

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>IL6014286</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>06/24/2014</b>
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NAME OF PROVIDER OR SUPPLIER  <b>PEACHTREE ESTATES</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>1370 STATE ROUTE 127 SOUTH JONESBORO, IL 62952</b>
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Z9999	<p><b>FINDINGS</b></p> <p>Statement of Licensure Violations:</p> <p>350.620a) 350.1210 350.1220j) 350.1220k) 350.1230d)1) 350.1230d)2) 350.1230d)3) 350.3240a)</p> <p>Section 350.620 Resident Care Policies</p> <p>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 350.1210 Health Services</p> <p>The facility shall provide all services necessary to maintain each resident in good physical health.</p> <p>Section 350.1220 Physician Services</p> <p>j) The facility shall notify the resident's physician of any accident, injury, or change in a resident's condition that threatens the health, safety or welfare of a resident, including, but not limited to, the presence of incipient or manifest</p>	Z9999		
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Illinois Department of Public Health  
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

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Z9999	<p>Continued From page 1</p> <p>decubitus ulcers or a weight loss or gain of five percent or more within a period of 30 days.</p> <p>k) At the time of an accident, immediate first aid treatment shall be provided by personnel trained in medically approved first aid procedures.</p> <p>Section 350.1230 Nursing Services</p> <p>d) Direct care personnel shall be trained in, but are not limited to, the following:</p> <p>1) Detecting signs of illness, dysfunction or maladaptive behavior that warrant medical, nursing or psychosocial intervention.</p> <p>2) Basic skills required to meet the health needs and problems of the residents.</p> <p>3) First aid in the presence of accident or illness.</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. (Section 2-107 of the Act)</p> <p>These Regulations were not met as evidenced by:</p> <p>Based on interview and record review, the facility failed to provide individuals with nursing services in accordance with their needs as evidenced by their failure to ensure that: Emergency Services for 1 (R1) who expired on 05/25/14 of a Myocardial Infarction resulting from Asphyxiation</p>	Z9999		
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Z9999	<p>Continued From page 2</p> <p>caused from Aspiration when they failed to immediately call 911 and provide first aid for medical emergencies after R1 showed signs of choking and appeared to be in respiratory distress on 05/25/14.</p> <p>The facility failed to:</p> <ol style="list-style-type: none"> <li>1. Provide reproducible documentation that R1's physician was notified of her continued episodes of vomiting and choking after nursing documented that the facility were told by the physician to "keep and eye on her" on 05/19/14.</li> <li>2. Direct support staff failed to implement the facility's policy and procedures for Emergency Services by not implementing the following:               <ol style="list-style-type: none"> <li>a) Call 911 immediately when R1 showed signs of choking and appeared to be in respiratory distress as trained and as per the facility's policy;</li> <li>b) Assess R1's airway to ensure that it was not blocked;</li> <li>c) Assess and document R1's vitals, inclusive of her respirations;</li> <li>d) Start life saving measures through the Heimlich maneuver and/or assessing the need for CPR upon R1 becoming unresponsive; and</li> <li>e) Ensure the R1 was placed on her side rather than her back to prevent aspiration;</li> </ol> </li> <li>3. The individual's medical record available and accessible to emergency medical staff in the event of an emergency to assist in preventing delays in medical treatment; and After this incident (05/25/14), the facility failed to implement</li> </ol>	Z9999		

