

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

PRINTED: 09/06/2011
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 145413	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____		(X3) DATE SURVEY COMPLETED 04/20/2011
NAME OF PROVIDER OR SUPPLIER ASTA CARE CENTER OF TOLUCA			STREET ADDRESS, CITY, STATE, ZIP CODE 101 EAST VIA GHIGLIERI TOLUCA, IL 61369		
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F 520	Continued From page 85 These failures had the potential to affect all 79 residents in the facility. Findings include: E1 (Administrator) stated during a telephone interview on 4/6/11 at 2:15 PM that the facility has QA meetings on a quarterly basis, but that the Medical Director makes only about one meeting out of four in a year's time. E1 said that another physician has attended in place of the Medical Director at times, so that a physician is present at the meetings half of the time. The facility's QA meeting attendance records for the past year indicated that meetings were held on 4/12/10, 9/29/10 and 12/29/10. No physician name was present on the sign-in attendance sheets for those meetings. E28 (Assistant Director of Nursing) stated on 4/15/11 at 10:15 AM that when she was pulling out the QA meeting attendance records for the past year for the survey team, she could not find any record for 2011. E28 said that when E28 contacted E1 about this, E1 told E28 that no QA meeting for 2011 has been held yet. The Center for Medicare and Medicaid Services (CMS) form # 672 completed by the facility indicated that the facility resident census was 79.	F 520			
F9999	FINAL OBSERVATIONS LICENSURE VIOLATIONS 300.670a)	F9999			

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F9999	<p>Continued From page 86 300.670b) 300.670e) 300.2420j)</p> <p>Section 300.670 Disaster Preparedness</p> <p>a) For the purpose of this Section only, "disaster" means an occurrence, as a result of a natural force or mechanical failure such as water, wind or fire, or a lack of essential resources such as electrical power, that poses a threat to the safety and welfare of residents, personnel, and others present in the facility.</p> <p>b) Each facility shall have policies covering disaster preparedness, including a written plan for staff, residents and others to follow. The plan shall include, but not be limited to, the following: 3) A written plan for moving residents to safe locations within the facility in the event of a tornado warning or severe thunderstorm warning; and</p> <p>e) The facility shall provide for the evacuation of physically handicapped persons, including those who are hearing or sight impaired.</p> <p>Section 300.2420 Equipment and Supplies</p> <p>j) There shall be a sufficient quantity of resident care equipment of satisfactory design and in good condition to carry out established resident care procedures. This shall include at a minimum the following: wheelchairs with brakes, walkers, metal bedside rails, bedpans, urinals, emesis basins, wash basins, footstools, metal commodes, over the lap tables, foot cradles, footboards, under the mattress bed boards,</p>	F9999			

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F9999	<p>Continued From page 87</p> <p>trapeze frames, transfer boards, parallel bars and reciprocal pulleys.</p> <p>These Requirements were not met as evidenced by:</p> <p>Based on observation, interview and record review, the facility failed to develop a plan for evacuation and failed to train all employees in emergency procedures to ensure that staff were knowledgeable of how to handle fire and disaster emergencies for Bariatric residents. This failure affected four of four bariatric residents (R1, R4, R6, R7) in the sample of 16 and 11 bariatric residents (R18, R21, R24, R25, R28, R30, R39, R40, R41, R42, R43) in the supplemental sample.</p> <p>Findings include:</p> <p>On 4/4/11 at 10:30 AM, R7 stated that she has lived in this facility since 9/06. R7 stated that she gained so much weight that she could no longer take care of herself and that this facility was the closest to her home that would accept bariatric residents. R7 stated that she has no use of her legs, therefore she is totally dependent on staff to transfer her using an electronic lift. R7 stated that up until about two months ago when the wheel broke off the shower bed, staff transferred her from her large bariatric bed to a shower gurney so she could attend activities. R7 stated that she has been "stuck in her room ever since." R7 stated that her bed is too large to fit through the door.</p> <p>According to the current Physician's Order dated 4/1/11- 4/30/11, R7 has diagnoses of Abdominal</p>	F9999			

