

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>1L6007066</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>12/22/2016</b>
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NAME OF PROVIDER OR SUPPLIER  <b>BELLWOOD DEVELOPMENTAL CENTER</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>105 EASTERN AVENUE BELLWOOD, IL 60104</b>
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Z 000	<b>COMMENTS</b>  Annual Health & Complaint Investigation 1696814/ IL90163	Z 000		
Z9999	<b>FINDINGS</b>  Statement of Licensure Violations:  350.510a) 350.510b) 350.510e) 350.510f) 350.620a) 350.1060a) 350.1060c)1)2) 350.1060d) 350.1060f) 350.1060h) 350.1060j) 350.1070 350.1210 350.14302) 350.1810a)1)2) 350.3240a)  Section 350.510 Administrator  a) There shall be an administrator licensed under the Nursing Home Administrators Licensing and Disciplinary Act (Ill. Rev. Stat. 1987, ch. 111, par. 3651 et seq.) full-time for each licensed facility. The licensee will report any change in administrator to the Department, within five days.  b) The administrator shall delegate in writing adequate authority to a person at least 18 years of age who is capable of acting in an emergency during his absence. Such administrative assignment shall not interfere with resident care	Z9999	<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 <b>01/07/17</b>
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Z9999	<p>Continued From page 1</p> <p>and supervision. The administrator or the person designated by the administrator to be in charge of the facility in the administrator's absence shall be deemed by the Department to be the agent of the licensee for the purposes of Section 3-212 of the Act, which requires Department staff to provide the licensee with a copy of their report before leaving the facility.</p> <p>e) The licensee and the administrator shall be familiar with this Part. They shall be responsible for seeing that the applicable regulations are met in the facility and that employees are familiar with those regulations according to the level of their responsibilities.</p> <p>f) If the facility has an assistant administrator, the Department shall be informed of the name and dates of employment and termination of this person. This will provide documentation of service to qualify for a license under the Nursing Home Administrators Licensing and Disciplinary Act (Ill. Rev. Stat. 1987, ch. 111, par. 3651 et seq.).</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 350.1060 Training and Habilitation Services</p>	Z9999		
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Z9999	<p>Continued From page 2</p> <p>a) The facility shall provide training and habilitation services to facilitate the intellectual, sensorimotor, and effective development of each resident in the facility.</p> <p>c) There shall be written training and habilitation objectives for each resident that are: 1) Based upon complete and relevant diagnostic and prognostic data. 2) Stated in specific behavioral terms that permit the progress of the individual to be assessed.</p> <p>d) There shall be evidence of training and habilitation services activities designed to meet the training and habilitation objectives set for every resident.</p> <p>f) There shall be a functional training and habilitation record for each resident, maintained by and available to the training and habilitation staff.</p> <p>h) There shall be available sufficient, appropriately qualified training and habilitation personnel, and necessary supporting staff, to carry out the training and habilitation program. Supervision of delivery of training and habilitation services shall be the responsibility of a person who is a Qualified Mental Retardation Professional.</p> <p>j) Appropriate records shall be maintained for each resident functioning in these programs. These shall show appropriateness of the program for the individual, resident's response to the program and any other pertinent observations and shall become a part of the resident's record.</p>	Z9999		
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Z9999	<p>Continued From page 3</p> <p>Section 350.1070 Training and Habilitation Staff Appropriately qualified staff shall be provided in sufficient numbers to meet the training and habilitation needs of the residents.</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 350.1430 Administration of Medication 2) Each dose administered shall be properly recorded in the clinical record by the person who administered the dose.</p> <p>Section 350.1810 Director of Food Services a) A full-time person, qualified by training and experience, shall be responsible for the total food and nutrition services of the facility. This person shall be on duty for a minimum of 40 hours each week. 1) This person shall be either a dietitian or a dietetic service supervisor. 2) The person responsible for the food service may assume some cooking duties but only if these duties do not interfere with the responsibilities of management and supervision.</p> <p>Section 350.3240 Abuse and Neglect 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 met as evidenced by:</p> <p>Based on observation, record review and</p>	Z9999		
