

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 145753	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 11/06/2024
NAME OF PROVIDER OR SUPPLIER LA Bella of Danville		STREET ADDRESS, CITY, STATE, ZIP CODE 1701 North Bowman Danville, IL 61832	

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>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 42702</p> <p>Based on observation, interview, and record review the facility failed to provide a clean and comfortable environment for four (R1, R3, R10 and R11) of five residents reviewed for a safe, clean, comfortable, and home-like environment from a total sample list of 18 residents.</p> <p>Findings include:</p> <p>On 11/6/24 at 12:20 PM, R2 was sitting at a dining room table covered with napkins, tissues, condiments, and bags of personal items on the table. On top of these items laid mucous filled tissues.</p> <p>On 11/4/24 at 12:21 PM, R1 was eating in his room. When asked why he wasn't eating in the dining room, R1 stated that he doesn't like to eat with R2. R1 stated that (R2) is nice enough, but that her hacking and spitting up mucous causes him to lose his appetite. Additionally, R2 throws the tissues that she spits into, onto the floor. R1 said, It is just disgusting and hard to avoid seeing it or stepping in it. I won't even go to BINGO anymore because I just can't stand to see and hear her spit mucous everywhere. R1 stated that he has complained about this to all of the staff, but they haven't done anything about it and that R2's hacking and spitting makes me sick to my stomach.</p> <p>On 11/4/24 at 7:20 PM, R3 stated that he doesn't like it when R2 hacks and spits up mucous in the dining room and that he has seen her throw her tissues onto the floor.</p> <p>On 11/4/24 at 12:15, R10 and R11 were sitting at a table in the dining room eating lunch, next to R2. Both stated that they didn't like R2's spitting up mucous in the dining room.</p> <p>On 11/6/24 at 12:30PM, V5 Administrative Assistant stated that she was aware that R2's behaviors are not appreciated by many of the residents and that R2 continues to cough, [NAME], spit and throw her tissues on the floor every day.</p> <p>R2's care plan dated 8/25/23 documents that R2 has a behavior that includes throat clearing during meal times and that R2 is supposed to be supervised by staff and reminded not to continue with this behavior.</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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(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (Each deficiency must be preceded by full regulatory or LSC identifying information)		
<p>F 0585</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Honor the resident's right to voice grievances without discrimination or reprisal and the facility must establish a grievance policy and make prompt efforts to resolve grievances.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 42702</p> <p>Based on interview and record review the facility failed to file a grievance for a known resident complaint for two (R1 and R3) of three residents reviewed for administration from a total sample list of 18 residents.</p> <p>Findings include:</p> <p>On 11/4/24 at 12:21PM, R1 was eating in his room. R1 stated that he doesn't like to eat in the dining room with R2 because R2 hacks and spits up mucous, causing him to lose his appetite. Additionally, R2 throws the tissues that she spits into, onto the floor. R1 said, It is just disgusting and hard to avoid seeing it or stepping in it. I won't even go to BINGO anymore because I just can't stand to see and hear her spit mucous everywhere. R1 stated that he has complained about this to all of the staff, including V5 Assistant Administrator, but they haven't done anything about it.</p> <p>On 11/4/24 at 7:20PM, R3 stated that he doesn't like it when R2 hacks and spits up mucous in the dining room and that he has seen her throw her tissues onto the floor. R3 stated that the staff know about this and haven't done anything to address the situation.</p> <p>On 11/6/24 at 10:00AM, V1 provided three months' worth of grievances that did not include any information about R2's behaviors.</p> <p>On 11/6/24 at 12:30PM, V5 stated she was aware that R2's behaviors are not appreciated by many of the residents and that R2 continues to cough, [NAME], spit and throw her tissues on the floor every day. V5 stated she has not filled out a grievance about this because she thought it was R2's behavior.</p> <p>The facility Grievances/Complaints, Filing Policy dated April 2017 documents that residents and their representatives have the right to file grievances, either orally or in writing, to the facility staff or to the agency designated to hear grievances. The administrator and staff will make prompt efforts to resolve grievances to the satisfaction of the resident and or their representative and all grievances will be investigated with a written response to the complainant within five working days.</p>		