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| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 145752 | (X2) MULTIPLE CONSTRUCTION A. Building B. Wing | (X3) DATE SURVEY COMPLETED 05/22/2024 |
| NAME OF PROVIDER OR SUPPLIER Forest View Rehab & Nursing Center | | STREET ADDRESS, CITY, STATE, ZIP CODE 535 South Elm Itasca, IL 60143 | |

For information on the nursing home's plan to correct this deficiency, please contact the nursing home or the state survey agency.

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| (X4) ID PREFIX TAG | SUMMARY STATEMENT OF DEFICIENCIES (Each deficiency must be preceded by full regulatory or LSC identifying information) |
| <p>F 0583</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p> | <p>Keep residents' personal and medical records private and confidential.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 31327</p> <p>Based on interview and record review, the facility failed to provide privacy and confidentiality for a resident by posting her photo on social media without her permission. This applies to 1 of 3 residents (R1) reviewed for privacy and photography in a sample of 3.</p> <p>The findings include:</p> <p>R1's face sheet shows an admitted [DATE].</p> <p>R1's face sheet includes the following diagnoses: multiple sclerosis and major depressive disorder.</p> <p>R1's MDS (Minimum Data Set) dated 4/5/24 shows a BIMS (Brief Interview for Mental Status) score of 15 which means she is cognitively intact.</p> <p>R1's Photographic Authorization and Release form dated 3/5/24 shows R1 circled 'no' for having her photo and/or image posted on the facility's website and social media. The form was also signed off by her.</p> <p>On 5/21/24 at 3:43 PM, telephone interview was completed with V5 (R1's family member). R5 stated, I was looking at the facility's web page on social media. I saw (R1's) picture on there with other residents. They are supposed to get my consent first before they do anything like this because I'm the POA (Power of Attorney). (R1) has been in the nursing home for a long time. She doesn't really know what social media is. I never told the facility about my concern, but I know they know I saw the picture because I wrote a comment saying why is (R1)'s photo here because I have not given consent for social media. Today, I see that they changed the photo. Her face is cut off, but her body shot is there.</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.

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| LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE | TITLE | (X6) DATE |
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| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 145752 | (X2) MULTIPLE CONSTRUCTION A. Building B. Wing | (X3) DATE SURVEY COMPLETED 05/22/2024 |
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| <p>F 0583</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p> | <p>On 5/22/24 at 9:25 AM, V3 (Activity Director) stated, (R1's) picture was taken last Wednesday on 5/15/24 for Nursing Home Week. Some of the residents were outside because we were having a barbecue. I'm not sure if I took the picture or if one of my activity aides did. I emailed the pictures and the residents' authorization sheets to V6 (Corporate). I don't know her exact position. (R1) declined to have her photo posted on social media. I know the next day V4 (Social Worker) saw (R1's) picture on social media. She immediately told (V1-Administrator) who contacted (V6). (V1) told (V6) to remove the posting immediately. I made a mistake. I will not post (R1's) picture. (R1) is at every activity. I and the other activity aides did these photographic authorization and release forms. I have a separate pile for the ones who agreed to have their photos taken and another pile who refused. This one just slipped by me. (R1) does not want to be on social media. I know that this was a big mistake on my part. I'm looking at the social media page now. I don't see (R1's) face on it anymore, but her body is there. I don't know why (V6) just didn't remove it. I sent a text to (V5) saying I'm so sorry about (R1's) picture and I told her that (V1) had corporate remove it. She never responded to my text.</p> <p>On 5/22/24 at 10:11 AM, R1 was in her room. R1 stated, I didn't sign anything to give them (the facility) permission to put my picture on social media. I don't want my picture there because I don't know what social media is going to do with my picture. (V5) is my POA. The facility is supposed to get consent from her if they want to use my picture. I would like it removed from the social media page. I just don't want it on social media.</p> <p>On 5/22/24 at 10:23 AM, V4 (Social Worker) stated, I saw (R1's) picture on the facility's webpage on social media at home. I immediately called (V1) last Friday and let her know. I told her (R1) doesn't like to be on social media. (R1) doesn't understand all that social media stuff. (V1) called corporate and proceeded to get (R1's) picture of the social media site.</p> <p>Facility's Policy titled: Photographing, Video Recording, Audio Recording, and Other Imaging of Residents, Visitors and Employees (Unknown Date) documents the following: The facility must take reasonable steps to protect residents, visitors, and employees, from unauthorized photography, video or audio recordings, or other images. Due to the sensitive nature of resident information and to protect resident privacy, the facility must follow the guidelines and procedures outlined below before allowing, or prior to, photographing, video or audio recording, or otherwise imaging residents, visitors, or employees. 5. Photographing/Audio Recording of Residents by employees for Publicity Purposes: Facility must obtain written authorization from the resident prior to photographing/audio recording the resident for publicity purposes, e.g. marketing materials or media releases. The authorization is only good for the type of photographs/recordings indicated and the timeframe listed in the authorization. Otherwise, a new authorization form must be obtained. When the photography/audio recording is for marketing purposes, the facility must obtain an authorization for use and disclosure of PHI for marketing purposes.</p> | | |