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Z9999	<p>Continued From page 4</p> <p>interview, it was determined that the Facility failed:</p> <p>1a) Notify the State of Illinois that E32 was appointed as Administrator, over 1 year ago.            b) Ensure the Acting Administrator is not identified as "Administrator".            c) Ensure the Administrator is meeting the requirements mandated by law, regulation, code and policy.            d) Comply with all provisions of Federal, state and local law, regulations and codes.            e) Ensure the Dietary Manager listed on the Organizational chart (E8) is qualified to hold the position</p> <p>2) Ensure documentation was accurate when;            a) there was a discrepancy in nursing documentation for 1 resident admitted to the hospital (R6) on 11/29/16.            b) Signatures added to MAR (Medication Administration Record) for 1 resident (R51) who had recurring skin breakdown issues.            c) documenting values of the height and/or weight of 3 individuals (R2, R7 and R11).            d) there is a lack of documentation of when 1 individual (R2) was last given and received a shower.</p> <p>3) The facility failed to ensure outside services met their current unsigned contractual agreement when they failed to;            a) monitor the contracted number of active treatment hours provided daily to residents.            b) provide a single consistent program for the residents.            c) provide monthly data sheets            d) provide an accurate attendance report.            e) intervene, without staff redirection, when R64</p>	Z9999		
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Z9999	<p>Continued From page 5</p> <p>disrobed himself in a public area. f) ensure repositioning was done accurately for residents on 1-hour and 2-hour repositioning schedules affecting 3 residents. l) provide adaptive utensils during lunch for 18 residents who are required to use adaptive utensils during meal time. n) ensure program data was sent to facility for 10 residents. k) provide intervention and redirection for 1 resident who was engaging in unhygienic behavior, and for 1 resident (R9) who had a toileting accident.</p> <p>Findings include:</p> <p>1) 77 Illinois Administrative Code, Subpart B: Administration. State Licensure 350.510 requires, "There shall be an administrator licensed under the Nursing Home Administrators Licensing and Disciplinary Act full time for each licensed facility." "There shall be an administrator licensed under The licensee will report any change in administrator to the Department within five days."</p> <p>Facility policy titled "Administrator" and dated 10/27/15 requires, "The Administrator or designee is responsible for, but not limited to: e) Ensures facility compliance with licensing, IDPA, IDPH, HCFA and DMHDD guidelines." g) Hires and monitors all service contract consultants. i) Maintaining his license on a current status as required by law, and maintaining a copy of such license or registration on premises."</p>	Z9999		
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Z9999	<p>Continued From page 6</p> <p>The Facility Job Description of the Administrator position list essential duties of the administrator as:</p> <p>D. Ensures quality and safety of food preparation E. Ensures quality of appropriate medical/nursing care. G. Hires and monitors all service contract consultants. I. Monitors/ensures cleanliness/safety /normalization of the living environment. M. Monitors/assists all external/internal activity programs. R. Chairs/attends committees meetings as directed.</p> <p>Documentation, dated 11/28/16, from the Illinois Department of Public Health (IDPH) Central Office, lists E33 as Administrator, however E33 left this facility over 1 year ago. This fact was confirmed by E1 (Acting Administrator) on 11/28/16 at 2 pm. E1 said since E33 left, E32 has been the Administrator of this facility. E1 was asked for reproducible documentation of state notification that E32 has been the Administrator of over 1 year. On 12/7/16 at 10:30 am, E1 said neither he, nor E32, have documentation that the state was notified within 5 days of change in Administration.</p> <p>On 11/28/16 at 11am, E1 identified himself to the survey team as Acting Administrator and that he works under the license of E32 (Administrator). E1 stated he is planning on taking the Administrator exam in 1/2017. E1 is unlicensed and does not have a temporary license, according to E32 on 12/20/16 at 10:30am.</p> <p>However, a contract between a Dietary Service</p>	Z9999		
