

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

PRINTED: 09/10/2010
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 145989	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____		(X3) DATE SURVEY COMPLETED C 02/05/2010
NAME OF PROVIDER OR SUPPLIER CAMELOT TERRACE			STREET ADDRESS, CITY, STATE, ZIP CODE 516 WEST FRECH STREET STREATOR, IL 61364		
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F 493	Continued From page 33 An Immediate Jeopardy was identified on 2/4/2010. The Immediate Jeopardy was determined to have begun on 1/06/2010 when Z11 attempted to mislead the City Fire Inspector regarding the Department's permission to place residents on the affected C wing. Z11, Owner was informed per telephone on 2/4/2010 that F493 would be cited. E14, Director of Operations and E2, Director of Nursing were informed of the Immediate Jeopardy on 2/5/2010 at 11 a.m.	F 493			
F9999	FINAL OBSERVATIONS LICENSURE VIOLATIONS 300.610a) 300.3240a) 300.3240b) 300.3240c) 300.3240e) Section 300.610 Resident Care Policies a) The facility shall have written policies and procedures, governing all services provided by the facility which 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. These policies shall be in compliance with the Act and all rules promulgated thereunder. These written policies shall be followed in operating the facility and shall be	F9999			

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F9999	<p>Continued From page 34</p> <p>reviewed at least annually by this committee, as evidenced by written, signed and dated minutes of such a meeting.</p> <p>Section 300.3240 Abuse and Neglect</p> <p>a) An owner, licensee, administrator, employee or agent of a facility shall not abuse or neglect a resident. (Section 2-107 of the Act)</p> <p>b) A facility employee or agent who becomes aware of abuse or neglect of a resident shall immediately report the matter to the facility administrator. (Section 3-610 of the Act)</p> <p>c) A facility administrator who becomes aware of abuse or neglect of a resident shall immediately report the matter by telephone and in writing to the resident's representative. (Section 3-610 of the Act)</p> <p>e) Employee as perpetrator of abuse. When an investigation of a report of suspected abuse of a resident indicates, based upon credible evidence, that an employee of a long-term care facility is the perpetrator of the abuse, that employee shall immediately be barred from any further contact with residents of the facility, pending the outcome of any further investigation, prosecution or disciplinary action against the employee. (Section 3-611 of the Act)</p> <p>These Regulations were not met as evidenced by:</p> <p>Based on record review, interview, and observation, the facility failed to follow their policy and investigate a potential abuse involving a resident (R1) with bruising of unknown origin.</p>	F9999			

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F9999	<p>Continued From page 35</p> <p>The facility failed to investigate possible causes for anal and perineal bruising of R1. The facility also failed to conduct a thorough investigation of alleged verbal abuse involving a resident with complaints of verbal abuse by a nurse (R4). These failures have the potential to affect all 43 residents residing in the facility.</p> <p>Findings include:</p> <p>The facility Resident Room/Wing Roster dated 1/27/10 indicated that there are a total of 43 residents in the facility.</p> <p>The Facility Abuse, Prevention, and Prohibition Policy dated 11/30/04 and received on 01/29/10 at 10:00 AM states the following: "Resident abuse must be reported immediately to the Director of Nursing and Administrator. The facility Administrator or Director of Nursing will thoroughly investigate alleged violations of individual's rights and document appropriate actions. While a facility investigation is under way, steps will be taken to prevent further abuse. Two management level staff will conduct interviews with completion of abuse questionnaires. Every employee will be interviewed who was working on the specific hall/wing that the affected resident resides on. Complete a Report of Alleged Resident Abuse. When an employee is the alleged perpetrator of abuse, that employee shall immediately be barred from any further contact with residents through suspension, pending the outcome of the facility investigation. The Administrator and Director of Nursing will relay this suspension in person. Any employee who knows or has reason to believe that abuse occurred and does not immediately report will face possible termination.</p>	F9999			

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F9999	<p>Continued From page 36</p> <p>Mental Abuse includes but is not limited to humiliation, harassment, and threats of punishment or deprivation. Verbal Abuse refers to the use by a licensee, employee, or agent of oral, written, or gestured language that includes disparaging or derogatory terms to residents regardless of their age, ability to comprehend or disability."</p> <p>1. The POS (Physicians Order Sheet) for R1 dated 01/01/10 states diagnoses of Dementia and a history of CVA (Cerebrovascular Accident). Nurse's notes for R1 dated 12/23/09 at 10:00AM state: "Resident noted to have new bruises around anal area, perineum and right thigh. Bruising is of unknown origin." R1's medical record does not show any other assessment of the bruised areas.</p> <p>The facility's Investigation Report for R1 dated 12/23/09 at 4:00PM states: "On 12/23/09 Certified Nurse Aide (E12) informed nurse of new bruises on (R1). (R1) was examined and noted bruising around anus, in perineal area, and on right thigh. (E12) stated that this was not present on day shift on 12/22/09." There was no other documentation in R1's clinical record assessing the bruising discovered on 12/23/09. On 01/28/09 at 11:40 a.m. DON (Director of Nursing) stated there was no further assessment made of the bruised areas and no further documentation of their progress.</p> <p>On 01/28/09 at 1:00PM, E12, C.N.A. (Certified Nurse Aide), stated, "I was washing (R1) when I discovered the bruises and reported them to the DON (Director of Nursing). I have concerns about (R1's) family member. (R1's) family member is always messing around with her. (R1's) family</p>	F9999			

