

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>IL6001226</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>C</b> <b>01/23/2017</b>
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NAME OF PROVIDER OR SUPPLIER  <b>BROTHER JAMES COURT</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>2508 ST. JAMES ROAD SPRINGFIELD, IL 62707</b>
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Z 000	<b>COMMENTS</b>  COMPLAINT INVESTIGATION 1740025/ IL90823	Z 000		
Z9999	<p><b>FINDINGS</b></p> <p>Statement of Licensure Violations:</p> <p>350.620a) 350.1210 350.1220j) 350.1230d)1)e) 350.3240a)</p> <p>Section 350.620 Resident Care Policies</p> <p>a) The facility shall have written policies and procedures governing all services provided by the facility which shall be formulated with the involvement of the administrator. The policies shall be available to the staff, residents and the public. These written policies shall be followed in operating the facility and shall be reviewed at least annually.</p> <p>Section 350.1210 Health Services</p> <p>The facility shall provide all services necessary to maintain each resident in good physical health.</p> <p>Section 350.1220 Physician Services</p> <p>j) The facility shall notify the resident's physician of any accident, injury, or change in a resident's condition that threatens the health, safety or welfare of a resident, including, but not limited to, the presence of incipient or manifest decubitus ulcers or a weight loss or gain of five</p>	Z9999	<p><b>Attachment A</b> <b>List of Licensure Violations</b></p>	

Illinois Department of Public Health LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE <b>03/06/17</b>
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Z9999	<p>Continued From page 1</p> <p>percent or more within a period of 30 days.</p> <p>Section 350.1230 Nursing Services</p> <p>d) Direct care personnel shall be trained in, but are not limited to, the following:</p> <p>1) Detecting signs of illness, dysfunction or maladaptive behavior that warrant medical, nursing or psychosocial intervention.</p> <p>e) Sufficient, appropriately qualified nursing staff shall be available, which may include licensed practical nurses and other supporting personnel, to carry out the various nursing service activities.</p> <p>Section 350.3240 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 Regulations were not followed as evidenced by:</p> <p>Based on record review and interview, the facility failed to ensure that nursing services provided adequate nursing staff; nursing assessment; monitoring; follow up of pulmonary status; physician notification and notification of 911 for 2 individuals (R11 and R12) who developed pneumonia. R11 was hospitalized and intubated due to pneumonia. R12 was diagnosed and hospitalized with pneumonia. The facility failed to take appropriate actions to ensure that a system to monitor for abnormal vital signs and a system for 911 (emergency personnel) notification has</p>	Z9999		