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Z9999	<p>Continued From page 7</p> <p>and the facility, labeled "Dietary Consultation Agreement" dated 1/1/16 includes a heading with "[E1's name] / Administrator". The contract is also hand-signed with ink by E1 as "Administrator."</p> <p>An employment contract between E2 (DON) and the facility, dated 11/21/16, is signed electronically as, "[E1's name], Administrator Bellwood Developmental Center."</p> <p>In an email from E1 to E32, dated 6/22/16, includes the electronic signature of " [E1], Administrator [of facility]."</p> <p>E1 was interviewed on 12/8/16 at 9:30 am. He confirmed he is unlicensed and functions as the Acting Administrator. He said the Dietary Contract and DON employment agreement were mistakes either in a template, a stamp, and that he "mis-signed" by writing Administrator in the Dietary contract. E1 confirmed E32 did not sign this contract.</p> <p>E32 (Administrator) said on 12/20/16 at 10:15 am, he is unaware that E1, who is unlicensed, is identifying himself as "Administrator."</p> <p>On 12/8/16 this survey team had a daily status meeting with the facility, and presented the preliminary deficient practice findings, which were identified during the survey. The Owner (E40) and the Chief Nursing Officer (E41) were present with E1, however E32 was not present. E40 said E32 had been out of state, but was currently in "western suburbs of chicago".</p> <p>E32 stated on 12/20/16 at 10:15 am, that he is the licensed Administrator, however "[E1] is running the place with my guidance." E32 said he</p>	Z9999		
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Z9999	<p>Continued From page 8</p> <p>has other facilities he oversees, but is only an administrator over this facility. He said he is at the facility at least 35 hours per week, but because he was on vacation, he could not be physically present during this survey.</p> <p>An interview was conducted with E5, Director of Social Services for 32 years, on 12/6/16 at 12:30pm. E5 was asked who was the facility administrator and when was the last time the administrator (E32) attended a staff meeting. E5 stated she saw E32 about a month ago, and that it was probably three to four years ago that E32 was in attendance at a staff meeting which E5 also attended. E5 identified E32 as the "owner."</p> <p>An interview was conducted with E3, Assistant Director of Nursing, on 12/6/16 at 10:45am. E3 has worked at the facility since August 2016 and was asked what was E32's title. E3 stated E32 was one of the owners. E3 was asked if E32 has attended a staff meeting, and if E32 has ever inquired about nursing issues. E3 stated she last saw E32 about a month ago in E1's (acting administrator) office. E3 said E32 has not attended a staff meeting which E3 also attended.</p> <p>Interview was conducted with E42, Case Manager for 22 years on 12/6/16 at 12:25pm. E5 was asked who was the facility administrator and when was the last time he saw the administrator. E42 identified E32 as the owner and to his knowledge E32 have never attended a staff meeting when E42 was present.</p> <p>The Administrators license was not observed at the facility on 11/28/16. On 12/6/16, at 10:20 am, E1 confirmed a copy of E32's license is currently not posted and available at the facility.</p>	Z9999		
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Z9999	<p>Continued From page 9</p> <p>2) The 11/29/16 to 11/30/16 nursing notes for R6 were reviewed and copied by this surveyor on 11/30/16. R6 was emergently admitted to the hospital on 9/30/16, 10/15/16 and 10/29/16, for Pneumonia. R6 was emergently sent to the hospital a fourth time on 11/30/16 at 7:45 am, with lethargy and abnormal vital signs. According to E3 (ADON) on 11/30/16 at 2 pm, R6 was admitted with Pneumonia and a Pneumothorax (collapsed lung). E53 (LPN) wrote on 11/29/16 at 5:30pm that R6 was anxious and short of breath (sob). She included his vital signs, however left the number of "R" (respirations) blank. E53 also wrote at this time that R6 received a puff of an inhaler for the sob. E53 wrote that same evening at 6 pm that the sob was resolved. There was not another note until 11/30/16 at 7:45 am, when R6 was observed during breakfast, very lethargic with cold and clammy skin. His vital signs were dangerously abnormal with blood pressure of 71/43 pulse 59 and respirations 16. The staff was "unable to obtain oxygen saturation", R6 was emergently sent to the hospital and admitted. These notes were copied by the surveyor on 11/30/16. E3 confirmed on 12/1/16 at 2:15 pm that the number of "R" (respirations) was blank, and that there was not a note for the night shift of 11/29/16 to 11/30/16. However, the chart was again reviewed on 12/6/16, at which time the blank "R" was filled in from the 11/29/16 note, and an 11/30/16 night shift note was written between the original 11/29/16 and the 11/30/16 7:45am. There was no</p>	Z9999		
