

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 145500	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 03/14/2025
NAME OF PROVIDER OR SUPPLIER Hillsboro Rehab & Hcc		STREET ADDRESS, CITY, STATE, ZIP CODE 1300 East Tremont Street Hillsboro, IL 62049	

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>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 42108</p> <p>Based on interview and record review, the facility failed to supervise and provide showers as scheduled for 4 of 4 (R1, R2, R3, R5) residents in a sample of 6.</p> <p>Findings include:</p> <p>The facility's Resident Council Minutes, dated 3/5/2025, documents, New Business/Department Discussions: Still short staffed, call lights aren't being answered. There is not enough in house staff, too agency workers that aren't doing their jobs correctly. Administration: Too short staffed, today was shower day but (R2) had to have a bed bath because there wasn't enough staff to care for everyone and still get showers done.</p> <p>1. R1's Care Plan, dated 5/14/2021, documents R1 has an ADL (activity of daily living) Self Care Performance Deficit. It also documents BATHING: R1 requires supervision with bathing. Staff provide supervision as needed.</p> <p>R1's Minimum Data Set (MDS), dated [DATE], documents R1 is cognitively intact.</p> <p>On 3/12/2025 at 1:20 PM, R1 stated he is the president of resident council. R1 stated lack of staff is an ongoing concern. R1 stated this concern is addressed in the resident council meeting. R1 stated they voice these concerns, but feel they are not being heard. R1 stated at times, there is 1 nurse for the entire building. R1 stated the CNAs (Certified Nurse's Assistants) are short as well. R1 stated, Showers are not being completed. It's not enough. You must have staff to do these things and we don't. R1 stated he gets his showers because he does them himself. R1 stated he tells the staff and goes in the shower alone. R1 stated he is not supervised by anyone but himself. R1 stated they tell him if he goes in on his own he can get a shower, because they don't have enough staff to supervise him. R1 stated the staff will tell them that they can't do something because they don't have enough staff.</p> <p>2. R2's Care Plan, dated 7/7/2021, documents Care/ADL Preferences Staff will honor my preferences while caring for me. I prefer a shower 3 x week in the mornings. It also documents 1/18/2024 R2 has an ADL Self Care Performance Deficit r/t (related to) obesity, respiratory failure, and heart failure. BATHING: the resident requires 1 staff participation with bathing.</p> <p>R2's MDS, dated [DATE], documents R2 is cognitively intact and requires substantial/maximal assistance with bathe/showers.</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 3/12/2025 at 11:30 AM, R2 stated she is scheduled to get a shower 3 times a week. R2 stated she does not always get a shower. R2 stated because they have 1 staff on the hall they can't do the shower, and if she wants to be cleaned, she would have to get a bed bath. R2 stated she wants a shower. R2 stated she is a large woman and requires the mechanical lift to get up and get in the shower. R2 stated when there is only 1 staff, they can't use the mechanical lift. R2 stated if there is one person she does not get cleaned well, and its rushed. R2 stated it takes a long time to perform the task. When asked how she knows it's because of staffing? R2 stated the staff tells her this is the reason.</p> <p>3. R3's Admission Record documents R3 was admitted [DATE] with diagnosis of Cerebral Infarction due to Embolism of Right Anterior Artery.</p> <p>R3's Care Plan, dated 2/3/2025, documents the resident has an ADL Self Care Performance Deficit Impaired balance. It continues o BATHING: the resident requires X1 staff participation with bathing. Date Initiated: 01/28/2025 and Revision on: 02/03/2025.</p> <p>R3's MDS, dated [DATE], documents R3 is cognitively impaired and requires substantial/maximal assist with bathing.</p> <p>R3's Shower schedule was Monday and Thursday night shift.</p> <p>On 3/14/2025, R3's Electronic Health Record (EHR) documents Shower/Bath documents No data found for 30 days back.