

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: IL6006399	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 01/26/2017
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NAME OF PROVIDER OR SUPPLIER MORTON VILLA HLTH & REHAB CTR	STREET ADDRESS, CITY, STATE, ZIP CODE 190 EAST QUEENWOOD ROAD MORTON, IL 61550
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S9999	<p>Final Observations</p> <p>Statement of Licensure Violations:</p> <p>300.610a) 300.1010h) 3001210b) 300.3240a)</p> <p>Section 300.610 Resident Care Policies</p> <p>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.</p> <p>Section 300.1010 Medical Care Policies</p> <p>h) The facility shall notify the resident's physician of any accident, injury, or significant 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 percent or more within a period of 30 days. The facility shall obtain and record the physician's plan of care for the care or treatment of such accident, injury or change in condition at the time of notification.</p> <p>Section 300.1210 General Requirements for Nursing and Personal Care</p>	S9999	<p>Attachment A</p> <p>Statement of Licensure Violations</p>	
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Illinois Department of Public Health LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE 02/15/17
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S9999	<p>Continued From page 1</p> <p>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 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 REGULATIONS WERE NOT MET AS EVIDENCED BY:</p> <p>Based on observation, interview, and record review the facility failed to notify the physician of a resident's continued pain and constipation for one of five residents (R11) reviewed for pain in the sample of 15. This resulted in R11 failing to receive medical treatment to relieve constipation and severe abdominal pain.</p> <p>Findings include:</p> <p>The facility's Change in Condition or Status Notification policy dated 03/2016 documents, "Our facility shall promptly notify the resident, his or her attending physician, and representative of changes in the resident's medical/mental condition and/or status. A significant change of condition is a decline or improvement of the resident's status that will not normally resolve itself without intervention of staff or by</p>	S9999		
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S9999	<p>Continued From page 2</p> <p>implementing standard disease-related clinical interventions..."</p> <p>The facility's Pain Assessment and Management policy dated 10/2010 documents, "Report the following to the physician or practitioner; Significant changes in the level of the resident's pain and unrelieved pain despite care plan interventions."</p> <p>The facility's Bowel Protocol dated 01/2012 documents: M.O.M. (Milk of Magnesia)-30 cc (cubic centimeters) if no BM (bowel movement) x 3 days or three consecutive small BM's. May repeat x one in eight hours for constipation. Dulcolax 10 mg (milligrams) suppository insert one suppository rectally if no results from M.O.M. May repeat x one in 24 hours for constipation. Fleets enema insert one rectally. If no results from dulcolax suppository. If no results call MD (Medical Doctor) for constipation.</p> <p>R11's Minimum Data Set Assessment dated 10-31-16 documents R11's BIMS (Brief Interview for Mental Status) is a score of 15, indicating R11 is cognitively intact.</p> <p>R11's current Bowel Elimination Care Plan documents R11 is at risk for alteration in bowel elimination related to weakness, morbid obesity, opiate therapy, etc...This same care plan documents R11 will have a regular elimination pattern as evidenced by soft/formed bowel movement at least once every three days and report changed in bowel status to the resident's physician as needed.</p> <p>R11's Physician's Order Sheet (POS) dated 1-1-17 to 1-31-17, documents R11 has the diagnosis of Constipation. This same POS</p>	S9999		