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Z9999	<p>Continued From page 10</p> <p>documentation that this was a late or added entry. E1 stated on 12/6/16 at approximately 11 am, that nursing should never add to a nursing note and all late entries should be identified as such. E1 said there is not a policy regarding late nursing entries.</p> <p>On 12/1/16, at 11:30 a.m., R51's MAR for the period of 8/15/16 to 9/14/16 [1st MAR copy] was reviewed and copied from R51's chart. The 1st MAR copy had missing initials for 9/10/16, 7 a.m. and 9/11/16, 7 a.m. for the following orders: "elevate both legs above heart X 1/2 hour twice daily to decrease swelling... (start 3/10/15) apply zinc oxide to inner buttock area twice daily and as needed... (start 3/10/15)"</p> <p>On 12/1/16, at 3:00 p.m., R51's MAR for the period of 8/15/16 to 9/14/16 [2nd MAR copy] was reviewed and copied a second time from R51's chart. The 2nd MAR copy had initials added for 9/10/16, 7 a.m. and 9/11/16, 7 a.m. for the following orders: "elevate both legs above heart X 1/2 hour twice daily to decrease swelling... (start 3/10/15) apply zinc oxide to inner buttock area twice daily and as needed... (start 3/10/15)". This MAR did not have any initials when reviewed earlier during the day.</p> <p>On 12/8/16, at 10:30 a.m., E3, Assistant Director of Nursing (ADON) and E7, Licensed Practical Nurse (LPN) confirmed that the 2nd MAR copy for R51 had initials added to it compared to the 1st MAR copy. E3 and E7 stated "they did not know who added the initials".</p> <p>Per R7's 6/21/13 Participant Face Sheet, R7 has a height of four feet and zero inches (equivalent to 48 inches). R7's 12/10/15 and 9/23/16</p>	Z9999		
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Z9999	<p>Continued From page 11</p> <p>Nutritional Notes documented a height of fifty-five inches for R7 and a calculation for BMI (Body Mass Index) that falls in the normal range. (R7's calculated BMI is not accurate since figure used for height was higher than the real value leaving the actual BMI of R7 to be over the normal range). Nurse E3 was asked by surveyor to measure and take the height and weight of R7 on 12/01/16 approximately at 3:30 PM. E3 provided the height for R7 on 12/5/16. R7's height was measured by E3 at fifty inches, five inches less than what was used to calculate R7's BMI. R7's weight was 119 pounds.</p> <p>Nurse E3 was informed on 12/01/16 that R2's record do not contain any recorded height. E3 checked R2's charts and validated there is no documented height for R2. E3 stated she will measure R2 for his height. R2 is an individual who takes Insulin for Diabetes per the December 2016 Medication Administration Record. E3 provided R2's height on 12/5/16 and measured R2 at fifty-seven inches. R2's Nutritional Notes dated 3/28/16 and 9/8/16 do not include an assessment of R2's BMI.</p> <p>Telephone interview with Registered Dietitian Z1 on 12/07/16 regarding lack of BMI for R2, whether Z1 actually does a visual and physical assessment of individuals assessed and if Z1 requested to get weights or heights for individuals including R2 and R7. Z1 stated she did request for the height and weight but could not produce documentation of when those requests were made. Z1's answers include the following: Facility provides the height and weight to Z1 or information obtained from the record in review. Z1 does not always conduct a visual and physical assessment during evaluations. Z1 validated that BMI should be calculated as part of a Nutritional</p>	Z9999		
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Z9999	<p>Continued From page 12</p> <p>Assessment as long as the height and weight values are available. BMIs are not necessarily needed when Z1 visualize/physically examine an individual. The facility Director Of Nursing has not really been at the facility.</p> <p>Per observation on 11/28/16 at 2:00 PM in R2's bedroom, R2 is an individual who uses an electric wheelchair and dependent on staff for transfer to and from wheelchair and bed by use of a mechanical lift. R2 is verbal and able to engage in meaningful conversation, able to ask for help to address his needs.</p> <p>Interview with R2 on 12/01/16 at 1:37 PM included R2 providing the following information: R2 was not showered on 12/01/16 or 11/30/16. R2 has asked for shower from staff in the past but never gets a shower. R2 stated that staff tells R2 there is no time to shower R2 in the morning due to staff rushing. R2 can't remember when the last time shower was provided to R2. R2 stated facility has a tub but R2 has not yet been in the tub.</p> <p>Interview with E4, Manager on 12/01/16 at 2:00 PM included the following: R2 is not reliable about being showered. R2 refuses shower and repositioning because R2 fears R2 will be left in the same position. (Individuals) should be showered daily in the evening except for a few who are on three times a week shower due to dry skin. R2 is not on the three times a week shower, R2 should get shower every day. If not able to shower, bed bath given if nursing approves. No (individual) is currently using the tub. Tub works. I don't think R2 has asked to use the tub.</p>	Z9999		
