

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 04/30/2025
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 - Few</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** 40701</p> <p>Based on interview and record review, the Facility failed to provide showers for 1 of 3 residents (R1) reviewed for showers, in the sample of 8.</p> <p>Findings include:</p> <p>1. R1's Face Sheet, dated 4/29/2025, documents R1 has a need for assistance with personal care.</p> <p>R1's Minimum Data Set (MDS), dated [DATE], documents R1 is cognitively intact and requires substantial/maximal assistance with showers/bathing.</p> <p>R1's Care Plan, dated 3/17/2025, documents R1 has ADL self care performance deficit and requires one staff member for bathing.</p> <p>On 4/24/2025 at 12:27 PM, V13, R1's daughter, stated, (R1) has ESBL (Extended-Spectrum Beta-Lactamase) in her urine. I get why she was on isolation, but I'm upset because the CNAs are telling her they can't give her an actual shower because of it. She is in a room by herself, with a shower attached. They told her she can't use the shower chair in case she peed. The shower chairs can be cleaned. They gave her a bed bath, and not even a good one. I've had to tell them to rinse the soap off afterwards. (R1) is continent most of the time, but she wears a (adult brief) just in case she dribbles.</p> <p>On 4/24/2025 at 5:45 PM, R1 stated she had been in the hospital recently. R1 stated the staff at the hospital told her to poop and pee on herself instead of taking her to bathroom or giving her a bed pan. R1 stated the hospital only gave her bed baths there, so when she got back to the facility she wanted a real shower, but was told she couldn't use the shower chair.</p> <p>On 4/25/2025 at 9:50 AM, V5, Certified Nursing Assistant (CNA), stated she was not aware of R1 not getting her showers. V5 stated R1 had a shower in her private room when she was in isolation, and the staff could have used a shower chair and cleaned it afterwards.</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 - Few</p>	<p>On 4/28/2025 at 2:15 PM, V1 stated, I expect staff to re-approach a resident if they refuse the first time or find out why they are refusing. We would switch shower days/times if they have a different preference than when they are scheduled. There is a procedure for cleaning shower chairs. They are made out of PVC (PVC stands for polyvinyl chloride, a versatile and widely used synthetic polymer. It's known for its durability, affordability, and resistance to chemicals, making it suitable for various applications, including construction, medical devices, and packaging) material so that they can be cleaned.</p> <p>On 4/28/2025 at 2:30 PM, V2, Director of Nursing (DON), stated R1 had ESBL in her urine, but had a room with a shower in it. V1 stated the shower chair could be cleaned, and should be cleaned in between every resident either way.</p> <p>The Facility's Grievance Form, dated 4/24/2025, documents the date of occurrence was 4/23/2025, and R1's shower was not given due to isolation, and R1 was given a bed bath instead.</p> <p>The Facility's provided shower sheets for R1 for the Month of April. There were only 4 shower sheets provided dated 3/31/2025, 4/7/2025, 4/23/2025 and 4/25/2025. R1's shower sheet, dated 4/23/2025, documents R1 was given a bed bath. The facility was unable to produce any shower refusal documentation for R1.</p> <p>The Facility's Shower Refusal Documentation Form was reviewed and documents a place for the resident's name, date of refusal, CNA name, times attempted, and reason for refusal.</p> <p>The Facility's Activity's of Daily Living Policy documents, This facility provides each resident with care, treatment and services according to the resident's individualized care plan. Based on individual resident's comprehensive assessment, facility staff will ensure that each resident's clinical condition demonstrates that the decline was unavoidable, including: Bathing.</p>		