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S9999	<p>Continued From page 3</p> <p>documents: Miralax dissolve 17 grams in liquid and take by mouth twice daily. M.O.M. (Milk of Magnesia) 30 cc (cubic centimeters) if no BM (Bowel Movement) x three days or three consecutive small BM's may repeat x one in eight hours for the diagnosis of constipation. Dulcolax 10 mg (milligrams) suppository insert one suppository if no result from the M.O.M and repeat x one in 24 hours for the diagnosis of constipation. Fleets enema insert one if no results from the dulcolax suppository and call MD if no results (Medical Doctor). Hydrocodone/Acetaminophen 5 mg/ 325 mg (Norco) one tablet every six hours as needed for pain.</p> <p>R11's Abdomen KUB (Kidneys, Uterus, and Bladder) x-ray dated 1-16-17 documents reason: Constipation, Abdominal Distention, and Pain. This x-ray documents: Findings would support the clinical diagnosis of constipation. At the bottom of this same x-ray report there is a signed order from Z3 (R11's Physician) that states, "Continue with laxative and suppository. If problem worsens or persists contact our office."</p> <p>R11's BM Elimination Logs are incomplete or indicate R11 had no BM on 1-2-17 through 1-7-17, 1-12-17, 1-13-17, 1-15-17 to 1-17-17, or 1-19-17 to 1-22-17.</p> <p>R11's Pain Evaluation dated 1-22-17 and electronically signed by E24 (Licensed Practical Nurse/LPN), documents R11's acceptable level of pain is a "2" on a 1-10 (1 indicates no pain, 5 indicates moderate pain, and 10 indicates worst pain) scale. This same Pain Evaluation documents R11 has non-verbal sounds of pain (crying, whining, gasping, moaning, or groaning) and protective body movements or postures of</p>	S9999		
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S9999	<p>Continued From page 4</p> <p>pain (bracing, guarding, rubbing or massaging a body part/area, clutching, or holding a body part during movement) that are not described as instructed to complete on the pain assessment form.</p> <p>On 1-23-17 at 10:30 a.m., R11 complained of right sided abdominal pain and diarrhea. R11 was holding the right side of his abdomen and had facial grimacing.</p> <p>On 1-23-17 at 11:30 a.m., E7 (Certified Nursing Assistant/CNA) was performing incontinence care on R11 and transferring R11 from the bed to the wheelchair. During these cares R11 was holding the right side of his abdomen and was moaning in pain.</p> <p>On 1-24-17 at 9:23 a.m., R11 complained of pain to the right side of his abdomen at a "10" on a 1-10 pain scale. R11 was guarding the right side of his abdomen.</p> <p>On 1-24-17 at 9:20 a.m., R11 stated, "I was given a suppository and milk of magnesia one time around the 16th of January, but nothing since. For the right sided pain they (facility staff) are only giving me pain medications....The nurses say nothing is wrong with me. My stools are watery and loose. I am able to to pass small pieces of stool. My stool is normally formed and I am not having normal stools now. I have had this terrible pain for over two weeks. I wish they would do something for me. I am uncomfortable with my daily living because of the pain."</p> <p>On 1-26-17 at 10:45 a.m., R11 was lying on his right side. R11 was holding his right side with his hand and stated, "I am having pain. I was asked by the nurse this a.m. if I wanted a pain pill. I</p>	S9999		
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S9999	<p>Continued From page 5</p> <p>don't want a pain pill. I want something for my bowels."</p> <p>On 1-23-17 at 11:50 a.m., E7 (CNA) stated, "(R11) has been having pain to the right side. (R11's) stools have been liquidly which is not normal for him." On 1-23-17 at 1:30 p.m., E7 verified that she did not tell the nurse about (R11's) complaints of pain. (R11) stated, "I thought they already new about the pain."</p> <p>On 1-24-17 at 11:50 a.m., E10 (CNA) stated, "(R11) has been having complaints of right abdominal pain. It has been taking him longer than usual to have a bowel movement."</p> <p>On 1-24-17 at 1:40 p.m., E16 (CNA) stated, "I take care of (R11) a couple times a week....(R11) complains of pain to the right side of his abdomen. The right sided pain to the abdomen is new pain for him...The nurse gave him a pain pill... If the bowel movement logs are blank or marked as a zero for two days we (staff) should inform the nurse so they can give him something else..."</p> <p>On 1-25-17 at 9:00 a.m., E1 (Administrator) stated, " (Nurses) should have called the doctor when (R11's) pain was a '10' on a 1-10 scale and was only relieved to a '6', because according to his pain evaluation his acceptable level of pain is a '2'."</p> <p>On 1-26-17 at 10:40 a.m., E13 (Licensed Practical Nurse) stated, "No one reported to me on Sunday (1-22-17) that (R11) had a hard BM. If it was reported I would have assessed him and listened to his bowel sounds. He said he had a blockage before. The physician's office should have been contacted that (R11's) problem</p>	S9999		

