

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

PRINTED: 01/05/2017
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 145333	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED C 01/03/2017
NAME OF PROVIDER OR SUPPLIER WEST SUBURBAN NURSING & REHAB CENTER			STREET ADDRESS, CITY, STATE, ZIP CODE 311 EDGEWATER DRIVE BLOOMINGDALE, IL 60108	
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F 000	INITIAL COMMENTS	F 000		
F 223 SS=G	<p>Incident Report Investigation to Incident of December 15, 2016/IL90633.</p> <p>483.12 FREE FROM ABUSE/INVOLUNTARY SECLUSION</p> <p>483.12 The resident has the right to be free from abuse, neglect, misappropriation of resident property, and exploitation as defined in this subpart. This includes but is not limited to freedom from corporal punishment, involuntary seclusion and any physical or chemical restraint not required to treat the resident's symptoms. This REQUIREMENT is not met as evidenced by: Based on interview and record review, the facility failed to prevent verbal and physical abuse from occurring to 2 of 11 residents (R1, R2) reviewed for abuse in the sample of 11.</p> <p>This failure resulted in R1 experiencing sleeplessness and fearfulness after being punched in the face when calling out for staff assistance. R2's medical diagnosis makes assessing the affects of physical abuse difficult. A reasonable person would not want to be verbally chastised or physically abused when requesting help.</p> <p>The findings include:</p> <p>1. On December 28, 2016 at 9:30 AM, R1 said, "On December 14, 2016, I was yelling for help and [E5] (CNA-Certified Nursing Assistant) came in my room and said, "What do you want? Shut up!" Then all of a sudden BAM, BAM, BAM, he punched me in the mouth three times. It hurt like</p>	F 223		

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 223	<p>Continued From page 1</p> <p>heck. Then he held my hand and said he was so sorry and offered me some chocolate from my drawer and begged me not to report him. I didn't say anything to anyone that night, but I layed there awake because I was afraid he would come back. I did not call for help while [E5] was working. I told [E11] (nurse) in the morning what happened because I did not think that it was right for [E5] to yell at me and punch me when I asked for help."</p> <p>R1's face sheet dated December 27, 2016 shows R1 was admitted to the facility in October 2015 with multiple diagnoses including hemiplegia and hemiparesis following cerebrovascular disease, atrial fibrillation, glaucoma, diabetes, major depressive disorder, lack of coordination and muscle weakness.</p> <p>R1's MDS (Minimum Data Set) dated November 7, 2016 shows R1 has moderate cognitive impairment and is totally dependent on facility staff for transferring, toileting and bathing, and requires extensive assistance for bed mobility, dressing and personal hygiene. The MDS also shows R1 is occasionally incontinent of bowel and bladder.</p> <p>On December 28, 2016 at 2:05 PM, E11 said, "Around 9:00 AM on December 15, 2016, [R1] told me he was punched by [E5] the previous night. I immediately reported the allegation to [E1] (Administrator) and [E2] (DON-Director of Nursing) and they started the investigation. I did a total body assessment and there was no visible injury, discoloration or swelling on [R1's] body."</p> <p>Nursing documentation dated December 15, 2016 by E11 shows the same information as</p>	F 223			

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F 223	<p>Continued From page 2 stated in the interview.</p> <p>The facility roster dated December 27, 2016 shows R1 and R2 are roommates.</p> <p>On December 27, 2016 at 4:00 PM, E1 (Administrator) said the facility conducted a full investigation of R1's abuse allegation. During the investigation, R5 (spouse of R2) stated she witnessed R2 being slapped by E5 (CNA) on December 14, 2016. E1 said the facility was unable to substantiate the abuse allegations made by R1 and R5 due to a lack of witnesses or visible injuries, and reported the same to IDPH (Illinois Department of Public Health) on December 19, 2016. On December 22, 2016, the local police department notified the facility of E5's confession of physical abuse towards R1.</p> <p>2. R5 was interviewed at the bedside of R2 on December 28, 2016 at 9:35 AM with E1 (Administrator) and E2 (DON) present. R2 was not interviewable due to his medical condition and cognitive status. R5 said her native language is Chinese and speaks limited English. R5 is the spouse of R2, resides at the facility, and sits at R2's bedside, tending to his needs. During the interview, R2 was laying in bed and was non-verbal and did not participate in the interview. A Chinese interpreter was requested for the interview, however, E1 made assurances an interpreter was not necessary. It was difficult to interview R5 because of the language barrier. R5 used hand gestures at times to explain her statements. R5 said, "My husband (R2) grabbed the CNA's upper arm (using hand gesture to show grabbing upper arm) during transfer from the wheelchair to the bed. [E5] abruptly removed my husband's hand and slapped him in the face</p>	F 223			

