

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 145857	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 07/24/2024
NAME OF PROVIDER OR SUPPLIER Aperion Care St Elmo		STREET ADDRESS, CITY, STATE, ZIP CODE 221 East Cumberland St Elmo, IL 62458	

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** 41610</p> <p>Based on interview, observation and record review the facility failed to provide timely assistance for 3 (R30, R33, and R21) of 4 residents reviewed for ADL (Activities of Daily Living) care in a sample of 35.</p> <p>Findings include:</p> <p>1. R30's face sheet documents diagnoses including: dementia, dysphagia, Alzheimer's disease, protein calorie malnutrition, schizoaffective disorder, major depressive disorder, seizures, chronic obstructive pulmonary disease, and chronic kidney disease. R30 care plan documents a focus area dated 02/13/24 of due to (R30's) general weakness, unsteadiness, endurance and severe cognitive deficits, she is in need of staff assistance to complete her functional abilities with an intervention dated 02/13/24 of (R30's) usual performance to complete her eating is dependent. R30's Minimum Data Sheet (MDS) dated [DATE] (signed 07/22/24) documents a BIMS (Brief Interview of Mental Status) score of 03 indicating severe impairment. Section GG of the same MDS documents that R30 requires partial/moderate assistance (Helper does less than half the effort. Helper lifts holds or supports trunk or limbs but provides less than half the effort.) R30's MDS dated [DATE] documents in section GG that R30 is dependent for eating (Helper does all of the effort. Resident does none of the effort to complete the activity.)</p> <p>On 07/21/24 at 11:51 AM, R30 received her food uncovered and set in front of her. R30 did not eat any of her food or make an effort to eat any of her food. At 12:33 PM V18 (CNA) came over and assisted R30. R30 ate less than 5% of her food.</p> <p>On 07/22/24 at 11:43 AM, R30's food was set in front of her. At 12:03 PM, R30 had still not received any assistance with her lunch. At 12:26 PM, another resident was observed attempting to assist R30 by putting her carrots on her fork. V17 (CNA) told the resident that R30 can feed herself, she does not need assistance. At this time R30 still had not had any bites of food. At 12:36 PM, V18 (CNA) came over and attempted to assist R30 with her meal. R30 took some bites when assisted and ended up eating approximately 5% of her food.</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>2. R33's face sheet documents diagnoses including: neurocognitive disorder with Lewy bodies, muscle wasting and atrophy, anorexia, Parkinson's disease without dyskinesia, dementia, anxiety disorder, major depressive disorder, Alzheimer's disease, cerebral infarction, hemiplegia and hemiparesis following cerebral infarction affecting right dominant side, chronic kidney disease stage 3A, and convulsions. R33's care plan documents a focus area dated 02/08/24 of Due to (R33's) severe cognitive deficits, general weakness and unsteadiness, he is in need of staff assistance to complete his functional abilities with an intervention dated 03/19/24 of (R33's) usual performance to complete his eating is dependent. R33's MDS dated [DATE] documents no BIMS was conducted due to resident is rarely/never understood. Section GG of the same MDS documents R33 is dependent for eating (Helper does all of the effort. Resident does none of the effort to complete the activity.)</p> <p>On 07/21/24 at 11:53 AM, R33 received his food, it was set on a table by his chair. At 12:04, R33 received assistance with his meal by V18 (CNA).</p> <p>On 07/22/24 at 11:45 AM, R33's food was set on the table next to his chair. At 12:02 PM, V18 (CNA) started assisting R33 with his lunch.</p> <p>3. R21's face sheet documents diagnoses including: Alzheimer's disease, disorder of urea cycle metabolism, gastro-esophageal reflux disease without esophagitis, anxiety disorder, anorexia, major depressive disorder, nutritional deficiency, type 2 diabetes mellitus, and dementia. R21's care plan with a focus area dated 02/14/24 of Due to (R21's) general weakness, unsteadiness and severe cognitive impairment, she is in need of staff assistance to complete her functional abilities with an intervention dated 02/14/24 of (R21's) usual performance to complete her eating is dependent. R21's MDS dated [DATE] documents no BIMS score was attempted due to resident is rarely/never understood. Section GG of the same MDS documents R21's eating performance as dependent.</p> <p>On 07/21/24 at 11:45 AM, R21 received her food covered and set in front of her on the table. At 12:02 PM, V17 (certified nurse aide/CNA) started assisting R21 with her meal.</p> <p>On 07/22/24 at 11:42 AM, R21's food was set in front of her. At 12:03 PM, V17 (CNA) started assisting R21 with her lunch.</p> <p>On 07/22/24 after delivering R21's, R30's and R33's food V18 (CNA) and V17 (CNA) were observed delivering other residents food and assisting them with their chairs and walkers.</p> <p>On 07/24/24 at 12:12 PM, V2 (Director of Nursing) stated that residents should not have to wait 20 minutes or more to receive assistance with their meals and the assistance should not have to be continually interrupted due to another resident is spilling a drink, standing up or needing other assistance. V2 stated they typically only have two CNA's on the unit for lunch and have three residents that need assistance, so if other residents stand up when they shouldn't, are falling asleep, or need their walker the residents that need assistance get interrupted.</p>		