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Z9999	<p>Continued From page 13</p> <p>E6 provided to surveyor on 12/01/16 approximately at 2:30 PM the following: 11/27/16 Resident Medical Concern Form at 6:00 AM. 11/28/16 and 11/29/16 Skin Check Form for Showers with entry of Refused for Section of Staff Name. 9/03/16 Evening Shower List with the entry of "Note: All residents marked with asterisk are to be weighed three times a week. Men will shower on Monday/Wednesday/Sunday only for residents marked with asterisk." R2's name is not on this list.</p> <p>E6 confirmed on 12/01/16 at 2:45 PM that there is no other evidence to validate when R2 was last showered. E6 added "I will make sure R2 gets a shower today (12/01/16). R2 went to the hospital on 11/26/16. There is no evidence of the last time R2 was showered at least since R2 returned to the facility from the hospital on 11/27/16.</p> <p>3) The facility's, Contract for Developmental Training Between Facilities, provided by the facility on 12/1/16 is not signed or dated by the facility, but signed and dated by the day program representative on 4/16/16.</p> <p>The facility's Position Title: Administrator dated 2/15/12, shows "G. Hires and monitors all services contract consultants. M. Monitors/assists all external/internal activity programs."</p> <p>The contract shows the day program will provide a minimum of 5 hours of program services per day.</p> <p>On 11/29/16 - R1, R2, R3, R4, R7, R9, R10, R11, R12, R13, R14, R15, R16, R17, R18, R19, R20,</p>	Z9999		
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Z9999	<p>Continued From page 14</p> <p>R22, R23, R24, R25, R26, R27, R28, R29, R30, R32, R34, R36, R37, R39, R41, R42, R48, R49, R50, R51, R52, R53, R54, R55, R56, R58, R59, R63, R64, R65, R73, R74, R75, R77 and R79 were at day training. Program services were viewed by surveyor on 11/29/16 between 10:30am and 1:45pm.</p> <p>In the main room were several residents sitting at the tables not engaged in activities with staff. R1 was noted walking around to several different rooms coloring on his own. R48 was watching a program on his tablet. R4 sat in the back of the room in her wheelchair the entire day. The only time someone spoke to R4 was during lunch. R9 sat a table with an opened magazine unengaged. Later R9 picked up some markers off the table and began coloring. No one at the day training program provided any active treatment.</p> <p>On 11/29/16 at 1:25pm R48 stated, "I'm bored. I just color and use my (tablet). I want to work."</p> <p>In the sensory room were R3, R7, R11, R18, R19, R27, R65 and Z10 (Direct Support Person/DSP). Z10 was sitting at the desk sitting on his cellular phone intermittently and coloring. A tablet was sitting on the desk playing a recorded basketball game. In front of the desk were R27 and R11 in their wheelchairs. R27 was looking in the other direction and R11 had his head down. R3 was sitting at the table coloring, self engaged. R7 was sitting on a mat on the floor with no shoes or sock on his feet. At approximately 10:45am, R7 was holding a piece of tissue in his hand placing it between his lips and into his mouth. R7 then dragged it across his feet. R7 continued this behavior until approximately 12:30pm. R7 was never redirected by Z10. Z10 did not engage the residents in any activities, nor did he converse</p>	Z9999		
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Z9999	<p>Continued From page 15</p> <p>with any of them. R18, R19 and R65 were in their wheelchairs sitting against the wall with their heads down not engaged.</p> <p>The contract shows the day program will identify specific services to be provide and along with the facility, the two will implement a single consistent program.</p> <p>None of the goals from the service plan were implemented for any of the residents on 11/29/16.</p> <p>On 11/29/16 at 12:45pm, Z7 (Direct Support Person/DSP) stated he is with an agency on a temporary assignment and new to day training. Z7 stated, "they didn't tell me where the data sheets are. I don't know what the goals are, I have a roll call sheet."</p> <p>On 11/29/16 at 12:50pm Z3 (Direct Support Person/DSP) stated, "this is my first. I was told I would be shadowing, but I'm by myself. I haven't done this kind of work before." Surveyor asked how she knew what to do, Z3 responded "I don't, I was suppose to shadow someone (Z4)." During observation, Z3 sat at a table with 6 residents. None of the residents were engaged. Z3 was provided no guidance by other staff.</p> <p>On 11/29/16 at 1:00pm, Z4 (Qualified Intellectual Disabilities Professional/QIDP) was asked if the goals from the service plan are being implemented, Z4 responded "we can't at times unless we remember what the goals are. Now that we have more people, we will be able to do that." Z4 continued to state they have been short for the last three months and have had only 4 other regular staff, Z8 (Direct Support Person/DSP), Z9 (DSP), Z10 (DSP) and Z12 (DSP).</p>	Z9999		

