

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

PRINTED: 03/31/2016
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 14G146	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____		(X3) DATE SURVEY COMPLETED 03/25/2016
NAME OF PROVIDER OR SUPPLIER FROELICH HOUSE			STREET ADDRESS, CITY, STATE, ZIP CODE 356 SOUTH MICHIGAN AVENUE GALESBURG, IL 61401		
(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
W 000	INITIAL COMMENTS	W 000			
W 262	<p>ANNUAL CERTIFICATION SURVEY - FUNDAMENTAL</p> <p>INSPECTION OF CARE</p> <p>483.440(f)(3)(i) PROGRAM MONITORING & CHANGE</p> <p>The committee should review, approve, and monitor individual programs designed to manage inappropriate behavior and other programs that, in the opinion of the committee, involve risks to client protection and rights.</p> <p>This STANDARD is not met as evidenced by: Based on record review and interview the facility failed to ensure their specially constituted committee reviewed and approved psychotropic medication which was ordered with intent to decrease unwanted behaviors during dental procedures for 2 of 4 individuals in the sample (R1, R4).</p> <p>Findings include:</p> <p>a) An undated Facility Roster provided at the time of survey entrance shows R1 functions at the level of Mild Intellectual Disability. A Physician Order Sheet (POS) dated January 1, 2016 shows R1 is 37 years old.</p> <p>A Medication Administration Record (MAR) for January 2016 shows documentation that R1 received 1 milligram of Lorazepam one hour prior to her dental procedure on 1/25/16.</p> <p>During an interview on 3/23/16 at 2:30pm, E1,</p>	W 262			

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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W 262	Continued From page 1 Residential Service Director (RSD), was asked if the facility could provide documentation of their Behavior Management Committee's review or approval for R1's Lorazepam. E1 stated no. b) A POS dated March 1, 2016 shows R4 has diagnoses which include Mild Intellectual Disability, Cerebral Palsy and Quadriparesis. A form titled "Permanent Individual Psychotropic Medication History" adopted 07/02, shows R4 received Ativan on 7/20/15, 8/6/15, and 10/8/15, all in the dosage of 1 milligram for pre dental procedures. During an interview on 3/23/16 at 2:30pm, E1, Residential Service Director (RSD), was asked if the facility could provide documentation of the Behavior Management Committee's review or approval for R4's administration of Ativan on these three occasions. E1 stated no.	W 262			
W 323	483.460(a)(3)(i) PHYSICIAN SERVICES The facility must provide or obtain annual physical examinations of each client that at a minimum includes an evaluation of vision and hearing. This STANDARD is not met as evidenced by: Based on record review and interview the facility failed to ensure two of four individuals in the sample (R2, R3) received an annual hearing screening. Findings include: An undated facility roster provided at the beginning of the survey shows R2 functions at the	W 323			

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W 323	<p>Continued From page 2</p> <p>level of Moderate Intellectual Disability and R3 functions at the level of Severe Intellectual Disability.</p> <p>Review of R2 and R3's charts did not reveal a hearing screening.</p> <p>E1, Residential Service Director was asked during interview on 3/24/16 at 1145am if he could provide documentation of hearing screenings for R2 or R3 performed within the past year. E1 stated no.</p>	W 323			