

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  145476	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED  12/20/2024
NAME OF PROVIDER OR SUPPLIER  Oregon Living and Rehabilitation Center		STREET ADDRESS, CITY, STATE, ZIP CODE  811 South 10th Street Oregon, IL 61061	

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 0584</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Honor the resident's right to a safe, clean, comfortable and homelike environment, including but not limited to receiving treatment and supports for daily living safely.</p> <p><b>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY**</b> 38488</p> <p>Based on observation, interview, and record review the facility failed to provide a homelike environment for 4 of 4 residents (R1, R2, R6, R7) reviewed for residents rights in the sample of 8.</p> <p>The findings include:</p> <p>R1's face sheet showed she was admitted to the facility 9/14/22 with diagnoses to include acute respiratory failure with hypoxia, hemiplegia and hemiparesis following cerebrovascular disease, Type 2 diabetes, hypertension, hyperlipidemia, bipolar disorder, and anxiety disorder. R1's facility assessment dated [DATE] showed she has no cognitive impairment.</p> <p>R2's face sheet showed he was admitted to the facility 12/9/22 with diagnoses to include atherosclerotic heart disease, Type 2 diabetes, acute cystitis without hematuria, hyperlipidemia, mood disorder, anxiety disorder, and depression. R2's facility assessment dated [DATE] showed he has no cognitive impairment.</p> <p>R6's face sheet showed he was admitted to the facility 9/1/16 with diagnoses to include epilepsy, abnormalities of gait and mobility, major depressive disorder, peripheral vascular disease, and osteoarthritis. R6's facility assessment dated [DATE] showed he has no cognitive impairment.</p> <p>R7's face sheet showed she was admitted to the facility on [DATE] with diagnoses to include acute kidney failure, hypertension, hyperkalemia, dehydration, and major depressive disorder. R7's facility assessment dated [DATE] showed she has no cognitive impairment.</p> <p>On 12/20/24 at 1:01 PM, R6 said I am the resident council president. We have been asking about a clock in the dining room. You look at the clock to see when the next thing is going to be. They said they haven't replaced it because it has something to do with the scheme of the decorations. We don't know why we can't just get a solid color or something . Someone went and got a small digital clock and put it next to the sink in the corner yesterday but you can't see it. The one that was in there at one time was very big and easy to see. It had fallen off the wall and broke. That was a long time ago. When I took over as resident council president, the previous president had been trying to get a clock in the dining room too. I've been president for over a year now. A long while ago there were two clocks but we just want one. I want to be able to know what time it is, how long before the next activity, how long until a meal, I'm pretty active here and doing things all the time. We discuss this at almost every resident council meeting and we will be discussing it at the next one as well.</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 0584</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>On 12/20/24 at 10:39 AM, R1 said, . They told us we can't have a clock in the dining room because it doesn't 'fit with the decor'. We really would like one in the dining room but they basically said 'screw you, you aren't getting one' . We [the residents] offered to purchase the clock ourselves but she said no. We want a clock for during meals, during resident council meetings, and during activities .</p> <p>On 12/20/24 at 10:51 AM, R2 said, There is no clock in the dining room because the regional lady said she is not going to repair or replace decorations . we want one in the dining room so we can tell what time it is and know if you need to finish up what you are doing so you can get to an appointment or something. People just like to know what time it is in general. It has been discussed in resident council meetings and the regional lady was there.</p> <p>On 12/20/24 at 1:32 PM, R7 said, We need a clock in the cafeteria. We all talk about needing a clock in the dining room all the time. The person who owns this place thinks its too 'tacky' to have a clock. We talked about it in resident council. There still isn't a clock in there that I know of. We want a clock in there so we can see what time it is. We are in there a long time . we just would like to know what time it is.</p> <p>On 12/20/24 at 1:22 PM, V4 (Activity Aide) said, The residents are always asking what time it is and complain to me that there is no clock in the dining room during activities. I told them they should bring it up in resident council and they have said that they have brought it up before. A resident bumped into it and it fell and broke. It was never replaced and I don't know why. They just want to see the time. If they had a clock in there it would help them with activities. I was here on Wednesday (12/18/24) and that little digital one was not in there. I was off yesterday so when I came in today, I saw one of the other staff members showing a resident that it was there today.</p> <p>On 12/20/24 at 2:35 PM, V1 (Administrator) said she was looking through old resident council meeting notes and she saw the residents were asking about a clock in February 2024. V1 said it was decided at the time (February 2024) that a clock is a decoration and so it would not be replaced. V1 said one of the meetings she has been invited to since she became the administrator (7 months ago) the dining room clock was brought up again but she was unable to recall what was discussed other than that the issue had been resolved.</p> <p>On 12/20/24 at 2:35 PM, V9 (Regional Director of Clinical Operations) who was present during V1 (Administrator's) interview interjected a clock is a decoration and would not be replaced. V9 said the issue of the resident's wanting a clock in the dining room was resolved previously. V9 said it was not resolved to the satisfaction of the residents because there was no clock placed in the dining room. V9 said the resolution was that resident's were told they can ask a staff member what time it is, the facility could assist the resident in obtaining a watch by contacting their power of attorney and requesting a watch, or the residents can go back to their room or another area of the facility and check the time. V9 said the small digital clock was placed in the dining room the day before the surveyor came into the facility.</p> <p>The State of Illinois Residents' Rights for People in Long-Term Care Facilities booklet with revision date of 5/18 showed, . You have the right to . Your facility must provide services to keep your physical and mental health, and sense of satisfaction .</p>		