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<p>F 0684</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Provide appropriate treatment and care according to orders, resident's preferences and goals.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 41610</p> <p>Based on interview, observation and record review the facility failed to monitor and report vomiting and food regurgitation episodes for 1 (R29) of 11 resident reviewed for dining in a sample of 35.</p> <p>Findings include:</p> <p>R29's face sheet documents diagnoses including: Alzheimer's disease, dementia, disorder of urea cycle metabolism, anemia, cerebrovascular disease, hemiplegia and hemiparesis following cerebral infarction affecting left non-dominant side, Gastro-Esophageal Reflux Disease (GERD), syncope and collapse, and presence of cardiac pacemaker.</p> <p>R29's care plan documents a focus area dated 05/11/22 of (R29) has the diagnosis of GERD and is in need of a proton pump inhibitor medication to treat his condition with a goal of Through the continued use of his gastric medication, (R29) will remain free of GERD complications through next review. Documented interventions dated 03/12/21 include monitor/document/report PRN (as needed) s/sx (signs or symptoms) of GERD: belching, coughing/choking when laying down, heartburn, dyspepsia, N/V (nausea/vomiting) indigestion, regurgitation, increased salivation, swallowing problems, bitter taste in mouth, dysphagia, substernal chest pain, and increased gag response and Proton pump inhibitor medication per doctor's orders. Monitor/document side effects and effectiveness.</p> <p>R29's Minimum Data Set (MDS) assessment dated [DATE] documents in Section C, Cognitive Patterns, a Brief Interview for Mental Status (BIMS) score of 03 indicating severe cognitive impairment. Section K, Swallowing/Nutritional Status, of the same MDS does not note any swallowing disorders.</p> <p>R29's Medication Review Report with a print date of 7/24/24 documents an order dated 8/6/20 for Pantoprazole Sodium (Proton-Pump Inhibitor) Tablet Delayed Release 40 milligrams (mg), 1 tablet by mouth one time a day related to GERD and an order dated 11/3/21 for a mechanical soft texture diet, thin consistency, offer fortified pudding or equivalent with lunch and supper.</p> <p>On 07/21/24 at approximately 12:05 PM, R29 was observed regurgitating/vomiting a portion of his food back onto his lunch plate. V18 (CNA) removed the soiled plate.</p> <p>On 07/22/24 at approximately 11:49 AM and 11:51 AM, R29 was observed regurgitating/vomiting a large portion of his food back onto his lunch plate. V18 (CNA) came over handed him paper towels and removed the plate. R29 was offered a fresh plate of food but declined.</p> <p>On 07/23/24 at 11:38 AM, R29 was observed with his food at lunch. At 11:47 AM, R29 shook his head no when asked if he was going to eat some lunch. At 12:05 PM, R29 had not eaten any of his food.</p> <p>On 07/22/24 at 12:48 PM, V6 (Licensed Practical Nurse/LPN) stated R29 did vomit up some of his food yesterday but not as much as today. V6 stated she was told about it a few months ago when it first started.</p> <p>(continued on next page)</p>		