</p> <p>On 3/14/2025 at 10:30 AM, the facility provided R3's Nurse Skin Inspection report, dated 2/27/2025.</p> <p>As of 3/15/2025 at 12:30 PM, the facility did not provide shower documentation for the following dates 2/3/2025, 2/6/2025, 2/10/2025, 2/13/2025, 2/17/2025, 2/20/2025, 2/24/2025, 3/3/2025, 3/6/2025, and 3/10/2025.</p> <p>On 3/12/2025 at 11:21 AM, when asked if she was receiving showers? R3 stated, No. When asked if she was getting a bath? R3 stated, No.</p> <p>On 3/13/2025 at 3:10 PM, V9, CNA, stated R3 is alert and understands what is being said. R3 has difficulty with words. V9 stated R3 can answer yes and no questions appropriately.</p> <p>4. R5's Care Plan, dated 2/14/2024, documents the resident has an ADL Self Care Performance Deficit. It continues BATHING: the resident is totally dependent on staff to provide a bath Bi-weekly and as necessary.</p> <p>R5's MDS, dated [DATE], documents R5 is cognitively impaired and dependent on staff for bathing.</p> <p>The facility provided the facility's shower schedule. R3 was scheduled for showers on Tuesday and Saturday.</p> <p>On 3/14/2025 at 10:30 AM, the facility provided R5's Nurse Skin Inspection report, dated 3/1/2025, 3/4/2025, 3/8/2025, and 3/11/2025.</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>As of 3/15/2025 at 12:30 PM, the facility did not provide shower documentation for the following dates 2/1/2025, 2/4/2025, 2/8/2025, 2/11/2025, 2/18/2025, 2/22/2025, and 2/25/2025.</p> <p>On 3/12/2025 at 10:00 AM, V2, Director of Nursing/DON, stated they have some staffing challenges and are using agency to help fill in.</p> <p>On 3/12/2025 at 1:40 PM V8, CNA, stated showers are not a priority. V8 stated when they are staffed, they can get them done. V8 stated because they are short on staff, everything can't get done. V8 stated they clean the private areas and clean the residents when they are incontinent or go to the toilet. V8 stated they prioritize, and when they are short, restorative and showers are not priority when you have the hall alone.</p> <p>On 3/12/2025 at 2:19 PM, V7, CNA, stated the facility does have a staffing problem. V7 stated when they are short. they have to prioritize. V7 stated showers and restorative are not priority. V7 stated sometimes they don't get done.</p> <p>On 3/12/2025 at 2:05 PM, V6, CNA, stated she works the unit. V6 stated, For the most part, we are staffed on the unit because we got a staffing tag. At times, is 1 CNA. The residents are always moving and require being always watched, and showers are not done. You can't leave the residents unattended for that long. The showers are documented on the shower sheet, identified the nursing skin sheet, and in the computer.</p> <p>On 3/13/2025 at 3:30 PM, V2, Director of Nursing, stated they do not have a specific policy for showers. V2 stated she was aware of the challenges in the facility, and is working to correct them.</p> <p>The facility's Activities of Daily Living, not dated, documents this facility provides each resident with care, treatment, and services according to the resident's individualized care plan.</p>

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<p>F 0688</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Provide appropriate care for a resident to maintain and/or improve range of motion (ROM), limited ROM and/or mobility, unless a decline is for a medical reason.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 42108</p> <p>Based on interview and record review, the facility failed to provide restorative services for 1 of 3 residents (R3) reviewed for nursing programs in a sample of 5.</p> <p>Findings include:</p> <p>R3's Admission Record documents R3 was admitted [DATE] with diagnosis of Cerebral Infarction due to Embolism of Right Anterior Artery.</p> <p>R3's Care Plan, dated 2/3/25, documents the resident has an ADL (activity of daily living) Self Care Performance Deficit Impaired balance. RESTORATIVE PROGRAM - Bed Mobility: Staff will assist and encourage R3 to do as much as she can, requires 2 staff to reposition in bed. [RNA,CNA,ResN] (restorative nurse's aide, certified nurse's assistant, restorative nurse) ? Requires documentation. RESTORATIVE PROGRAM - Grooming: R3 requires verbal cueing, Staff will hand R3 a washcloth to bring to face to wash face and will assist with brushing hair.