

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 145757	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 07/23/2025
NAME OF PROVIDER OR SUPPLIER Integrity Hc of Carbondale		STREET ADDRESS, CITY, STATE, ZIP CODE 120 North Tower Road Carbondale, IL 62901	
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>Based on interview, observation, and record review the facility failed to provide a clean, safe, sanitary environment for 14 residents of 14 residents (R1, R2, R3, R4, R6, R8, R9, R10, R11, R12, R13, R14, R15 and R16) reviewed for environment in a sample of 18. Findings include: On 07/17/25 at 3:10 PM, the air vent in the ceiling in the hall right outside a room where the meal trays were being staged and approximately 20 feet from the dining room on the North Hall, had a black substance covering approximately 50 % of the vent. On 07/17/25 at 2:58 PM, there was a black substance on the ceiling tiles around the air vent and on the air vent after the doorway leading to the North Hall. The black substance went from the vent to the wall on the right side of the ceiling on the other side of the entryway to the North Hall. On 07/17/25 at 4:40 PM, V2 (Director of Nursing) stated, she has seen mold or a black moldlike substance on the North Hall. She believes she brought it to V1's (Administrator) attention Tuesday (07/15/25) morning. V2 stated, it should be cleaned. On 07/21/25 at 10:05 AM, the same air vent in the ceiling in the hall right outside a room where the meal trays were being staged and approximately 20 feet from the dining room, had a black substance covering approximately 50 % of the vent. A Resident List provided by the facility dated documents, R1, R2, R3, R4, R6, R8, R9, R10, R11, R12, R13, R14, R15 and R16 reside on the north hall. The facility policy dated 06/2009 titled, Cleaning and Disinfection of Environmental Surfaces documents: environmental surfaces will be cleaned and disinfected according to current CDC recommendations for disinfection of healthcare facilities and the OSHA Bloodborne Pathogens standard.</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
FORM CMS-2567 (02/99) Previous Versions Obsolete	Event ID:	Facility ID: 145757
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F 0692 Level of Harm - Actual harm Residents Affected - Few	Provide enough food/fluids to maintain a resident's health. (continued on next page)

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F 0692 Level of Harm - Actual harm Residents Affected - Few	<p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on observation, interview and record review the facility failed to provide dietary supplements, and the appropriate protein portion size to prevent further weight loss or weight maintenance for 9 of 11 residents (R1, R2, R3, R8, R9, R10, R11, R12, R13) reviewed for weight loss in a sample of 18. This failure further contributes to continued harm to R2 and R10, who have a documented history of severe weight loss. Findings include: 1. R2's admission record documents an admission date of 01/09/22 with diagnoses including: chronic obstructive pulmonary disease, acute osteomyelitis of left ankle and foot, malignant neoplasm of upper lobe, anemia, protein calorie malnutrition, major depressive disorder, anxiety disorder, hypothyroidism, drug induced subacute dyskinesia, osteoarthritis, muscle weakness, and cognitive communication deficit. R2's order summary report documents a dietary order of regular diet with mechanical soft texture. Thin liquids consistency, ground meat extra gravy, (nutritional shakes) two times a day, 1 scoop protein powder in oatmeal at breakfast, vanilla pudding at supper, med pass 2 ounces at lunch and supper, (nutritional ice cream) two times a day, offer snacks throughout the day. Assist with meals in dining room and whole milk at breakfast for diet. This order was started on 07/22/24 with no end date listed. R2's Minimum Data Set (MDS) dated [DATE] documents a brief interview of mental status (BIMS) score of 12 indicating resident is moderately impaired. Section GG documents R2's eating ability as supervision or touching assistance. R2's care plan documents a focus area of R2 is at risk for nutritional deficit related to diagnoses including malnutrition, underweight, poor appetite, and a diagnosis of anemia. R2 is on a regular mechanical soft diet with ground meat with extra gravy, nutritional shakes two times a day, 1 scoop of protein powder in oatmeal at breakfast (likes oats thicker), vanilla pudding daily at supper, and nutritional ice cream two times a day with a revision date of 01/18/24 with interventions including: provide and serve supplements as ordered dated 08/07/23, to be up and in dining room for all meals due to requires assistance with eating dated 04/21/25, add whole milk at breakfast dated 07/10/25 and offer snacks throughout the day dated 07/10/25. R2's nutrition progress note dated 07/08/2025 at 1:12 PM documents: mechanical soft ground meats with extra gravy. Percent of meal intakes is 51 - 100 %, supplement intake: health shakes two times a day, 1 scoop of protein powder in oatmeal at breakfast, vanilla