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Z9999	<p>Continued From page 2</p> <p>been developed and implemented when the facility failed to:</p> <ol style="list-style-type: none"> <li>1. Ensure a thorough nursing assessment of R11 and R12 pulmonary status.</li> <li>2. Ensure documentation of pulmonary status is complete.</li> <li>3. Ensure the physician is notified when vital signs are abnormal or unattainable.</li> <li>4. Ensure that a medical emergency was identified.</li> <li>5. Ensure nursing staff provides medical care according to DNR/code status.</li> <li>6. Ensure adequate staffing of nurses in order to provide thorough assessments, monitoring and medical interventions.</li> </ol> <p>The facility's failures to ensure adequate nursing staff, nursing assessments, monitoring, follow up of pulmonary status, physician notification and notification of 911 have the potential to affect 92 additional individuals (R1-R10 and R14-R95) who reside in the facility that require nursing services.</p> <p>Resident Functioning Level Roster (dated 1/3/17) identifies that 95 total individuals (R1-R95) reside at the facility.</p> <p>Findings include:</p> <ol style="list-style-type: none"> <li>1. R11 is a 72 year old male admitted to the facility on 8/18/16. A diagnoses list dated 7/21/16 includes Moderate Intellectual Disability, Brief</li> </ol>	Z9999		
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Z9999	<p>Continued From page 3</p> <p>Psychotic Disorder, Obsessive Compulsive Disorder, Diabetes Mellitus, Hypertension and Dementia.</p> <p>IDPH/DNR/POLST (dated 9/12/16) documents that R11 wants full Cardiopulmonary Resuscitation and Full Treatment.</p> <p>R11's Health Note written by E8, LPN (Licensed Practical Nurse) dated 12/26/16 document R11 was admitted to a local hospital on 12/11/16 for Congestive Heart Failure, Sepsis and Pneumonia. R11 discharged back to the facility on 12/26/16.</p> <p>Vital Signs Data View for R11, dated 12/27/16 at 11:00 PM documents Oxygen Saturation level of 85%, Temperature of 98.0 degrees, Respirations 14 and Blood Pressure 116/61. No other assessment information is documented.</p> <p>R11's Health Note written by E12, LPN dated 12/29/16 document, "12/28/16, Resident had episodes of unresponsiveness and SPO2 (oxygen saturations) was in the low 70's. He was sent out to (local hospital) emergency room, to be sent back with an order for Augmentin, also full set of vital signs every 4 hours."</p> <p>R11's Health Note written by E8, LPN dated 12/29/16 at 12:05 AM documents, "resting well with HOB elevated approximately 30 degrees, SpO2 70 % on room air, O2 per mask applied at 3 liters. Not noted swelling of ankles, PPP(Pedal pulses present)."</p> <p>R11's Health Note written by E8, LPN, dated 12/29/16 at 4:04 AM, documents, "At 1:00 AM, temp was 97.8, pulse 90, resp 20, BP 110/80, SpO2 80% has been resting well, kept taking O2 off and holding in his hand or pushing up on forehead. O2 was removed at this time."</p>	Z9999		
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Z9999	<p>Continued From page 4</p> <p>R11's Health Note written by E8, LPN, dated 12/29/16 at 5:20 AM, documents, "At 5:00AM, vital signs were temp 97.8, pulse 88, resp 20, SpO2 70%, BP 112/80, HOB remains elevated at 30 degrees, non-compliant with O2, no resp distress notes, no noted LE (lower extremity) edema PPP." The physician and/or emergency personnel were not notified. There were no other nursing notes written on 12/29/16.</p> <p>Vital Signs Data View for R11, dated 12/29/16 at 7:00 PM documents O2 saturation of 82%, Pulse 92, Respirations 14 and BP 114/63.</p> <p>Vital Signs Data View for R11, dated 12/30/16 at 9:00 PM, documents Pulse 92, BP 136/68. No other vital signs or assessments documented.</p> <p>R11's Health Status Note written by E11, LPN, dated 12/31/16 at 9:28 PM documents, "Bilateral wheezing noted upon auscultation." No Oxygen saturation level is documented.</p> <p>R11's Health Note written by E8, LPN, dated 12/31/16 at 10:46 PM documents, "At 11:00 PM, noted to have very quick, even respirations at 40, unable to obtain an SpO2 (oxygen saturation level), pulse 92, unable to hear a B/P (Blood Pressure). HOB (Head of Bed) is elevated and is resting well. Will monitor closely."</p> <p>R11's Health Note written by E8, LPN, dated 1/1/17 at 12:26 AM documents, "12:30 AM, continues to rest well with HOB elevated. Breathing remains rapid at 44 but even, eyes are slightly open and glazed looking. Unable to obtain SpO2, will not register on machine. Pulse at the carotid is 92. Mouth care given, due to dryness from mouth breathing."</p>	Z9999		
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Z9999	<p>Continued From page 5</p> <p>E6 (LPN) completed the General Event Report (dated 1/1/17 at 6:15 AM) documents, "Staff reported that resident was breathing funny. Writer went into his room to find him breathing fast and shallow, his (oxygen) was 65 and he was unresponsive. (Primary Care Physician) was notified and resident sent to (local hospital) emergency room." The form documents that Z1 (Physician) was notified at 6:20 AM.</p> <p>R11's Health Note written by E6, LPN, dated 1/1/17 at 10:18 AM documents, "Staff reported that resident was breathing funny. Writer went into his room to find him breathing fast and shallow, his O2 (sat) was 65 and he was unresponsive. PCP (Primary Care Physician) notified and resident sent to (local hospital) Emergency Department. Administrator notified, GER (General Event Report) made, on 24 report log."</p> <p>R11's Health Note written by E6, LPN dated 1/1/17 at 11:19 AM, documents, "Resident intubated and admitted to ICU (intensive care unit).</p> <p>R11's Health Note written by E6 dated 1/4/17 at 1:37 PM, documents, "His nurse reports that he has pneumonia, is intubated and unresponsive."</p> <p>Nurses Schedule (dated 1/1/17- 1/14/17) documents that E6 and E7 worked 6:00 AM-12:00 PM on 1/1/17.</p> <p>On 1/4/17 at 4:35 PM, E2, DON (Director of Nursing) stated; "Vital signs are document on the T-Log and/or vital signs data view." E2 was asked what a nurse should do if unable to obtain SpO2. E2 responded, "Try to warm resident up, try other areas of the body, assess quickly if</p>	Z9999		