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Z9999	<p>Continued From page 3</p> <p>a system to assure that each individual's medical record is accessible to emergency medical staff in the event of an actual emergency.</p> <p>4. to have Direct Support staff promptly retrained in first aid for medical emergencies after the facility investigated the 05/25/14 incident involving R1.</p> <p>Findings include:</p> <p>On 05/25/14, R1 showed signs of choking accompanied with respiratory difficulty. Prior to this, R1 demonstrated symptoms of coughing and gagging, often accompanied with emesis on 05/16, 05/18, 05/23 and 05/24/14. After notifying the physician on 05/19/14, the facility failed to have reproducible documentation that the facility notified the physician of R1's continued episodes of coughing and gagging after they were ordered to "keep and eye on her". Per staff interviews, on 05/25/14, R1 appeared to be choking and her neck and tongue became swollen and and her face turned blue. Staff did not immediately call 911 services, but instead called the nurse who prompted them to dial 911. After dialing 911, R1 continued to appear as if she was choking and showed signs of respiratory distress. Staff present (E3 and E4) did not start first aid for a medical emergency, did not check her airway for blockage, did not take vitals, nor did they ensure that R1 was positioned appropriately to prevent possible aspiration during her choking episode. Upon arrival of the emergency medical staff (EMS) to the facility, R1 was lying flat on her back, had no pulse and appeared to be choking. Staff present at the time of the EMS's arrival (E3,</p>	Z9999		
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Z9999	<p>Continued From page 4</p> <p>E4 and E5) were not observed by the EMTs to be performing any type of first aid measures. Z1 (EMS - Captain 1st Responder) stated upon interview that R1's throat and tongue were so swollen that she appeared to be having an allergic reaction. When the EMS's requested R1's medical record, staff of the facility informed them that her chart was locked in the med (medication) room and was not accessible to staff. Z1 stated that not having access to the individual's medical and medication information delays prompt medical treatment. Z1 also stated that R1 was demonstrating agonal breaths and that she appeared to have been in distress for a period of time. While being transported to a local hospital, R1 went into cardiac arrest and was pronounced deceased at the hospital. The State of Illinois Certificate of Death Worksheet for 05/25/14 identifies R1's Cause of Death as, "Myocardial Infarction". This work sheet also states that the Myocardial Infarction was attributed to "Asphyxiation" caused by "Aspiration".</p> <p>After this incident, the facility did not promptly retrain staff on calling 911 as per the facility's policy for Medical Emergencies, on providing first aid during medical emergencies, nor ensure that each individual's medical record is accessible to emergency medical staff in the event of an emergency.</p> <p>The Physician's Order sheet dated May 2014 identifies that R1 was 58 years of age at the time of her passing on 05/25/14. This sheet also identifies that she functioned at a profound level of intellectual disability and had diagnoses of, Impulse Control Disorder, Tardive Dyskensia,</p>	Z9999		
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Z9999	<p>Continued From page 5</p> <p>Bi-Polar, Non Specified, Chronic Constipation, SIB (Self Injurious Behavior) and Vitamin Deficiency.</p> <p>The facility's Policy and Procedures for Emergency Services dated 07/09/08 states that it is the policy of the facility to provide, "Emergency care shall be available to all residents of this facility 24 hours a day, 7 days a week, and 365 days a year. Procedures contained within this policy include:</p> <ol style="list-style-type: none"> <li>1. In the event of a medical emergency, immediately dial 911.</li> <li>2. The Administration/Assistant Administrator shall be notified as soon as possible when a medical emergency arises.</li> <li>3. At the time of an accident, immediate first aid treatment shall be provided by personnel trained in medically approved first aid procedures.</li> </ol> <p>The Heart Saver First Aid CPR (Cardiopulmonary Resuscitation) and AED (Automated External Defibrillator) training manual by the American Heart Association 2011 is the current training manual used by the facility when certifying staff in first aid and medical emergencies. In review of what staff are trained regarding, choking, difficulty breathing and medical emergencies, this manual states:</p> <p>"General Breathing Problems, "Someone may develop mild or severe blockage of the air passages. Someone having a heart attack, having a stroke or experiencing certain injuries may also have breathing problems... Choking is when food or another object gets stuck in the airway in the throat. The object stops air from getting to the lungs. Some choking is mild and</p>	Z9999		
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Z9999	<p>Continued From page 6</p> <p>some is severe. If it's severe, act fast. Get the object out so the person can breathe..." It further states that if someone: cannot breathe or; has a cough that has no sound or; cannot talk or make a sound; or makes the choking sign the block in the airway is Severe. It then states, "you should act quickly" and "you should follow the steps to help a choking adult". When someone has severe choking, give thrust slightly above the belly button. These thrust are sometimes call the Heimlich maneuver. Like a cough, each thrust pushes air from the lungs. This can help remove an object that is blocking the airway...</p> <p>If a person is breathing but is not responding, roll him to his side and wait for someone with more advanced training to arrive and take over. Placing someone in the side position helps keep the airway clear in the event the person vomits. If the person stops breathing or is only gasping, you will need to roll him onto his back and assess the need for CPR.</p> <p>Medical Emergencies: Step 5 Phone the your emergency response number (or 911) if</p> <ul style="list-style-type: none"> <li>* The person has no medicine</li> <li>* The person does not get better after using her medicine</li> <li>* The person's breathing gets worse, the person has trouble speaking, or the person stops responding."</li> </ul> <p>The Incident Report dated 05/25/14 states, "Staff (unnamed) heard R1 in distress in her bedroom. They went to investigate. Staff called the agency nurse and then 911 for an ambulance. R1 passed away that evening. Investigation started immediately and report to follow with 5 business days..."</p>	Z9999		

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Z9999	<p>Continued From page 7</p> <p>The Preliminary Reporting Form completed by E3 (Direct Support Person - DSP) states that (on 05/25/14) at approximately 10:15 P.M., "I heard R1 grunting and wheezing got up to go see. As I (E3) and staff (E4) got in her room she was trying to cough but couldn't. We (E3 and E4) tried to offer her something to drink but she wouldn't take it. She kept trying to cough and grunted. She hit her (herself?) constantly trying to cough up stopped her from hitting and she kept grunting trying to cough. I (E3) noticed her face started turning blue and her lips got darker. I called E5 (Licensed Practical Nurse/LPN) and explained. She said call 911 and I told them (911) what happened. As soon as they arrived she kept trying to lay back, we sat her up and after a few attempts she slowly stopped breathing and the ambulance put her on the stretcher and in the truck to perform CPR."</p> <p>The Patient Care Report (prepared by the Emergency Medical Staff/EMS) dated 05/25/14 identifies that 911 was called approximately 14 minutes after staff discovered R1 was choking and experiencing respiratory distress. This report states,</p> <p>"Narrative: Received a 911 dispatch (22:29 / 10:29 P.M.) ... for a 58 Y/o (year old) female with breathing difficulties. Arrived on scene (22:34 / 10:34 P.M.) were meet (met) by a staff member. He related that the PT (patient) was not breathing right. He directed EMS to the PT whom was in a room next to the entry. PT was laying on the bed supine (on her back) with her head up on two pillows. She was agnel (agonal) breathing (irregular breaths occurring when the body is not provided with adequate oxygen) with her tongue</p>	Z9999		