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F9999	<p>Continued From page 37</p> <p>member) always transfers (R1) who is a (mechanical lift). I feel that the (family member) could have caused the bruising on (R1's) anus and perineum."</p> <p>On 01/27/10 at 12:50PM, E4 (Care Plan Coordinator) stated, "There have been times when the staff has had suspicions about (R1's) bruises and skin tears and wondered if the (family member) had anything to do with them. When (R1) has been questioned in the past about how (R1) received bruises (R1) would only say, '(R1's family member) is a good (person). The C.N.A.'s have said that these bruises occur around the same time (R1's family member) visits. (R1's family member) is not allowed to take (R1) out of the facility because in the past the (family member) has taken (R1) out and fed (R1) who is tube fed and a choking hazard and is not to have anything by mouth. The staff thinks (R1) is afraid of the (family member). The staff says (R1) cowers when the (family member) is around. (R1's family member) does not get along with (other family members) and tries to implicate that they cause (R1's) bruises when they visit. Administrators in the past have supposedly talked to the (family member) but nothing has come of it."</p> <p>On 01/28/10 at 11:50AM, E4 (Care Plan Coordinator) stated, "The evening nurse that used to work here told me of an incident that happened with (R1's family member) when visiting the facility one evening. (R1's family member) went into (R1's) room and closed the door. (R1's family member) came out of (R1's) room a few minutes later was zipping up a sweatshirt and was visibly sweating. (R1's family member) left the facility quickly without saying</p>	F9999			

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F9999	<p>Continued From page 38</p> <p>anything to the staff. I don't know if the nurse examined (R1) after that incident or not."</p> <p>On 01/28/10 at 10:30AM, E5, SSD (Social Service Director), stated, "There have been concerns about (R1's) safety at the hand of (R1's family member). I think it is in an effort on (R1's family member's) part to pin injuries on (R1's other family members). I didn't speak to the (family member) about it and I am not aware of anyone else doing so. (R1's family member) is very argumentative and some of the staff fear (that family member)."</p> <p>On 01/28/10 at 1:05PM, E7, LPN (Licensed Practical Nurse)/Evening Shift, stated, "I feel that (R1's family member) sometimes can be harmful to (R1). (R1's family member) gives (R1) drinks at times and (R1) is not supposed to have anything by mouth."</p> <p>On 01/27/10 at 12:45PM, E2, DON (Director of Nursing), stated, "The C.N.A.'s feel that some of (R1's) bruises occur around the time (R1's family member) visits. (R1's family member) is obsessed about who visits (R1) and does not want (R1's other family members) to visit, and has even claimed that they cause (R1's) injuries. (R1's family member) has even gone to court unsuccessfully to keep them from visiting (R1) and has requested that the staff supervise any visits (R1) gets from (R1's other family members)."</p> <p>On 01/28/10 at 12:10PM, Z3 (R1's attending physician) stated, "Yes, I was notified by the facility that (R1) had bruises on the anus and perineum. I found it suspicious and thought the nursing home was investigating this to find out</p>	F9999			

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F9999	<p>Continued From page 39 how this happened."</p> <p>On 01/28/10 at 11:40AM, E2 DON (Director of Nursing) stated, "No, I did not start an abuse investigation about (R1's) anal/perineal bruising. The only thing that was different was (R1) had gone to the hospital for a gastrostomy tube change. (R1) had not fallen. I wonder at times if the (family member) did things to her to blame on (R1's other family members)."</p> <p>On 02/04/10 at 10:00AM during a meeting with the owner and E2 DON, E2 said she spoke with a nurse who works at the hospital. The hospital nurse told E2 that during a procedure to change the g-tube (gastrostomy tube) it would be likely that R1, who has contractures and is in a fetal position, would have to have had her legs pulled down. This could cause some bruising to the perineal and anal areas. E2 DON said that the hospital nurse E2 talked with was not the nurse working on 12/22/09 when R1 was sent to the hospital to have the g-tube changed. The care plan for R1 dated 01/22/10 states: "Has limitation of ROM (Range of Motion) to right elbow and contracture of left knee, all other joints WFL (Within Functional Limits). E2 DON stated that she remembered telling R1's POA(Power of Attorney) about the bruises on R1's perineum and anus.</p> <p>On 02/04/10 at 1:45PM Z10 (R1's POA) stated, "No, the facility did not notify me that (R1) had any bruises on the anus or perineal area on 12/23/09."</p> <p>On 01/28/10 at 9:30AM R1 was in the hospital lying in bed with oxygen running. R1 was frail with a pallor appearance. R1 was lying on her</p>	F9999			

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F9999	<p>Continued From page 40</p> <p>back and slightly shifted to the right side with her arms outstretched and her legs slightly flexed at the knees. There was a purple bruise on the inner elbow area of the right arm approximately 2 inches in diameter. The bruised skin was intact. R1 was not able to verbalize when asked questions.</p> <p>On 01/28/10 Z9 the Chief Nursing Officer at the hospital stated that the hospital nursing staff does a complete head to toe skin assessment and record any open areas, bruises, or scratches. Hospital skin assessment form for R1 dated 01/23/10 states R1 has open areas on left buttocks, right buttocks, and 3 scratched areas on left flank areas.</p> <p>2. The POS (Physicians Order Sheet) for R4 dated 12/04/09 states diagnoses of Diabetes Mellitus and Cellulitis of Right Lower Extremity. The MDS (Minimum Data Set) for R4 dated 12/17/09 states R4 is able to understand and can make needs known and has no short term or long term memory problems.</p> <p>On 01/28/10 at 1:30PM, during a resident group interview, R4 stated that she had been verbally abused by a nurse. On 01/29/10 at 10:00AM R4 stated, "It was a weekend recently. My roommate had her call light on. It was at least 15 minutes and no one came to answer the light. I got into my wheelchair and went up to the nurses' station. I didn't see anyone around so I went looking for someone and found a facility staff member. I told the staff member that my roommate needed help. I returned to my room and found my roommate getting up in her wheelchair. I was afraid my roommate would fall so I helped her a little bit. After my roommate got</p>	F9999			