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S9999	<p>Continued From page 6</p> <p>persisted..."</p> <p>R11's Clinical Notes from 1-17-17 to 1-23-17 do not include any documentation of Z3 (R11's Physician) being notified of R11's continued right abdominal pain or constipation.</p> <p>On 1-24-17 at 1:25 p.m., Z1 (Z3's Registered Nurse) stated, "The last notification we have had regarding (R11) was on 1-17-17 regarding (R11's) KUB abdominal results. If suppository was not working they (facility staff) should have contacted us (physician's office staff) before now if he is still having pain. That is just good nursing care. I would want to know if the pain persisted. I have no record of them (facility staff) calling us (physician's office staff)."</p> <p>(B)</p> <p>300.1230j)5) 300.1230k)</p> <p>Section 300.1230 Direct Care Staffing 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). 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) 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</p>	S9999		
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S9999	<p>Continued From page 7</p> <p>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>These regulations were not met as evidenced by: Based on interview and record review the facility failed to meet the minimum required staffing ratio of 10 percent (%) Registered Nurses for 14 of 14 days reviewed. The facility also failed to meet the required minimum staffing ratio of 25% licensed nursing staff for one of 14 days and 75% Direct Care staff hours for two of 14 days reviewed. These failures have the potential to affect all 75 residents in the facility.</p> <p>Findings include: On 1/24/17 at 10:00a.m., during the Resident Council meeting, R5, R16, R19, R20, R37, R38, R39, R40 stated that the facility did not have enough staff to provide care for the residents especially on the weekends. R5, R16, R19, R20, R37, R38, R39, R40 stated that call lights frequently are not answered for long periods of time and that the facility is often so short of staff that the staff who are working are mandated to work longer than their scheduled shifts.</p> <p>On 1/24/16 at approximately 1:00p.m., E1 (Administrator) provided the facility's daily staff hours Labor Reports dated 1/9/17 to 1/22/17 which itemized hours worked each day by all nursing disciplines (Registered Nurses, Licensed Practical Nurses, Certified Nurse Aides). The report also documented the daily intermediate and skilled resident census.</p> <p>A daily staff hours Labor Report dated 1/9/17 documents the facility had 13 skilled care residents and 65 intermediate care residents on that date. The daily staff hours Labor Report also documents the facility had 16.75 Registered</p>	S9999		
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S9999	<p>Continued From page 8</p> <p>Nurse hours to care for residents during that 24 hour period. Based on the calculation of 3.8 times the number of skilled care residents plus 2.5 times the number of intermediate care residents the facility required a total of 211.90 nursing staff hours for that day. Of that 211.90 hours, 10 percent or 21.19 hours were required to be Registered Nurses.</p> <p>A daily staff hours Labor Report dated 1/10/17 documents the facility had 13 skilled care residents and 65 intermediate care residents on that date. The daily staff hours Labor Report also documents the facility's only Registered Nurse working on that date was E2 (Director of Nurses). Because only half of E2's hours at the facility can be counted as resident care hours, the facility actually only had 4 Registered Nurse hours to care for residents during that 24 hour period. Based on the calculation of 3.8 times the number of skilled care residents plus 2.5 times the number of intermediate care residents the facility required a total of 211.90 nursing staff hours for that day. Of that 211.90 hours, 10 percent or 21.19 hours were required to be Registered Nurses.</p> <p>A daily staff hours Labor Report dated 1/11/17 documents the facility had 13 skilled care residents and 65 intermediate care residents on that date. The daily staff hours Labor Report also documents the facility's only Registered Nurse working on that date was E2 (Director of Nurses). Because only half of E2's hours at the facility can be counted as resident care hours, the facility actually only had 4 Registered Nurse hours to care for residents during that 24 hour period. Based on the calculation of 3.8 times the number of skilled care residents plus 2.5 times the number of intermediate care residents the facility required a total of 211.90 nursing staff hours for that day. Of that 211.90 hours, 10 percent or</p>	S9999		
