

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: IL6000996	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED C 03/29/2019
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NAME OF PROVIDER OR SUPPLIER BLOOMINGTON REHABILITATION & HCC	STREET ADDRESS, CITY, STATE, ZIP CODE 1925 SOUTH MAIN STREET BLOOMINGTON, IL 61701
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S 000	Initial Comments Complaint Investigation 1962119/IL110671	S 000		
S9999	Final Observations Statement of Licensure Violations 300.610a) 300.1210b) 300.3240a) Section 300.610 Resident Care Policies a) The facility shall have written policies and procedures governing all services provided by the facility. The written policies and procedures shall be formulated by a Resident Care Policy Committee consisting of at least the administrator, the advisory physician or the medical advisory committee, and representatives of nursing and other services in the facility. The policies shall comply with the Act and this Part. The written policies shall be followed in operating the facility and shall be reviewed at least annually by this committee, documented by written, signed and dated minutes of the meeting. Section 300.1210 General Requirements for Nursing and Personal Care b) The facility shall provide the necessary care and services to attain or maintain the highest practicable physical, mental, and psychological well-being of the resident, in accordance with each resident's comprehensive resident care plan. Adequate and properly supervised nursing care and personal care shall be provided to each	S9999	<h2>Attachment A</h2> <h3>Statement of Licensure Violations</h3>	

Illinois Department of Public Health
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

Electronically Signed

TITLE

(X6) DATE

04/19/19

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S9999	<p>Continued From page 1</p> <p>resident to meet the total nursing and personal care needs of the resident.</p> <p>Section 300.3240 Abuse and Neglect</p> <p>a) An owner, licensee, administrator, employee or agent of a facility shall not abuse or neglect a resident. (Section 2-107 of the Act)</p> <p>These requirements are not met as evidenced by:</p> <p>Based on interview and record review, the facility directed the transfer of money from a cognitively impaired resident's (R1) bank account to the facility without notification and consent of R1's financial Power of Attorney. The facility also failed to operationalize their abuse prevention policy by failing to prevent misappropriation of resident's (R1) money. These failures resulted in the inappropriate transfer of a cognitively impaired resident's personal funds to the facility.</p> <p>Findings include:</p> <p>The facility Abuse Prevention Program Policy (2/2019) documents: "This facility affirms the right of our residents to be free from abuse, neglect, misappropriation of resident property, and exploitation as defined below." The same record documents: "Misappropriation of resident property means the deliberate misplacement, exploitation, or wrongful, temporary, or permanent use of a resident's belongings or money without the resident's consent."</p> <p>The facility "Your Rights Under Medicaid" policy (undated) documents: "For care that is covered by Medicaid, the nursing home should never ask you to pay more than the amount your State Medicaid Agency said is your share."</p>	S9999		
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S9999	<p>Continued From page 2</p> <p>The facility Resident's Rights policy (undated) documents: "Your facility may not become your money manager nor your Social Security representative payee without your permission" and "If you receive Medicaid, the facility cannot make you pay for anything for which Medicaid pays."</p> <p>R1's Profile Face Sheet (undated) documents R1's payor source is Medicaid and documents the diagnosis of Cognitive Communication Deficit.</p> <p>R1's Care Plan (3/28/2019) documents R1 has Severely Impaired Cognition and has Impaired Communication - Expressive.</p> <p>R1's Minimum Data Set (3/18/2019) documents R1 has Severe Cognitive Impairment.</p> <p>R1's Care Plan Summary (7/26/2018, 10/16/2018, 1/9/2019) documents R1 "Lacks financial decision making ability."</p> <p>R1's 1/9/2019 Care Plan Summary (the most recent Care Plan Summary in R1's medical record) documents R1's financial decision maker is "POA" (Power of Attorney).</p> <p>R1's Power of Attorney for Property (12/14/2018) documents R1's family (V4) is R1's legal representative for financial matters.</p> <p>On 3/27/2019 at 3:06PM, V3 (Business Office Manager) reported R1's payor source was Medicaid and Social Security. V3 reported the facility became aware R1 had a private bank account with pension income the facility was not aware of when R1 first began receiving Medicaid as a payor source. V3 reported R1 is supposed to</p>	S9999		
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S9999	<p>Continued From page 3</p> <p>pay all of her pension and Social Security income to the facility except a \$30.00 monthly allowance, with Medicaid paying the remaining balance. V3 reported R1 was required to withdraw all funds in her private bank account except \$100.00, the amount required to keep the account open so R1 can continue to receive pension checks into R1's bank account. V3 reported R1 had not assigned the facility as the direct payee for R1's newly discovered pension income. V3 reported the facility contacted Medicaid to report R1's pension money and then the facility transport van driver (V5) took R1 to the bank to withdraw R1's money and R1 provided the facility with a cashier's check which was deposited into a facility account.</p> <p>On 3/28/2019 at 2:15PM, V3 (Business Office Manager) confirmed R1's financial Power of Attorney (V4, R1's family) was never sent any bills by the facility for R1's care. V3 confirmed Medicaid did not direct the facility to take R1 to the bank and withdraw funds to provide to the facility. V3 also confirmed the facility did not inform R1's financial representative, V4, prior to taking R1 to the bank to withdraw money to give to the facility.</p> <p>The Cashier's Check (XXXXXXX941, 03/08/2019) documents R1 made a withdrawal from R1's bank account for \$12,159.00. The same record documents: "Remitter: (R1)/((V4) POA))" and "Pay To The Order Of: BLOOMINGTON REHABILITATION."</p> <p>On 3/28/2019 at 12:36PM, V4 (R1's financial Power of Attorney/POA) reported becoming first aware of R1's pension income in November, 2018 and asking V3 (Business Office Manager) at the time to determine how much money R1 owed the facility so V4 could pay R1's bill. V4</p>	S9999		