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F9999	<p>Continued From page 41</p> <p>into her wheelchair I pushed her down to the nurses' station. The nurse (E13) was at the nurses' station when I got there. I started to tell (E13) that my roommate needed some help. (E13) interrupted me, pointed her finger at my face and said, 'You need to mind your own business. (Your roommate) has a voice of her own. This is none of your concern.' I was embarrassed. It made me feel small and degraded. I was just trying to help my roommate. (E13) didn't need to talk to me that way. The activity aide (E8) was there and heard her talk to me like that. I told my sister. The next day I spoke with (E2 DON) (Director of Nursing) and (E5 SSD) (Social Service Director) about this and reported (E13). The DON said she would talk to (E13). I never did hear what happened and know that (E13) is still working. I wonder if (E13) talks to other residents like that. I don't want to be a problem. I am going home soon." R4 was sitting in a recliner in her room. R4 is a 50 year old resident who is alert and oriented.</p> <p>On 01/29/10 at 10:30AM E8 (Activity Aide) stated, "I was here that day. (R4) brought her roommate up to the nurses' desk. (R4) told (E13) that her roommate needed help. I overheard (E13) say to (R4), 'This is none of your business. (Your roommate) has a voice of her own so this is none of your concern.' (E13) was pointing her finger at (R4). When (R4) saw me later (R4) told me that she was upset and embarrassed over what (E13) said and did. I told (E5 SSD) the next day and (E5) was going to talk to (R4)."</p> <p>On 01/28/10 at 10:45AM E5 SSD (Social Services Director) stated, "I am familiar with this complaint. (E8) told me and I talked to (R4). I went to (E2 DON) (Director of Nursing) and (E2)</p>	F9999			

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F9999	<p>Continued From page 42</p> <p>told me she had already talked to (E13) about the incident. I am not aware that (E13) was suspended pending any investigation. All incidents regarding suspected abuse are to go to the Administrator and the DON."</p> <p>On 01/29/10 at 11:25AM, E13, LPN (Licensed Practical Nurse), stated, "Part of what (R4) says is somewhat true. I would never point my finger at anyone. (R4) came up to the nurses' station three times to tell me the roommate needed something. The third time (R4) brought her roommate. I told (R4) calmly and firmly that the roommate has her own mouth and can speak for herself. I don't have a mean bone in my body. One of the activity people told me (R4) was going to report me. I was off on the Monday after that weekend. When I came back to work on Tuesday, (E2) spoke to me and I told her the same thing. I have not been talked to about it since."</p> <p>On 01/29/10 at 11:10AM, E2, DON (Director of Nursing), stated, "(R4) told me that (E13)LPN raised her voice to her and told her that 'we would handle the roommate.' I talked to (E13) LPN and she said she told (R4) 'we would handle it.' I talked to a C.N.A. who was working that day and she didn't know anything about it. I did not talk to (E8) Activity Aide or to (E5) SSD. I did not do an investigation. I just talked to (E13)."</p> <p>On 01/29/10 facility abuse investigation files did not contain any investigation of mental abuse made towards R4.</p> <p>(A)</p>	F9999			

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F9999	Continued From page 43 300.2210b)1)8) 300.2910a)1) 300.3110a) 300.3110b) Section 300.2210 Maintenance b) Each facility shall: 1) Maintain the building in good repair, safe and free of the following: cracks in floors, walls, or ceilings; peeling wallpaper or paint; warped or loose boards; warped, broken, loose, or cracked floor covering, such as tile or linoleum; loose handrails or railings; loose or broken window panes; and any other similar hazards. 8) The building and grounds shall be kept free of any possible infestations of insects and rodents by eliminating sites of breeding and harborage inside and outside the building; eliminating sites of entry into the building with screens of not less than 16 mesh screen to the inch and repair of any breaks in construction. Section 300.2910 Structural a) General Design Requirements 1) The buildings and all parts thereof shall be of sufficient strength to support all dead, live, and lateral loads without exceeding the working stresses permitted for the materials of their construction in generally accepted good engineering practice. Section 300.3110 Structural a) Buildings and all parts thereof shall be maintained structurally to support all dead, live	F9999			

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F9999	<p>Continued From page 44 and lateral loads.</p> <p>b) Buildings shall be maintained in good repair. Buildings that show signs of distress shall be repaired immediately.</p> <p>These Regulations were not met as evidenced by:</p> <p>Based on observation, record review and interview, the facility failed to maintain the building free of excessive moisture and mold, resulting from roof leakage on two of four wings. The facility also failed to maintain the structure of the building free from damaging insect harborage evident on one of four wings.</p> <p>These failures had the potential to affect all 43 residents living in the facility.</p> <p>Findings include:</p> <p>The Resident Room/Wing Roster dated 1/27/10 indicated that there were a total of 43 residents in the facility. E2 (Director of Nursing) marked the document to indicate five residents with respiratory infections [R1 (in hospital), R2, R3, R11 and R13].</p> <p>E3 (Maintenance Supervisor) stated on 1/27/10 at 10:00 AM that when E3 came in the employee entrance by D wing on Monday 1/25/10, there was a strong, damp, moldy smell in the building. E3 said that it had rained quite a bit the previous weekend. E3 stated that several employees complained of eye irritation and headaches from the odor. E3 also said on that Monday 1/25/10, the roof started to leak through the ceiling down</p>	F9999			