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Z9999	<p>Continued From page 16</p> <p>On 11/29/16 at 1:10pm, Z5 (Direct Support Person/DSP) stated she is with an agency on a temporary assignment. Today is her third day. Z5 continued to stated she doesn't know the goals of the residents and has not had time to check. Z5 needs a permanent staff member to log her into the system to find out what they are for each resident. Z5 continued to state, "I color with them and one resident likes music. It's pretty much coloring."</p> <p>On 11/29/16 at 1:40pm, Z13 (Program Director of Day Training) was asked if the service plan and goals are being implemented, Z13 responded "I don't know how much got done to be honest. We are trying to ramp up our activities, trying to do bigger outings, out to store and more."</p> <p>The contract shows the day program will provide written reports to the facility on a monthly basis of each individual's progress toward meeting the objectives identified in the service plan.</p> <p>No documents were given to the facility from day training with the residents progress toward meeting goals identified in the service plan.</p> <p>On 12/1/16 at 1:10pm, E5 (Director of Social Services) stated they have not been getting the paperwork from the day training program regularly. They were not getting any information on goals. Day training assessments were not done. E5 continued to state, "there were times when I went over there and there was nothing going on." E5 was asked what she did when she found out nothing was going on, E5 responded "informing people, being more firm-residents needed to be engaged. I was hesitant to be firm, but now I'm giving them suggestions and being</p>	Z9999		
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Z9999	<p>Continued From page 17</p> <p>more firm." E5 continued to stated the QIDP's need to be at day training more often than a sporadic meeting.</p> <p>On 12/1/16 at 1:25pm, E43 (Qualified Intellectual Disabilities Professional/QIDP) stated she has been to day training a few times for individual service plan meetings (ISP). E43 continued to state the day training program has had issues with staffing in the past. E43 stated "a lot of time they are sitting around at a table doing nothing. I have other residents that need sensory stimulation, but they did not provide anything. Staffing issues, the agency's been around. I don't know is it a leadership issue? We've all mentioned the issues, is it a lack of equipment or staff. Maybe they will get it, but they don't. They go over goals on annuals. I know they have goals. We have gotten a sheet just once."</p> <p>E43 continued, "they say we'll send something and they don't. They have not been forthcoming with their information. No numbers, figures or goals. None since they have been at (day training)." E43 continued, staff have not been engaging with lower functioning residents. E43 stated "what are their budgetary restraints? I expected more, they're a larger agency and have been around."</p> <p>The contract shows the day training program will give attendance report to the facility.</p> <p>A copy of residents attending day training on 11/29/16 was given by the facility. Some of the residents who stayed back were on the list. After surveyor observed day training, a copy of the attendance reports were given by day training showing all the residence in attendance. The following residence were at day training, but were</p>	Z9999		