</p> <p>R3's MDS, dated [DATE], documents R3 is cognitively impaired and requires substantial/maximal assist with adls.</p> <p>R3's Electronic Record does not document restorative programs performed.</p> <p>R3's Physical Therapy (PT) Discharge (D/C) Summary, dated 1/28/2025, documents R3 was discharged from PT 2/18/2025. It also documents Discharge instructions: The patient will remain in LTC (Long Term Care) setting on RNP (Restorative Nursing Program) for PROM (Passive Range of Motion) and transfers. Restorative program established/trained = Restorative Range of Motion program, Restorative transfer.</p> <p>R3's Occupational Therapy Discharge Summary, dated 2/27/2025, documents R3 was discharged from Occupational Therapy on 2/27/2025. It also documents discharge instructions: Patient d/c'd to this facility. Would benefit from continued therapy services when insurance allows. Restorative Program established/trained = Restorative program on Range of Motion.</p> <p>R3's Care Plan and tasks do not document these restorative programs.</p> <p>On 3/12/2025 at 1:40 PM, V8, CNA, stated showers are not a priority. V8 stated when they are staffed they can get them done. V8 stated because they are short on staff everything can't get done. V8 stated they clean the private areas and clean the residents when they are incontinent or go to the toilet. V8 stated they prioritize, and when they are short, restorative and showers are not priority when you have the hall alone. V8 stated R3 doesn't have any restorative programs. V8 stated R3 was getting therapy.</p> <p>On 3/12/2025 at 2:19 PM, V7, CNA, stated the facility does have a staffing problem. V7 stated when they are short, they have to prioritize. V7 stated showers and restorative are not priority. V7 stated sometimes they don't get done.</p> <p>(continued on next page)</p>		

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<p>F 0688</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>On 3/12/2025 at 2:05 PM, V6, CNA, stated she works the unit. V6 stated, For the most part, we are staffed on the unit, because we got a staffing tag. At times, there is 1 CNA. The residents are always moving, and require being always watched, and showers are not done. You can't leave the residents unattended for that long.</p> <p>On 3/13/2025 at 1:00 PM, V3, Therapy Director, stated, (R3) came to the facility from hospital with a recent stroke. (R3) initially recieved all 3 disciplines. (R3) is currently reciving speech therapy. (R3) has been discharged from therapy. Upon discharge, a restorative program was put in place, and the nursing staff was trained. The restorative program is to be completed by the nursing department.</p> <p>On 3/13/2025 at 2:42 PM, V11, CNA, stated they don't have restorative aides. V11 stated the CNAs do the programs and document it in the computer when completed.</p> <p>On 3/13/2025 at 3:00 PM, V12, CNA, stated they do the restorative programs. V12 stated they document it in the computer.</p> <p>On 3/13/2025 at 3:10 PM, V10, CNA stated R3 is on therapy and does not get therapy.</p> <p>On 3/13/2025 at 3:30 PM, V2, Director of Nursing stated they currently do not have a Restorative Nurse or aides. V2 stated the duties are split up, and they are working at getting it taken care of.</p> <p>The facility's Restorative Nursing Policy and Procedure, not dated, documents it is the policy of this facility to provide restorative nursing which promotes the resident's ability to adapt and adjust to living as independently and safely as possible.</p>