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

PRINTED: 09/10/2010
FORM APPROVED
OMB NO. 0938-0391

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F9999	<p>Continued From page 45</p> <p>into the D wing lounge. E3 stated that the City Fire Chief (Z1) was in the building on that Monday. According to E3, Z1 believed that the building should be sampled for air quality. E3 said that yesterday (1/26/10), E3 helped nursing staff move the medication room supplies off of C wing, which was closed due to roof leakage on 12/24/09, so that nurses on staff did not have to go in and out of the dampness on C wing. E3 stated that two workers from one of the owner's other facilities came to this building and patched some holes in the C wing roof on 1/26/10. E3 stated that he was going to put plastic sheeting up that morning to seal the entrance to C wing.</p> <p>On 1/27/10 at 10:25 AM, a musty, damp odor was present in the central nursing station/D wing lounge area. An approximate two and one half square foot area of ceiling in the D wing lounge, near the wall between D and C wings was sagging and darkly stained. Two small holes were present in this ceiling area, with a plastic garbage can containing a small amount of water sitting on the floor beneath. The area was blocked by 2 large wall divider planters and a long folding table. At this time, E3 (Maintenance Supervisor) was placing plastic sheeting behind the closed set of C wing fire doors near the central nursing station and blankets on the floor in front of these doors.</p> <p>On 1/27/10 at 10:30 AM, E2 (Director of Nursing) stated that the moldy smell in the building was more noticeable lately, and that several employees had complained of itchy, watery eyes. E2 said nurse E7 had terrible swelling of the eyes lately. E2 said that some residents have had respiratory problems, but E2 could not determine if this was related to the dampness in the</p>	F9999			

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

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F9999	<p>Continued From page 46 building.</p> <p>On 1/27/10 at 11:50 AM, Z1 (City Fire Chief) stated that Z1 was at the facility on Monday (1/25/10) because the city had received complaints from the community regarding the facility's roof leakage and moldy smell. Z1 said that at that time, water was leaking through the ceiling in the D wing lounge. Z1 said that due to this situation, Z1 contacted an environmental company regarding air quality sampling. Z1 said that he learned from this contact that three samples would have to be obtained to evaluate the air in the building: one air sample from the outside, one air sample from the inside, and one sample of damaged drywall. Z1 stated that he is not aware of any air sampling that has been done in that facility.</p> <p>On 1/27/10 at 1:00 PM, Z2 (local ombudsman) stated Z2 had received about 15 complaints from employees and family members concerning the roof leaks and mold smell in the building. Z2 stated that Z2 was informed by the individuals making these complaints that staff and residents at the facility had respiratory problems, but Z2 was not given details. Z2 stated Z2 was at the facility three to four weeks ago, and noticed a musty smell on C wing. Z2 saw mold on the activity office doorway at that time.</p> <p>E4 (Care Plan Coordinator) stated at 10:35 AM on 1/27/10 that after E4 has been at work for an hour or so, E4's eyes start to burn and E4 develops a headache. E4 said these symptoms go away a couple hours after E4 goes home at night. E4 also said that E4 has concerns about the residents living at the facility, since "We get to go home, but the residents can't."</p>	F9999			

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

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F9999	Continued From page 47 E5 (Social Service/Activity Director) stated at 10:40 AM on 1/27/10 that during the last few days with the warmer weather, the damp odor was stronger in the building. E5 said her eyes have been burning and her throat feels irritated by the end of the work day. E6 (Dietary Supervisor) stated at 10:55 AM on 1/27/10 that she has irritated, itching eyes by the time E6 leaves work. E8 (Activity assistant) stated at 11:40 AM that E8 has experienced a runny nose, burning eyes, and itching all over while at work. E8 stated that these symptoms only develop when she is at work and not at home. E9 (Charge Nurse) stated at noon on 1/27/10 that E9 "never misses work," but for the last couple months, E9 has experienced severe headaches, burning eyes and a runny nose as the work day progresses. E9 also stated that when E9 goes home and rests for a couple hours, these symptoms stop. E9 stated she has also noticed that several residents without a history of headaches have complained of headaches to E9 lately. Nurse aide E10 stated on 1/27/10 at 2:05 PM that she has had shortness of breath and coughing since the end of November 2009. E10 said she has gone to the doctor probably once a month since then, and has been treated with antibiotic and prednisone. E10 said that the symptoms returned though after these treatments. E10 said she has also had a sore throat now for a month, but that it gets better when she goes home. E10 said she used to work on C wing, until it was	F9999			

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

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F9999	<p>Continued From page 48</p> <p>closed on 12/24/09 due to the leaking roof. E10 stated that the roof had been leaking before Thanksgiving 2009.</p> <p>Nurse aide E12 stated at 2:10 PM on 1/27/10 that E12 has had headaches and coughing while at work, which are gone after two to three hours at home after work.</p> <p>Nurse aide E11 stated at 2:55 PM on 1/27/10 that when E11 would put up stock in the medication room, when it was located on C wing, E11 would develop a headache, sore throat and lethargy. E11 said the symptoms would subside after being at home for a while, only to come back when E11 resumed work again. E11 stated the facility never provided E11 with equipment to protect from breathing the moldy air.</p> <p>E7 (Licensed Practical Nurse) stated at 1:00 PM on 1/28/10 that E7 begins to experience "cold-like" symptoms and red irritated eyes when E7 comes to work. E7 said these symptoms leave and E7 is again fine after about an hour after work.</p> <p>Z4 (family member of resident) stated on 1/27/10 at 12:35 PM that Z4 was concerned about the residents living at the facility with regard to the mold problem. Z4 said last week a nurse was in the C wing medication room with the C wing doors unlocked, so Z4 walked down C wing. Z4 said, "The odor of mold was horrible." Z4 said he can even smell the odor when he walks in the entry door. Z4 said he visits family everyday, and when Z4 sits in the common area near C wing, "the smell gets to you and your eyes itch." Z4 said the roof leaks have been going on for six months at least.</p>	F9999			

