

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: IL 6000731	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 12/16/2022
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NAME OF PROVIDER OR SUPPLIER BARRY COMMUNITY CARE CENTER	STREET ADDRESS, CITY, STATE, ZIP CODE 1313 PRATT STREET BARRY, IL 62312
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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
S 000	Initial Comments Annual Licensure and Certification Survey	S 000		
S9999	Final Observations Statement of Licensure Violations 300.610a) 300.1210b) 300.1210c) 300.3240b) 300.3240c) 300.3240e) 300.3240g) Section 300.610 Resident Care Policies 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. Section 300.1210 General Requirements for Nursing and Personal Care b) The facility shall provide the necessary care and services to attain or maintain the highest	S9999	Attachment A Statement of Licensure Violations	

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE _____ TITLE _____ (X6) DATE _____

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S9999	<p>Continued From page 1</p> <p>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>c) Each direct care-giving staff shall review and be knowledgeable about his or her residents' respective resident care plan.</p> <p>Section 300.3240 Abuse and Neglect</p> <p>b) A facility employee or agent who becomes aware of abuse or neglect of a resident shall immediately report the matter to the Department and to the facility administrator. (Section 3-610(a) of the Act)</p> <p>c) A facility administrator who becomes aware of abuse or neglect of a resident shall immediately report the matter by telephone and in writing to the resident's representative and to the Department. (Section 3-610(a) of the Act)</p> <p>e) When an investigation of a report of suspected abuse of a resident indicates, based upon credible evidence, that another resident of the long-term care facility is the perpetrator of the abuse, that resident's condition shall be immediately evaluated to determine the most suitable therapy and placement for the resident, considering the safety of that resident as well as the safety of other residents and employees of the facility. (Section 3-612 of the Act)</p>	S9999		

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S9999	<p>Continued From page 2</p> <p>g) A facility shall comply with all requirements for reporting abuse and neglect pursuant to the Abused and Neglected Long Term Care Facility Residents Reporting Act.)</p> <p>These Requirements were not met evidenced by:</p> <p>Based on interview and record review, the facility failed to prevent resident to resident sexual abuse for 2 of 6 residents (R41, R206) reviewed for abuse in the sample of 23. This failure resulted in R41 being sexually fondled by R206 without her ability to consent and based upon a reasonable person approach this would have caused feelings of violation, anxiety, fear, humiliation, and anger.</p> <p>Findings include:</p> <p>R41's Resident Information Sheet documents R41 has diagnoses of unspecified dementia and anxiety disorder.</p> <p>R41's Minimum Data Set (MDS) dated 10/18/2022 documents a Brief interview of mental status score of 00, which indicates severe cognitive impairment.</p> <p>R206's MDS dated 6/7/2022 documents a brief interview of mental status score of 15, which indicates R206 is cognitively intact.</p> <p>R206's Care Plan Focus, with initiation date of 3/3/22, documents "The resident has a behavior problem." The Care Plan Intervention, initiation date of 4/25/22, documented "Resident has had multiple incidents of inappropriate touching of female staff."</p>	S9999		

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S9999	<p>Continued From page 3</p> <p>The Facility's "Resident Abuse Investigation Report" regarding R41 and R206 documented a sexual abuse incident occurred on 5/31/22 at 10:45 PM at the nurse's station which was witnessed by V4, Licensed Practical Nurse (LPN). The Report documented V4 walked around nurse's station and found R206 with his hand under R41's shirt fondling R41's breast.</p> <p>R41's Progress Note dated 5/31/2022 at 10:45 PM documented "Walked around nurses' station to find male resident fondling res. (resident) breast. Male res. redirected and sent to room. Will inform Day shift nurse to inform proper persons."</p> <p>R41's Progress Note dated 6/1/2022 at 6:50 AM documents "Heard residents talking walked around nurses' station and found resident with his hand in female resident's shirt fondling her breast, redirected resident, and sent resident to his room. Message sent for DON (Director of Nursing) to call."</p> <p>R206's Progress Notes dated 5/31/2022 at 10:45 PM documents "Walked around nurses station found res. with his hand inside a female residents shirt fondling her breast, res. redirected and sent to his room."</p> <p>On 12/14/22 at 9:39 AM, V2, Director of Nursing (DON) stated on 5/31/2022 at 10:45 PM an abuse allegation occurred between R41 and R206, and V2 was notified at 6:30 AM on 6/1/2022 of this abuse allegation. V2 states that V4, Licensed Practical Nurse (LPN) was the employee who witnessed the sexual abuse on 5/31/2022 at 10:45 PM between R41 and R206. V2 states that R206 had multiple sexual behaviors with staff prior to this occurrence and that R206 has had</p>	S9999		

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S9999	<p>Continued From page 4</p> <p>multiple medication changes to decrease this behavior. V2 states she is not aware of what R206 stated to R41. V2 states she did not ask V4 what R206 said to R41. V2 stated that V4 was an agency nurse and no longer works at the facility.</p> <p>The Facility's Abuse, Prevention and Prohibition Policy, revised November 2018, documents the "Statement of Intent" as "Each resident has the right to be free from abuse, corporal punishment and involuntary seclusion. Residents must not be subjected to abuse by anyone, including, but not limited to facility staff, other residents, consultants or volunteers, staff of other agencies serving the resident, family member or legal guardians, friends, or other individuals."</p> <p>(B)</p>	S9999		