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Z9999	<p>Continued From page 8</p> <p>protruding out of her mouth. The tongue appeared swollen. was pushing out of the PT mouth when she would breath. Staff couldn't advise of PT past medical HX (history) or present meds. PT chart is locked up and staff has no way to get to it in emergency. Fingers tips were cyanotic (bluish discoloration caused by lack of oxygen in the blood) appeared PT had been agnel (agonal) breathing for some time. EMS looked at the airway noted no obstruction. Pt was moved rapidly to the cot and outside to the ambulance. As EMS was loading PT she stopped breathing.</p> <p>PT was placed on cardiac monitor noted asystole (no heart beat) a #3 airway was inserted after suctioning and looking for a foreign body. CPR (Cardiopulmonary Resuscitation) was started continued CPR for about two minute and then contacted dispatch for a second crew. Continued to perform CPR and bag (device used to assist ventilation in a person who is not breathing or who is having difficulty breathing) PT with #3 airway. Crew arrived and the attempted a intubation (placement of a plastic tube into the windpipe to maintain and open the person's airway) which was unsuccessful initially, EMS started a line in the left ac (antecubital) with a 20 gauge cath (catheter) running NS (normal Saline) at a wide open rate. 1 epi (Epinephrine) (medication given to open the person's airway to the lungs) was pushed during that time. PT was intubated with a #7 tube and begin to bag PT. Noted during intubation allot (a lot) of foreign matter IE emesis in the airway, suctioned several times to clear airway. Gave second epi just prior to leaving the facility. Gave a third epi prior to arriving at ER (Emergency Room)..."</p> <p>Z1 (Emergency Medical Staff Captain - 1st</p>	Z9999		
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Z9999	<p>Continued From page 9</p> <p>Responder) was interviewed by telephone on 06/03/13 at 1:30 P.M. and stated, "We entered the facility to respond to a call of respiratory distress. R1 was laying flat on her back on her bed with her head bent on a pillow. If someone is choking or having difficulty breathing, lying on your back is the worst position for them to be in. Three staff were standing around in the room, just looking. They weren't doing anything. I was alarmed because she (R1) appeared to be taking agonal breaths at a rate of less than 10-12 per minute. This is not enough to sustain life. Her (R1's) face and fingers were cyanotic. It appeared that she had to have been that way, in distress for a while. Staff should have called 911 sooner. R1's breaths were agonal and similar to the last breath sounds someone takes before they die. Her (R1's) tongue appeared to be twice it's normal size and she appeared to be having an allergic like reaction. When we asked staff for R1's medical information from her chart (R1's) to check her current medications, past medical history and for any allergies, we were told that the chart was locked in the chart room. One of the staff (unnamed) told us that someone would bring the chart to the emergency room later. Not having access to R1's medical records creates a delay in providing prompt medical treatment". Z1 went on to say, "I started R1 on oxygen and within seconds she stopped breathing and had no pulse. The first attempt to intubate R1 was not successful due to the size of her tongue blocking her airway. R1 was suctioned and pieces of food were noted in her emesis. CPR was started and continued until hospital personnel took over".</p> <p>This report goes on to state that the Ambulance Service departed the facility at 23:03/ 11:03 P.M. and arrived at the hospital at 23:08/11:08 P.M.</p>	Z9999		
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Z9999	<p>Continued From page 10</p> <p>The Emergency Department Physician Documentation dated 05/25/14 Time 23:14/11:14 pm states, "HPI (history of present illness) unobtainable due to patient distress. Preceding the arrest, the patient was dyspneic, was choking was found down by nursing home staff. The arrest occurred CILLA. (CILA - Center for Independent Living) Prehospital Course: Bystanders at the scene did not perform CPR. The patient has not experienced similar symptoms in the past. The patient has not recently seen a physician. Original EMS call was for pt in respiratory distress/Medics found patient with agonal respirations and in asystole... Differential diagnosis: cardiac arrest, respiratory arrest, asphyxiation, aspiration, obstructed airway... Patient pronounced on 2014/05/25 23:18:00". (11:18 PM)</p> <p>Review of R1's record identifies documentation within her Universal Progress Notes and the Nurse's Notes depicting that R1 had experienced similar symptoms prior to 05/25/14. Documentation for the month of May 2014 identifies the following entries:</p> <p>05/16/14 5:18 A.M. As R1 was in the bathroom #2 getting cleaned up form being incontinent, she began coughing. As of now, she has coughed 4 times, and each time she has gagged. Nurse (E6) was informed;</p> <p>05/18/14 2:05 A.M. R1 was coughing a lot tonight. Each time she does she starts gagging. Watch for any liquids or emesis to come out. She has not coughed up anything yet. Called E6 (LPN) and left a voicemail. Stated that I (E8 DSP) would call her (E6) again if anything</p>	Z9999		
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Z9999	<p>Continued From page 11</p> <p>worsens;</p> <p>05/19/14 10:00 A.M. Staff (DSP) called at reported that R1 had coughed /gagged in her sleep without emesis during the night... Called placed to E10 (Physician/Facility's Medical Director) et (and) notified of occurrences. No new orders at present, E10 request, "just keep and eye on her". R1 continues to be at 90 degrees during oral intake due to risk of aspiration related to mechanically altered diet et feeding self too quickly. Continues meal pacing program;</p> <p>05/23/14 11:00 P.M. R1 woke up from sleep coughing took her back to room and took vitals temp (temperature) 97.5 and BP (blood pressure 140/80 respiration (this entry is blank) . R1 vomited twice clothes was changed and called nurse E6 (LPN) and nurse called E2 (Assistant Administrator) also E6 said do another set of vitals in 30 mins. (minutes);</p> <p>05/23/14 11:30 P.M. E11 (DSP) and I (E9) took R1's vitals again. temp 98.1 Respiration 14 BP 136/72, Called Nurse (E6) and said her vitals were normal and that she would be here... first thing in the morning to see R1. Also R1 will be going to see E10 (facility's Medical Director) on Monday;</p> <p>05/24/14 0800 (8:00 A.M.) "Staff reports R1 got up during the night at 2200 (10:00 P.M.) et appeared to have "clear snot" on her nose, mouth et spots on blouse. Then went to BR bathroom et vomited twice in same instance. VSS (Vital Signs) temp taken immediately 97.4 A (auxiliary) then 30 mins. (minutes) later 98.2 No s/sx (signs/symptoms) of aspiration were reported; and</p>	Z9999		