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<p>F 0684</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>On 07/22/24 at 12:50 PM, V17 (Certified Nurse Aide/CNA) stated she has seen R29 vomit up his food a few times before the last couple days. V17 said she does not know if V20 (Speech Language Pathologist/SLP) is aware, but they do tell the nurse on duty.</p> <p>On 07/22/24 at 12:54 PM, V18 (CNA) stated R29 does throw up his food often, previously it was only sometimes but the last couple weeks it has been more often. V18 said they have told V6 (Licensed Practical Nurse). V18 said she has told V22 (Former Special Care Unit Manager) about a month ago before she left. V8 said she has also mentioned it to V20 (SLP) in the past.</p> <p>On 07/22/24 at 1:40 PM, V16 (Minimum Data Set Coordinator) stated he is not aware of any concerns with R29's swallowing issues or food regurgitation concerns.</p> <p>R29's electronic medical record did not document any episodes of R29 regurgitating/vomiting his food or a physician being notified of R29 having this concern.</p> <p>On 07/23/24 at 11:36 AM, V20 (SLP) stated R29 throwing up in his food does not happen that often. V20 said she looked through the progress notes and did not see anything documented about it. V20 stated she has evaluated R29 for that concern in the past and she had talked to nursing about it in the past and did not believe it was an issue with swallowing but might be an issue with his GERD (Gastroesophageal Reflux Disease) medication and stated she felt it was a concern R29's physician needed to address. V20 stated she could recommend a barium study be done but R29 would have to be referred to her.</p> <p>On 07/24/24 at 12:12 PM, V2 (Director of Nursing/DON) stated they do not have any documentation for R29 about him eating and vomiting his food back up because she did not know about it. V2 said that V22 (Former Special Care Unit Manager) did not pass it on to her. V2 said the doctor should have been notified especially since it is still going on.</p> <p>The facility policy dated 11/13/18 titled, Physician-Family Notification - Change in Condition documents in part: Purpose: to ensure that medical care problems are communicated to the attending physician or authorized designee and family/responsible party in a timely, efficient, and effective manner.</p>		

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<p>F 0727</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Many</p>	<p>Have a registered nurse on duty 8 hours a day; and select a registered nurse to be the director of nurses on a full time basis.</p> <p>39744</p> <p>Based in interview and record review the facility failed to provided the services of a Registered Nurse for 8 consecutive hours per day 7 days a week. This failure has the potential to effect all 43 residents living at this facility.</p> <p>Findings Included:</p> <p>On 7/23/2024 at 1:10pm, V1 (Administrator) said the facility did not have the required 8 hours per day 7 days a week of Registered Nurse coverage. V1 said they did not have a policy for Registered Nurse coverage.</p> <p>On 7/22/2024 at 8:30am, V10 (Licensed Practical Nurse) said she worked the weekend of 7/20/24 and 7/21/24 and the facility did not have a Registered Nurse working on either of those days. V10 said frequently the facility does not have Registered Nurse coverage on the weekends she works.</p> <p>The facility nursing schedule for May, June and July of 2024 revealed the facility did not have the required 8 hours of Registered Nurse coverage for the following dates: 5/11, 5/25, 5/26, 6/8, 6/9, 6/22, 6/23, 6/29, 6/30, 7/6, 7/20, and 7/21.</p> <p>The Long Term Care Facility Application for Medicare and Medicaid (Form CMS 671) dated 7/22/24 documents there are 43 residents residing in the facility.</p>

