

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: IL6006472	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED C 07/22/2022
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NAME OF PROVIDER OR SUPPLIER MULBERRY MANOR	STREET ADDRESS, CITY, STATE, ZIP CODE 612 EAST DAVIE STREET, BOX 88 ANNA, IL 62906
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Z 000	COMMENTS Complaints 2255179/IL148622 & 2255482/IL148961	Z 000		
Z9999	<p>FINDINGS</p> <p>#1 of 2</p> <p>Statement of Licensure Violations:</p> <p>350.620a) 350.1060a) 350.1060g) 350.1210d) 350.1230b) 350.1230d)1) 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 350.1060 Training and Habilitation Services</p> <p>a) The facility shall provide training and habilitation services to facilitate the intellectual, sensor motor, and effective development of each resident in the facility.</p> <p>g) Appropriate training and habilitation programs shall be provided residents with</p>	Z9999	<p>Attachment A Statement of Licensure Violations</p>	

Illinois Department of Public Health LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
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Z9999	<p>Continued From page 1</p> <p>hearing, vision, perceptual, or motor impairments, in cooperation with appropriate staff.</p> <p>Section 350.1210 Health Services</p> <p>The facility shall provide all services necessary to maintain each resident in good physical health. These services include, but are not limited to, the following:</p> <p>d) Physical and occupational therapy services for purposes of initiating, monitoring and follow-up of individualized treatment programs rendered by or under the supervision of a physician with special training or experience in the specialty or a physical therapist or an occupational therapist.</p> <p>Section 350.1230 Nursing Services</p> <p>b) Residents shall be provided with nursing services, in accordance with their needs, which shall include, but are not limited to, the following: The DON shall participate in:</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>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 met as evidenced by:</p>	Z9999		

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Z9999	<p>Continued From page 2</p> <p>Based on interview and record review, the facility failed to implement their system to prevent neglect for 1 of 1 individual in the sample, (R1) by their failure to:</p> <p>Implement a home exercise program as recommended by the physical therapist on 2 separate occasions for 1 of 1 individuals in the sample, (R1) who developed foot drop and worsening ankle contractures to both ankles and ensure follow-up appointments with healthcare providers were re-scheduled in a timely manner, which resulted in a delay in care.</p> <p>Findings include:</p> <p>The facility's resident roster dated 4-28-22, documents: R1, R21, R22, R25-R27, R29, R33, R36, R40-R42 function in the Mild Range of Intellectual Disabilities, R11, R17-R20, R24, R28, R31, R39, R43, R44 function in the Moderate Range of Intellectual Disabilities, R2, R3, R5, R7, R8, R13, R34, R37, R38 function in the Severe Range of Intellectual Disabilities, R4, R6, R9, R10, R12, R14-R16, R23, R30, R32, R35 function in the Profound Range of Intellectual Disabilities.</p> <p>The facility's policy titled, "Abuse and/or Neglect of Individuals" dated 11-1-21 documents in part, "Policy: It is the policy of this facility to provide a safe environment for the individuals served that is free from abuse, neglect, and exploitation. All staff/consumer interactions including, but not limited to training, assisting with activities of daily living, implementing behavior management</p>	Z9999		

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Z9999	<p>Continued From page 3</p> <p>techniques, etc., will be directed at enhancing the development of the individual consumer...Mistreatment of individuals will be defined as: 4. Any willful failure to respond to a consumer's obvious needs or to provide the supervision and care needed..."</p> <p>The facility's procedure titled, "Procedures for Investigating Abuse/Neglect of Resident" dated 2-8-21 documents in part, "Neglect: The failure to provide adequate medical or personal care or maintenance, which failure results in a physical or mental injury or in the deterioration of an individual's physical or mental condition... (Domestic neglect allegations do not require any specific harm.)"</p> <p>The facility's policy titled, "Nursing Services" (undated) documents in part, "This facility will have a full-time director of nursing services (DON) who is a registered nurse (RN) and whose responsibility is the immediate supervision of the facility's health services...1) A registered nurse or licensed practical nurse will be on duty 24 hours per day and seven days per week in charge of health services at all times when the director of nursing services is not on duty...3)b) Residents shall be provided with nursing services, in accordance with their needs, which shall include, but are not limited to, the following: The DON shall participate in: 3) Periodic reevaluation of the type, extent, and quality of services and programming. 4) Develop discharge plans, and the referral to appropriate community resources...7) Modification of the resident care plan, in terms of the resident's daily needs, as needed..."</p> <p>1. R1's Physician Order Sheet (POS) dated 7-2022 documents additional diagnoses of Foot</p>	Z9999		

