

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 145651	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 06/28/2024
NAME OF PROVIDER OR SUPPLIER LA Bella of Alton		STREET ADDRESS, CITY, STATE, ZIP CODE 3490 Humbert Road Alton, IL 62002	

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** 49494</p> <p>Based on observations, interview, and record review, the facility failed to provide showers for 4 of 4 residents (R2, R5, R6 and R17) in the sample of 21 reviewed for showers.</p> <p>Findings include:</p> <p>1.R2's face sheet, dated 6/27/24, documented that R2 was admitted to the facility on [DATE].</p> <p>R2's medical diagnosis sheet, dated 6/27/24, documented that R2 has the following diagnoses: cerebral ischemia, hypertension, history of cerebral infarction, depression, anxiety, muscle weakness, schizoaffective disorder, and need for assistance with personal care.</p> <p>R2's MDS (Minimum Data Set), dated 3/15/24, documented R2 is cognitively intact, R2 requires partial moderate assistance with hygiene and is dependent on staff for all mobility.</p> <p>On 6/25/24 R2's bath and skin report sheet, dated June 2024, documented that R2 had 2 showers in June on 6/8/24 and 6/15/24.</p> <p>On 6/25/24 at 9:20 am R2 was lying in bed with dried food stuck to her left arm and chest. R2's hair appeared greasy, and she appeared unkempt. R2 stated that she had not had a shower in about two weeks. R2 stated that she asked for one last Saturday but that no one gave her a shower.</p> <p>2.R5's face sheet, dated 6/27/24, documented that R5 was admitted to the facility on [DATE].</p> <p>R5's medical diagnosis sheet, dated 6/27/24, documented that R5 has the following medical diagnoses: cerebral infarction, Alzheimer's disease, chronic kidney disease, congestive heart failure, type 2 diabetes mellitus, hypertension, intervertebral disc degeneration, and need for assistance with personal care.</p> <p>R5's MDS, dated [DATE], documented that R5 is moderately cognitively impaired, requires partial/moderate assistance with showers and partial/moderate assistance with transfers into the shower.</p> <p>On 6/25/24 R5's bath and skin report sheet, dated June 2024, documented that R5 had a shower on 6/3/24, 6/17/24, and 6/24/24.</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 6/25/24 at 9:40 am R5 was observed lying in bed and appeared disheveled, unshaven and hair greasy. R5 stated that he received a shower last night but that he usually only gets a shower every 2-3 weeks. R5 stated he would like to receive at least two showers per week.</p> <p>3.R6's face sheet, dated 6/27/24, documented that R6 was admitted to the facility on [DATE].</p> <p>R6's medical diagnosis sheet, dated 6/27/24, documented that R6 has the following medical diagnoses: Parkinson's disease with dyskinesia, spinal stenosis, vascular dementia, congestive heart failure, cognitive communication deficit, depressions, and need for assistance with personal care.</p> <p>R6's MDS, dated [DATE], documented that R6 is moderately cognitively impaired and is dependent on staff for showers/bathing.</p> <p>On 6/25/24 R6's bath and skin report sheet, dated June 2024, documented that R6 only received one shower in June on 6/20/24.</p> <p>On 6/25/24 at 9:48 am R6 stated that he hasn't had a shower in about a month and he usually gets one every other week. R6 appeared disheveled with food stuck to his shirt and dried food on his beard.</p> <p>4.R17's face sheet, dated 6/27/24, documented that R17 was admitted to the facility on [DATE].</p> <p>R17's medical diagnosis sheet, dated 6/27/24, documented that R17 has the following diagnoses: chronic obstructive pulmonary disease (COPD), type 2 diabetes mellitus, chronic kidney disease (end stage and on dialysis), hypertensive heart failure, hypertension, and need for assistance with personal care.</p> <p>R17's MDS, dated [DATE], documented that R17 is cognitively intact and requires substantial/maximum assistance with showers/bathing and mobility.</p> <p>On 6/25/24 R17's bath and skin report sheet, dated June 2024, did not document that R17 received any showers for the month of June.</p> <p>On 6/25/24 at 10:55 am R17 stated that she has not had a shower since she moved to her new room about 3 weeks ago. R17 stated that her name was not on the shower list, and she still has not had a shower even though she lets the Certified Nurse Assistants (CNA) know several days ago.</p> <p>On 6/25/24 at 12:45 pm V10 LPN (Licensed Practical Nurse) stated that the showers are supposed to be documented in the shower book after they are completed by the CNAS.</p> <p>On 6/25/24 at 12:50 pm V11 CNA stated that many of the shower sheets are blank so either the CNAS are not getting the showers completed or they are forgetting to document the showers.</p> <p>On 6/26/24 at 11:50 am V15 CNA stated that they document the residents' ability to complete a shower or bath in the EMR (Electronic Medical Record) every day and that they chart when the actual showers are given on the monthly bath and skin report sheet.</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>On 6/26/24 at 11:58 am V16 CNA Supervisor stated that the CNAS are supposed to be using the paper bath and skin report sheets to document when the showers are given.</p> <p>The facility's Activities of Daily Living (ADLs) Policy dated March 2018, documented residents will be provided with care, treatment, and services as appropriate to maintain or improve their ability to carry out activities of daily living (ADLs). Residents who are unable to carry out activities of daily living independently will receive the services necessary to maintain good nutrition, grooming and personal and oral hygiene. It continues, appropriate care and services will be provided for residents who are unable to carry out ADLs independently, with the consent of the resident and in accordance with the plan of care, including appropriate support and assistance with: a. hygiene (bathing, dressing, grooming, and oral care).</p>		

