STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	14G233	A. BUILDING _____ B. WING _____	C 11/19/2015

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
DOUGLAS TERRACE	**324 EAST DOUGLAS AVENUE JACKSONVILLE, IL 62650**

(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 SURVEY COMPLAINT #1546029/IL81236 & COMPLAINT #1546234/IL81474	W 000		
W 148	483.420(c)(6) COMMUNICATION WITH CLIENTS, PARENTS & The facility must notify promptly the client's parents or guardian of any significant incidents, or changes in the client's condition including, but not limited to, serious illness, accident, death, abuse, or unauthorized absence. This STANDARD is not met as evidenced by: Based on file review and staff interview it was determined that the facility failed to notify guardians for 11 of 11 individuals (R#1-R#11) concerning an internal pest infestation that required treatment from an outside contractor. Findings include: 1. Review of facility roster submitted on 11/17/15 @ 11:OOAM; noted 11 individuals requiring guardianship services with current family or the Office of State Guardianship. A. R1, R2, R3, R5, R6, R7, R8, R9, R10, R11 & R15 current family member as court appointed guardian. B. R4-Office of State Guardianship as court appointed guardian. Review of facility "Bed Bug" procedural guideline	W 148		12/1/15

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE | TITLE | (X6) DATE 12/01/2015

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W 148	Continued From page 1 (no date noted): Staff are to contact a manager/Administrator/Executive Director Notify regulatory agency if required Have exterminator verify problem and the extent Attempt to identify source In-service staff on universal precautions and infection control policies Add to Quality Assurance Committee Report. Review of local pest control agency bill dated 10/5/15 noted detection of bedbugs and requirement of treatment for all rooms in the residential facility. Review of facility "Action Taken to Address Bed Bugs" (no date stated): Every morning lunches are packed in plastic bags in order to be disposable Mattresses are encased entirely in mattress encasements Bed bug traps are on beds to recognize bug issues Residents are encouraged to leave all personal items at home in order to prevent transportation of bed bugs from day program All residents are encouraged to shower immediately after returning home from day program Staff inspect beds daily as they are cleaning rooms and making beds If staff find a bed bug they are to contact Administrator, maintenance, pest control agency, and guardians of affected rooms. Interview with E2 (Qualified Intellectual Disability Professional) on 11/18/15 @ 10:45AM. E2 confirmed that the facility discovered bed bugs in 9/30/15 and treatment was conducted and	W 148		

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W 148	Continued From page 2 completed on 10/5/15 facility wide. E2 stated that bed bugs were located in the bedroom containing R1 & R2. E2 confirmed that entire facility was treated based on recommendations of pest control agent. E2 stated that guardians of R1 & R2 where notified of the occurrence of the bedbugs and treatment plans. E2 was unable to provide any reproducible evidence of the conversations with R1 & R2's guardians. In addition E2 confirmed that guardians for R3-R11 were not contacted concerning the bed bug issue and action plan requiring the clients to follow new recommendations as outlined in "Action plan to address bed bugs".	W 148		
W 331	483.460(c) NURSING SERVICES The facility must provide clients with nursing services in accordance with their needs. This STANDARD is not met as evidenced by: Based on file review and staff interview it was determined that the facility failed to provide nursing services for 15 of 15 individuals (R#1-R#15) concerning nursing assessments after an internal pest infestation was discovered that required treatment from an outside contractor. Findings include: 1. Review of facility roster submitted on 11/17/15 @ 11:OOAM; noted individuals requiring guardianship services with current family; own guardians; or The Office of State Guardianship. A. R1, R2, R3, R5, R6, R7, R8, R9, R10, R11 & R15 current family member as court appointed guardian. B. R4-Office of State Guardianship as court	W 331		12/1/15

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W 331	Continued From page 3 appointed guardian. C. R12, R13 & R14 self-guardians. Roster stated the following Intellectual levels: Mild Intellectual functioning-R3,R6,R8 & R13. Moderate Intellectual functioning-R1,R4,R5,R7,R9,R10,R11 & R12. Severe Intellectual functioning-R2 & R15. Profound Intellectual functioning-R14. Review of local pest control agency bill dated 10/5/15 noted detection of bedbugs and requirement of treatment for all rooms in the residential facility. Review of facility "Action Taken to Address Bed Bugs" (no date stated): Every morning lunches are packed in plastic bags in order to be disposable Mattresses are encased entirely in mattress encasements Bed bug traps are on beds to recognize bug issues Residents are encouraged to leave all personal items at home in order to prevent transportation of bed bugs from day program All residents are encouraged to shower immediately after returning home from day program Staff inspect beds daily as they are cleaning rooms and making beds If staff find a bed bug they are to contact Administrator, maintenance, pest control agency, and guardians of affected rooms. Interview with E2 (Qualified Intellectual Disability Professional) on 11/18/15 @ 10:45AM. E2 confirmed that the facility discovered bed bugs on 9/30/15 and treatment was conducted and	W 331		

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W 331	Continued From page 4 completed on 10/5/15 facility wide. E2 stated that bed bugs were located in the bedroom containing R1 & R2. E2 confirmed that entire facility was treated based on recommendations of pest control agent. E2 stated that R1 & R2 were examined for any occurrences of bedbugs and bites. E2 was unable to provide any reproducible evidence of the staff evaluations of R1 & R2. In addition E2 confirmed that RN consultant(E3) for R1-R15 was not contacted concerning the bed bug issue and did not communicate with the client's physician(s) concerning the bed bugs and any medical concerns or needed assessments for R1-R15.	W 331		