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F9999	<p>Continued From page 88</p> <p>Pain, Morbid Obesity, Hypertension, Cellulitis, Diabetes Mellitus type II and Peripheral vascular disease. The Occupational Therapist Seating/Evaluation dated 4/26/10 documents that R7 is bed bound due to morbid obesity and long term nonuse of legs. The Activities of Daily Living assessment section documents that R7 is dependent on staff for all activities except for eating.</p> <p>E15 (Social Service) stated on 4/5/11 at 10:30 AM that she knows that the shower bed is broken and they have not done anything about it. E15 stated that the shower bed was the only way R7 could come out of her room to activities. "It is the only way she has to be mobile. The wheelchair that (R7) brought from home does not fit. It needs to be modified." E15 verified that R7 has been in her room for at least 2 months with no way out. E15 stated that she does not know how they would evacuate R7 from the building in an emergency unless they used the mechanical lift like they did the day the shower bed wheel broke off. The staff pushed the mechanical lift with R7 dangling in the sling from the kitchen to her room, approximately 50 feet.</p> <p>On 4/5/11 at 1:15 PM, E7, Licensed Practical Nurse(LPN) stated the R7 really wants to get out of her room for activities, but there in no way to get her out of her room. The wheelchair does not fit her right now and the wheels will not work. The shower bed which was used to take her out of the room broke and does not work. We have the bariatric lift, but it is used for other residents too. In case of emergency, I am not sure how we would evacuate R7. If the bariatric lift was not available, I suppose we could use a draw sheet</p>	F9999			

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F9999	<p>Continued From page 89</p> <p>with several staff on it to drag her out or put resident on plastic blue mat and drag her out.</p> <p>On 4/6/11 at 10:00 AM, E2 (Director of Nurses) stated that the bariatric residents have a vinyl stretcher hanging on the bathroom door to use for emergencies. E2 stated that it takes eight people to use this stretcher (three on each side and one on each end to carry any of 10 bariatric residents in this facility weighing between 300 and 500 pounds.) E2 stated that the staff have not had any hands on training, but they all know where they are located. E2 stated that usually five Certified Nursing Assistants are scheduled to work on second shift with two nurses and on 3rd shift two CNAs are scheduled with one to two nurses. E2 stated that they do not have specific instructions in the Evacuation Plan for the bariatric residents or in the Fire Safety Plan.</p> <p>On 4/6/11 at 1:00 PM, E17 Certified Nurse Assistant (CNA) stated that she has had fire safety training at least once a year. E17 stated that she is aware of how to use fire extinguisher because about a year ago she put out a small grease fire in the kitchen. Kitchen staff were not aware of how to use extinguisher. E17 stated that she has not had any training on use of the vinyl stretcher or any training specific to the bariatric residents.</p> <p>On 4/6/11, E20, E22 and E23 (Certified Nurse Assistants) from 1:45pm - 2:30 pm all stated that they have the fire training at least once a year. All stated that they had not been trained on how to evacuate the bariatric residents. They could not give specific information on R7. They all stated that there is a slide board hanging on the</p>	F9999			

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F9999	<p>Continued From page 90</p> <p>bathroom door that they could put her on it and drag her out. They stated that they have not practiced an evacuation using the vinyl stretcher with weight applied up to 500 pounds to see if it was possible. They all stated that they would have to wait for firemen to arrive to help. E22 stated that she would cover R7 up with fire blanket and wait for firemen.</p> <p>On 4/7/11 at 2:00pm, E2 took this surveyor to R6's room and removed the black vinyl stretcher from the bathroom door. E2 measured the width of the vinyl stretcher. It measured 3 feet wide E2 stated that she could not find the specifications for this stretcher. E2 stated that she is not sure how much weight it is designed to carry. There was no blue slide board hanging on the bathroom door. R7 had a black vinyl stretcher hanging on the bathroom door, also. There was no blue slide board in R7's room either.</p> <p>On 4/13/11 at 1:30pm, E2 stated that the blue slide is not intended to be dragged on the floor for evacuation usage.</p> <p>On 4/7/11 at 3:30 pm, E2 presented a list of bariatric residents. Five weigh over 400 pounds (R39, R30, R18, R28, R7). Two use the bariatric lift to transfer from bed (R6, R7). One (R7) is bed fast and has no wheelchair that fits in order to get out of bed. R6 transfers to a wheelchair (cannot bear weight) with the bariatric lift. Three bariatric residents weighing over 200 pounds need the other mechanical lift to transfer from bed to the wheelchair (R21, R1, R4). Seven are ambulatory with assist (R30, R18, R28, R42, R25, R41, R40). Four bariatric residents are ambulatory independently (R24, R43, R4, R39).</p>	F9999			