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Z9999	<p>Continued From page 18</p> <p>not on the attendance list provided by day training: R1, R2, R4, R15, R16, R17, R20, R22, R23, R24, R25, R32, R34, R36, R41, R42, R48, R49, R50, R51, R53, R54, R56, R58, R75 and R77.</p> <p>Both of the attendance lists from day training and the facility were incorrect.</p> <p>The contract shows the maximum number of individuals in any given month is 65.</p> <p>On 11/29/16 at 1:00pm, Z4 (Qualified Intellectual Disabilities Professional/QIDP) stated there were times the facility was told to hold back residents because there was not enough staff.</p> <p>On 12/1/16 at 1:25pm, E43 (Qualified Intellectual Disabilities Professional/QIDP) stated, "they have asked us in the past to hold back residents because they don't have enough staff and then that puts us in a position of what to do with the residents."</p> <p>On 11/29/16 at 1:40pm, Z13 (Program Director of Day Training) stated they were short 3 direct support staff on 11/29/16, the day of the observation.</p> <p>On 11/29/16, at 1:00 p.m., R64 was observed sitting on a padded bench located against the wall in the big room at Day Training (DT) site. On 11/29/16, at 1:00 p.m. when surveyor entered the hall, R64 was seated on his buttocks with his legs separated and bent up in front of him with all his frontal genital areas completely exposed. R64 was not wearing any clothes on his body. R1, R58 and R75 were seated next to him on the</p>	Z9999		
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Z9999	<p>Continued From page 19</p> <p>pped bench. R2, R4, R9, R12, R13, R14, R15, R16, R17, R20, R22, R23, R24, R25, R28, R32, R33, R34, R36, R42, R48, R51, R53, R54, R56, R59, R61, R68, R70, R73, and R77 were all seated in the big room with full frontal view of R64. No staff were in the big hall except Z3 (DT DSP (Direct Support Person) who stated that it is her first day of work at DT). Z3 was seated on a chair with other residents by a table with her back towards R64. When surveyor approached Z3 about R64, Z3 turned around to look at R64 but did not do anything. At 1:02 p.m., Z9 (DT DSP) entered the hall. Surveyor approached Z9 about R64 being naked. Z9 then went up to R64 and proceeded to assist him with putting his clothes on.</p> <p>On 11/29/16, at 1:05 p.m., Z9 stated R64 has a behavior of disrobing and confirmed that staff should immediately intervene when he disrobes.</p> <p>Facility Resident Repositioning schedule requires that R51 and R4 are to be repositioned every hour, and R18 and R19 are to be repositioned every 2 hours. The Resident Repositioning Schedule reads, "Changing a resident's position by changing the w/c[wheelchair] angle (ex: tilt-in-space w/c) does not constitute a position change."</p> <p>On 11/29/16, R18 and R19 were observed seated in the sensory room. R18 and R19 was not observed to be repositioned during the entire observation from 10:30 a.m. to 1:45 p.m. On 11/29/16, at 11:15 a.m., when asked how often residents are repositioned, Z10, Day Training Direct Support Person (DT DSP) stated, "in this room I reposition R18 and R19 by tilting wheelchair in backward position and forward position." R18 and R19 were not repositioned as</p>	Z9999		
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Z9999	<p>Continued From page 20</p> <p>required by Facility Resident Repositioning Schedule.</p> <p>On 11/29/16, R4 was observed to be seated in her wheelchair against the wall in the main room at DT. R4 stayed seated in the same location (against the wall in the main room) during the entire observation from 10:30 a.m. to 1:45 p.m. R4 was not repositioned every hour as required by the Facility Resident Repositioning Schedule.</p> <p>R51 was seated in the front of the big room by a table with other residents. R51 was not observed to be repositioned during the entire observation from 10:30 a.m. to 1:45 p.m. R4 was not repositioned every hour as required by the Facility Resident Repositioning Schedule.</p> <p>On 11/29/16, at 11:15 a.m., Z10 stated that the Day Training does not document on repositioning that are conducted for the residents.</p> <p>On 11/29/16 in the sensory room, R7 was sitting on a mat on the floor with no shoes or sock on his feet. At approximately 10:45am, R7 was holding a piece of tissue in his hand placing it between his lips and into his mouth. R7 then dragged it across his feet. R7 continued this behavior until approximately 12:30pm. R7 was never engaged in any activities or redirected for his behavior by Z10 (Direct Support Person).</p> <p>On same day, at 11:45am R9 stood up after eating lunch and walked to the kitchen. R9's light gray sweat pants were wet from the front of the genital area to the back of the pants. R9 walked into the kitchen and sat on the floor. No one assisted R9 with her wet pants. R9 stood up and walked near the entrance in the main room and again sat on the floor.</p>	Z9999		