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S9999	<p>Continued From page 9</p> <p>21.19 hours were required to be Registered Nurses.</p> <p>A daily staff hours Labor Report dated 1/12/17 documents the facility had 13 skilled care residents and 65 intermediate care residents on that date. The daily staff hours Labor Report also documents the facility had 15.75 Registered Nurse hours to care for residents during that 24 hour period. Based on the calculation of 3.8 times the number of skilled care residents plus 2.5 times the number of intermediate care residents the facility required a total of 211.90 nursing staff hours for that day. Of that 211.90 hours, 10 percent or 21.19 hours were required to be Registered Nurses.</p> <p>A daily staff hours Labor Report dated 1/13/17 documents the facility had 13 skilled care residents and 65 intermediate care residents on that date. The daily staff hours Labor Report also documents the facility had 16.25 Registered Nurse hours to care for residents during that 24 hour period. Based on the calculation of 3.8 times the number of skilled care residents plus 2.5 times the number of intermediate care residents the facility required a total of 211.90 nursing staff hours for that day. Of that 211.90 hours, 10 percent or 21.19 hours were required to be Registered Nurses.</p> <p>A daily staff hours Labor Report dated 1/14/17 documents the facility had 13 skilled care residents and 65 intermediate care residents on that date. The daily staff hours Labor Report also documents the facility had 13.25 Registered Nurse hours and 154.02 Direct Care staff hours to care for residents during that 24 hour period. Based on the calculation of 3.8 times the number of skilled care residents plus 2.5 times the number of intermediate care residents the facility required a total of 211.90 nursing staff hours for that day. Of that 211.90 hours, 10 percent or</p>	S9999		
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S9999	<p>Continued From page 10</p> <p>21.19 hours were required to be Registered Nurses and 75% or 158.93 hours were required to be Direct Care staff.</p> <p>A daily staff hours Labor Report dated 1/15/17 documents the facility had 12 skilled care residents and 65 intermediate care residents on that date. The daily staff hours Labor Report also documents the facility had zero Registered Nurse hours to care for residents during that 24 hour period. Based on the calculation of 3.8 times the number of skilled care residents plus 2.5 times the number of intermediate care residents the facility required a total of 208.10 nursing staff hours for that day. Of that 208.10 hours, 10 percent or 20.81 hours were required to be Registered Nurses.</p> <p>A daily staff hours Labor Report dated 1/16/17 documents the facility had 13 skilled care residents and 65 intermediate care residents on that date. The daily staff hours Labor Report also documents the facility had 16.75 Registered Nurse hours to care for residents during that 24 hour period. Based on the calculation of 3.8 times the number of skilled care residents plus 2.5 times the number of intermediate care residents the facility required a total of 209.40 nursing staff hours for that day. Of that 209.40 hours, 10 percent or 20.94 hours were required to be Registered Nurses.</p> <p>A daily staff hours Labor Report dated 1/17/17 documents the facility had 15 skilled care residents and 63 intermediate care residents on that date. The daily staff hours Labor Report also documents the facility's only Registered Nurse working on that date was E2 (Director of Nurses). Because only half of E2's hours at the facility can be counted as resident care hours, the facility actually only had 4 Registered Nurse hours to care for residents during that 24 hour period. Based on the calculation of 3.8 times the number</p>	S9999		