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>IL6014286</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>06/24/2014</b>
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NAME OF PROVIDER OR SUPPLIER  <b>PEACHTREE ESTATES</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>1370 STATE ROUTE 127 SOUTH JONESBORO, IL 62952</b>
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(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
Z9999	<p>Continued From page 12</p> <p>05/25/14 7:10 A.M. R1 seems to sleep all night without coughing or vomiting if she sleeps with 3 pillows under her head.</p> <p>There is no documentation contained within any of R1's notes that the facility notified the physician of her continued episodes of coughing and vomiting after they were told on 05/19/14 to "keep and eye on her" by E10 (physician).</p> <p>In review of the facility's Preliminary Reporting Form dated 05/25/14 at 10:15 P.M. documentation states, "R1 was heard grunting by I (E3 DSP/Direct Support Person) and E4 (DSP). Went to go check on her and she was sitting up and appeared to be trying to push a cough out but couldn't. We tried giving her something to drink but she refused. She kept hitting herself trying to push a cough out and we tried to stop her from doing that she kept grunting and screaming trying to push it out. I called E6 (LPN/Licensed Practical Nurse) and told her and she said "call 911". I called 911 and notified what happened when they pulled up she tried to lay back in the bed we constantly sat her up and she slowly laid back and took a deep breath. We called her name constantly and got no response. The ambulance came in with the stretcher and put her in the truck and performed CPR. R1 passed away."</p> <p>E3 (DSP) was interviewed on 06/05/14 at 10:32 A.M. and stated, "I have worked at the facility since February 2014 and I am certified in First Aid and CPR." E3 confirmed that he worked and was present at the facility on 05/25/14 and stated, "We (E4/DSP and myself) heard grunting and R2 was coming down the hall to get us because she</p>	Z9999		

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>IL6014286</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>06/24/2014</b>
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Z9999	<p>Continued From page 13</p> <p>thought R1 was choking. R2 had told us that she would come and get us during the night if R1 was having problems. At about 10:15 P.M. (05/25/14) it happened. I had taken R1 to the bathroom about 9:55 P.M. and put her back to bed. When R2 had come to get us we found R1 wheezing and she acted like she was pushing something out. I went and called E6 (LPN). E4 (DSP) informed me that R1's face was turning blue and I got off the phone and called 911. R1 was in the dining room and was still coughing. We offered her a drink and she refused. She was starting to get her color back and we walked her down to her bedroom. At that time E5 (Third Shift DSP) pulled upped. I checked for a pulse and I didn't feel a pulse. E5 stated that she felt a pulse. R1 was slowly breathing and not responding but by that time 911 was here. They said R1 was breathing but did not have a pulse. The EMTs asked about her chart and stated that they needed the chart. I told them that the medication room was locked and that someone would meet them at the hospital later with R1's chart." During this interview E3 confirmed that all of the individual's charts are locked in the medication room. and stated, "No" when asked if he or any staff at the time of the incident on 05/25/14 had access to the medication room.</p> <p>During this interview, E3 stated, "No" when asked by the surveyor if he had called 911 before calling the nurse when R1 was choking and appeared to be in respiratory distress. E3 stated, "No" when asked if he or E4 had checked R1's airway for blockage. E3 also stated "No" when asked if he or E4 had performed the Heimlich Maneuver or CPR when R1 was choking and/or when she became unresponsive.</p> <p>Review of the Witness Statement report</p>	Z9999		
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Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>IL6014286</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>06/24/2014</b>
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Z9999	<p>Continued From page 14</p> <p>completed by E4 (DSP 2nd Shift on 05/25/14) identifies that R1 was, "...coughing, choking, gagging her lips turned blueish prior to E3 (DSP) calling the nurse (E6). This report goes on to say, "E3 went to call E6, I got R1 to the dining room and her color came back. She was still choking. I keep talking to her She coughed She went back to her room still choking trying to lay down."</p> <p>E4 (DSP) was interviewed by telephone on 06/05/14 at 3:00 P.M. regarding her written statement for 05/25/14. E4 stated, "I no longer work at the facility. I was there the night R1 died. It was me and E3 and then E5 came. This happened about 10:15 P.M. or so. R1 started coughing and choking and her lips turned blue. E3 called the nurse (E6) and she told him to call 911. R1 kept trying to lay down and we kept trying to get her up. Her tongue and neck swelled up and she couldn't breath. When E4 was asked if either E3, E6 or herself provided first aid care to R1 when she was choking and/or in respiratory distress, she stated, "We patted her on her back and told her to try to cough it up."</p> <p>E5 (DSP 3rd Shift) was interviewed by telephone on 06/05/14 at 1:00 P.M. and stated, " I arrived to work on 05/25/14 at 10:30 P.M. I checked on R1 when I came in and I didn't feel a pulse in her arm but I felt a faint pulse in her neck. When I got there she was coughing and didn't appear to be breathing. The ambulance was pulling up at the time and they took over."</p> <p>During the survey Entrance with E8 (Authorized Direct Support Staff (ADSP) on 06/03/14 at 3:00 P.M. E8 stated that R1's chart was not available for the surveyor to review. When E8 was asked if the other individual's records were available, she</p>	Z9999		