pudding at supper, Med pass and nutritional ice cream. R2's current weight is 82 pounds with low body mass index and weight loss. R2's function is assistance with meals. R2's height is 64 inches and weight on 06/04/25 was 82 pounds with a BMI of 14 % and a December weight of 91 pounds. R2 has a 10 % weight loss over six months. R2's skin is at risk. Continue diet orders of mechanical soft ground meat with extra gravy, nutritional shakes two times a day, 1 scoop of protein powder in oatmeal at breakfast, vanilla pudding at supper and nutritional ice cream two times a day. R2's nurses note dated 07/03/25 at 10:23 AM documents: R2 had weight loss, medical doctor and resident notified and new interventions implemented. On 07/17/25 at approximately 1:01 PM, V4 (Dietary) ground the ham and mixed mayonnaise in with the ground ham, the ham was scooped onto paper plates with the baked beans and microwaved to reach 145 degrees Fahrenheit. On 07/17/25 at approximately 1:01 PM, V4 stated, she is going to mix mayonnaise in with the ham to make the mechanical soft ham because they do not have any gravy for the mechanical soft ham. On 07/17/25 at approximately 1:28 PM, R2 was served her lunch of mechanical soft ham, baked beans and applesauce. R2 did not receive the extra gravy, nutritional shake, or nutritional ice cream with her lunch. On 07/17/25 at 3:10 PM, R2 stated lunch was not enough food, she had asked for something else, but she did not get it. R2 stated, The lunch meal was awful. On 07/17/25 at 5:47 PM, R2 did not receive a health shake with her dinner. On 07/21/25 at 8:10 AM, R2 was brought to the dining room for breakfast. Her food was placed in front of her and plastic utensils placed in the food and the staff member walked away. R2 did not receive assistance or encouragement during breakfast with her meal and ate less than 25% of her meal. On 07/21/25 at 12:33 PM, R2 did not receive a health shake with lunch. On 07/21/25 at 6:46 PM, R2 did not receive a health shake with her dinner. 2. R10's admission record documents an admission date of 09/06/17 with diagnoses including: dementia, essential hypertension, vitamin D deficiency, thiamine deficiency, alter mental status, Parkinson's disease, epilepsy, muscle weakness, and other symbolic dysfunctions. R10's order summary report documents a dietary order of regular diet with a pureed texture, thin liquids consistency, whole milk three times a day, health shake three times a day, (nutritional ice cream) with lunch and supper, super cereal (nutritional cereal) at breakfast, ice cream two times a day, melted margarine to hot sides at lunch and supper, offer pudding three times a</p>		

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<p>F 0802</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Many</p>	<p>Provide sufficient support personnel to safely and effectively carry out the functions of the food and nutrition service.</p> <p>Based on interview, observation, and record review the facility failed to provide an adequate number of dietary staff to serve dinner in a timely manner. This failure has the potential to affect all 51 residents that reside at the facility. Findings include: The Resident List Report dated 07/17/25 documents 51 residents currently reside at the facility. On 07/17/25 at 2:47 PM, V1 (Administrator) stated, dinner is at 5:15 PM. On 07/17/25 at 2:47 PM, V3 (Business Office Manager/Acting Dietary Manager) stated, lunch is at 12:30 PM and dinner is at 5:15 PM. On 07/21/25 at 3:40 PM, V1 (Administrator) stated they had two kitchen staff members (V8 and V9 (Dietary Aides) not show up for work Sunday night (07/20/25). V1 stated, V6 (Dietary Aide) was called in to work. On 07/21/25 at 4:05 PM V6 (Dietary Aide) stated, she was called in to work on 07/20/25 and there were no other dietary staff present. V6 stated there were Certified Nurse Aides in the kitchen cooking grilled cheese and spaghetti sauce with meatballs. V6 stated, she received a text at 3:16 PM on 07/20/25 to see if she could come into work. V6 stated, the evening shift usually start about 1:30 PM. V6 stated, she was able to get to the facility at 4:00 PM and she just followed what they were already cooking because they had already started that and dinner was supposed to start at 5:15 PM, in an hour and fifteen minutes. V6 stated, some of the dinners did not go out until approximately 7:30 PM. On 07/21/25 at 4:10 PM, R18 stated, they did not eat until late on Sunday night (07/20/25) and CNA's did help cook because there was no dietary staff for a while. R18 stated, a couple residents did try to help by clearing trays and dishes. R18 was alert and oriented to person, place and time. On 07/21/25 at 4:14 PM, R17 stated she did not get her dinner until 7:38 PM last night (07/20/25) and it was a grilled cheese and some awful spaghetti sauce, but the grilled cheese was good. The CNA's went in and helped in the kitchen. R17 was alert and oriented to person, place and time. On 07/21/25 at 4:20 PM, R6 stated he did not get his dinner until late Sunday night, it was probably almost two hours late. R6 stated, it was grilled cheese and spaghetti sauce he