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CENTERS FOR MEDICARE & MEDICAID SERVICES

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F9999	<p>Continued From page 49</p> <p>On 1/28/10 at 10:40 AM, there was an approximate 2 square foot hole in the ceiling drywall in the D wing lounge, where the ceiling was sagging the day before. A moldy smell was present in this area, and the exposed insulation and ceiling joist were covered with areas of black mold. The approximate two to three feet of exposed wood ceiling joist also had signs of insect burrowing and tunneling. Small pieces of wet drywall lying nearby had black mold on the inner surface. Numerous, small, white, insect larvae approximately three millimeters in length were crawling on the inside surface of one small piece of drywall lying on a nearby table.</p> <p>E3 stated at 10:40 AM on 1/28/10 that he was instructed by the facility owner earlier that morning to take down the wet ceiling drywall in the D lounge, and clean inside the ceiling to remove the mold. E3 stated that when he began a short while ago, E3 found "lots of termites" inside that area of the ceiling. E3 said he has worked at the facility for many years, and was not aware of any termite history for the building.</p> <p>E3 stated at 1:10 PM on 1/28/10 that in order to remove all the mold inside the D wing ceiling, which he had been instructed to do by the owner, E3 would have to remove more damaged drywall and insulation. E3 stated the removal would probably involve a width of 2 more joist spaces and probably 16 inches more in length from the hole opening in the other direction. E3 also stated that a pest control inspector was supposed to come to the building later in the afternoon.</p> <p>The upper attic space was visible above the area in the D wing ceiling (as referred to above) at</p>	F9999			

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

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F9999	<p>Continued From page 50</p> <p>1:15 PM on 1/28/10 after E3 had removed the fiberglass insulation between the ceiling joists. The now totally exposed insect-damaged wooden two by four joist had voids of missing wood up to approximately one-half to one inch in depth in spots on the bottom joist surface for a length of approximately three feet. The underside of the plywood roof sheeting and adjacent rafters were wet and darkly stained directly above this area. D wing roof sheeting and a rafter were also wet and stained approximately two feet east of the open area as well.</p> <p>During a group interview with residents R5 to R12 at 1:30 PM on 1/28/10, a majority of the residents commented that the C wing roof had been leaking "off and on" since the summer of 2009. The residents said the leaking got much worse around Christmas 2009 when it rained heavily, but that the "smell of mold or mildew" became noticeable last fall, maybe even as early as August 2009. The residents stated that since C wing has been closed, the odor is better, but is still noticeable in the D wing lounge, especially in the mornings.</p> <p>Z7 (local roofing company estimator) stated on 2/2/10 at 9:30 AM that the roofing company had been contacted by the facility in early January 2010 regarding an assessment of the C wing roof. Z7 stated that there was too much ice and snow on the roof at that time to do that, so Z7 waited until the middle of that month when the roof was clear to evaluate it. Z7 took some core samples of the existing roof, and found that the roofing material was wet clear down to the roof deck itself. Z7 stated that it was his professional opinion that the C wing roof could not be patched successfully, and an entirely new roof was</p>	F9999			

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CENTERS FOR MEDICARE & MEDICAID SERVICES

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F9999	<p>Continued From page 51</p> <p>needed for C wing. Z7 stated that a roof replacement bid was submitted to the facility, but that the owner did not "want to go that route." Z7 further stated that when the weather had improved last week, the roofing company informed the owner that workers could come out to repair the roof for the time being. Z7 said that the owner told Z7's company at that time that the owner already had someone taking care of it.</p> <p>E3 (Maintenance Supervisor) stated at 10:10 AM on 1/29/10 that the local pest control company inspector (Z5) was in the building late afternoon 1/28/10 to assess the termite situation. E3 said that after meeting with Z5, E3 reinforced the two by four ceiling joist in the D wing lounge that had been damaged by termites by bolting two more two by fours, one on each side, to the existing joist.</p> <p>Z5 (local pest control company inspector) stated on 2/1/10 at 10:20 AM that he did find one area of termite damage in the facility ceiling last week. Z5 said that the hollow block wall adjacent to the damaged area was treated on Saturday 1/30/10. Z5 said that the floor underneath that wall has to be treated as well to do the job properly, but that there are boiler pipes in that floor area. Z5 said that because of the risk of drilling into that piping, Z5 needs to get a signed liability waiver from the facility before the floor treatment can be done. Z5 stated that in order to do a complete termite treatment project, the soil around the building has to be treated as well when the frost is out of the ground. Z5 stated that at this point, the owner signed a "No Guarantee Contract" for treatment of only the one wall area.</p> <p>The Subterranean Termite Service Agreement</p>	F9999			

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

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F9999	<p>Continued From page 52</p> <p>from Z5's company dated 1/29/10 and signed by both Z5 and the owner clearly indicated that the termite elimination treatment provided by the company for the "inside only" carried "No Guarantee."</p> <p>E3 stated at 12:05 PM on 1/29/10 that the inspector from the facility's currently contracted pest control company was at the facility that morning and did not wish to treat the building for termites.</p> <p>Z6 (inspector for facility's contracted pest control company) stated on 2/1/10 at 12:15 PM that Z6 definitely found a "termite problem" in the facility last week. Z6 said that due to the nature of the building's construction, there was no way for Z6 to determine how extensive the termite damage was in the building. Z6 stated that termites eat from the inside to the outside of the wood components, so one cannot see the extent of the damage. Z6 said that because of the boiler pipes hidden in the floor and subject to drilling damage, Z6 did not wish to pursue the job. Z6 had concerns of treating the entire building and having to evacuate residents from wings. Z6 also stated that any assessment of the current building structural integrity needed to be done by a qualified engineer.</p> <p>The facility's building is a one story structure with no basement or crawl space. The building's main entrance is on its South side. Wings A and B are attached to the main building towards the North, Wing C is attached to the main building towards the Northeast (near the central nursing station) and D wing is attached to the main building towards the East. A Wing has 15 resident rooms, B wing has 14 resident rooms, C wing has 12</p>	F9999			