Illinois Department of Public Health

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Z9999	<p>Continued From page 15</p> <p>stated, "I have a key to the medication room and and so do the staff that pass medications". During this interview, E8 went on to state that when she leaves the facility at the end her shift, none of the other staff members would be able to access the individual's charts until someone authorized to pass medications arrives to the facility with a key to unlock the medication room.</p> <p>E3 (DSP/Direct Support Person) was interviewed on 06/05/14 at 10:32 A.M. and stated, "I have worked at the facility since February 2014 and I am certified in First Aid and CPR." E3 confirmed that he worked and was present at the facility on 05/25/14 and stated, " The EMTs asked about her (R1's) chart and stated that they needed the chart. I told them that the med (medication) room was locked and that he chart was in the med room. I did tell him that someone would meet them at the hospital later with R1's chart." During this interview E3 confirmed that all of the individual's charts are locked in the medication room.</p> <p>E7 (Registered Nurse/RN Consultant) was interviewed by telephone on 06/05/14 at 3:25 P.M. and stated, "Yes I met with E1 (Administrator) and E2 (Assistant Administrator) after the incident to discuss and investigate the incident. " When E7 was asked about the locked records she stated, "I knew they were locked but I never thought anything about it. One of our nurses lives less than seven miles from the facility and could get to the facility in a few minutes'. When E7 was asked why the nurse did not come to the facility to get the chart after becoming aware of staff calling 911, she stated, "I was told that E6 (LPN/Licensed Practical Nurse) was out of town". When E7 was asked if staff should have documented R1's vitals during her</p>	Z9999		
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Illinois Department of Public Health

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Z9999	<p>Continued From page 16</p> <p>episode(s) of choking and experiencing respiratory distress, she stated, "I would have expected vitals". When asked if she was aware if the facility had retrained staff on first aid in medical emergencies when dealing with individuals who are choking and/or in respiratory distress, she stated, "Not that I'm aware".</p> <p>During the interview with E1 (Administrator) on 06/04/14 at 4:30 P.M., E1 was asked if the facility had taken any action since 05/25/14 to ensure that emergency medical personnel have access to the individual's chart and/or medical information in the event of an emergency and he stated, "No".</p> <p>E1 (Administrator) was interviewed on 06/04/14 at 4:30 P.M. regarding the facility's investigation dated 05/30/14 which states, "There will be an all staff meeting to go over the above again (facility address, DNR (Do Not Resuscitate) code) plus: refresher on when to start CPR, talk about when to call the nurse and ambulance..." E1 stated, "No" when asked by the surveyor if staff had been retrained in CPR and on the facility's policy regarding calling 911 before calling the nurse since 05/25/14. E1 also stated, "No" when asked if the facility had taken any action to address the accessibility of the individual's charts to ensure that emergency medical personnel have the individual's needed medical information in the event of an emergency.</p> <p>This report goes on to state that during the facility's investigation the following issues were found:</p>	Z9999		
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Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>IL6014286</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>06/24/2014</b>
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Z9999	Continued From page 17  1. Staff did not know the facility's address when they called the ambulance .. 2. Staff did not know if she (R1) was a DNR (Do Not Resuscitate) or code... 3. There will an all staff meeting to go over the above... refresher on when to start CPR, talk about when to call the nurse and ambulance..."  (A)	Z9999		

Imposed Plan of Correction

**PLAN OF CORRECTION  
AND CREDIBLE ALLEGATION OF COMPLIANCE  
FROM  
PEACH TREE ESTATES  
1370 STATE ROUTE 127 SOUTH  
JONESBORO, ILLINOIS**

**DATE SURVEY COMPLETED: 6-24-14**

**CREDIBLE ALLEGATION OF COMPLIANCE:** No later than **July 30<sup>th</sup>, 2014**  
Peach Tree Estates shall be in substantial compliance with all requirements for continued certification under the Medicaid Program.