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S9999	<p>Continued From page 4</p> <p>reported visiting R1 in the facility on 12/14/2018 and signing a financial Power of Attorney form to become R1's financial representative and then taking R1 to R1's bank to have V4 assigned as R1's financial POA. V4 reported the facility received a copy of the POA form after R1 was returned from the bank to the facility on 12/14/2018. V4 reported asking V3 during the visit how much money is owed for R1's care and not receiving an answer from V3. V4 reported viewing R1's account ledger on 3/19/2019 and noticing on March 7, 2019, the facility had received a check from R1's bank account for \$12,159.00. V4 stated "It (the facility taking R1 to R1's bank to withdraw funds to give to the facility without contacting V4 first) was underhandedly done."</p> <p>On 3/29/2019 at 12:50PM, V4 stated: "I am livid. They (the facility) took it upon themselves (the unauthorized withdraw and transfer of R1's money to the facility) and didn't even consult me about it and it was found in the aftermath that they did it on the eighth of March."</p> <p>On 3/29/2019 at 10:10AM, V5 (Transport Van Driver) reported being told on 3/8/2019 by V3 (Business Office Manager) to take R1 to the bank. V5 reported V3 said R1 needs some money from R1's bank to give to the facility before R1 discharges and relocates to Atlanta, Georgia. V5 recalled telling V3 that V5 was not R1's Power Of Attorney and V5 didn't think V5 could take R1 to the bank to make a money withdrawal. V5 reported being provided with a note from V3 containing a dollar amount R1 was to withdraw and pay to the facility, an address change request for R1's mail (bank statements) to come directly to the facility, a request for prior banking statements, and a new debit card. V5</p>	S9999		
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S9999	<p>Continued From page 5</p> <p>reported V3 then called R1 into V3's office and told R1 about going to the bank with V5 to get money to pay to the facility. V5 reported R1 did not understand V3, and normally R1 does not talk. V5 reported being asked by the bank during the visit if V5 was R1's POA and telling the bank "Nope." V5 reported not being aware of R1's POA at the time of the money withdrawal and stated: "I can't see (R1) being held accountable for her own money mental-wise."</p> <p>On 3/27/2019 at 1:15PM, R1 did not recall ever going to the bank with facility staff to withdraw money to provide to the facility.</p> <p>The Resident Deposit Sheet (3/8/2019) documents the facility retroactively deposited \$702.73 of R1's money each month into R1's facility account for the months of February, 2018 - March, 2019.</p> <p>On 3/27/2019 at 3:06PM, V3 (Business Office Manager) confirmed the deposit of \$702.73 each month from February, 2018 - March, 2019 was a portion of the \$12,159 transferred from R1 to the facility on 3/8/2019.</p> <p>R1's Claim Status Response (3/29/2019) documents the facility had already received payment from Medicaid for R1's room and board for the months of February, 2018 - February, 2019.</p> <p>(B)</p>	S9999		