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F 223	<p>Continued From page 3 (using hand gestures)." R5 said she reported the physical abuse on December 15, 2016.</p> <p>E11's (nurse) documentation shows R5 reported the physical abuse of R2 on December 15, 2016. E11 reported the abuse allegation immediately to E1 and E2. E11 performed a full body assessment of R2 and no visible injuries were noted.</p> <p>Progress notes dated December 16, 2016 showed R2 was hospitalized the day following the abuse allegation, for sepsis. R2 was readmitted to the facility on December 19, 2016. R5 accompanied R2 to the hospital and remained with him during his hospital stay.</p> <p>R2's face sheet dated December 27, 2016 shows R2 was admitted to the facility in December 2015 with multiple diagnoses including cerebrovascular disease, Parkinson's disease, dementia, atrial fibrillation, diabetes, chronic kidney disease, gastrostomy, and aphasia.</p> <p>R2's MDS dated October 27, 2016 shows R2's native language is Chinese. R2 has moderate cognitive impairment, is rarely understood, is totally dependent on facility staff for transfers, eating, bathing and toileting, and is frequently incontinent of bowel and bladder.</p> <p>R5's MDS dated December 13, 2016 shows R5 is cognitively intact and requires supervision with her ADLs (activities of daily living).</p> <p>On December 28, 2016 at 12:20 PM, Z1 (police officer) said he responded to the facility on December 15, 2016 for an allegation of abuse. Z1 said there was no physical evidence of abuse</p>	F 223			

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F 223	<p>Continued From page 4</p> <p>on R1 or R2. Z1 said R1 explained how he was punched by E5 on the evening of December 14, 2016 after calling out for help from his room. Z1 said he was unable to interview R2 due to his medical condition and interviewing R5 (spouse of R2) was difficult due to a language barrier. Z1 said the facility did not provide an interpreter to speak to R2 or R5. Z1 said E5 confessed to physically abusing R1 within 4 to 5 days of the incident and that no arrest was made because neither R1, R2, or R5 pressed charges against E5. Z1 said it was not clear if R2 or R5 understood the legal system due to the language barrier.</p> <p>The facility's shift assignment sheet dated December 14, 2016 shows E5 was responsible for the care of multiple residents, including R1, R2 and R5.</p> <p>The facility's policy and procedure entitled "Abuse Prevention Program" revised September 1, 2016 shows: "Policy: It is the policy of this facility to prevent resident abuse, neglect, mistreatment, and misappropriation of resident property. ...For the purposes of this policy, and to assist staff members in recognizing abuse, the following definitions shall pertain: 1. Abuse: The willful inflection of injury, unreasonable confinement, intimidation, or punishment with resulting physical harm or pain or mental anguish or deprivation by an individual, including a caretaker, of goods or services that are necessary to attain or maintain physical, mental psychosocial well-being. 2. Verbal Abuse: Any use of oral, written or gestured language that includes disparaging and derogatory terms to residents or their families, or within their hearing distance, to describe residents, regardless of their age, ability to</p>	F 223			

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F 223	Continued From page 5 comprehend or disability. ..4. Physical Abuse: Hitting, slapping, pinching, kicking, etc. It also includes controlling behavior through corporal punishment."	F 223			
F 226 SS=C	483.12(b)(1)-(3), 483.95(c)(1)-(3) DEVELOP/IMPLMENT ABUSE/NEGLECT, ETC POLICIES 483.12 (b) The facility must develop and implement written policies and procedures that: (1) Prohibit and prevent abuse, neglect, and exploitation of residents and misappropriation of resident property, (2) Establish policies and procedures to investigate any such allegations, and (3) Include training as required at paragraph §483.95, 483.95 (c) Abuse, neglect, and exploitation. In addition to the freedom from abuse, neglect, and exploitation requirements in § 483.12, facilities must also provide training to their staff that at a minimum educates staff on- (c)(1) Activities that constitute abuse, neglect, exploitation, and misappropriation of resident property as set forth at § 483.12. (c)(2) Procedures for reporting incidents of abuse, neglect, exploitation, or the misappropriation of resident property (c)(3) Dementia management and resident abuse	F 226			

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F 226	<p>Continued From page 6</p> <p>prevention.</p> <p>This REQUIREMENT is not met as evidenced by:</p> <p>Based on interview and record review the facility failed to follow their Abuse Prohibition policy for hiring and rehiring employees.</p> <p>This failure has the potential to affect all 192 residents residing in the facility.</p> <p>The findings include:</p> <p>The facility policy entitled, "Abuse Prevention Program" revised on December 1, 2016 shows: "Procedure: I. Pre-employment Screening of Potential Employees - This facility will not knowingly employ any individual convicted of resident abuse, neglect, mistreatment, or misappropriation of resident property. The facility will not knowingly employ any direct care staff convicted of any of the crimes listed in the Illinois Healthcare Workers Background Check Act (unless waived under the provision of the act), or with findings of abuse listed on the Illinois Nurse Aide registry. Prior to a new employee starting a working schedule: Initiate a reference check from previous employer(s), in accordance with the facility policy. ...Check the Illinois Health Care Worker Registry on any individual being hired for prior reports of abuse, previous fingerprint results, and the sex offender Website links on the Registry."</p> <p>Ten employee files were reviewed for health care worker background checks, on December 27 and 28, 2016, with the following findings:</p> <p>1. No information was found in the employee files of E5 (CNA), E7 (housekeeper), E8</p>	F 226			