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F9999	<p>Continued From page 53</p> <p>resident rooms and D wing has 10 resident rooms. On 1/27/10 A wing housed 21 residents and B wing housed 22 residents. Wings C and D were closed.</p> <p>During telephone interview with Z12 (Mold Inspection Company Representative) on 2/3/10 at 10:17 a.m., Z12 affirmed that the company had been in the facility on 2/2/10 to do an inspection. Z12 indicated that personnel from the company had been onsite for 1.5 to 2 hours. Five air samples were taken. Z12 stated that his personnel wanted to take more samples, but Z11 (Owner) would not allow that to be done. According to Z12, "the place is a wreck." Z12 stated that a written narrative regarding the visit would be completed by the next day and made available to the Department.</p> <p>The report from Z12's Mold Inspection Company dated 2/2/10 reads in part:</p> <p>"The first thing we noticed was a musty odor as we approached the doors leading into Wing C. There was also a large spot on the ceiling in the common area that had been cut out and was covered up.</p> <p>The odor became very strong as we entered wing C...called the maintenance man at home and he came down to the home to speak with us...Reportedly (Z7's company) recommended a roof replacement but the roof was patched instead...this creates a problem with our warranty because even if all leaks were stopped there is still a lot of water trapped in the space which will eventually seep thru the concrete into the living space leaving the home exposed to mold growth...We did a walk thru of all 12 patient</p>	F9999			

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

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F9999	Continued From page 54 rooms and the other small rooms off of the wing C common area. Room 12 was the worst with excessive damage to the outside wall, all of the rooms on that side of the hall will need some tear out on the outside wall...The activity room storage area has visible growth in many of the cabinets. This area is showing growth of light grey mold....All areas need to have baseboard removed...the wall that is shared with the rest of the building is covered in drywall and wallpaper. This shared wall will need to be taken down to the concrete. There is extreme growth on the back of the wall paper and under the baseboard. Owner should be cautioned that trying to remove this without proper precautions will result in a larger problem with air quality in the rest of the building as the tear out will release a huge quantity of spores into the air...Samples were taken at the far end of the hall, in room 12, and in the common area." (A) 300.165a)8) 300.510a) 300.510e) Section 300.165 Criteria for Adverse Licensure Actions a) Adverse licensure actions are determinations to deny the issuance of an initial license, to deny the issuance of a renewal of a license, or to revoke the current license of a facility. 8) The facility knowingly submitted false information either on the licensure or renewal application forms or during the course of an	F9999			

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CENTERS FOR MEDICARE & MEDICAID SERVICES

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F9999	<p>Continued From page 55 inspection or survey of the facility.</p> <p>Section 300.510 Administrator</p> <p>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>e) The licensee and the administrator shall be familiar with this Part. They shall be responsible for seeing that the applicable regulations are met in the facility and that employees are familiar with those regulations according to the level of their responsibilities.</p> <p>These Regulations were not met as evidenced by:</p> <p>Based on record review, observation, and interview the facility's owner and governing body failed to act promptly and in a manner which ensured that all residents residing in the facility were protected from potential health hazards. Continued denial by the owner that a mold problem possibly exists throughout the building as well as repeated actions which attempted to interfere with an accurate assessment and resolution of the problem created an adversarial atmosphere with contractors. The governing body attempted to mislead the Department and instructed staff to provide less than truthful information to Department representatives. These actions are delaying the removal of the immediacy of Immediate Jeopardy cited for failure to investigate potential sexual abuse and failure to maintain the building free of excessive</p>	F9999			

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

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STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 145989	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____		(X3) DATE SURVEY COMPLETED C 02/05/2010
NAME OF PROVIDER OR SUPPLIER CAMELOT TERRACE			STREET ADDRESS, CITY, STATE, ZIP CODE 516 WEST FRECH STREET STREATOR, IL 61364		
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F9999	<p>Continued From page 56</p> <p>moisture and mold. These failures have the potential to affect all 43 residents in the building.</p> <p>Findings include:</p> <p>The Illinois Department of Public Health was notified on 12/24/09 by telephone call from a concerned citizen that Camelot Terrace had significant water intrusion from a leaking roof. During telephone call to the facility on 12/24/09 at 12:15 p.m., E2, Director of Nursing confirmed that the roof over C wings was leaking and that residents were being located to wings A and B. According to E2, C wing was to remain closed until roof repairs could be made.</p> <p>On 12/31/09 Illinois Department of Public Health initiated a complaint investigation. This investigation focused on the status of the water damage to C wing and how the facility was managing the situation. On 12/31/09 at 9:50 a.m. a rain gutter was present above the suspended ceiling in the C wing hallway and adjacent activity/common area which was draining water dripping from the roof into a large plastic garbage can. The wall by the entry door and the exterior wall of room C12 was buckled and soft to the touch in spots.</p> <p>During this investigation initiated on 12/31/09, Z1, City Fire Chief was in contact with Illinois Department of Public Health through both the surveyor and the Regional Office Supervisory Personnel.</p> <p>Z1 had issued a notice to the facility's owner on 1/4/2010. This notice stated that the city received a complaint regarding roof leakage and water damage to the facility. Subsequent to this</p>	F9999			

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CENTERS FOR MEDICARE & MEDICAID SERVICES

