

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: IL6004477	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 12/09/2016
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NAME OF PROVIDER OR SUPPLIER HILLTOP SKILLED NURSING AND REHABILITATION	STREET ADDRESS, CITY, STATE, ZIP CODE 910 WEST POLK STREET CHARLESTON, IL 61920
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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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S 000	Initial Comments Annual Licensure and Certification Survey	S 000		
S9999	Final Observations Statement of Licensure Violations Section 300.670 Disaster Preparedness c) Fire drills shall be held at least quarterly for each shift of facility personnel. Disaster drills for other than fire shall be held twice annually for each shift of facility personnel. Drills shall be held under varied conditions to: 1) Ensure that all personnel on all shifts are trained to perform assigned tasks; 2) Ensure that all personnel on all shifts are familiar with the use of the fire-fighting equipment in the facility; and 3) Evaluate the effectiveness of disaster plans and procedures. k) Coordination with Local Authorities 1) Annually, each facility shall forward copies of all disaster policies and plans required under this Section to the local health authority and local emergency management agency having jurisdiction. This requirement is NOT MET as evidenced by: Based on interview and record review the facility failed to complete five of six required disaster drills during the previous year (one drill for first shift, two drills for second shift, and two drills for third shift) and also failed to forward facility disaster policies and plans to the local health authority and local emergency management agency. These failures have the potential to	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

TITLE

(X6) DATE

12/21/16

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S9999	<p>Continued From page 1</p> <p>affect all 35 residents residing in the facility.</p> <p>Findings include:</p> <p>On 12/8/2016 the Facility Emergency Drills binder documented one disaster drill completed on first shift on 9/6/2016. No other disaster drills were documented for the survey period. The facility could not document any communication of disaster policies and plans to the local health authority or local emergency management agency.</p> <p>On 12/8/2016 at 12:00 PM, E4 (Maintenance) acknowledged the facility did not communicate disaster plants to the local health authority and local emergency management agency during the previous survey year.</p> <p>On 12/8/2016 at 12:45 PM, E1 (Administrator) acknowledged the facility only completed one disaster drill (9/6/2016) during the previous survey year.</p> <p>The Resident Census and Conditions of Residents Report dated 12/6/2016 documents 35 residents residing in the facility.</p> <p>(B)</p> <p>Section 300.1230 Direct Care Staffing</p> <p>b) The number of staff who provide direct care who are needed at any time in the facility shall be based on the needs of the residents, and shall be determined by figuring the number of hours of direct care each resident needs on each shift of the day.</p> <p>d) Each facility shall provide minimum direct care staff by:</p>	S9999		
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S9999	<p>Continued From page 2</p> <p>1) Determining the amount of direct care staffing needed to meet the needs of its residents; and</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>k) Effective September 12, 2012, a minimum of 25% of nursing and personal care time shall be provided by licensed nurses, with at least 10% of nursing and personal care time provided by registered nurses. Registered nurses and licensed practical nurses employed by a facility in excess of these requirements may be used to satisfy the remaining 75% of the nursing and personal care time requirements. (Section 3-202.05(e) of the Act)</p> <p>l) To determine the numbers of direct care personnel needed to staff any facility, the following procedures shall be used:</p> <p>1) The facility shall determine the number of residents needing skilled or intermediate care.</p> <p>2) The number of residents in each category shall be multiplied by the overall hours of direct care needed each day for each category.</p> <p>3) Adding the hours of direct care needed for the residents in each category will give the total hours of direct care needed by all residents in the facility.</p> <p>4) Multiplying the total minimum hours of direct care needed by 25% will give the minimum amount of licensed nurse time that shall be</p>	S9999		

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S9999	<p>Continued From page 3</p> <p>provided during a 24-hour period. Multiplying the total minimum hours of direct care needed by 10% will give the minimum amount of registered nurse time that shall be provided during a 24-hour period.</p> <p>These requirements are NOT MET as evidenced by: Based on record review and interview the facility failed to have 10 percent of nursing and personal care time provided by a registered nurse for 10 of 14 days reviewed. This failure has the potential to affect all 35 residents residing in the facility. Findings include: On 12/8/16 E1 Administrator provided a staffing spreadsheet for the period 11/13/16 through 11/26/16 documenting a daily average of 7.7 skilled care residents residing in the facility and a daily average of 34.35 intermediate care residents residing in the facility. The calculated total daily staffing requirement equals 115.14 hours with 11.51 daily hours required for Registered Nurses. The facility's spread sheet dated for the period 11/13/16 through 11/26/16 documents a shortage of hours for Registered Nurses on the following 10 days:</p> <p>11/13/16 - 8.2 documented hours, a shortage of 3.31 hours.</p> <p>11/14/16 - 8 documented hours, a shortage of 3.51 hours.</p> <p>11/15/16 - 8.2 documented hours, a shortage of 3.31 hours.</p> <p>11/16/16 - 4 documented hours, a shortage of 7.51 hours.</p>	S9999		
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S9999	<p>Continued From page 4</p> <p>11/17/16 - 6.4 documented hours, a shortage of 5.11 hours.</p> <p>11/18/16 - 8.2 documented hours, a shortage of 3.31 hours.</p> <p>11/19/16 - 8 documented hours, a shortage of 3.51 hours.</p> <p>11/24/16 - 8.22 documented hours, a shortage of 3.29 hours.</p> <p>11/25/16 - 4 documented hours, a shortage of 7.51 hours.</p> <p>11/26/16 - 8.95 documented hours, a shortage of 2.56 hours.</p> <p>On 12/8/16 at 2:14 PM E1 Administrator confirmed the hours on the facility's staffing spreadsheet were accurate and acknowledged the shortage of registered nurses for the 10 of 14 days reviewed.</p> <p>The Facility Data Sheet dated 12/7/16 documents 35 residents reside in the facility.</p> <p>(AW)</p>	S9999		
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