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<p>F 0725</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Many</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>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 42108</p> <p>Based on interview and record review, the facility failed to ensure sufficient nursing staff to provide nursing and related services to meet the residents' needs for 1 of 3 residents reviewed for staffing in a sample of 6. This has the potential to affect all residents living in the facility.</p> <p>Findings include:</p> <p>The facility's Resident Council Minutes, dated 3/5/205, documents, New Business/Department Discussions: Still short staffed, call lights aren't being answered There is not enough in house staff, too agency workers that aren't doing their jobs correctly. Administration: Too short staffed, today was shower day but (R2) had to have a bed bath because there wasn't enough staff to care for everyone and still get showers done.</p> <p>1. R1's Care Plan, dated 5/14/2021, documents R1 has an ADL (activity of daily living) Self Care Performance Deficit. It also documents BATHING: R1 requires supervision with bathing. Staff provide supervision as needed.</p> <p>R1's Minimum Data Set, dated [DATE], documents R1 is cognitively intact.</p> <p>On 3/12/2025 at 1:20 PM, R1 stated he is the president of resident council. R1 stated lack of staff is an ongoing concern. R1 stated this concern is addressed in the resident council meeting. R1 stated they voice these concerns but feel they are not being heard. R1 stated at times there is 1 nurse for the entire building. R1 stated the CNAs (Certified Nurse's Assistant) are short as well. R1 stated, Showers are not being completed. It's not enough. You must have staff to do these things and we don't. R1 stated he gets his showers because he does them himself. R1 stated he tells the staff and goes in the shower alone. R1 stated he is not supervised by anyone but himself. R1 stated they tell him if he goes in on his own because they don't have enough staff to supervise him. R1 stated the staff will tell them that they can't do something because they don't have enough staff.</p> <p>2. R2's Care Plan, dated 7/7/2021, documents Care/ADL Preferences Staff will honor my preferences while caring for me. I prefer a shower 3 x week in the mornings. It also documents 1/18/2024 R2 has an ADL Self Care Performance Deficit r/t (related to) obesity, respiratory failure, and heart failure. BATHING: the resident requires 1 staff participation with bathing.</p> <p>R2's MDS, dated [DATE], documents R2 is cognitively intact and requires substantial/maximal assistance with bathe/showers.</p> <p>(continued on next page)</p>

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<p>F 0725</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Many</p>	<p>On 3/12/2025 at 11:30 AM, R2 stated she is scheduled to get a shower 3 times a week. R2 stated she does not always get a shower. R2 stated because they have 1 staff on the hall they can't do the shower, and if she wants to be cleaned, she would have to get a bed bath. R2 stated she wants a shower. R2 stated she is a large woman and requires the mechanical lift to get up and get in the shower. R2 stated when there is only 1 staff, they can't use the mechanical lift. R2 stated if there is one person, she does not get cleaned well, and it's rushed. R2 stated it takes a long time to perform the task. When asked how she knows it's because of staffing? R2 stated the staff tells her this is the reason.</p> <p>3. R3's Admission Record documents R3 was admitted [DATE] with diagnosis of Cerebral Infarction due to Embolism of Right Anterior Artery.</p> <p>R3's Care Plan, dated 2/3/2025, documents the resident has an ADL Self Care Performance Deficit Impaired balance. It continues BATHING: the resident requires X1 staff participation with bathing. RESTORATIVE PROGRAM - Bed Mobility: Staff will assist and encourage R3 to do as much as she can, requires 2 staff to reposition in bed. [RNA,CNA,ResN] (restorative nurse's aide, certified nurse's assistant, restorative nurse) ? Requires documentation. RESTORATIVE PROGRAM - Grooming: R3 requires verbal cueing, Staff will hand (R3) a washcloth to bring to face to wash face and will assist with brushing hair.</p> <p>R3's MDS, dated [DATE], documents R3 is cognitively impaired and requires substantial/maximal assist with ADLs.</p> <p>R3's Shower schedule was Monday and Thursday night shift.</p> <p>On 3/14/2025 R3's Electronic Health Record (EHR) documents Shower/Bath documents, No data found for 30 days back. R3's Electronic Record does not document restorative programs performed.