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F9999	<p>Continued From page 57</p> <p>complaint, an inspection was performed at the facility on 12/29/09. According to the notice the building was found to be in violation of the city code related to the roof and interior surface sections. This notice indicated that closure of the C wing was warranted, and that repair work would need to be inspected by a City Code Inspector prior to re-occupancy of this wing.</p> <p>On 1/6/2010 at 9:35 a.m. Z1, City Fire Chief stated that he was concerned that the owner of Camelot Terrace (Z11) wanted to re-open C wing so quickly. Z1 related that Z11, Owner had called Z1 and stated that he wanted to put residents again on C wing. Z1 asked during this telephone call to the Department if the Department had indeed granted permission for this move. Z1 stated that he had concerns at this time with water intrusion into overhead lights and light switches, as well as onto the floors. Z1 also expressed concern over the mold growth visible in some rooms where there were holes in the drywall. Z1 was assured that no permission had been granted for resident occupancy of this wing.</p> <p>On 1/27/2010 facility staff were notified that an Immediate Jeopardy had been identified related to the water intrusion and subsequent mold development in the facility, posing a possible health risk to the 43 residents residing in the building.</p> <p>E3, Maintenance stated at 10:45 a.m. on 1/28/2010 that "the owner told me to take down the ceiling drywall in the D lounge (outside C wing) where the leak came in...and clean inside the ceiling to remove the mold."</p> <p>On 1/28/2010 at 10:10 a.m. E5, Social Services</p>	F9999			

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CENTERS FOR MEDICARE & MEDICAID SERVICES

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F9999	<p>Continued From page 58</p> <p>Director stated that " you need to know that he (the Owner) had (E3) take out that piece that was bulging outside C wing. When (E3) did it, it smelled awful and there were termites all over inside and in the stuff that (E3) pulled down. He (the Owner) told (E3) to get some (bleach product) spray and spray up there so it looks clean."</p> <p>However on 2/4/2010 during tour with Z11, Owner at 10:30 a.m. when Illinois Department of Public Health representative commented that mold had been found in this area, Z11 denied that mold had been present and "would need to see the pictures."</p> <p>Further misrepresentation by Z11 was illustrated when E4, Care Plan Coordinator stated on 1/28/2010 at 10:30 a.m. that "I'm upset. (Z11) called me this morning and told me to go on C wing and take pictures where there has been some cleaning done. He (Z11) wanted (E3, Maintenance Supervisor) to remove ceiling tiles where there wasn't a problem and have pictures of them made. He (Z11) gave me three email addresses and told me to email these pictures so that Illinois Department of Public Health would see that it's all fixed. I don't feel right about this. The problem isn't fixed and if I send those pictures it will look like things are okay, when they are not."</p> <p>E2, Director of Nursing stated on 1/27/2010 that "he (Owner) doesn't want to fix it. We are all concerned for the residents and the staff...Something needs to be done...he (Owner) won't do it. He (Owner) had us move residents out around Christmas eve. Then after you (Illinois Department of Public Health) left at the</p>	F9999			

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F9999	<p>Continued From page 59</p> <p>end of December, he (Owner) wanted us to start using the wing again. I refused to move anyone...it just wasn't safe."</p> <p>On 2/3/2010 at 10:00 a.m. E4, Care Plan Coordinator called the Illinois Department of Public Health regional office. E4 stated during this telephone interview that "there was a company that was out here yesterday (2/2/2010) testing the air." According to this interview, the company representative said to E3, Maintenance Supervisor that "you have no idea how dangerous this is. He said our residents are at high risk." E4 stated that Z11 (Owner) told the man to "make the report look good." E4 continued that Z11 called E4 on 2/3/2010 and told her that "OHSa wanted pictures...he (Owner) had me fax the pictures that show everything is fixed, but it isn't."</p> <p>After this call from E4, Care Plan Coordinator, the Illinois Department of Public Health contacted the company which had been in the facility to do the mold inspection on 2/2/2010. During telephone interview with Z12 (Mold Inspection Company Representative) on 2/3/2010 at 10:17 a.m., Z12 affirmed that the company had been in Camelot Terrace on 2/2/2010 to do an inspection. Z12 indicated that personnel from the company had been onsite for 1.5 to 2 hours. Five air samples were taken. Z12 stated that his personnel wanted to take more samples, but Z11 would not allow that to be done. According to Z12, "the place is a wreck." Z12 stated that a written narrative regarding the visit would be completed by the next day and made available to the Department.</p> <p>On 2/4/2010 at 11:30 a.m., E3, Maintenance</p>	F9999			

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CENTERS FOR MEDICARE & MEDICAID SERVICES

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F9999	<p>Continued From page 60</p> <p>Supervisor stated that "the air man told me not to go down C wing without a respirator. He says this is a dangerous situation--he was here at 6 p.m...(Z11, Owner) told me it was a bad report and he's getting another one today. He (Z11) told me and the receptionist to put residents back down C wing on 2/2/2010....He (Z11, Owner) told me today (2/4/2010) to keep the pest control guys away from IDPH (Illinois Department of Public Health)."</p> <p>The report from Z12's Mold Inspection Company dated 2/2/2010 and written by Z14, Inspector for Mold Inspection Company, reads in part:</p> <p>"The first thing we noticed was a musty odor as we approached the doors leading into Wing C. There was also a large spot on the ceiling in the common area that had been cut out and was covered up.</p> <p>The odor became very strong as we entered wing C...called the maintenance man at home and he came down to the home to speak with us...Reportedly (Z7's company) recommended a roof replacement but the roof was patched instead...this creates a problem with our warranty because even if all leaks were stopped there is still a lot of water trapped in the space which will eventually seep thru the concrete into the living space leaving the home exposed to mold growth...We did a walk thru of all 12 patient rooms and the other small rooms off of the wing C common area. Room 12 was the worst with excessive damage to the outside wall, all of the rooms on that side of the hall will need some tear out on the outside wall...The activity room storage area has visible growth in many of the cabinets. This area is showing growth of light</p>	F9999			

