

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

PRINTED: 03/26/2012  
FORM APPROVED  
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>14G197</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____		(X3) DATE SURVEY COMPLETED  <b>03/21/2012</b>
NAME OF PROVIDER OR SUPPLIER  <b>HALLAM TERRACE</b>			STREET ADDRESS, CITY, STATE, ZIP CODE <b>1108 TAYLOR STREET ROCKFORD, IL 61103</b>		
(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 322	<p>Annual Certification - Fundamental Survey</p> <p>Inspection of Care</p> <p>483.460(a)(3) PHYSICIAN SERVICES</p> <p>The facility must provide or obtain preventive and general medical care.</p> <p>This STANDARD is not met as evidenced by: Based on record review and interview the facility failed to ensure for 2 of 4 in the sample (R2 and R3) that the facility provide preventive and general medical care.</p> <p>Findings include:</p> <p>1) Per record review of the Individual Service Plan dated 7-8-11, R2 is a 22 year old female. R2 functions in the Moderate Range of Mental Retardation. R2's list of diagnoses includes Down's Syndrome, Obesity, Tinea Under breasts, and Seborrhea Scalp.</p> <p>Per record review of the Physician Order Sheet dated 3-1-12 to 3-31-12 states R2 to have a pap smear every 2 years as ordered by the physician.</p> <p>Per record review of a Consultation Report dated 8-17-11 is written gynecological exam menstrual management unknown cardiac status need to review pediatric status to see if Estrogen contraindicated. The findings is written R2 with acanthosis nigricans, axillae, inner thighs under breasts with a recommended diabetic screening. Under Genitourinary is written declined pelvic</p>	W 322			

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 322	<p>Continued From page 1 exam.</p> <p>Per interview with E3 (Resident Service Director) on 3-20-12 at 2:28 P.M. when asked if R2 had a pap test, E3 stated " That during her appointment she did not get one done". E3 stated "no it does not look like she got one". When asked if R2 received a diabetic screening as recommended, E3 replied "It was not done, I think it was overlooked".</p> <p>Per interview with E2 (Facility Representative) on 3-20-12 at 4:30 P.M. stated that R2 is now scheduled to get a diabetic screening.</p> <p>2) Per record review of the Individual Service Plan dated 4-11-11, R3 is a 55 year old male. R3 functions in the Severe Range of Mental Retardation. R3 diagnoses includes Status Post Repair Varicele and Edentulous.</p> <p>Per record of the Consultation Report dated 11-28-11 is written R3 is having worse accidents stooling his bed in the night. R3 states he feels better, but unfortunately he tends to tell you what he thinks you want to hear.</p> <p>Per record review of the Consultation report dated 11-16-11 is written R3 rectal pain and stool incontinence. The report states was unable to examine for internal hemorrhoids. The report states the diagnoses as constipation and anal fissure with the reason for visit being rectal pain. The report states that R3 has rectal pain with bowel movements and when washing the area with R3 having a history of hemorrhoids.</p> <p>Per record review of the Consultation report</p>	W 322			

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W 322	<p>Continued From page 2</p> <p>dated 10-10-11 is written R3 has bloody urine and complains of pain when wiping self after bowel movement. The report states Urinary Frequency and hemorrhoids. R3 with hematuria and last night R3 had blood in underwear that was after voiding. The report states that the patient noticed that the patient has external hemorrhoids not bleeding. R3 complains of pain with bowel movements.</p> <p>According to the Nursing note dated 10-10-11 is written R3 continues to have some difficulties with incontinence of bowel. R3 is on a fiber supplement now which has helped. R3 was unable to complete a colonoscopy last month due to anxiety.</p> <p>Per record review of a Progress Note dated 10-3-11 is written they were unable to perform R3's colonoscopy due to his increased anxiety.</p> <p>According to the record of the Physical Exam dated 4-28-11 is written reconsider colonoscopy, unable to perform last year due to anxiety two times</p> <p>Per interview with E3 (Resident Service Director) on 3-20-12 at 3:00 P.M. when asked if R3 received a colonoscopy, E3 stated "No he refused. He is very objective to it". When asked if E3 is scheduled to get a colonoscopy, E3 stated "He is not currently scheduled".</p>	W 322			