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Z9999	<p>Continued From page 21</p> <p>At 12:05pm, surveyor asked Z11 (Licensed Practical Nurse) if she was aware R9 was wet, Z11 replied she was aware and they are trying to get her changed. Z11 asks another staff person to take R9 to the bathroom. R9 walked into another room. Staff cleaned off the tables and assist other residents while verbally asking R9 across the room to go to the bathroom. At 12:15pm Z11 stated to surveyor that R9 is no longer wet and does not assist R9 to the bathroom. At 12:30pm, R9 was assisted to the bathroom where her clothes were changed.</p> <p>On 11/29/16 at 1:00pm, Z4 (Qualified Intellectual Disabilities Professional/QIDP) stated staff try to toilet the independent residents after lunch by giving verbal prompts. Surveyor asked how they know when someone needs to be changed or taken to the bathroom, Z4 responded "we know." Surveyor asked Z4 to elaborate, but Z4 just responded with we know again.</p> <p>Facility Adaptive Equipment dated 11/18/16 requires the following adaptive equipments during meal time: R13 - scoop plate, built up spoon, R14 - coated spoon, R28 - hi-lip plate, R29 - coated spoon &amp; sipper cup, R23 - hi-lip plate, R26 - hi-lip plate, R17 - hi-lip plate, R63 - hi-lip plate, R34 - coated spoon, R75 - scoop plate, R30 - scoop plate, curved coated spoon, R65 - hi-lip plate, left good grip spoon, dycem mat, R49 - sipper cup, sectional plate, R50 - hi-lip plate, R51 - hi-lip plate, plate guard, left built up spoon, dycem, weighted cup with straw, R32 - scoop plate, built up utensils, R39 - sipper cup, plate guard, R27 - hi-lip plate, plate guard dycem mat, built up spoon, R64 - hi-lip sectional plate</p>	Z9999		
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Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  IL6007066	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  12/22/2016
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NAME OF PROVIDER OR SUPPLIER  BELLWOOD DEVELOPMENTAL CENTER	STREET ADDRESS, CITY, STATE, ZIP CODE 105 EASTERN AVENUE BELLWOOD, IL 60104
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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 22</p> <p>Observations were conducted on 11/29/16 between 10:30 a.m. to 1:45 p.m. at the Day Training (DT) site. All residents eating at the DT facility were observed to be using styrofoam plates, styrofoam cups, and plastic spoons and forks during mealtime. R13, R14, R17, R23, R26, R27, R28, R29, R30, R32, R34, R49, R50, R51, R63, R64, R65, and R75 were not observed to receive their adaptive equipment during mealtime at DT as required by the Facility Adaptive Equipment list for meals.</p> <p>On 11/30/2016 the facility presented a job description for Dietary Manager. This document was revised in 2-15-00. It was unsigned by any employee or supervisor. The E1 (acting administrator) presented this document to the survey team. The document presents as follows; " Position Title: Dietary Manager " , " Education/Exper.: HS diploma/GED [General Education Degree] = 3 yrs. Related experience; Food Sanitation Cert = 90 hr Dietary Superv. Cert. "</p> <p>The Dietary Manager is listed as E8. However, E8 stated on 11/30/16 at 11 am, that she never went to the training, nor took the test for Dietary Manager, as required by the state of IL. E8 said she is not a Dietary Manager, but is a Food Sanitarian. E8 stated she has not taken or enrolled in a 90 hour course for a Certified Dietary Manager. E8 was hired at this facility on 5/24/15.</p> <p>Upon entry to this facility on 11/28/16 at 12 pm, E1 informed the survey team that E8 was the Dietary Manager and in charge of dietary service operations.</p> <p>On 11/30/16 at 11:30am, E1 said he was unaware</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>IL6007066</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>12/22/2016</b>
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NAME OF PROVIDER OR SUPPLIER  <b>BELLWOOD DEVELOPMENTAL CENTER</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>105 EASTERN AVENUE BELLWOOD, IL 60104</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 23</p> <p>that E8 is not qualified to be the Dietary Manager.</p> <p>On 12/1/16, at 9:35 a.m., E8 (Dietary Manager) was observed standing outside the resident shower room. When asked if she often assists with showers, E8 stated, "this is my first time." E8 added, "I assist whenever help is needed. I assist with loading residents on the bus and feeding residents."</p> <p>On 12/14/16, at 12:30 p.m., Facility provided a list of approved feeders. According to E1 (Acting Administrator), E8 is included in the Approved Feeders list who are required to assist residents with feeding while holding other positions, such as, laundry, housekeeping, clerical, administration, and nursing.</p> <p>On 12/8/16, at 2:00 p.m., E1 (Acting Administrator) confirmed that all staff are expected to help when needed and when there is a shortage of staff.</p> <p>An interview was conducted with E32 ( facility Administrator) on 12/20/16 at 10:00 am According to E32, he was aware that E8,(Dietary Manager) was not certified as a manager when she was hired and he assumed she "got certification."</p> <p>E32 said as of today, E1 is running the dietary department, until someone is hired.</p> <p>(B)</p>	Z9999		
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