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Z9999	<p>Continued From page 6</p> <p>symptoms of distress." E2 was asked if the facility had parameters to identify when a doctor should be notified regarding O2 saturation levels and respirations. E2 responded, "Nothing in writing but normal is 12-20 respirations and below 90% for O2 sat." E2 was asked what the nurses should do if they were unable to obtain a Blood Pressure. E2 responded, "Notify the physician." E2 stated, "If a resident is in distress, the nurse should call 911 then notify the physician. There is no need to get permission from the doctor to send out."</p> <p>On 1/4/17 at 5:15 PM, E6, LPN, stated; "On 1/1/17, I came in to work, clocked in and got my keys. E9, DSP (Direct Support Person) reported (R11) was breathing funny. I grabbed the pulse oximeter and SpO2 level was 65%. I went and grabbed oxygen and tubing and called the PCP (Primary Care Physician) and asked if she wanted (R11) sent out. The PCP responded yes. Ambulance was called." E6 stated she could not recall getting a report from the night shift nurse as the nurse was still passing medications then everything happened so quickly.</p> <p>On 1/5/17 at 9:45 AM, E4, LPN, stated; with current staffing levels, it is "Very difficult to get all required work done."</p> <p>On 1/5/17 at 11:40 AM, E10, DSP (Direct Support Person) stated he had worked the night of 12/31/16. E10 stated; "E8, LPN reported (R11) was not doing well and to make a point of checking in on him. Breathing was labored. (I) wasn't sure if he was going to make it through the night.</p> <p>On 1/5/17 at 12:15 PM, E7, LPN stated; "I was working the morning of 1/1/17. The overnight</p>	Z9999		
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Z9999	<p>Continued From page 7</p> <p>nurse reported (R11) had not done well overnight, was glassy eyed and lemon glycerin swabs were used to keep mouth moist. The day nurse (E6) went down and got vitals then made decision to send (R11) out. I helped get paperwork ready. (E6) called (Local non-emergency ambulance)."</p> <p>On 1/5/17 at 12:30 PM, E8, LPN stated; "Basically, I was monitoring (R11) as he had been in and out of the emergency room over the last 24 to 48 hours and they were not doing anything. They kept sending him back. Was trying to make (R11) as comfortable as possible. Monitor to get oxygen level up. I could not hear (R11's) Blood pressure. Did mouth care. I did not call the doctor."</p> <p>E8 confirmed she was aware R11 was a full code. E8 stated on the night of 12/31/16, "I was checking (R11) every 30 minutes and had DSP (direct support person) checking him often, telling them to let me know if anything changes. I honestly did not think (R11) was going to live." E8 stated she would normally notify the doctor if an O2 sat dropped below 80%. E8 stated normal respirations are 18-20. E8 confirmed she did not contact the DON (Director of Nursing) or the administrator.</p> <p>E8 was asked about staffing levels at night. E8 stated, "Work with 2 nurses until about 9 PM then I am by myself for the whole building. Another nurse stays to help with the 8 PM medication pass then leaves. E8 stated, "There is not enough time to get all the work done." E8 stated she has complained about lack of nursing staff to the DON.</p> <p>On 1/5/17 at 12:55 PM, Z2 Office Manager for local ambulance service stated, a non-emergency call came in at 6:45 AM on 1/1/17 to transport (R11) from the facility to a local hospital.</p>	Z9999		
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Z9999	<p>Continued From page 8</p> <p>On 1/5/17 at 1:00 PM, Z1, Physician, stated, "I was on call over the New Year's holiday. The facility did not notify me of R11's condition following the Emergency Room visit on 12/28/16. If I had gotten a call related to low O2 sat levels or the inability to obtain a Blood pressure, I would have given the order to send R11 back to the emergency room. R11 is a full code." Z1 stated she would expect to be notified if O2 sat levels were below 90% or Respirations were above 30. Z1 stated, "Someone should have called 911. Someone should have been notified." Z1 was asked if the delay in treatment for R11 could have contributed to the current condition including intubation. Z1 responded, "Yes. Most definitely."</p> <p>2) Physician's Orders (dated 1/1/17-1/31/17) identifies R12 as a 60 year old individual who functions at the Moderate level of Intellectual Disabilities with additional diagnoses of Congestive Heart Failure, Sleep Apnea, Cardiac Enlargement and Asthma.</p> <p>Local walk in medical care clinic consultation report (dated 12/26/16) documents R12 was seen for complaints of chest congestion. The clinic diagnosed R12 with Pneumonia and prescribed Amoxicillin by mouth and a ProAir Inhaler.</p> <p>T-Log /Electronic Nurses Notes (dated 11/4/16-1/2/17) documents the following for R12: "12/22/16 at 8:37 PM- Home Visit" "12/26/16 at 2:07 PM- Resident returned to facility, family had taken to (local clinic) this am and given orders for Amoxicillin -Pot Clavulante 875-125 mg BID (twice a day) for URI (upper Respiratory Infection) pneumonia, community acquired." "12/26/16 at 9:28 PM- temp is 99.4 at 2100 hrs. is</p>	Z9999		
