

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

PRINTED: 02/11/2015  
FORM APPROVED  
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>14G317</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____  B. WING _____		(X3) DATE SURVEY COMPLETED  <b>02/05/2015</b>
NAME OF PROVIDER OR SUPPLIER  <b>ALVIN EADES CENTER</b>			STREET ADDRESS, CITY, STATE, ZIP CODE <b>1000A WEST MICHIGAN JACKSONVILLE, IL 62650</b>		
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W 000	INITIAL COMMENTS	W 000			
W 137	<p>ANNUAL CERTIFICATION SURVEY - FUNDAMENTAL</p> <p>INSPECTION OF CARE</p> <p>LICENSURE SURVEY</p> <p>483.420(a)(12) PROTECTION OF CLIENTS RIGHTS</p> <p>The facility must ensure the rights of all clients. Therefore, the facility must ensure that clients have the right to retain and use appropriate personal possessions and clothing.</p> <p>This STANDARD is not met as evidenced by: Based on observation, interview and record review, the facility failed to ensure that individuals who are unable to access or use personal hygiene items are involved in programs to learn the necessary skills to do so for 3 of 4 individuals in the sample and 2 individuals outside the sample. (R2, R3, R4, R5 and R6)</p> <p>Findings Include:</p> <p>1) On 2/04/15 at 7:12am., R6 was observed to approach the facility med room. E2 (Direct Care) was observed to pour a cup of mouthwash for R6. E1 (Qualified Intellectual Disabilities Professional) was interviewed on 2/04/15 at 2:30pm. When asked why the mouthwash was kept in the med room, E1 stated that it was because R5 would drink it, anything in liquid form. E1 also stated that R5 steals food and is a choking hazard.</p>	W 137			

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 137	<p>Continued From page 1</p> <p>When asked if everyone on group 2 has their access to personal hygiene supplies such as toothpaste, mouthwash and shampoo locked up in the med room, E1 stated no. E1 stated that R3's mouthwash is locked up and his shampoo is locked up because he would use too much. E1 also stated that R2's deodorant is locked up because he will put it all over himself. E1 stated that R6 has his bottled cologne locked up because R5 may drink it. E1 verified that R5's supplies are also locked up for his safety.</p> <p>When asked if any of these individuals are on programs to regain access to personal hygiene supplies, E1 stated no. When asked specifically if R5 is on a training program regarding ingesting inappropriate liquids, E1 stated that he is on a behavior program which addresses food stealing.</p> <p>1a) R5's Behavior Support Plan (BSP) of 4/23/14 and Individual Program Plan (IPP) of 6/09/14 were reviewed. R5's BMP lists Adaptive behavior as "Appropriate eating" and list the Maladaptive behavior as "Food Stealing." It does not address going into others rooms and drinking inappropriate items.</p> <p>R5's IPP does not include any programs addressing his restriction of access to personal hygiene supplies or his drinking of inappropriate liquids.</p> <p>1b) R2's IPP of 3/04/14 was reviewed. Under the section titled "Identified Strengths And Needs" it does not include information regarding inappropriate use of deodorant. R2's IPP does not include any program addressing the restriction of access to deodorant or his misuse of deodorant.</p>	W 137			

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W 137	Continued From page 2  1c) R3's IPP of 10/15/14 was reviewed. Under the section titled "Identified Strengths And Needs" it does not include information regarding inappropriate use of shampoo. Under "Self Care: Bathing" it states "Needs Assistance" "Cues to wear robe to and from bath area." Under "Self-Care: Hygiene" it states, "Requires cues" "Monitor to ensure hygiene tasks are completed." R3's IPP does not include any program addressing the restriction of access to shampoo due to inappropriate use or the restriction of access to shampoo.  2) On 2/04/15 at 1:10pm., E1 was interviewed regarding R4's locked personal hygiene supplies. When asked if R4's shampoo was locked up, E1 stated "Yes, he is not capable of keeping it." When asked if his mouthwash is locked up, E1 stated yes. When asked what all R4's has his access restricted to, E1 stated shampoo, mouthwash, toothpaste and toothbrush. When asked if R4's IPP of 2/11/14 addresses the restriction of access to personal hygiene supplies, E1 stated, "I don't think so."  R4's IPP of 2/11/14 was reviewed. It does not include any program addressing the restriction of access to personal hygiene supplies or address R4's possible misuse of those items.	W 137			
W 449	483.470(i)(2)(iv) EVACUATION DRILLS  The facility must investigate all problems with evacuation drills and take corrective action.  This STANDARD is not met as evidenced by: Based on interview and record review, the facility	W 449			

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W 449	<p>Continued From page 3</p> <p>failed to take corrective action regarding an individual refusing to participate in evacuation drills for 1 of 1 individuals with a pattern of refusing to participate in evacuation drills. (R4)</p> <p>Findings Include:</p> <p>R4's current Individual Program Plan (IPP) of 2/11/14 list diagnoses of Mental Retardation, Down's Syndrome and Depression with Obsessive Compulsive Disorder. Facility evacuation drill reports were reviewed. R4 was noted to have refused to participate in drills on 11/20/14 on 2nd shift fire and disaster, 10/21/14 on 1st shift, on 8/11/14 on 3rd shift, and on 5/28/14 on 2nd shift both fire and disaster for a total of 6 refusals of evacuation drills.</p> <p>Comments included 5/28/14, "All cooperated except [R4] had hard time getting [R4] out. On 8/11/14, "[R4] refused to leave room. All others did well. On 10/21/14 R4 "did not go outside-all other men co-operated very well." On 11/20/14, "Everybody did good except [R4] wouldn't come out of his room."</p> <p>R4's clinical record was reviewed. It contained a "Capability of Self -Preservation" assessment dated 1/19/14. Under the section titled "Conclusions of Evaluation" it has marked "Not capable of self-preservation at this time." R4's IPP of 2/11/14 did not address R4's refusal to participate in evacuation drill and did not contain any programmatic corrective action on how to increase R4's compliance and how staff are to handle a refusal by R4 in the case of an actual emergency.</p> <p>E1 (Qualified Intellectual Disabilities Professional)</p>	W 449			

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W 449	Continued From page 4 was interviewed on 2/04/14 at 1:10pm. When asked what corrective action has been taken to increase compliance with drills, E1 stated to just ask him to try to go next time. E1 added "He absolutely refuses." When asked if a program has been developed to increase his compliance with evacuation drills, E1 stated, "No program has been in place."	W 449			