

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  145045	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED  08/18/2024
NAME OF PROVIDER OR SUPPLIER  Pearl of Naperville, The		STREET ADDRESS, CITY, STATE, ZIP CODE  200 Martin Avenue Naperville, IL 60540	

For information on the nursing home's plan to correct this deficiency, please contact the nursing home or the state survey agency.

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (Each deficiency must be preceded by full regulatory or LSC identifying information)
<p>F 0677</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Provide care and assistance to perform activities of daily living for any resident who is unable.</p> <p><b>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 34410</b></p> <p>Based on observation, interview, and record review, the facility failed to provide personal care to dependent residents.</p> <p>This applies to 6 of 7 residents (R2, R3, R4, R5, R6, and R7) reviewed for activities of daily (ADL) care in a sample of 7.</p> <p>The Findings Include:</p> <p>1. R2 is a [AGE] year-old male with cognition intact as per the MDS (Minimum Data Set), dated 7/5/24. The MDS also documented R2 (deaf and blind) requires substantial assistance with toileting hygiene.</p> <p>On 8/17/24 at 10:25 AM, R2 was observed with a soaked incontinent brief with urine and feces.</p> <p>On 8/17/24 at 10:25 AM, V7 (Manager on Duty / MOD/Licensed Practical Nurse/LPN) stated, Our staff is supposed to check on residents every two hours and as needed. They are shorthanded today.</p> <p>A review of R2's incontinent care plan documents: Clean peri-area after each incontinent episode.</p> <p>2. R3 is a [AGE] year-old female with mild cognitive impairment as per the MDS dated [DATE].</p> <p>On 8/17/24 at 10:32 AM, R3 stated, I have been waiting for 30 minutes to be changed. I was changed at 8:30 PM last night. Nobody has changed me yet.</p> <p>On 8/7/24 at 10:35 AM, V8 (Certified Nursing Assistant/CNA) transferred R3 to the wheelchair to take her to the bathroom. V8 stated R3 wanted to be changed in the bathroom after she used the toilet. R3 was observed with a urine-soaked incontinent brief with discoloration (light blackish).</p> <p>A review of R3's incontinent care plan documents: Check and as required for incontinence. Wash, rinse, and dry perineum.</p> <p>3. R4 is a [AGE] year-old male with moderate cognitive impairment as per the MDS dated [DATE].</p> <p>On 8/17/24 at 10:05 AM, V7 checked on R4 and observed a soaked, incontinent brief with stool.</p> <p>(continued on next page)</p>

Any deficiency statement ending with an asterisk (\*) denotes a deficiency which the institution may be excused from correcting providing it is determined that other safeguards provide sufficient protection to the patients. (See instructions.) Except for nursing homes, the findings stated above are disclosable 90 days following the date of survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosable 14 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
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<p>F 0677</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>On 8/17/24 at 10:07 AM, V7 stated, (V10, Certified Nursing Assistant) is the assigned CNA for R4. (V10) just came at 9:30 AM, and I am going to change (R4).</p> <p>A review of R4's incontinent care plan documents: Clean peri-area with each incontinent episode. Check for incontinence. Wash, rinse, and dry perineum. Change clothing as needed after incontinent episodes.</p> <p>4.R5 is a [AGE] year-old female admitted on [DATE].</p> <p>On 8/17/24 at 9:55 AM, R5 was on her bed with the feeding pump beeping.</p> <p>On 8/17/24 at 9:58 AM, V13 (R5's Husband) stated, The pump was beeping for a while, and nobody is coming. I came here at around 8:00 AM, and nobody has changed my wife since I came.</p> <p>On 8/17/24 at 10:00 AM, V7 checked on R5, and observed an external urinary catheter with urine leaked onto the incontinent brief and with a bowel movement. V7 stated she is going to change R5.</p> <p>A review of R5's incontinent care plan documents: Clean peri-area with each incontinent episode. Check for incontinence. Wash, rinse, and dry perineum. Change clothing as needed after incontinent episodes.</p> <p>5. R6 is a [AGE] year-old female with cognition intact as per the MDS dated [DATE].</p> <p>On 8/17/24 at 9:40 AM, R6 said, I called 10 minutes ago to change my brief. They changed me before 7:00 AM by the night staff.</p> <p>On 8/17/24 at 9:45 AM, V11 (CNA) stated, I didn't have a chance to change (R6). I started at 6:00 AM, and I was the only CNA in this hallway. Another one just showed up now. I was passing trays and feeding residents. We need more staff on the floor.</p> <p>A review of R6's incontinent care plan documents: Provide peri care after each incontinent episode.</p> <p>6. R7 is a [AGE] year-old female with cognition intact as per the MDS dated [DATE].</p> <p>On 8/17/24 at 9:20 AM, R7 stated she is wet and is waiting to be changed.</p> <p>On 8/17/24 at 9:10 AM, V6 (Certified Nursing Assistant / CNA) stated, I started my shift at 6:00 AM. I have 14 residents, and four of them require feeding assistance. I was feeding the residents, and I haven't had a chance to change (R7) yet.</p> <p>A review of R7's incontinent care plan documents: Clean peri-area with each incontinent episode. Check for incontinence. Wash, rinse, and dry perineum. Change clothing as needed after incontinent episodes.</p> <p>On 8/17/24 at 1:20 PM, V2, Director of Nursing, stated, Our staff is supposed to provide incontinent care every two hours and as requested by residents.</p> <p>(continued on next page)</p>