thinks. R6 was alert and oriented to person, place and time. On 07/21/25 at 4:30 PM, R9 who was alert to person, place and time stated, dinner was late last night. On 07/21/2025 at 2:00 PM, V6 was the only person in the kitchen. On 07/21/25 at 3:05 PM, V6 was the only person in the kitchen. On 07/21/25 at 4:07 PM, V6 was the only person in the kitchen. On 07/21/25 at 4:12 PM, V1 stated there is more than one staff scheduled to be in the kitchen. V1 stated the second person is scheduled at 1:30 PM. On 07/21/25 at 4:12 PM (after surveyor asked where the second person was) V1 stated, let me text them and see if they are coming. V1 stated dinner is at 5:15 PM. On 07/21/25 at 5:00 PM, V6 was the only person in the kitchen. On 07/21/25 at 6:27 PM the first tray was served, at 6:58 PM hall trays were started to be served. The undated document titled, Meal Times documents: breakfast 7:30 AM, lunch noon, and dinner 5:30 PM. The Facility Assessment Tool dated 05/31/25 documents: average daily census 50, under the section titled, Staffing Plan the category listing: other (e.g. (example), department heads, nurse educator, quality assurance, ancillary staff in maintenance, housekeeping, dietary, laundry) the box is blank. The facility policy revised 07/2017 titled, Resident Nutrition Services documents: 2. Residents shall receive prompt meal service and appropriate feeding assistance. Reasonable efforts will be made to accommodate resident choices and preferences.</p>		

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<p>F 0804</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Ensure food and drink is palatable, attractive, and at a safe and appetizing temperature.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on interview, observation and record review the facility failed to provide food that appeared palatable and attractive for 7 of 7 residents (R2, R3, R6, R8, R10, R15, and R16) reviewed for dining in a sample of 18. Findings include:1. On 07/17/25 at 1:10 PM the individual serving of pureed ham was microwaved in a paper product bowl, the pureed ham was dry looking, crusty around the edges and a grayish color after being microwaved to be heated to a servable temperature. The microwaved pureed ham was served to R3, R10, R15, R16. R3's order summary report documents a dietary order of regular diet with a pureed texture with an order date of 05/20/25 and no end date listed.R10's order summary report documents a dietary order of regular diet with a pureed texture, whole milk three times a day, health shake three times a day, nutritional ice cream with lunch and supper, super cereal at breakfast, ice cream two times a day, melted margarine to hot sides at lunch and supper, offer pudding three times a day, 1 scoop of protein powder at all meals with an order date of 01/15/25 and no end date listed.R15's order summary report documents a dietary order of regular diet with a pureed texture and double desserts with all meals with an order date of 11/26/24 and no end date listed.R16's order summary report documents a dietary order of regular diet with a pureed texture, super cereal at breakfast, whole milk three times a day with meals, extra margarine/butter, sauces/gravies all meals with an order date of 10/19/24 and no end date listed.On 07/17/25 at 2:38 PM, V3 (Business Office Manager/Acting Dietary Manager) stated, the pureed food did not look appetizing after being microwaved.On 07/23/25 at 11:35 AM, V1 (Administrator) stated, the pureed ham did not look appetizing after being microwaved. 2. R2's Minimum Data Set (MDS) dated [DATE] documents a brief interview of mental status (BIMS) score of 12 indicating resident is moderately impaired.R2's order summary report documents a dietary order of regular diet with mechanical soft texture, ground meat extra gravy, nutritional shakes two times a day, 1 scoop protein powder in oatmeal at breakfast, vanilla pudding at supper, nutritional ice creams two times a day. Assist with meals in dinning room and whole milk at breakfast for diet with an order date of 07/22/24 and no end date listed.On 07/17/25 at approximately 1:01 PM, V4 (Dietary) ground the ham and mixed mayonnaise in with the ground ham, the ham was scooped onto paper plates with the baked beans and microwaved to reach 145 degrees Fahrenheit.On 07/17/25 at approximately 1:01 PM, V4 stated she is going to mix mayonnaise in with the ham to make the mechanical soft ham because they do not have any gravy for the mechanical soft ham. On 07/17/25 at approximately 1:28 PM, R2 was served her lunch of mechanical soft ham, baked beans and applesauce.On 07/17/25 at 3:10 PM R2 stated, lunch was not enough food, she had asked for something else, but she did not get it. R2 stated, the lunch meal was awful. R2 was alert and oriented to person, place and time.3. On 07/17/25 at 1:50 PM the individual slices of ham were microwaved to bring the ham up to temperature and appeared dry and burnt around the edges.On 07/17/25 at 3:02 PM, R6 stated the food for the last two days has been messed up and sucky! R6 was alert and oriented to person, place, and time.On 07/17/25 at 5:45 PM, R8 stated dinner tonight is much better than dinner last night. Last night was not good. R8 stated, the ham today was no good either. The ham was dry and burnt. R8 was alert and oriented to person, place, and time.On 07/23/25 at 11:40 AM, V1 stated she does not know how she expected to have food prepared for 51 residents, with sides and gravy and brought to the appropriate temperature on a residential sized grill. It was poor planning. The facility policy dated 07/17 titled, Resident Nutrition Services documents: 4. Nursing personnel or feeding assistants will inspect food trays as they are delivered to ensure that the correct meal has been delivered, that the food appears palatable and attractive, and it is served at a safe and appetizing temperature.</p>		