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Z9999	<p>Continued From page 4</p> <p>Deformity (LT), Gait Disturbance and History of Hodgkin's Lymphoma.</p> <p>R1's physician order dated 6-16-20, documents, "May have PT evaluation for gait disturbance, and recurrent falls."</p> <p>Review of R1's healthcare record includes 5 consultation reports from podiatry and the primary care provider between 6-1-21 through 10-6-21, which do not address R1's ankle contractures by a healthcare professional in addition to, as verified by E3/DON on 7-14-22, R1's refusals to participate in her home exercise program (HEP).</p> <p>R1's nursing notes reviewed between 6-21-21 through 1-18-22 does not include notification to either the podiatrist or the primary care provider that R1 was refusing her HEP or that an attempt was made to have R1 re-evaluated by a provider to address her ankle contractures as noted in the physical exam conducted on 4-1-21.</p> <p>Physical therapy (PT) evaluation dated 6-26-20 documents in part, "Medical diagnosis: Gait disturbance, recurrent falls. Treatment diagnosis: Poor balance. Subjective Profile: R1 reports she is doing okay. Worker from facility said she gets lazy and decides to sit on floor. R1 reports a staff member was using a wheelchair because it was quicker and now she doesn't want to walk or be active. Patient goal: Worker voices goal of R1 exercising more. Assessment: R1 is considered appropriate for skilled PT services and has good rehab potential for stated goals...Short Term Goals x 2 weeks: 1. Patient will be independent with home exercise program (HEP) 2. Patient will increase BERG balance score (Balance scale helps determine a person's ability to safely balance, The higher the score, the better your</p>	Z9999		

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Z9999	<p>Continued From page 5</p> <p>balance.) >5 points. Long Term Goals x 4 weeks: 1. Patient will be independent with management of overall condition 2. Patient BERG balance score >25/56 3. Patient will have no falls since start of PT." R1's treatment plan includes attending physical therapy 2 times per week for 4 weeks for a total of 8 visits. In addition, R1 was provided with a HEP sheet to be completed at the facility, which included 4 exercises.</p> <p>The Covid-19 Risk Assessment Tool dated 9-22-20 documents in part, "R1 may attend all medical appointments, following CDC recommendations to mitigate risks."</p> <p>R1's physician order dated 11-4-20 documents in part, "Refer to podiatry for foot deformity. Refer to PT for evaluation."</p> <p>Podiatry consult sheet dated 11-10-20 verifies R1 was assessed for hammer toe (left foot), pain to left foot and is ambulatory. The consult sheet further documents in part, "Physical Exam: Musculoskeletal: Toes on the right foot are hammer toes, but are flexible and non-tender. Left foot has a 2nd digit hammertoe with mallet toe, and the toe is the longest by far. The 3rd toe is a hammertoe. The 2nd and 3rd toes have rigid, non-reducible contractures. The 4th and 5th toes are flexible and non-tender with palpation and range of motion...there is a fixed fairly rigid equinus deformity bilateral (Upward bending motion of the ankle joint is limited, lacking the flexibility to lift the top of the foot)."</p> <p>PT evaluation dated 12-10-20 documents in part, "Medical diagnosis: Other abnormalities of gait and mobility. Treatment diagnosis: Decreased mobility and gait impairments. Subjective Profile: Worker requests a 1 time visit for home exercise</p>	Z9999		