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<p>F 0712</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Ensure that the resident and his/her doctor meet face-to-face at all required visits.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 49494</p> <p>Based on interview and record review the facility failed to ensure residents were seen by a physician for 4 of 7 residents (R2, R5, R18 and R21) reviewed for physician visits in the sample of 21.</p> <p>1.R2's face sheet, dated 6/27/24, documented that R2 was admitted to the facility on [DATE].</p> <p>R2's medical diagnosis sheet, dated 6/27/24, documented that R2 has the following diagnoses: cerebral ischemia, hypertension, history of cerebral infarction, depression, anxiety, muscle weakness, schizoaffective disorder, and need for assistance with personal care.</p> <p>R2's MDS (Minimum Data Set), dated 3/15/24, documented R2 is cognitively intact.</p> <p>On 6/26/24 at 9:15 am R2 stated that she has only seen her Medical Doctor (V18) one time and that was when she was admitted about two years ago. R2 stated that the Physician Assistant comes to see her but that her doctor never does.</p> <p>R2's EMR (Electronic Medical Record) does not document any Medical Doctor progress notes for 2024.</p> <p>2.R5's face sheet, dated 6/27/24, documented that R5 was admitted to the facility on [DATE].</p> <p>R5's medical diagnosis sheet, dated 6/27/24, documented that R5 has the following medical diagnoses: cerebral infarction, Alzheimer's disease, chronic kidney disease, congestive heart failure, type 2 diabetes mellitus, hypertension, intervertebral disc degeneration, and need for assistance with personal care.</p> <p>R5's MDS, dated [DATE], documented that R5 is moderately cognitively impaired.</p> <p>R5's EMR does not document any physician visits by his primary Medical Doctor V18 nor any doctor for this year, 2024.</p> <p>3.R18's face sheet, dated 6/27/24, documented that R18 was admitted to the facility on [DATE].</p> <p>R18's medical diagnosis sheet, dated 6/27/24, documented that R18 has the following diagnoses: chronic obstructive pulmonary disease (COPD), type 2 diabetes mellitus, congestive heart failure, peripheral vascular disease, dementia, atherosclerotic heart disease, and hypertension.</p> <p>R18's MDS, dated [DATE], documented that R18 is moderately cognitively impaired.</p> <p>R18's EMR does not document any physician progress notes by V18, Medical Doctor for 2024.</p> <p>4.R21's face sheet, dated 6/27/24, documented that R21 was admitted to the facility on [DATE].</p> <p>R21's medical diagnosis sheet, dated 6/27/24, documented that R21 has the following medical diagnoses: COPD, type 2 diabetes mellitus, hypertension, schizophrenia, adult failure to thrive, and sensorineural hearing loss.</p> <p>(continued on next page)</p>		

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<p>F 0712</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>R21's MDS, dated [DATE], documented that R21 is cognitively intact.</p> <p>R21's EMR does not document any Medical Doctor progress notes by his primary physician, V18 for this year 2024.</p> <p>On 6/26/24 at 10:45 am V1 Administrator stated that she cannot find any physician progress notes for R2, R5, nor R18 for this year. V1 stated that V18's Physician Assistant is at the facility almost every day seeing residents and that V18 must not be seeing his residents every 60 days. V1 stated she will be doing a QA (Quality Assurance) on this.</p> <p>On 6/27/24 at 9:37 am V1 stated that she spoke to her Medical Director (V18) and that he stated he has not visited any of his residents this year unless they were receiving skilled services or newly admitted and that he will conduct an audit and start seeing his residents at least every 60 days. V1 stated that R5 has not seen a medical doctor since August of 2023.</p> <p>The facility's Physician Services Policy, dated February 2021, documented the medical care of each resident is supervised by a licensed physician. It continues, 7. Physician visits, frequency of visits, emergency care of residents, etc., are provided in accordance with current OBRA (Omnibus Budget Reconciliation Act) regulations and facility policy.</p>		