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<p>F 0677</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>The facility presented Urinary Continence and Incontinence Assessment and Management policy, revised on 4/18/24, documents: It is a standard of care to provide incontinent care as needed.</p>		

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<p>F 0725</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Provide enough nursing staff every day to meet the needs of every resident; and have a licensed nurse in charge on each shift.</p> <p><b>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY**</b> 34410</p> <p>Based on observation, interview, and record review, the facility failed to provide adequate staffing to meet the care needs of residents. Staffing was insufficient to provide residents with assistance in Activities of Daily Living.</p> <p>This applies to 6 of 7 residents (R2-R7) reviewed for staffing concerns in a sample of 7.</p> <p>Findings include:</p> <p>On 8/17/24 at 8:50 AM, V4 (Licensed Practical Nurse / LPN) stated, We have 80 residents in the building and only four nurses and four CNAs on the floor now. We need at least 5-6 CNAs to provide resident care. I heard another CNA is coming late, around 9:30 AM. CNAs work from 6:00 AM to 2:00 PM.</p> <p>1.R2 is a [AGE] year-old male with cognition intact as per the MDS (Minimum Data Set) dated 7/5/24. The MDS also documented R2 (deaf and blind) requires substantial assistance with toileting hygiene. R2 was observed on 8/17/24 at 10:25 AM, with a soaked incontinent brief with urine and feces.</p> <p>On 8/17/24 at 10:25 AM, V7 (Manager on Duty / MOD/Licensed Practical Nurse/LPN) stated, Our staff is supposed to check on residents every two hours and as needed. They are shorthanded today.</p> <p>2. R3 is a [AGE] year-old female with mild cognitive impairment as per the MDS dated [DATE].</p> <p>On 8/17/24 at 10:32 AM, R3 stated, I have been waiting for 30 minutes to be changed. I was changed at 8:30 PM last night. Nobody has changed me yet.</p> <p>On 8/7/24 at 10:35 AM, V8 (Certified Nursing Assistant/CNA) transferred R3 to the wheelchair to take her to the bathroom. V8 stated R3 wanted to be changed in the bathroom after she used the toilet. R3 was observed with a urine-soaked incontinent brief with discoloration (light blackish).</p> <p>3. R4 is a [AGE] year-old male with moderate cognitive impairment as per the MDS dated [DATE].</p> <p>On 8/17/24 at 10:05 AM, V7 checked on R4 and observed a soaked, incontinent brief with stool. V7 stated, (V10) is the assigned CNA for (R4). (V10) just came at 9:30 AM, and I am going to change (R4).</p> <p>4. R5 is a [AGE] year-old female admitted on [DATE].</p> <p>On 8/17/24 at 9:55 AM, R5 was observed in bed with the feeding pump beeping. V13 (R5's Husband) stated, The pump was beeping for a while, and nobody is coming. I came here at around 8:00 AM, and nobody had changed my wife since I came.</p> <p>On 8/17/24 at 10:00 AM, V7 checked on R5 and observed an external urinary catheter with urine leaked onto the incontinent brief and with a bowel movement. V7 stated she is going to change R5.</p> <p>5. R6 is a [AGE] year-old female with cognition intact as per the MDS dated [DATE].</p> <p>(continued on next page)</p>		

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