**PLANS OF CORRECTION:** The following plans of correction are submitted as part of the requirements for continued Medicaid certification. The submission of these plans of correction does not constitute any admission by the facility that the alleged deficiencies are true or that the facility agrees with the deficiencies. Nonetheless, the facility will take the following steps to assure continued compliance with all applicable requirements.

**W 104 483.410(a)(1) Governing body**

There is a key in the staff bathroom available 24 hours a day 7 days a week for staff to access the medical charts in the med room on an emergency basis. All present staff has been in serviced to this practice. This practice has been added to the new staff orientation training done before a staff person works a shift at the home at the time of hire and ongoing. All staff were made aware during individual in-service training by 7/29/2014. This administrator was responsible for overseeing its completion date by Saturday July 29<sup>th</sup>, 2014.

**Monitoring Person:** Gary Griffith, Administrator

**Responsible Staff:** Suzanne Cline, Training Coordinator and Gary Griffith, Administrator

**Completion Date:** 7/29/2014 and ongoing

OK 7/20/14

**W 122 483.420 Client Protections**

All certified facility staff was retrained on CPR/first aid per American Heart Association by 7/29/2014 by Gary Griffith and Suzanne Cline. All certified staff was given a written test to determine their competency in this area after their training. Non certified staff were given specific training and then tested on their competency related to their involvement in this area being non certified in cpr/first aid by 7/29/2014. The in-service material was given to surveyors the evening of the above date. Tests that were given to certified/non certified staff available upon request. All new staff will be trained on an on-going basis and obtain certification in CPR/First Aid within 120 days.

**Monitoring Person:** Gary Griffith, Administrator

Completion Date: 20 Days from receipt of Notice

# Imposed Plan of Correction

**Responsible Staff:** Gary Griffith, Administrator Suzanne Cline, Training Coord.

**Completion Date:** 7/29/2014 and ongoing

There is always, and always has been, a certified person on each shift and residents go on outings with a certified staff person as of 6/5/2014 and this will be ongoing thereafter.

**Monitoring Person:** Gary Griffith, Administrator

**Responsible Staff:** Gary Griffith, Administrator and Joan Patton, Asst. Adm.

**Completion Date:** 7/29/2014 and ongoing as it always has been

See W 149

See W 318

OK 7/21/14

## W 149 483.42(d)(1) Staff Treatment of Clients

All certified facility staff was retrained on CPR/first aid per American Heart Association by 7/29/2014 by Gary Griffith and Suzanne Cline. All certified staff was given a written test to determine their competency in this area after their training. Non certified staff were given specific training and then tested on their competency related to their involvement in this area being non certified in cpr/first aid by 7/29/2014. The in-service material was given to surveyors the evening of the above date. Tests that were given to certified/non certified staff available upon request. All new staff will be trained on an on-going basis and obtain certification in CPR/First Aid within 120 days.

**Monitoring Person:** Gary Griffith, Administrator

**Responsible Staff:** Gary Griffith, Administrator Suzanne Cline, Training Coord.

**Completion Date:** 7/29/2014 and ongoing

There is always, and always has been, a certified person on each shift and residents go on outings with a certified staff person as of 6/5/2014 and this will be ongoing thereafter.

**Monitoring Person:** Gary Griffith, Administrator

**Responsible Staff:** Gary Griffith, Administrator and Joan Patton, Asst. Adm.

**Completion Date:** 7/29/2014 and ongoing as it always has been

Staff will demonstrate per American Heart Association for systems demonstrated through retraining by no later than 6/30/2014. This administrator will oversee that the above trained staff will demonstrate their competency on what they have been trained and tested on. All

Completion Date: 20 Days from Receipt of Notice

# Imposed Plan of Correction

new staff will be trained and demonstrate competency at the time of hire and on an on-going basis by 7/29/2014.

**Monitoring Person:** Gary Griffith, Administrator

**Responsible staff:** Gary Griffith, Administrator; Joan Patton, Asst. Adm.; Carolyn Kissiar, RN Consultant; and Suzanne Cline, Training Coordinator

**Completion Date:** 7/29/2014 and ongoing

There is a key in the staff bathroom available 24 hours a day 7 days a week for staff to access the medical charts in the med room on an emergency basis. All present staff has been in serviced to this practice. This practice has been added to the new staff orientation training done before a staff person works a shift at the home at the time of hire and ongoing. All staff were made aware during individual in-service training by 7/29/2014. This administrator was responsible for overseeing its completion date by Saturday July 29<sup>th</sup>, 2014.

**Monitoring Person:** Gary Griffith, Administrator

**Responsible Staff:** Suzanne Cline, Training Coordinator

**Completion date:** 7/29/14 and ongoing.

All staff was retrained on the facility policy of immediately calling 911 in case of a medical emergency by 7/29/2014. This administrator oversaw completion of staff training completed by Saturday, July 29<sup>th</sup>, 2014. All new hires will be trained on this policy at the time of hire and ongoing.