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<p>F 0812</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Many</p>	<p>Procure food from sources approved or considered satisfactory and store, prepare, distribute and serve food in accordance with professional standards.</p> <p>Based on observation, interview and record review the facility failed to prepare and distribute food in accordance with professional standards of food safety and failed to maintain appropriate sanitizer levels in the dish machine to prevent foodborne illness. This has the potential to affect all 51 residents living in the facility. Findings include: The facility, Resident List Report dated 07/17/25 documents there are 51 residents currently residing at the facility. On 07/17/25 at 11:45 AM, V1 (Administrator) stated the kitchen is currently closed down by the health department for pests and needing cleaning. V1 stated they are hoping the health department will open the kitchen today. V1 stated, the health department stated they could grill outside, they could just not use the kitchen. The Food Establishment Inspection Report dated 07/15/25 documents item #38 observation: live roach observed at time of inspection that crawled into the square mechanical/electrical compartment above the dish machine drain. General Comments: due to the number of foodborne illness risk factors and public health intervention violations as well as wastewater back up and live pests, the food service permit for (facility name) has been suspended until further notice. You are to cease operations immediately. On 07/23/25 at 8:20 AM, V16 (Local Health Department Inspector) stated she did not say the facility could grill outside and prepare the food in a different room at the facility. V16 stated, she asked V1 if they were getting food from outside, and that it was coming in to go containers, and she was told yes. On 07/17/25 at 11:50 AM, V3 (Business Office Manager/Acting Dietary Manager) stated, they grilled dinner outside on the grill last night (07/16/25) and breakfast that morning outside on the grill. On 07/17/25 at 11:30 AM, V17 (Dietary Cook) was grilling ham slices and warming baked beans on a residential sized grill on a grill outside the facility. At that time V17 stated he was directed by V1 to grill lunch outside and bring it inside and serve it. On 07/17/25 at 12:05 PM, V1 stated all trays were going to be staged and served from the room down the hall from the dining room. V1 stated, that is where they served breakfast from. This was a larger room that contained two eight foot white foldable tables, no handwashing sink or dish washing sinks. On 07/17/25 at 12:15 PM the food staging room contained a container of thickener sitting on one of the white tables with a scoop sitting in the container of thickener. On 07/17/25 beginning at 1:10 PM the first tray was served for lunch; all trays were sent out from the food staging room that was a side room approximately 20 feet down the hall from the dining room. On 07/17/25 between 1:10 PM and 2:23 PM all residents trays were served without any of the drinks covered. On 07/17/25 at 2:25 PM, V3 stated all items on every tray should have been covered, since every tray should have been treated as a hall tray. On 07/21/25 at 5:35 PM, V1 transferred ice to the residents glasses using her gloved hand after touching the ice machine, ice machine lid, and the ice scoop handle without any glove change or any hand hygiene in between. On 07/22/25 at 12:20 PM, V11 (Dietary Aide) transferred glasses onto the residents trays by the rims after touching the health shake cartons, the cooler door, and the gallon milk container with no hand hygiene in between. On 07/22/25 at 3:40 PM, the dish machine sanitizer was tested and measured 10 ppm (parts per million) chlorine. On 07/22/25 at 3:40 PM, V6 (Dietary aide) stated, the chlorine should be reading at least 50 ppm. V6 stated, she had not tested it yet today, she would think the morning shift had tested it. On 07/23/25 at 9:47AM, V18 (Registered Dietician) stated, when she was called and asked about an emergency menu, she reiterated they need to make sure safe temperatures were maintained, food was handled safely and prepared sanitarly. V18 stated she was told by V1 that the kitchen was shut down not that their food permit was suspended, so she directed as per the information she was given.</p>		