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F 226	<p>Continued From page 7 (housekeeper), and E9 (housekeeper) to show reference checks were obtained from previous employers.</p> <p>2. The employee file for E6 (CNA) showed the date of hire was November 29, 2016. No information was found to show the facility staff made an attempt to obtain a reference check from E6's previous employer. The Health Care Worker Registry was not checked prior to E6's employment. On December 27, 2016 the facility obtained a report from the Illinois State Police showing E6 was found guilty of retail theft on April 17, 2006, and guilty of retail theft and contributing to the delinquency of a minor on May 25, 2010.</p> <p>On December 27, 2016 the facility checked E6's status on the health care worker registry. The registry showed E6 was not eligible to work as a CNA when he was rehired on November 29, 2016.</p> <p>On December 27, 2016 at 3:23 PM, E4 (Human Resources Manager) said, "E6 was a rehire. He was hired in 2009 and left our employment on May 26, 2016. We did not do reference checks, check the Illinois State Police records or the Health Care Worker Registry for E6. We never do background checks on rehires. References from past employers were not checked for E5-E9."</p> <p>The facility's undated policy entitled, "Personnel Policy & Protocol" shows: "...Reference check from previous employers shall be initiated. An attempt shall be made to check and obtain a reference. ...The facility shall check the status of all applicants with the Health Care Worker Registry prior to hiring."</p>	F 226			

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F 490 F 490 SS=C	Continued From page 8 483.70 EFFECTIVE ADMINISTRATION/RESIDENT WELL-BEING 483.70 Administration. A facility must be administered in a manner that enables it to use its resources effectively and efficiently to attain or maintain the highest practicable physical, mental, and psychosocial well-being of each resident. This REQUIREMENT is not met as evidenced by: Based on interview and record review, the facility administrator failed to ensure facility policies for abuse prevention and personnel hiring were followed. This failure has the potential to affect all 192 residents residing in the facility. The findings include: Ten employee files were reviewed for health care worker background checks, on December 27 and 28, 2016, with the following findings: 1. No information was found in the employee files of E5 (CNA), E7 (housekeeper), E8 (housekeeper), and E9 (housekeeper) to show reference checks were obtained from previous employers. 2. The employee file for E6 (CNA) showed the date of hire was November 29, 2016. No attempt was made to obtain a reference check from E6's previous employer. The Health Care Worker Registry was not checked prior to E6's employment. On December 27, 2016 the facility obtained a report from the Illinois State Police showing E6	F 490 F 490			

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F 490	<p>Continued From page 9</p> <p>was found guilty of retail theft on April 17, 2006, and guilty of retail theft and contributing to the delinquency of a minor on May 25, 2010.</p> <p>On December 27, 2016 the facility checked E6's status on the health care worker registry. The registry showed E6 was not eligible to work as a CNA when he was rehired on November 29, 2016.</p> <p>On December 27, 2016 at 3:23 PM, E4 (Human Resources Manager) said, "E6 was a rehire. He was hired in 2009 and left our employment on May 26, 2016. We did not do reference checks, check the Illinois State Police records or the Health Care Worker Registry for E6. We never do background checks on rehires. References from past employers were not checked for [E5] through [E9]."</p> <p>On December 28, 2016 at 3:20 PM, E1 (Administrator) said, "I have the final say for every employee hired at the facility. I personally sit with each employee and discuss abuse. We should have done the background check when we rehired [E6] (CNA)."</p> <p>The facility policy entitled, "Abuse Prevention Program" revised on December 1, 2016 shows: "Procedure: I. Pre-employment Screening of Potential Employees - This facility will not knowingly employ any individual convicted of resident abuse, neglect, mistreatment, or misappropriation of resident property. The facility will not knowingly employ any direct care staff convicted of any of the crimes listed in the Illinois Healthcare Workers Background Check Act (unless waived under the provision of the act), or with findings of abuse listed on the Illinois Nurse Aide registry. Prior to a new employee</p>	F 490			

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F 490	Continued From page 10 starting a working schedule: Initiate a reference check from previous employer(s), in accordance with the facility policy. ...Check the Illinois Health Care Worker Registry on any individual being hired for prior reports of abuse, previous fingerprint results, and the sex offender Website links on the Registry." The facility's undated policy entitled, "Personnel Policy & Protocol" shows: "...Reference check from previous employers shall be initiated. An attempt shall be made to check and obtain a reference. ...The facility shall check the status of all applicants with the Health Care Worker Registry prior to hiring."	F 490		