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Z9999	<p>Continued From page 6</p> <p>program (HEP) because R1 can get confrontational at times. R1 is able to walk for short distances but tires out quickly. Has history of bilateral foot problems that also limit ability to function. Patient goal: To develop HEP improve strength and endurance. Assessment: Patient is appropriate for skilled PT evaluation for HEP. Discharge Plan: R1 to be discharged from skilled physical therapy after skill evaluation for HEP."</p> <p>R1's physical exam consultation dated 4-1-21 document in part, "History of present illness: She ambulates short distances with help, uses wheelchair for longer distances. Musculoskeletal system: Overall findings, contractures of ankles and feet. Feet showed an abnormal appearance. Therapy: Request consultation by podiatrist."</p> <p>Podiatry consult sheet dated 6-21-21 documents, "Patient uncooperative, refused treatment today."</p> <p>Nursing note entry dated 6-21-21 documents in part, "Toenails trimmed, NNO's (no new orders)."</p> <p>Primary care provider (PCP) consultation dated 7-8-21 documents, "Often refuses to walk, but is able with walker and stand by assist. In wheelchair."</p> <p>PCP consultation dated 8-6-21 verifies only skin and behavioral problems were addressed.</p> <p>Podiatry consult sheet dated 9-17-21 verifies R1 received treatment for painful, thick toenails and a foot odor.</p> <p>PCP consultation dated 10-6-21 verifies R1 walks. No other physician notes addressing R1's ankle contractures.</p>	Z9999		

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Z9999	<p>Continued From page 7</p> <p>Review of R1's health record does not include documentation that an attempt was made by the facility to have R1 re-evaluated by a podiatrist to address her ankle and foot contractures as noted in R1's physical exam conducted on 4-1-21.</p> <p>R1's physician order dated 1-6-22 documents in part, "Foot deformity. Podiatry referral-Z2/Podiatrist."</p> <p>Podiatry consult sheet dated 1-18-22 verifies R1 was brought into the appointment by a facility worker, Z1/Guardian and documents in part, "Chief complaint: follow-up: Hammer toe...Problems: Equinus contracture of the ankle, Hammer toe-Left, Pain in left foot, Acquired pes planus (flat Feet) of left foot...HPI: I have seen the patient just once in November 2020. Her relative/Z1 relates that before Covid, the patient was wearing braces on both feet and walking, even without the use of a walker...The facility worker relates that it sometimes takes her 30-45 minutes to even walk 100 yards. She uses a walker now. She will take 2 or 3 steps and then has to stop and rest. She had what were apparently AFO's (Ankle foot orthotics. A brace (usually plastic) worn on the lower leg and foot to support the ankle, hold the foot and ankle in the correct position and correct foot-drop or other biomechanical problems with the foot) on both sides, but got them about 7 years ago, and probably has not worn any type of bracing in a year and half or so...They both relate that she always walks on her toes...Musculoskeletal: Weightbearing examination reveals the heel to be completely off the ground about 2 inches on the right, severe pes plano valgus (medical term that refers to an abnormal foot due to a flattened arch, a rolled-in appearance of the ankle, and a heel that appears to be rolled-out from under the</p>	Z9999		

