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

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	14G207	A. BUILDING ______ B. WING ______	C 02/17/2016

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
EMERALD ESTATES	**1577 EAST MYRTLE, P.O. BOX 232 CANTON, IL 61520**

(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 COMPLAINT INVESTIGATION #1620433 / IL00082941 - W184	W 000		
W 184	483.430(c)(3) FACILITY STAFFING There must be a responsible direct care staff person on duty on a 24 hour basis (when clients are present) to respond to injuries and symptoms of illness, and to handle emergencies, in each defined residential living unit housing: (i) Clients for whom a physician has not ordered a medical care plan; (ii) Clients who are not aggressive, assaultive or security risks; and (iii) Sixteen or fewer clients. This STANDARD is not met as evidenced by: Based on record review and interview of residents the facility failed to ensure a staff person was in the facility at all times potentially affecting 15 of 15 residents who live in the facility (R1-R15). Findings include: Based on an undated Resident Roster which E1, Residential Service Director (RSD) provided upon survey entrance on 2/16/16, there are 15 residents in the facility. 3 residents have Mild Intellectual Disability (R1, R7, R14). Eight residents have Moderate Intellectual Disability (R2, R3, R4, R5, R6, R9, R10, R12). Four residents have Severe Intellectual Disability (R8, R11, R13, R15).	W 184		2/23/16

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE | TITLE | (X6) DATE 02/23/2016

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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An undated facility policy titled No Smoking Policy and Procedure found in a facility policy book provided by E1 at the beginning of the survey reads, "Residents of the facility, employees and guests will be permitted to smoke only in the designated smoking area which is at least 15 feet of any entrance to any public building. There must be one other employee on duty. An employee may step away from the building to smoke, only in the designated smoking area, one at a time, for a brief (less than 3 minutes) break and return to work." The policy continues, "Midnight employees will not be allowed to smoke unless there is another employee on duty."

E2, Direct Service Provider (DSP), was interviewed on 2/16/16 at 11:50am and asked if she was aware of any delay in residents meals. E2 stated residents are served meals on time when she works and is not aware of delays in meals any other time.

E2 was asked if employees of the facility smoke. E2 stated yes, some employees smoke. E2 stated residents complain of staff smoking all of the time.

R1 was interviewed privately on 2/16/16 at 1pm and asked if she had experienced a delay in mealtimes. R1 stated no.

R1 was asked if employees go outside to smoke together. R1 stated yes. R1 was asked what time of day this occurs. R1 stated, "Mostly in the morning." R1 was asked if any staff was in the house when they went outside to smoke. R1 stated no.

R1 stated the morning staff was E3, E4 and E5

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(DSP's) on these occurrences. R1 was asked if this happened frequently. R1 stated yes.

R2 was interviewed privately on 2/16/16 at 1:04pm and asked if staff goes outside to smoke. R2 stated staff goes outdoors to smoke. R2 was asked what staff was working when this occurred. R2 stated E3, E4 and E5.

R2 was asked when this occurred, R2 stated early in the mornings. R2 stated this did not occur when E2 worked third shift.

R6 was interviewed privately on 2/16/16 at 1:08pm and asked if staff smokes outside. R6 stated yes. R6 was asked if staff goes out at the same time to smoke. R6 stated yes. R6 asked if any staff were left in the house when the others were outside smoking. R6 stated no. R6 was asked if this happened a lot. R6 stated yes.

R4 was interviewed on 2/16/16 at 1:12pm. R4 was told by this surveyor "Someone told me staff goes outside in the morning and smokes together. Is this true or false." R4 stated, "True." R4 was asked who the staff members were that smoked together. R4 stated it was E3 and E4. R4 was asked if any staff was left in the house when staff members were outside smoking. R4 stated no.

R3 was interviewed on 2/16/16 at 3:20pm and asked if employees go out and smoke together. R3 said yes. R3 was asked if there were any staff left in the house when this occurred. R2 said no. R3 was asked what time this usually happened when there was no staff in the house. R3 said "5 or 6 (am) morning".

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R5 was interviewed privately on 2/16/16 at 4:02pm and asked if employees go out and smoke together. R5 stated yes.. R5 was asked who these employees were. R5 stated (E3, E4 and E5). R5 was asked if any staff were in the house when E3, E4 and E5 were outside smoking. R5 stated no. R5 was asked how long they were outside. R5 stated, "I don't know." R5 was asked what time does this happen when E3, E4 and E5 are all outside at the same time. R5 stated, "Mornings a lot".

E1 was interviewed on 2/17/16 at 9:48am and advised E3 and E4's shift starts at 6am. E1 confirmed E5 is the only staff working between 11pm and 6am (on her assigned days).

E6, Administrator, was interviewed on 2/17/16 at 9:50am and confirmed the facility policy states employees are supposed to go out to smoke one at a time and also that there had to be additional staff on duty before third shift could go out to smoke.