarm turned off. E1 stated that E6, Maintenance Director who had been working on the hall had seen R3 on the hall once while he was working on the hall on 5/06/09, prior to R3 leaving the building. E1 stated that they currently have two residents (R3 and R4) who wear (electronic monitoring) bracelets due to elopement risk.</p> <p>On 5/12/09 at 10:50 AM E6 stated, "We were doing sanding and had the end doors open on A hall while we were doing the remodeling because of the drywall dust." E6 said when he was measuring for cabinets, R3 came up to where he and Maintenance Assistant, E11 were working and E3 told R3 to go up the other way. E6 stated that R3 went back up the hall to the lobby. E6 stated, "While we were measuring and hanging cabinets he must have got by us." E6 stated, "We thought while we were hanging cabinets we would be able to keep an eye on residents. (R3)</p>	F9999			

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F9999	<p>Continued From page 24</p> <p>was quiet and fast. I guess those doors being open were too tempting and he got right by us." E6 confirmed that the general door alarm for A wing was disarmed and the secondary battery operated alarm was also turned off. E6 stated he was not aware that a resident had left the building until he had gone to take out the trash and he saw facility staff walking (R3) back up A hall. E6 stated that R3 came from (another facility) and has not adjusted to living here yet. E6 stated that R3 has told him several times he wanted to "Go Home." E6 stated R3 is very emotional and cries easily and just walks around and around."</p> <p>Assistant Director of Nurse's, E3 stated on 5/12/09 at 11:45 AM that she was up in the front hallway when E10, Medical Records told her that she had just gotten a phone call from a lady who said a resident was wandering on Mattis Avenue and they thought he was ours. E3 stated she told the Nurses to do a head count and she ran out the front door. E3 stated as she looked North on Mattis Avenue she could see a lady flagging her over. E3 estimated it was no more than a block. E3 stated she recognized (R3) and R3 said "Going home." E3 said two CNA's who knew R3 better then came up. E3 said (R3) did not want to walk back toward the facility but when she said they will go for a car ride, R3 got into the lady's van, with E3 and one of the CNA's." E3 stated "The A hall Certified Nurse Aid (CNA) had seen (R3) walking on the hall a few minutes earlier but did not think anything of it because (R3) walks up and down the halls. The Maintenance guys were hanging cabinets mid A hall with the doors propped open to let the dust out." E3 stated there was a Police Officer who stopped to make sure the resident was OK.</p>	F9999			

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F9999	Continued From page 25 Medical Record, E10 confirmed during interview on 5/12/09 at 12:10 PM that on 5/06/09 she received a phone call from a women who said "You have a resident walking down the street on Mattis Avenue, she said he was going North." E10 stated, "I had no idea that (R3) was out of the building and the staff at the desk didn't know either." E10 stated as soon as she hung up she yelled, "We have a resident out on Mattis" and E10 ran out the front doors. E10 said as they got out to the street she could see a car stopped about a block away and could see R3 walking and by the time she down there E3 had already gotten to him. E10 stated apparently E5 had already gotten a phone call and had sent E3. E10 stated that R3's (electronic monitoring bracelet) did activate the alarm when R3 came back into the building with E3. Assistant Administrator, E5 confirmed during interview on 5/12/09 at 12:30 PM that she received a phone call from a women who said "You might have a resident walking North down Mattis." E5 stated she got E2 and E3 and they went right out. E5 stated she did not let the staff know until after she got back into the building. E5 stated, "I wanted to act as quickly as possible. We told them we needed to check on a patient." Certified Nurse Aide E7 was interviewed on 5/12/09 at 2:30 PM. E7 stated that she was working second shift on 5/06/09. E7 stated that she was assigned to A Hall and was passing ice on the wing. E7 said she had seen R3 walk by two times on the hall while she was stopped talking to another resident. E7 said about ten or fifteen minutes later she found out that R3 had gotten out. E7 stated that the outside hall door	F9999			

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F9999	<p>Continued From page 26</p> <p>was propped open and the alarms did not go off because the doors were already open. E7 stated she did not see R3 leave and she did not know where the other CNA assigned to the hall was at the time.</p> <p>On 5/12/09 at 1:00 PM, an attempt was made to interview R3 about the incident and to gauge his safety awareness. When spoken to, tears would well up in R3's eyes and he would shake his head "No" to any questions asked. R3's speech was garbled and mumbled and could not be understood. R3 did not appear to be interviewable.</p> <p>Careplan Coordinator, E8 was interviewed on 5/12/09 at 2:00 PM about the safety awareness assessment she had completed for R3 on 5/07/09. E8 stated R3 has no safety awareness. When she attempted to show him a picture of a stop sign and ask traffic question, R3 just shook his head don't know. E8 stated he does not know what to do in traffic, he cannot find his room, he says go home but does not know where home is, and gets his days and nights confused. He would not be safe out by himself he could not tell anyone where he lives.</p> <p>The facility is located in a residential area with a 35 mile per hour speed limit for the four lane Mattis Avenue which runs North and South directly in front of the facility. The facility has four resident wings that are set in a circle around a central round lobby area with Nurses station. If manned, the Nurses station has direct visual control of the four exit doors at the end of the resident corridors as well as the front door and the door to the enclosed courtyard. All of the eight exit doors are connected to a general alarm</p>	F9999			

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F9999	<p>Continued From page 27</p> <p>system which has a voice enunciator which sounds and announces when a door has been opened. This alarm is reset by staff once it has been determined that a resident has not left the building. There are also secondary battery operated alarms on the doors that are set to alarm when the door is opened. The front entrance doors and the courtyard doors are also equipped with an electronic monitoring system which is activated by a bracelet worn by residents at risk of exit seeking.</p> <p>The facility policy entitled "Door Alarm Policy and Procedure" dated 3/11/03 was posted on the wall above the door alarm panel on 5/12/09. The procedure reads; "Purpose: To ensure that employees are aware of the facility's compliance with resident supervision. The facility ensures that each resident receives adequate supervision and strives to prevent elopements. The facility ensures that visual control is maintained and provides secondary measures to aid in physical supervision. There are staff on duty 24 hours a day as well as other tools/systems to provide additional supervision, ie, Location monitoring, (Electronic Monitoring) System, electronic monitoring alarms on exterior doors ect. Electronic monitoring systems are used as a secondary method of ensuring that residents in the facility are closely monitored for travel in and out of our facility. This method does not take the place of direct staff supervision." The Procedure includes; "1. All exit wing alarms will remain activated at all times."</p> <p>The undated facility policy entitled "Door Alarm Policy and Procedure located in the "Code Yellow" Book (for residents at high risk of elopement) also states, "All alarms will be set at</p>	F9999			

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F9999	Continued From page 28 all times. Staff may silence front door alarm with constant visual observation. The door chime and (electronic monitoring device) will continually activate at all times." E6 Maintenance Director stated during interview on 5/12/09 at 10:50 am that the only doors equipped with the 24 hours (electronic monitoring system) was the front and courtyard doors. The Assistant Administrator E5 stated on 5/12/09 approximately 1:30 pm, it is the facility policy to use a buddy system (one staff person watches the door, while the other staff goes out the door) when a door alarm is to be held open or propped open or has the alarm turned off for example to take out the trash out the B wing door. (A)	F9999			