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Z9999	<p>Continued From page 8</p> <p>ankle) on the left with genu recurvatum (deformity in the knee joint). She has a fixed equinus bilaterally, non reducible to even 90 degrees. Very rigid foot structure. Semi rigid forfoot and rigid midfoot, hindfoot and ankle deformity. Assessment/Plan: 1. Equinus contracture of the ankle-discussed various options with the patient's sister. I explained that the rigid nature would likely necessitate ankle arthrodesis (Joint Fusion) to achieve a plantigrade foot (normol posture)."</p> <p>Further review of the podiatrist note verifies a physical therapy referral was ordered in addition to a podiatrist referral for a surgical consult to address R1's rigid equinus contracture of the left and right ankle.</p> <p>Review of R1's health record verifies R1 was not seen by the referring podiatrist until 4-20-22 and was not assessed by the physical therapist until 5-3-22.</p> <p>Podiatry surgical consult dated 4-20-22 verifies R1 was seen for ankle instability to both ankles and ankle contractures and documents in part, "She was placed in AFO's but has not been wearing them because she has been minimally weight bearing since November. Physical Exam: Foot/ankle: achilles contracture bilateral with equinus deformity of both ankles. Neurological: Motor-foot drop, left, foot drop, right. Clinical Assessment/Plan: Discussed equinus contracture of ankles bilateral secondary to drop foot and immobility. Provided order for physical therapy focusing on ankle ROM and stretching achilles for 6 weeks. Discussed surgical options if contracture persists without improvement. Goal is brace foot with ability to weight bear..."</p> <p>PT evaluation dated 5-3-22 documents in part,</p>	Z9999		

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Z9999	<p>Continued From page 9</p> <p>"Medical diagnosis: Short Achilles tendon, bilateral ankle, bilateral foot drop. Treatment diagnosis: Bilateral foot drop. Subjective Profile: Achilles tendon is so tight, she is on her tippy toes, and takes forever to walk a short distance. Reports she went to specialist and wants to try PT to stretch them out to avoid major surgery...Palpation: Significant tightness/contractures in bilateral achilles tendon...Assessment: Patient has poor posture, gait deviations, increased swelling, bilateral foot drop deformities, decreased bilateral ankle ROM, and tightness/contractures of bilateral achilles tendon associated with bilateral foot drop...Functional limitations: Patient ambulates with handhold assist and unable to ambulate for distance. Plan: Will see for skilled PT for interventions to include: 1. Therapeutic exercise: stretching with postural emphasis, bilateral ankle ROM, bilateral ankle stability, bilateral ankle strength 2. Manual therapy: AAROM (Active Assistive Range of Motion)/PROM (Passive Range of Motion) bilateral ankles 3. Modalities: as needed 4. Other: Postural education, body mechanics, activity modification as needed. Frequency/Duration: 2-3 times per week for 6 weeks for at total of 12-18 visits. Discharge Plan: Patient to be discharged from skilled physical therapy when the patient has met goals or maximum potential has been reached."</p> <p>Review of R1's record titled, "Notes" between dates 10-26-20 through 7-13-22 provided by E5/Office Manger, verifies R1 was scheduled an appointment with the referring podiatrist on 6-23-22. Review of note entry dated 6-21-22 documents, "Received call from podiatrist office stated that doctor was out of the office and that they needed to reschedule appointment, will return call to reschedule once I am at work."</p>	Z9999		

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Z9999	<p>Continued From page 10</p> <p>Interview with E5 on 7-14-22 at approximately 3:15 PM, E5 verified she did not reschedule R1's 6-23-22 appointment and reported that she forgot to call Z1/Guardian, who subsequently arrived to R1's appointment, awaiting R1.</p> <p>Interview with Z2/Podiatrist on 7-14-22 at 1:02 PM, Z2 stated, "R1 had ankle contractures at the 11-2020 visit, but they were not an issue and not bad enough to address, also she was ambulatory. That appointment was to address her hammer toes and the possibility of her having surgery for them. Then next time I saw her on 1-18-22, her contractures had become significantly worse. Her heels were off the ground." Z2 was asked if physical therapy or any other treatment implemented by the facility would've prevented R1 from acquiring worsening ankle contractures? Z2 stated, "Yes, and if there was some walking every day, it wouldn't have happened, her contractures are terribly bad now. She would need super aggressive physical therapy to prevent them from getting any worse." Z2 was asked would you expect the facility to notify the primary care provider if R1 refused to participate in her HEP? Z2 stated, "The primary doctor should have been notified of her refusals."</p> <p>Interview with Z3/Physician on 7-14-22 at 1:49 PM, Z3 was asked if the facility not implementing and encouraging R1 to participate in her home exercise program and her not attending her physical therapy appointments had contributed to R1's contractures becoming worse? Z3 answered, "Sure."</p> <p>Interview with Z4/ Physical Therapist (PT) on 7-14-22 at 2:30 PM, Z4 was informed E3/DON reported that R1 had a history of refusing her home exercise program stemming from her</p>	Z9999		