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Z9999	<p>Continued From page 9</p> <p>resting in bed (antibiotic) was started SpO2 (peripheral capillary oxygen saturation)= 91%, in no respiratory distress at this time, Lung sounds are (slightly) wheezy (especially) upper lobes." "12/27/16 at 1:45 AM- Had episode of loose, mushy yellowish-brown stool, attempted to get to bathroom and fell, hit mid forehead and left side of nose. Small goose egg to mid forehead. Radial pulse is 60, unable to detect B/P, respirations 16 and regular, no cyanosis noted. Very lethargic, PEÁRL (pupils equal and reactive to light), but verbally unresponsive, responsive slightly to physical stimuli. 911 was called at 0118, here at 0135." "12/27/16 - Spoke with nurse at (local hospital) ICU (Intensive Care Unit) resident diagnosis septic shock: continues bi-pap."</p> <p>The T-Log Notes,confirm nursing did not do an assessment of R12 when he returned to the facility from his home visit until approximately 7 hours later. A thorough pulmonary assessment inclusive of a of pulse, respirations and blood pressure was not done by nursing.</p> <p>ON 1/4/17 at 10:05 AM an interview was conducted with E2/ Director of Nursing. When asked what would be expected of nursing when an individual has a SpO2 of 91%, E2 stated, "Assess for cyanosis, take vitals and listen to lungs." E2 confirmed that vitals would be a full set inclusive of pulse, respirations and blood pressure.</p> <p>On 1/4/17 at 11:40 AM an interview was conducted with E11/ Licensed Practical Nurse. When asked if there was any other documentation of assessments or vitals, E11 stated, "No other vitals/ assessments outside of Nurse's Notes."</p>	Z9999		
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Z9999	<p>Continued From page 10</p> <p>Hot Chart Policy (revised 6/6/14) states; "Nurse will continue charting on the resident's condition change until the resident is free of clinical abnormal or symptom free for three consecutive shifts."</p> <p>3) Resident Room Assignments (dated 12/16/16) identifies that 95 individuals reside at the facility (R1- R95).</p> <p>6:00 AM Medication Count by wings (provided to surveyor per fax on 1/9/17) identifies that 64 individuals receive medications at the 6:00 AM medications administration. The form also documents there are a total of 262 medications administered at 6:00 AM.</p> <p>Nurse's Schedule (dated 12/18/16- 1/28/17) documents that only one nurse worked from 11:00 PM- 6:00 AM on 12/18/16, 12/25/16, 12/27/16, 12/30/16, 12/31/16 and 1/1/17. The schedule also documents that there is only one nurse scheduled to work from 11:00 PM- 6:00 AM on 1/8/17, 1/14/17, 1/15/17, 1/17/17 and 1/28/17.</p> <p>Open Shift Needs (dated 12/31/16-1/17/17) is a sign up sheets for nurses to fill open shifts. This sign up sheet documents needs for the 12:00 PM- 6:30 PM and 6:00 PM- 11:00 PM . The form does not identify that the facility was trying to fill the dates identified as having only one nurse from 11:00 PM- 6:00 AM.</p> <p>In an interview with E1/ Administrator and E2/ Director of Nursing on 1/4/17, when asked about staffing regarding nurses, E1 stated , "Nurses work 12 hour shift. We have two shifts. First shift works 6:00 AM -6:30 PM. Second shift works 6:00 PM -6:30 AM. We have a third nurse on day</p>	Z9999		
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Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>IL6001226</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>C</b> <b>01/23/2017</b>
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NAME OF PROVIDER OR SUPPLIER  <b>BROTHER JAMES COURT</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>2508 ST. JAMES ROAD SPRINGFIELD, IL 62707</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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Z9999	<p>Continued From page 11</p> <p>who works with the outside Physicians, Dentist and Medical Director who do visits to the facility." E2 stated the facility has 3 individuals with Gastrostomy Tubes, 1 individual with a colostomy, 3 individuals with suprapubic catheters and 1 individual with a urostomy. When asked about the medication administration, E1 stated that the 6:00 PM-6 :30 AM nurses are responsible for the 6:00 AM medication administration.</p> <p>On 1/5/17 at 9:45 AM, E4, LPN, stated with current staffing levels, it is "Very difficult to get all required work done."</p> <p>On 1/5/17 at 12:30 PM, E8 was asked about staffing levels at night. E8 stated, "Work with 2 nurses until about 9 PM then I am by myself for the whole building. Another nurse stays to help with the 8 PM medication pass then leaves." E8 stated, "There is not enough time to get all the work done." E8 stated she has complained about lack of night shift nursing staff to the Director of Nursing.</p> <p>In an interview with E1 on 1/5/17 at 1:45 PM, when asked again about staffing of nursing, E1 stated two 12 hour shifts with 2 nurses on each shift. The nurse's schedule was reviewed with E1. E1 confirmed that there was only one nurse on duty from 11:00 PM on 12/31/16 to 6:00 AM on 1/1/17. When asked if only one nurse works from 11:00 PM - 6:00 AM, E1 stated, "Yes it happens." E1 confirmed that the schedule showed several dates where there was only one nurse scheduled to work. When asked who was responsible for scheduling the nurses, E2 stated, "The DON." E1 stated, "We have a problem with nursing schedule, we need nurses."</p>	Z9999		
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Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>IL6001226</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>C</b> <b>01/23/2017</b>
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NAME OF PROVIDER OR SUPPLIER  <b>BROTHER JAMES COURT</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>2508 ST. JAMES ROAD</b> <b>SPRINGFIELD, IL 62707</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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Z9999	Continued From page 12  (A)	Z9999		
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FAC. NAME: BROTHER JAMES COURT