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F9999	<p>Continued From page 61</p> <p>grey mold....All areas need to have baseboard removed...the wall that is shared with the rest of the building is covered in drywall and wallpaper. This shared wall will need to be taken down to the concrete. There is extreme growth on the back of the wall paper and under the baseboard. Owner should be cautioned that trying to remove this without proper precautions will result in a larger problem with air quality in the rest of the building as the tear out will release a huge quantity of spores into the air...Samples were taken at the far end of the hall, in room 12, and in the common area."</p> <p>The report continues: "I arrived with the impression from (Z12's company) we were authorized to take whatever samples were needed to find out the extent of the problem in the building. As (Z13) and I were discussing the best way to keep those samples to a minimum and still get a good idea what is needed the owner (Z11) called the nurse's station and asked to speak with me. (Z11, Owner) asked me if I knew what he wanted and I affirmed that he wanted to know how bad the mold situation was in the building. He got agitated and said, no, he wanted clear samples in wing C to take to the State. I informed him that that would not be possible as he had a severe mold problem in Wing C. He questioned how I could be sure without lab samples back and I explained our inspection process and started naming off places visible mold was found and to what severity. He then said he didn't want samples taken in C and I told him I had already taken 3 and what our plan was to sample the rest of the building. He became angry again and told me he did not want us looking at any of the rest of the building. If wing C was affected he could live with that but he</p>	F9999			

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F9999	<p>Continued From page 62</p> <p>wanted at least one clean sample outside of wing C to show the state the rest of the building was not affected. He suggested the sample be taken at the nurse's station and not close to wing C. I agreed this would a good spot but cautioned him that the probability of outside contamination was high. He then again told he wanted a clean sample and that only a clean sample would make him "very happy."</p> <p>On 2/4/2010 at 10:20 a.m. Z11, Owner accompanied two Department of Public Health representatives on a tour of the building. Department of Public Health representative asked Z11 if the Mold Inspection Company had been in the building on 2/2/2010. Z11 replied "No." Z11 was asked if any air samples had been taken and again responded "No." Later during the same tour, Z11 was asked again if a company had been in the building. Z11 replied "Maybe, I can't remember the name of the company."</p> <p>On 2/3/2010 at 10:10 a.m. Z5, Exterminator called the Illinois Department of Public Health regional office. Z5 stated that Z11, Owner "wanted me to write up what we did at the building, so I did. He (Owner) didn't like what I put on statement--he wanted me to state that I found no termite damage in any other part of the building; I can't say that."</p> <p>In a written statement from Z5, Z5 writes that "My first contact with (Z11, Owner) was when I was there on February 28, 2010 (sic--January 28, 2010). This conversation was by telephone. It was regarding the fact that the building is/was experiencing a termite infestation. The area affected (which was the only area truly</p>	F9999			

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F9999	<p>Continued From page 63 inspected/observed) was the wall between two wings of the facility, located near the nurses' station."</p> <p>Later in this same written statement, Z5 writes "...I brought a waiver to the facility on Feb. 1 and actually spoke again with (Z11) on the telephone. During this conversation, he (Owner) told me that he needed me to write something stating that there were no termites found anywhere else and that it should also say what percentage of control/affect the treatment performed this far provided. In addition, he wanted me to say that even though I wasn't a structural engineer, that I felt sufficient work had been done to provide 'structural stability' paraphrased."</p> <p>"...Later that day (Tuesday February 2, 2010) (Z11) called my office and I returned his call...Now he was wanting me to write, in some detail, what treatment we had performed so far, and again, he wanted me to write something saying that I did not find any termites anywhere else and a statement about the repairs to the structure. I once again explained to him that I could not say there were no other termites found, because I hadn't looked anywhere else. He continued to push this issue. And, I was not a structural engineer; therefore no comment could be made in that regard also. He pressed on with this issue as well..."</p> <p>"The statement that I sent him is also sent with this statement. He (Owner) called back to my office. He wanted me to still to write the aforementioned information that I was refusing to write. He then asked if I could inspect the rest of the building then. I told him that I could. He said that I should do this on Wednesday, write the</p>	F9999			

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F9999	<p>Continued From page 64 statement and then he would 'tell me what else needed to be put in that statement.'</p> <p>2. At the time of exit, there was no licensed Administrator in place.</p> <p>The Resident Room/Wing Roster dated 1/27/2010 indicates that there were a total of 43 residents in the facility at that time.</p> <p>E1, previous Administrator left employment with the facility on 1/29/2010 after being employed approximately three weeks. E2, Director of Nursing stated on 2/4/2010 at 12:30 p.m. that Z11, Owner is in the building two times a month and E14, Director of Operations is in the building once a month. According to E2, E14 is "supposed to be the Acting Administrator. We call her and half the time she doesn't call back." E2 also stated that "I have to assume responsibility for other departments."</p> <p>E14 and Z11 are not licensed Nursing Home Administrators.</p> <p>E4, Care Plan Coordinator stated during this same interview that "there is no one here when Illinois Department of Public Health" or other inspectors come in. There is no one here to sign checks...which can affect resident trust. We fall behind in Quality Assurance meetings, fall meetings, and skin meetings.</p> <p>E5, Activity Director/Social Services stated at 12:30 p.m. on 2/4/2010 that "we have no one to turn to for questions."</p> <p>(A)</p>	F9999			