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Z9999	<p>Continued From page 11</p> <p>6-26-20 physical therapy evaluation. Z4 was then asked if there were any other treatments available to R1 due to her refusal? Z4 stated, "An alternate treatment would've been casting, but R1 refusing would not make it viable. When I saw her on 5-3-22, her heels did not touch the ground, it was worse on the right over the left. She had the contractures when I saw her previously, but they weren't bad like they are now. It would've helped to prevent the contractures from getting worse if she completed her physical therapy and her home exercise program."</p> <p>Interview with Z4/PT on 7-14-22 at 3:25 PM, Z4 was asked if R1 attended all sessions of her PT as ordered on 6-26-20? Z4 stated, "She was seen on 6-26-20 and she did not return after that. I wrote a discharge note for her on 8-25-20." Z4 confirmed providing the facility a HEP after her 6-26-20 physical therapy appointment for R1 to complete at home. Z4 verified the next time he evaluated R1 was when she returned for a one time evaluation on 12-10-20 and stated, "I saw her again on 12-10-20, it was a one time visit to provide R1 with another exercise program to be completed at home. The program included 9 different exercises. 6 were for strengthening, 3 were for range of motion."</p> <p>Interview with E3/Director of Nursing (DON) on 7-14-22 at 3:45 PM, E3 confirmed there is no staff training or documentation for R1's ankle braces or her home exercise programs provided 6-26-20 and 12-10-20 by the physical therapist. E3 was asked if R1 attended all PT appointments as recommended by the PT on 6-26-20? E3 stated, "She ended up getting Covid in July 2020." E3 then confirmed that, although R1's guardian wanted her to attend all medical appointments based on the Covid-19 Risk</p>	Z9999		

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Z9999	<p>Continued From page 12</p> <p>Assessment Tool of 9-22-20, R1 was never rescheduled to complete her physical therapy treatment. E3 was then asked for the PT evaluation notes from her 12-10-20 appointment with Z4? E3 stated, "I have no record of that." E3 was then asked why R1 was not scheduled to see the referring podiatrist and physical therapist until 4-20-22 and 5-3-22? E3 stated, "I have no explanation for that except we had Covid in January and February and she was not rescheduled."</p> <p>Interview with E5/Office Manager on 7-15-22 at 3:41 PM, E5 was asked who is responsible for rescheduling office visits? E5 stated, "That would be me." E5 was asked why R1 was not rescheduled for physical therapy after her 6-26-20 appointment and why there was no record of her 12-10-20 evaluation? E5 stated, "I don't remember."</p> <p>Interview with E1/Administrator on 7-14-22 at approximately 3:50 PM, E1 was asked why the podiatrist and the primary care provider were not notified of R1's refusals to participate in her HEP as well as R1's ankle contractures not being addressed even though she consulted with these providers between 6-21-21 through 10-6-21? E1 stated, "They saw her, I assumed they knew. They are the doctors."</p> <p>. R1's nursing care plan dated 4-26-22 documents in part, "Mobility: Should wear braces on both ankles at all times except when in bed for the night and when bathing. (R1 refuses braces) ...Physical therapy home exercise program..."</p> <p>Interview with E3/DON on 7-14-22 at 3:45 PM, E3 confirmed R1 refuses wearing her ankle braces and has not worn them for a while in addition to</p>	Z9999		