COMPLAINT #: 0090823

LIC. ID #: 0020495

DATE COMPLAINT RECEIVED: 01/03/17 12:37:00

IDPH Code	Allegation Summary	Determination
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601	GOVERNING BODY & MANAGEMENT	I W 318
602	CLIENT PROTECTIONS	I W 318
606	HEALTH CARE SERVICES	I W 318

The facility has committed violations as indicated in the attached\*  
 No Violation

\*Facilities participating in the Medicare and/or Medicaid programs will not receive a copy of the certification deficiencies as they have already received a copy through the certification program process.

Determination Codes

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- 1 = VALID - A complaint allegation is considered "valid" if the Department determines that there is some credible evidence that there has been a deficiency (non-compliance with the Act or rules & regulations) relating to the complaint allegation.
- 2 = INVALID - A complaint allegation is considered "invalid" if the Department determines that there is no credible evidence that there has been a deficiency (non-compliance with the Act or rules & regulations) relating to the complaint allegation.
- 3 = UNDETERMINED - A complaint allegation is considered "undetermined" if the Department finds there is insufficient information reported to initiate or complete an investigation.

RESIDENT INJURY - Per the P&A v. Lumpkin consent decree, allegations of resident injury will always be "valid" if the resident who is the subject of the allegation was injured.