**Monitoring Person:** Gary Griffith, Administrator

**Responsible Staff:** Suzanne Cline, Training Coordinator and Gary Griffith, Administrator

**Completion Date:** 7/29/2014 and ongoing

All non-certified staff will be trained on taking and documenting resident vital signs as appropriate. All new hires will be trained on this at the time of hire and ongoing thereafter.

**Monitoring Person:** Gary Griffith, Administrator

**Responsible Staff:** Carolyn Kissiar, RN Consultant; Workshop Nurse; and Gary Griffith, Administrator

**Completion Date:** No later than 7/29/2014 and ongoing

Completion Date 20 days from  
Receipt of Notice

OK 7/21/14

# Imposed plan of correction

## W 154 483.420(d)(3) Staff Treatment of Clients

This administrator Gary Griffith will completely investigation allegations of abuse/neglect and address them in the written report.

**Responsible Person(s):** Gary Griffith, Administrator  
**Person Monitoring:** Gary Griffith, Administrator  
**Target Date:** 7/30/2014

OK 7/21/14

## W 318 483.460 Health Care Services

This facility will ensure that in the future it has reproducible documentation of resident's physician being notified of their medical conditions.

**Responsible Persons:** Jamie Ragan, LPN and Carolyn Kissiar, Rn consultant.

**Monitoring Person:** Carolyn Kissiar, Rn consultant.

**Target Date:** 7-30-14 and on-going thereafter.

All certified facility staff was retrained on CPR/first aid per American Heart Association by 7/29/2014 by Gary Griffith and Suzanne Cline. All certified staff was given a written test to determine their competency in this area after their training. Non certified staff were given specific training and then tested on their competency related to their involvement in this area being non certified in cpr/first aid by 7/29/2014. The in-service material was given to surveyors the evening of the above date. Tests that were given to certified/non certified staff available upon request. All new staff will be trained on an on-going basis and obtain certification in CPR/First Aid within 120 days.

**Monitoring Person:** Gary Griffith, Administrator

**Responsible Staff:** Gary Griffith, Administrator Suzanne Cline, Training Coord.

**Completion Date:** 7/29/2014 and ongoing

There is always, and always has been, a certified person on each shift and residents go on outings with a certified staff person as of 6/5/2014 and this will be ongoing thereafter.

**Monitoring Person:** Gary Griffith, Administrator

**Responsible Staff:** Gary Griffith, Administrator and Joan Patton, Asst. Adm.

**Completion Date:** 7/29/2014 and ongoing as it always has been

Completion Date: 20 Days from receipt of Notice

# Imposed Plan A Correction

Staff will demonstrate per American Heart Association for systems demonstrated through retraining by no later than 6/30/2014. This administrator will oversee that the above trained staff will demonstrate their competency on what they have been trained and tested on. All new staff will be trained and demonstrate competency at the time of hire and on an on-going basis by 7/29/2014.

**Monitoring Person:** Gary Griffith, Administrator

**Responsible staff:** Gary Griffith, Administrator; Joan Patton, Asst. Adm.; Carolyn Kissiar, RN Consultant; and Suzanne Cline, Training Coordinator

**Completion Date:** 7/29/2014 and ongoing

There is a key in the staff bathroom available 24 hours a day 7 days a week for staff to access the medical charts in the med room on an emergency basis. All present staff has been in serviced to this practice. This practice has been added to the new staff orientation training done before a staff person works a shift at the home at the time of hire and ongoing. All staff were made aware during individual in-service training by 7/29/2014. This administrator was responsible for overseeing its completion date by Saturday July 29<sup>th</sup>, 2014.

**Monitoring Person:** Gary Griffith, Administrator

**Responsible Staff:** Suzanne Cline, Training Coordinator

**Completion date:** ~~7/29/14~~ and ongoing thereafter.

All staff was retrained on the facility policy of immediately calling 911 in case of a medical emergency by 7/29/2014. This administrator oversaw completion of staff training completed by Saturday, July 29<sup>th</sup>, 2014. All new hires will be trained on this policy at the time of hire and ongoing.

**Monitoring Person:** Gary Griffith, Administrator

**Responsible Staff:** Suzanne Cline, Training Coordinator and Gary Griffith, Administrator

**Completion Date:** ~~7/29/2014~~ and ongoing

All non-certified staff will be trained on taking and documenting resident vital signs as appropriate. All new hires will be trained on this at the time of hire and ongoing thereafter.

**Monitoring Person:** Gary Griffith, Administrator

**Responsible Staff:** Carolyn Kissiar, RN Consultant; Workshop Nurse; and Gary Griffith, Administrator

**Completion Date:** ~~No later than 7/29/2014~~ and ongoing

Completion Date: 20 days from Receipt of Notice  
OK 7/21/14

# Imposed Plan of Correction

## W 331 483.460(c) Nursing Services

This facility will ensure that in the future it has reproducible documentation of residents physician being notified of their medical conditions.

**Responsible Persons:** Jamie Ragan, LPN and Carolyn Kissiar, Rn consultant.

**Monitoring Person:** Carolyn Kissiar, Rn consultant.

**Target Date:** ~~7-30-14~~ and on-going thereafter.

All certified facility staff was retrained on CPR/first aid per American Heart Association by 7/29/2014 by Gary Griffith and Suzanne Cline. All certified staff was given a written test to determine their competency in this area after their training. Non certified staff were given specific training and then tested on their competency related to their involvement in this area being non certified in cpr/first aid by 7/29/2014. The in-service material was given to surveyors the evening of the above date. Tests that were given to certified/non certified staff available upon request. All new staff will be trained on an on-going basis and obtain certification in CPR/First Aid within 120 days.