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Z9999	<p>Continued From page 13</p> <p>verifying R1 has refused to participate in her HEP since 3-5-21.</p> <p>R1's nursing care plan dated 4-26-22 documents in part, "Mobility: Uses wheelchair for long distances..."</p> <p>Review of R1's physician's order sheet (POS) dated 7-2022 documents R1 may use a walker for ambulation and does not include the use of a wheelchair.</p> <p>R1's nursing care plan dated 3-22-22 documents in part, "Cerebral Palsy: Ankle foot orthotics (AFOs) to be worn on the right ankle/foot with footwear daily..."</p> <p>Review of R2's POS dated 7-2022 does not include the use of AFO's to be worn daily for R2.</p> <p>Interview with E3/DON on 7-19-22 at 12:55 PM, confirmed nursing should review monthly physician orders for accuracy.</p> <p>(B)</p> <p>#2 Statement of Licensure Violations: 350.620a) 350.1210b) 350.3240a)</p> <p>Section 350.620 Resident Care Policies</p> <p>a) The facility shall have written policies and</p>	Z9999		

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Z9999	<p>Continued From page 14</p> <p>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>b) The facility shall provide all services necessary to maintain each resident in good physical health.</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 met as evidenced by:</p> <p>Based on record review and interview, the facility failed to 1) ensure staff conducted tasks and observations as required and ensure staff completed thorough and accurate documentation affecting 2 of 3 individuals in the sample, (R1, R3) and 13 individuals outside the sample, (R6, R9, R13, R18, R24, R30-R37). 2) Complete an assessment on residents after staff were found to be asleep on their assigned wing, potentially affecting all 44 residents residing at the facility, (R1-R44). 3) Provide adequate staff supervision to assigned facility wing affecting all 44 residents residing at the facility, (R1-R44) when staff were found to be off their designated hall.</p> <p>Findings include:</p>	Z9999		

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Z9999	<p>Continued From page 15</p> <p>The facility's resident roster dated 4-28-2022 documents: R1, R33, R36 function in the Mild Range of Intellectual Disabilities, R18, R24, R31 function in the Moderate Range of Intellectual Disabilities, R3, R13, R34, R37 function in the Severe Range of Intellectual Disabilities, R6, R9, R30, R32, R35 function in the Profound Range of Intellectual Disabilities.</p> <p>The facility's policy titled, "Abuse and/or Neglect of Individuals" dated 11-1-21 documents in part, "Policy: It is the policy of this facility to provide a safe environment for the individuals served that is free from abuse, neglect, and exploitation. All staff/consumer interactions including, but not limited to training, assisting with activities of daily living, implementing behavior management techniques, etc., will be directed at enhancing the development of the individual consumer...Mistreatment of individuals will be defined as: 4. Any willful failure to respond to a consumer's obvious needs or to provide the supervision and care needed..."</p> <p>Interview with E10/Licensed Practical Nurse on 7-16-22 at 4:15 AM, E10 was asked if she has been ever aware of any staff that have been found asleep on their shift overnight? E10 stated, "Yes, E8/Direct Support Person in training (DSPT) and E9/DSP. I reported it to E3/Director of Nursing, E5/Office Manager and E14/DSP Supervisor, I sent a text to them." E10 was then asked when this incident occurred? E10 stated, "A good couple of weeks ago." E10 was asked if she completed any documentation as a result of finding the staff asleep? E10 stated, "No." E10</p>	Z9999		

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Z9999	<p>Continued From page 16</p> <p>denied having the notification text message that was sent to E3, E5 and E14. E10 verified she could not recall what wing E8 and E9 were assigned the night E10 found them asleep.</p> <p>Interview with E5/Office Manager on 7-18-22 at 1:45 PM, E5 denied receiving a text message from E10 to report staff E8 and E9 were found asleep. E5 then stated, "If I did receive a message like that, I would pass that information along to administration, but I don't see anything."</p> <p>Interview with E3/DON on 7-18-22 at 2:02 PM, E3 denied receiving a text message from E10 to report staff E8 and E9 were found asleep.</p> <p>Interview with E14/DSP Supervisor on 7-18-22 at 2:15 PM, E14 denied receiving a text message from E10 to report staff E8 and E9 were found asleep. E14 then stated, "E9 is a good worker and I have never seen or heard about him sleeping on duty."</p> <p>Interview with E2/Executive Director on 7-18-22 at 4:28 PM, E2 stated, "E10 did not report the allegation to the correct staff. E10 should have reported it to me or E1/Administrator and E14/DSP Supervisor. We have no record or knowledge of the incident that E10 found 2 staff asleep."</p> <p>Interview with E2/Executive Director on 7-20-22 at 9:26 AM, E2 was asked if the residents should have been assessed by E10 as a result of discovering staff asleep on their assigned wing? E2 stated, "Yes, an incident report should have been completed. An evaluation of the residents should have been done." E2 was then asked if this would be a nursing function to complete? E2 stated, "I would think so, yes."</p>	Z9999		