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<p>F 0732</p> <p>Level of Harm - Potential for minimal harm</p> <p>Residents Affected - Many</p>	<p>Post nurse staffing information every day.</p> <p>39744</p> <p>Based on interview, record review and observations, the facility failed to prominently post the daily nurse staffing data which includes the facility's name, date, census and the total number and actual hours worked per shift for licensed and unlicensed staff responsible for resident care. This failure has the potential to affect all 43 residents who reside at this facility.</p> <p>Findings included:</p> <p>On 7/21//2024 at 11:00am and 1:00pm, the facility was observed to not have a Daily Nurse Staffing data sheet posted in a prominent place readily accessible to residents and visitors.</p> <p>On 7/23/2024 at 10:00ampm, V1 (Administrator) said She didn't know the facility was not posting Daily Nurse Staffing data and thus have not been doing it.</p> <p>On 7/22/2024 at 10:30am, V10 (Licensed Practical Nurse) said she works the dayshift at this facility as a full time nurse. V10 said she has never seen the Daily Nurse Staffing data posted while working at this facility.</p> <p>On 7/22/2024 at 9:30am and 2:00pm the facility did not have a Daily Nurse Staffing data sheet posted in a prominent place readily accessible to residents and visitors.</p> <p>On 7/23/2024 at 9:30am and 12:00pm the facility did not have a Daily Nurse Staffing data sheet posted in a prominent place readily accessible to residents and visitors</p> <p>The Long Term Care Facility Application for Medicare and Medicaid (Form CMS 671) dated 7/22/24 documents there are 43 residents residing in the facility.</p>

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<p>F 0758</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Implement gradual dose reductions(GDR) and non-pharmacological interventions, unless contraindicated, prior to initiating or instead of continuing psychotropic medication; and PRN orders for psychotropic medications are only used when the medication is necessary and PRN use is limited.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 49663</p> <p>Based on interview and record review the facility failed to ensure residents were free from unnecessary psychotropic medications for 1 (R24) of 5 residents reviewed for unnecessary medications in a sample of 35.</p> <p>Findings Included:</p> <p>R24's Admission Record documents an admitted [DATE] with diagnoses including major depressive disorder, recurrent, mild; schizophrenia, unspecified; insomnia, and nutritional anemia, unspecified.</p> <p>R24's Medication Review Report with a print date of 7/24/24 documents an order for Doxepin 6 milligrams (MG) 1 tablet at bedtime with a start date of 8/29/2023, Quetiapine Fumarate 300MG 1 tablet daily with a start date of 8/04/2023, and Alprazolam (Xanax) 2MG tablet three times a day with a start date of 8/17/2023.</p> <p>On 7/22/2024 at 1:03 PM, V2 (Director of Nursing) stated that R24 had a comprehensive list of gradual reduction review reminders for psychotropic and sedative medications on 2/26/2024 that included Quetiapine 300 MG, Doxepin 6 MG and Xanax 2 MG form from the pharmacy. V2 stated she has no documentation from V13 (Mental Health Family Nurse Practitioner/FNP) on the gradual dose reduction for Quetiapine, Doxepin and Xanax.</p> <p>On 7/24/2024 at 9:08 AM, V21 (Pharmacist) stated she sends the recommendation reminders for the gradual drug reduction (GDR) forms to the facility. V21 stated the facility should maintain all documentation on the GDR's from the pharmacy and physicians recommendations. V21 stated she did send over a GDR form for R24 for Quetiapine 300MG, Doxepin 6MG, and Alprazolam 2MG with dates from 11/23/2023, 1/25/2024 with next evaluation date of 2/2024. V21 stated she sent a reminder for the GDR on these same medications on 2/26/2024 with next evaluation dates of 8/2024. V21 stated she also sent a reminder form dated 3/27/2024 on the same medications documenting the next evaluation date of 8/2024. V21 stated she does show a gap of information missing on R24's gradual drug reductions from the physician on Quetiapine, Doxepin and Xanax, and doesn't have documentation from the physician on these medications.</p> <p>R24's Pharmacy Consultation Report dated 11/23/2023 and 1/25/2024 documented Quetiapine 300MG 1 tablet daily and Alprazolam 2MG 1 tablet three times a day with next evaluation due 2/2024. Pharmacy Consultation Reports dated 2/26/2024 and 3/27/2024 documented Quetiapine 300MG 1 tablet daily, Doxepin 6MG 1 tablet daily, and Alprazolam 2MG 1 tablet three times daily with last GDR date of 2/26/2024 and next evaluation 8/2024.</p> <p>R24's Medication Administration Record (MAR) for July 2024 documents administration of Quetiapine 300MG 1 tablet daily, Doxepin 6MG 1 tablet daily, and Alprazolam 2MG 1 tablet three times daily being administered.</p> <p>(continued on next page)</p>		