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F9999	<p>Continued From page 91</p> <p>E2 provided a list of slings for the mechanical lifts, 13 in total, one 400-600 lbs, five 325-400 lbs, one 400 -700 lbs and three less than 325. According to this list there are 15 residents requiring transfer with the mechanical lift.</p> <p>On 4/5/11 at 1030 AM, E30 (Maintenance Supervisor) stated that the shower bed has been fixed for about two weeks. E30 stated that it was reported broken on 2/25/11. E30 stated that he had to order parts. E30 stated that the bariatric shower bed is very old, so parts are hard to get.</p> <p>The Evacuation Policy Procedure dated 1/01/98 documents to evacuate residents in an orderly fashion. Evacuate in the following manner: Move residents in great danger first, Evacuate horizontally first, Evacuate the fastest moving ambulatory residents first, then slower ambulatory residents and lastly wheelchair residents using the two man chair carry. Bedfast residents will be moved last. CNA's will assist residents at the end of each exit wing and will tell a designated person who will write the resident's name down.</p> <p>This evacuation policy does not address the bariatric residents who are non ambulatory and bedfast who require mechanical lifts. and the one bariatric resident who has no use of her lower extremities and does not have a wheelchair that fits.</p> <p style="text-align: center;">(A)</p> <p>300.615e)</p>	F9999			

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F9999	<p>Continued From page 92</p> <p>Section 300.615 Determination of Need Screening and Request for Resident Criminal History Record Information</p> <p>In addition to the screening required by Section 2-201.5(a) of the Act and this Section, a facility shall, within 24 hours after admission of a resident, request a criminal history background check pursuant to the Uniform Conviction information Act [20 ILCS 2635] for all persons 18 or older seeking admission to the facility.</p> <p>This REQUIREMENT was not met, as evidenced by:</p> <p>Based on interview and record review, the facility failed to request a criminal history background check within 24 hours of admission for one of ten recently admitted residents (R22).</p> <p>Findings include:</p> <p>The admission records presented for ten recently admitted residents indicated that no criminal background check was on file for R22. The facility's Three Months Admit & Discharges list dated 4/6/11 indicated that R22 was admitted on 2/8/11. A facility background check request form dated 2/8/11 indicated that it was faxed to the facility's corporate office on that date.</p> <p>E2 (Director of Nursing) stated on 4/11/11 at 2:30 PM that last week facility staff could not find R22's background check in the file. E2 said that all resident background checks are requested from the facility's corporate office. E2 said that the corporate office was contacted, and staff there could not find the original request that the</p>	F9999			

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F9999	<p>Continued From page 93</p> <p>facility had sent to them on 2/8/11, so corporate staff then ran the State Police criminal background check for R22 on 4/7/11.</p> <p>The facility presented the State Police background check for R22 dated 4/8/11, and it showed no criminal record for R22.</p> <p style="text-align: right;">(B)</p> <p>300.625m)</p> <p>Section 300.625 Identified Offenders</p> <p>If the identified offender is a convicted (see 730 ILCS 150/2) or registered (see 730 ILCS 150/3) sex offender or if the Criminal History Analysis conducted pursuant to Section 2-201.6 of the Act reveals that the identified offender poses a significant risk of harm to others within the facility, the offender shall be required to have his or her own room within the facility subject to the rights of married residents under Section 2-108(e) of the Act. (Section 2-201.6(d) of the Act.)</p> <p>This REQUIREMENT was not met, as evidenced by:</p> <p>Based on observation, interview and record review, the facility failed to place two of six identified sex offenders (R15 and R16) living in the building in private rooms.</p> <p>Findings include:</p> <p>The Department's Criminal History Analysis Security Recommendation Report (CHAR) dated</p>	F9999			