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Z9999	<p>Continued From page 17</p> <p>On 7/16/22 client records collected on A-wing hall at 3:00 AM include the following data:</p> <p>Incontinence Record sheets to be completed every 2 hours, include documentation of staff initials to indicate being done, were documented ahead of the scheduled times when reviewed between 4:00 AM through 8:00 AM for R1, R30 and R33.</p> <p>Sleep Data Collection sheets to be completed every hour, include documentation of staff initials to indicate being done, were documented ahead of the scheduled times reviewed between 3:00 AM through 8:00 AM for R31, R33-R36.</p> <p>Elopement Data sheets to be done every 30 minutes, include documentation of staff initials to indicate being done, were documented ahead of the scheduled times reviewed between 3:00 AM through 8:00 AM for R33-R37.</p> <p>Interview with E11/Direct Support Person (DSP) on 7-16-22 at 3:10 AM, E11 was asked if is ok to document for times that haven't occurred yet? E11 stated, "Probably not."</p> <p>Client records collected on B-wing hall at 3:12 AM include the following data:</p> <p>Turn Schedule sheets to be completed every 2 hours, include documentation of staff initials to indicate being done, were documented ahead of the scheduled times reviewed between 4:00 AM through 6:00 AM for R3, R6, R9, R13.</p>	Z9999		

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Z9999	<p>Continued From page 18</p> <p>Incontinence Record sheets to be completed every 2 hours, include documentation of staff initials to indicate being done, were documented ahead of the scheduled times reviewed between 4:00 AM through 8:00 AM for R18.</p> <p>Sleep Data Collection sheets to be completed every hour, include documentation of staff initials to indicate being done, were documented ahead of the scheduled times reviewed between 4:00 AM through 9:00 AM for R24.</p> <p>Interview with E12/DSP on 7-16-22 at 3:15 AM, E12 was asked why are future times documented? E12 stated, "Because that's the way I'm going to turn them." E12 was asked, are you suppose to document on times that haven't occurred yet? E12 stated, "No."</p> <p>Observation on 7-16-22 at 2:24 AM: E10/Licensed Practical Nurse and E11/Direct Support Person (DSP) were sitting on the front porch of the facility. E13/DSP then entered the front porch.</p> <p>Observation on 7-16-22 at 2:25 AM: E10, E11 and E13 entered the building. E11 was observed to walk into A-wing classroom.</p> <p>Observation on 7-16-22 at 2:30 AM: E12/DSP entered facility front entrance and began walking towards B-wing hall.</p> <p>Interview with E11/DSP on 7-16-22 at 3:00 AM, E11 stated, "We get two 15 minutes breaks and a 30 minute lunch." E11 was asked is it ok to leave a unit unattended? E11 stated, "Yes, regardless if I'm on my phone or not, I can still see if someone comes into the dining room. I can see through the window."</p>	Z9999		

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Z9999	<p>Continued From page 19</p> <p>Interview with E10/LPN on 7-16-22 at 4:15 AM, E10 stated, "There should be someone on the units, C-wing is different, the residents can make their needs known. E11 and I shouldn't have been both outside when you arrived."</p> <p>Interview with E1/Administrator on 7-18-22 at 12:23 PM, E1 was asked if it is ever ok for staff to leave their assigned unit unattended? E1 stated, "No."</p> <p>(B)</p>	Z9999		