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S9999	Continued From page 11 of skilled care residents plus 2.5 times the number of intermediate care residents the facility required a total of 214.50 nursing staff hours for that day. Of that 214.50 hours, 10 percent or 21.45 hours were required to be Registered Nurses. A daily staff hours Labor Report dated 1/18/17 documents the facility had 15 skilled care residents and 61 intermediate care residents on that date. The daily staff hours Labor Report also documents the facility had 16.75 Registered Nurse hours to care for residents during that 24 hour period. Based on the calculation of 3.8 times the number of skilled care residents plus 2.5 times the number of intermediate care residents the facility required a total of 209.50 nursing staff hours for that day. Of that 209.50 hours, 10 percent or 20.95 hours were required to be Registered Nurses. A daily staff hours Labor Report dated 1/19/17 documents the facility had 16 skilled care residents and 61 intermediate care residents on that date. The daily staff hours Labor Report also documents the facility had 16.75 Registered Nurse hours to care for residents during that 24 hour period. Based on the calculation of 3.8 times the number of skilled care residents plus 2.5 times the number of intermediate care residents the facility required a total of 213.30 nursing staff hours for that day. Of that 213.30 hours, 10 percent or 21.33 hours were required to be Registered Nurses. A daily staff hours Labor Report dated 1/20/17 documents the facility had 17 skilled care residents and 61 intermediate care residents on that date. The daily staff hours Labor Report also documents the facility had 18.00 Registered Nurse hours to care for residents during that 24 hour period. Based on the calculation of 3.8 times the number of skilled care residents plus	S9999			

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: IL6006399	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 01/26/2017
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NAME OF PROVIDER OR SUPPLIER MORTON VILLA HLTH & REHAB CTR	STREET ADDRESS, CITY, STATE, ZIP CODE 190 EAST QUEENWOOD ROAD MORTON, IL 61550
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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>Continued From page 12</p> <p>2.5 times the number of intermediate care residents the facility required a total of 217.10 nursing staff hours for that day. Of that 217.10 hours, 10 percent or 21.71 hours were required to be Registered Nurses.</p> <p>A daily staff hours Labor Report dated 1/21/17 documents the facility had 16 skilled care residents and 61 intermediate care residents on that date. The daily staff hours Labor Report also documents the facility had zero Registered Nurse hours, 48.25 Licensed Nurse hours, and 141.25 Direct Care staff hours to care for residents during that 24 hour period. Based on the calculation of 3.8 times the number of skilled care residents plus 2.5 times the number of intermediate care residents the facility required a total of 213.30 nursing staff hours for that day. Of that 213.30 hours, 10 percent or 21.33 hours were required to be Registered Nurses, 25% or 53.33 hours were require to be Licensed Nurses, and 75 percent or 159.98 hours were required to be Direct Care staff.</p> <p>A daily staff hours Labor Report dated 1/22/17 documents the facility had 15 skilled care residents and 60 intermediate care residents on that date. The daily staff hours Labor Report also documents the facility had zero Registered Nurse hours to care for residents during that 24 hour period. Based on the calculation of 3.8 times the number of skilled care residents plus 2.5 times the number of intermediate care residents the facility required a total of 207.00 nursing staff hours for that day. Of that 207.00 hours, 10 percent or 20.70 hours were required to be Registered Nurses.</p> <p>On 1/26/17 at 2:00p.m., E1 verified the facility did not have the minimum requirement of Registered Nurse hours 1/9/17 to 1/22/17 or the minimum requirement of Licensed Nurses on 1/21/16. E1 also verified the facility did not have the minimum</p>	S9999		
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Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: IL6006399	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 01/26/2017
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NAME OF PROVIDER OR SUPPLIER MORTON VILLA HLTH & REHAB CTR	STREET ADDRESS, CITY, STATE, ZIP CODE 190 EAST QUEENWOOD ROAD MORTON, IL 61550
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S9999	Continued From page 13 number of Direct Care staff hours on 1/14/17 or 1/21/17. The Centers for Medicare and Medicaid Services Resident Census and Conditions of Resident form 672 dated 1/23/17 and signed by E6 (Minimum Data Set Coordinator) documents that at the time of the survey 75 residents resided in the facility. (AW)	S9999		
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