</p> <p>On 3/14/2025 at 10:30 AM, the facility provided R3's Nurse Skin Inspection report, dated 2/27/2025. As of 3/15/2025 at 12:30 PM, the facility did not provide shower documentation for the following dates 2/3/2025, 2/6/2025, 2/10/2025, 2/13/2025, 2/17/2025, 2/20/2025, 2/24/2025, 3/3/2025, 3/6/2025, and 3/10/2025.</p> <p>R3's Physical Therapy (PT) Discharge (D/C) Summary, dated 1/28/2025, documents R3 was discharged from PT 2/18/2025. It also documents, Discharge instructions: The patient will remain in LTC (Long Term Care) setting on RNP (Restorative Nursing Program) for PROM (Passive Range of Motion) and transfers. Restorative program established/trained = Restorative Range of Motion program, Restorative transfer.</p> <p>R3's Occupational Therapy Discharge Summary, dated 2/27/2025, documents R3 was discharged from Occupational Therapy on 2/27/2025. It also documents discharge instructions: Patient d/c'd to this facility. Would benefit from continued therapy services when insurance allows. Restorative Program established/trained = Restorative program on Range of Motion.</p> <p>R3's Care Plan and tasks do not document this restorative program.</p> <p>On 3/12/2025 at 11:21 AM, when asked if she was receiving showers? R3 stated, No. When asked if she was getting a bath? R3 stated, No.</p> <p>(continued on next page)</p>		

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<p>F 0725</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Many</p>	<p>4. R5's Care Plan, dated 2/14/2024, documents the resident has an ADL Self Care Performance Deficit. It continues BATHING: the resident is totally dependent on staff to provide a bath Bi-weekly and as necessary.</p> <p>R5's MDS, dated [DATE], documents R5 is cognitively impaired and dependent on staff for bathing.</p> <p>On 3/14/2025 at 10:30 AM, the facility provided R5's Nurse Skin Inspection report, dated 3/1/2025, 3/4/2025, 3/8/2025, and 3/11/2025. The facility provided the facility's shower schedule. R3 was scheduled for showers on Tuesday and Saturday.</p> <p>As of 3/15/2025 at 12:30 PM, the facility did not provide shower documentation for the following dates 2/1/2025, 2/4/2025, 2/8/2025, 2/11/2025, 2/18/2025, 2/22/2025, and 2/25/2025.</p> <p>On 3/12/2025 at 10:00 AM, V2, Director of Nursing/DON, stated they have some staffing challenges and are using agency to help fill in.</p> <p>On 3/12/2025 at 1:40 PM, V8, CNA, stated showers are not a priority. V8 stated when they are staffed ,they can get them done. V8 stated because they are short on staff, everything can't get done. V8 stated they clean the private areas and clean the residents when they are incontinent or go to the toilet. V8 stated they prioritize, and when they are short, restorative and showers are not priority when you have the hall alone. V8 stated the showers are documented on the shower sheets, identified the Nurse Skin Inspection report as the shower sheet, and in the computer.</p> <p>On 3/12/2025 at 2:19 PM, V7, CNA, stated the facility does have a staffing problem. V7 stated when they are short, they have to prioritize. V7 stated showers and restorative are not priority. V7 stated sometimes they don't get done.</p> <p>On 3/12/2025 at 2:05 PM, V6, CNA, stated she works the unit. V6 stated, For the most part, we are staffed on the unit because we got a staffing tag. At times, there is 1 CNA. The residents are always moving, and require being always watched, and showers are not done. You can't leave the residents unattended for that long.</p> <p>On 3/13/2025 at 3:10 PM, V9, CNA, stated R3 is alert and understands what is being said. R3 has difficulty with words. V9 stated R3 can answer yes and no questions appropriately.</p> <p>The facility's Sufficient Nursing Staff policy, dated 12/2024, documents, Policy The facility's Sufficient Nursing Staff policy, dated 12/2024, documents There will be sufficient team members with appropriate competencies and skill set available in each unit to provide nursing and related services to the resident as planned by the interdisciplinary team based on resident's assessment(s) to attain or maintain the highest practicable physical, mental, and psychological well-being of each resident. Facility leadership will provide sufficient personnel on a 24 hour basis to provide nursing care to all residents in accordance with the residents' individual care plans.</p>