

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

PRINTED: 07/09/2014
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 145190	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____		(X3) DATE SURVEY COMPLETED C 06/12/2014
NAME OF PROVIDER OR SUPPLIER HEARTLAND OF CHAMPAIGN			STREET ADDRESS, CITY, STATE, ZIP CODE 309 EAST SPRINGFIELD CHAMPAIGN, IL 61820		
(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) COMPLETION DATE	
F 000	INITIAL COMMENTS Heartland of Champaign Complaint Survey 1462471/IL70197- F241	F 000			
F 241 SS=E	483.15(a) DIGNITY AND RESPECT OF INDIVIDUALITY The facility must promote care for residents in a manner and in an environment that maintains or enhances each resident's dignity and respect in full recognition of his or her individuality. This REQUIREMENT is not met as evidenced by: Based on observation, interview and record review, the facility failed to answer call lights promptly to address resident needs for assistance for five residents (R6, R8, R10, R13, R14) in the supplemental sample. Findings include: On 6/11/14 at 9:18am R6's call light was on. The call light was answered at 9:27am. On 6/11/14 at 9:30am, R6 stated he needed assistance with the strap on a boot. On 6/11/14 at 9:28am, E6 (Nursing Assistant) stated, call lights are usually answered within three minutes. R6 was requesting assistance with a splint. On 6/11/14 at 9:23am R13's call light was on. The call light was answered at 9:32am. On 6/11/14 at 10:04am, R13 stated she needed assistance changing an incontinence brief. R13 stated staff are getting better with call lights but a lot of times	F 241			

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

Any deficiency statement ending with an asterisk (*) denotes a deficiency which the institution may be excused from correcting providing it is determined that other safeguards provide sufficient protection to the patients. (See instructions.) Except for nursing homes, the findings stated above are disclosable 90 days following the date of survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosable 14 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.

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F 241	<p>Continued From page 1</p> <p>it takes about 10 minutes for the staff to respond. The Minimum Data Set, 6/4/14, documents R13 with a Brief Interview for Mental Status of 15.</p> <p>On 6/11/13 at 9:34am, R14's emergency call light was alarming. The emergency call light was answered at 9:39am. E5 (Nursing Assistant) was observed at the nursing station entering information into a computer. At 9:39am, E2 (Director of Nursing) instructed E5 to answer the emergency light. On 6/11/14 at 10:07am, R14 stated she pulled the emergency light because she needed assistance in the bathroom. The Minimum Data Set, 3/21/14, documents R14 with a Brief Interview for Mental Status of 11.</p> <p>On 6/10/14 at 11:45am, R10 stated there is a delay in call lights being answered and indicated it sometimes takes an hour. The Minimum Data Set, 3/13/14, documents R10 with a Brief Interview for Mental Status of 15.</p> <p>On 6/12/14 at 9:05am, R8 stated call lights are not answered timely and stated it sometimes takes up to 30 minutes. The Minimum Data Set, 4/30/14, documents R8 with a Brief Interview for Mental Status of 15.</p> <p>On 6/11/14 at 1:07pm, E2 (Director on Nursing) stated call lights should be answered within three to five minutes. An emergency call light should be answered as soon as staff hears it; the resident probably needs assistance in the bathroom.</p> <p>The Resident Council Minutes, completed by E3 (Activity Director), on 3/27/14, 4/29/14 and 5/28/14, document resident concerns with the timeliness of call light response by staff.</p>	F 241			

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F 241	<p>Continued From page 2</p> <p>On 6/11/14, E3 stated call light complaints were received in March, April and May Resident Council Meetings. If two or more residents complain E3 places it on the minutes and reports the concern to E1 (Administrator) and E2. E3 was unable to provide the names of the residents who complained but thought it was only two.</p> <p>The facility policy, Call Lights, 12/2009, documents staff are to answer al call lights in a prompt and courteous manner. All staff, regardless of assignment, answers calls lights.</p>	F 241			