**Monitoring Person:** Gary Griffith, Administrator

**Responsible Staff:** Gary Griffith, Administrator Suzanne Cline, Training Coord.

**Completion Date:** ~~7/29/2014~~ and ongoing

There is always, and always has been, a certified person on each shift and residents go on outings with a certified staff person as of 6/5/2014 and this will be ongoing thereafter.

**Monitoring Person:** Gary Griffith, Administrator

**Responsible Staff:** Gary Griffith, Administrator and Joan Patton, Asst. Adm.

**Completion Date:** ~~7/29/2014~~ and ongoing as it always has been

Staff will demonstrate per American Heart Association for systems demonstrated through retraining by no later than 6/30/2014. This administrator will oversee that the above trained staff will demonstrate their competency on what they have been trained and tested on. All new staff will be trained and demonstrate competency at the time of hire and on an on-going basis by ~~7/29/2014~~.

**Monitoring Person:** Gary Griffith, Administrator

Completion Date 20 days from Receipt of Notice



# Imposed Plan of Protection

**Responsible staff:** Gary Griffith, Administrator; Joan Patton, Asst. Adm.; Carolyn Kissiar, RN Consultant; and Suzanne Cline, Training Coordinator

**Completion Date:** ~~7/29/2014~~ and ongoing

There is a key in the staff bathroom available 24 hours a day 7 days a week for staff to access the medical charts in the med room on an emergency basis. All present staff has been in serviced to this practice. This practice has been added to the new staff orientation training done before a staff person works a shift at the home at the time of hire and ongoing. All staff were made aware during individual in-service training by 7/29/2014. This administrator was responsible for overseeing its completion date by Saturday July 29<sup>th</sup>, 2014.

**Monitoring Person:** Gary Griffith, Administrator

**Responsible Staff Person:** Suzanne Cline, Training Coordinator

**Completion Date:** ~~7/29/14~~ and ongoing thereafter.

All staff was retrained on the facility policy of immediately calling 911 in case of a medical emergency by 7/29/2014. This administrator oversaw completion of staff training completed by Saturday, July 29<sup>th</sup>, 2014. All new hires will be trained on this policy at the time of hire and ongoing.

**Monitoring Person:** Gary Griffith, Administrator

**Responsible Staff:** Suzanne Cline, Training Coordinator and Gary Griffith, Administrator

**Completion Date:** 7/29/2014 and ongoing

All non-certified staff will be trained on taking and documenting resident vital signs as appropriate. All new hires will be trained on this at the time of hire and ongoing thereafter.

**Monitoring Person:** Gary Griffith, Administrator

**Responsible Staff:** Carolyn Kissiar, RN Consultant; Workshop Nurse; and Gary Griffith, Administrator

**Completion Date:** No later than ~~7/29/2014~~ and ongoing

Completion Date: 20 days from receipt of Notice

7/21/14

imposed plan of correction

**W 336 483.460(c)(3)(iii) Nursing Services**

The lpn Jamie Ragan will be responsible for conducting the quarterly nursing assessments. The quarterly assessments for R-4 & 5 were actually found in the nurses office and have been filed in the resident's files.

**Responsible Person(s):** Jamie Ragan, lpn  
**Person Monitoring:** Carolyn Kissar, Rn consultant.  
**Target Date:** 7/30/2014

OK 7/21/14

**W 342 483.460(c)(5)(iii) Nursing Services**

All certified facility staff was retrained on CPR/first aid per American Heart Association by 7/29/2014 by Gary Griffith and Suzanne Cline. All certified staff was given a written test to determine their competency in this area after their training. Non certified staff were given specific training and then tested on their competency related to their involvement in this area being non certified in cpr/first aid by 7/29/2014. The in-service material was given to surveyors the evening of the above date. Tests that were given to certified/non certified staff available upon request. All new staff will be trained on an on-going basis and obtain certification in CPR/First Aid within 120 days.

**Monitoring Person:** Gary Griffith, Administrator

**Responsible Staff:** Gary Griffith, Administrator Suzanne Cline, Training Coord.

**Completion Date:** 7/29/2014 and ongoing

There is always, and always has been, a certified person on each shift and residents go on outings with a certified staff person as of 6/5/2014 and this will be ongoing thereafter.

**Monitoring Person:** Gary Griffith, Administrator

**Responsible Staff:** Gary Griffith, Administrator and Joan Patton, Asst. Adm.

**Completion Date:** 7/29/2014 and ongoing as it always has been

Staff will demonstrate per American Heart Association for systems demonstrated through retraining by no later than 6/30/2014. This administrator will oversee that the above trained staff will demonstrate their competency on what they have been trained and tested on. All new staff will be trained and demonstrate competency at the time of hire and on an on-going basis by 7/29/2014.

**Monitoring Person:** Gary Griffith, Administrator

Completion Date: 20 days from the receipt of notice