

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 145257	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 11/27/2024
NAME OF PROVIDER OR SUPPLIER Crystal Pines Rehab & Hcc		STREET ADDRESS, CITY, STATE, ZIP CODE 335 North Illinois Avenue Crystal Lake, IL 60014	

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 0656</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Develop and implement a complete care plan that meets all the resident's needs, with timetables and actions that can be measured.</p> <p>35178</p> <p>Based on observation, interview, and record review the facility failed to develop a comprehensive care plan that provided interventions for a resident's known behaviors for 1 of 9 residents (R2) reviewed for Care Plans in the sample of 9.</p> <p>Findings include:</p> <p>R2's Careplan printed on 11/25/24 did not address R2's behavior of requesting staff to buy things for her or provide interventions for staff to implement when the behaviors are present.</p> <p>On 11/25/24 at 9:45AM, R2 said, I use to have a CNA-Certified Nursing Assistant that would buy things from an on-line retailer for me. We both eventually got in trouble for it. I have a history of having problems with handling money.</p> <p>On 11/27/24 at 9:35AM, V3 CNA said, R2 requested I buy her something. I told her I could not. R2 insisted and gave me the money. I intended to give it back later in my shift. I got busy and forgot. I gave it back to her when I returned the next day. I was not informed R2's behavior of continually requesting staff to buy things for her.</p> <p>On 11/25/24 at 9:54 AM, V1 Administrator said, I dispense the funds for the residents. R2 gets \$60.00 per month. R2 will usually take the entire amount out of her account in one lump sum. R2 does ask staff to go to the store for her.</p> <p>On 11/27/24 at 9:09AM, V1 Administrator said, V3 CNA is new to the facility. The more experienced CNA's know how to defer requests to management or activities. There are staff that can purchase items for the residents, the CNA is not appropriate to perform that task.</p> <p>R2's Abuse Investigation dated 11/14/2024 shows, on 11/14/2024 R2 approached a staff member stating she gave a CNA money to buy her snacks. She couldn't remember who, but the CNA did not bring her the snacks. R2 described the CNA. Her description matched two CNAs. Both CNAs were interviewed. V3 (CNA) stated R2 insisted she take the money to buy snacks. Staff member was educated on not accepting money from residents despite their insistence.</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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