

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>IL6001457</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>C</b> <b>02/18/2015</b>
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NAME OF PROVIDER OR SUPPLIER  <b>CHAMPAIGN URBANA NRSG &amp; REHAB</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>302 WEST BURWASH SAVOY, IL 61874</b>
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(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) COMPLETE DATE
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S9999	<p>Final Observations</p> <p>Statement of Licensure Violations:</p> <p>300.1230d)2))5</p> <p>Section 300.1230 Direct Care Staffing</p> <p>d) Each facility shall provide minimum direct care staff by:</p> <p>2) Meeting the minimum direct care staffing ratios set forth in this Section.</p> <p>j) Skilled Nursing and Intermediate Care For the purpose of this subsection, "nursing care" and "personal care" mean direct care provided by staff listed in subsection (f).</p> <p>5) Effective January 1, 2014, the minimum staffing ratios shall be increased to 3.8 hours of nursing and personal care each day for a resident needing skilled care and 2.5 hours of nursing and personal care each day for a resident needing intermediate care. (Section 3-202.05(d) of the Act)</p> <p>This requirement is not met as evidenced by: Based on interview and record review the facility failed to provide the minimum direct care staffing ratio for three of fourteen days reviewed. This has the potential to affect all 127 residents residing at the facility.</p> <p>Findings include: The Daily Census and Staffing Document for 2/8/15 shows 87 intermediate care residents and 44 skilled care residents, which calculates to 384.7 hours of minimum required direct care staff hours. The Daily Census and Staffing Document for 2/8/15 shows a total of direct care staff hours worked as 368.5 hours.</p> <p>The Daily Census and Staffing Document for</p>	S9999	<p><b>Attachment A</b> <b>Statement of Licensure Violations</b></p>	
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Illinois Department of Public Health  
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

02/25/15

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>IL6001457</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>C</b> <b>02/18/2015</b>
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S9999	<p>Continued From page 1</p> <p>2/14/15 shows 85 intermediate care residents and 42 skilled care residents, which calculates to 372.1 hours of minimum required direct care staff hours. The Daily Census and Staffing Document for 2/14/15 shows a total of direct care staff hours worked as 330.11 hours.</p> <p>The Daily Census and Staffing Document for 2/15/15 shows 86 intermediate care residents and 42 skilled care residents, which calculates to 374.6 hours of minimum required direct care staff hours. The Daily Census and Staffing Document for 2/15/15 shows a total of direct care staff hours worked as 350.25 hours.</p> <p>On 2/18/15 at 10:15am, E1 (Administrator) confirmed the direct care staff hours provided were correct and several days between February 4, 2015 and February 17, 215 were below the minimum required hours.</p> <p>The Daily Detail Census Report, 2/17/15, documents 127 residents at the facility.</p> <p style="text-align: right;">B</p>	S9999		