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<p>F 0758</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>There is no documentation in R24's Medical Record documenting an attempted GDR or a rationale or contraindication for the GDR for Quetiapine, Doxepin and Xanax.</p> <p>The facility policy titled Psychotropic Medication-Gradual Dosage Reduction (revision date 2/1/18) documents under Gradual Dosage Reduction (GDR) that residents who use psychotropic drugs shall receive gradual dose reductions and behavior interventions, unless clinically contraindicated, in an effort to discontinue or reduce the medications. A gradual dose reduction shall be encouraged at least twice yearly unless previous attempts at reduction have been unsuccessful or reduction is clinically contradicted .The physician has documented the clinical rational for why an additional attempted dose reduction at that time would be likely to impair the resident's function or increased distressed behavior.</p>		

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<p>F 0805</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Ensure each resident receives and the facility provides food prepared in a form designed to meet individual needs.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 41610</p> <p>Based on observation, interview and record review the facility failed to provide food with the prescribed texture of mechanical soft for 4 residents (R30, R29, R33 and R10) of 4 residents reviewed for diets in a sample of 35.</p> <p>Findings include:</p> <p>1. R30's face sheet documents diagnoses including: dementia, dysphagia, Alzheimer's disease, and protein calorie malnutrition.</p> <p>R30's Medication Review Report dated 07/24/24 documents a dietary order dated 07/11/22 of regular diet: mechanical soft texture with an order status of active.</p> <p>R30's care plan documents a focus area dated 07/11/22 of: R30 has no teeth and does not use dentures and as a result she is noted to be at risk for dental complications. Documented interventions include: therapeutic mechanically altered diet per doctor's orders. R30's care plan also documents a focus are of: R30 is in need of a therapeutic increased calorie diet to meet her nutritional needs with a dated initiated of 12/20/22. Documented interventions include: therapeutic increased calorie, mechanically altered diet per doctor's order, offer subs (substitutions) for food items not liked and or eaten.</p> <p>R30's Minimum Data Sheet (MDS) dated [DATE] documents a BIMS (Brief Interview of Mental Status) score of 03, indicating R30 has severe cognitive impairment.</p> <p>On 07/21/24 at 11:45 AM, R30 was served brown sugar meatloaf that was not ground and did not have gravy over the top, and broccoli florets that were not chopped. Some of the broccoli florets and pieces observed measured approximately 1.5 inches wide at the floret portion by 2 inches long. R30 did not eat any of the broccoli florets and pieces of the broccoli were measured from R30's uneaten food.</p> <p>On 07/22/24 at 11:35 AM, R30 was served carrots that were not soft chopped. The carrots were approximately 1.75 inches wide by 1.0 inch long. R30 did not eat any of the carrots and pieces of the carrots were measured from 30's uneaten food.</p> <p>On 07/23/24 at 11:37 AM, R30 was served Italian blend vegetables that were not soft chopped. The Italian blend vegetables had pieces that were over 2 inches in length. R30 did not eat any of the Italian blend vegetables and pieces were measured from 30's uneaten food.</p> <p>2. R29's face sheet documents diagnoses including: Alzheimer's disease, dementia, cerebrovascular disease, hemiplegia and hemiparesis following cerebral infarction affecting left non-dominant side, and gastro-esophageal reflux disease.</p> <p>R29's Medication Review Report dated 07/24/24 documents a dietary order dated 11/03/21 of general diet: mechanical soft texture with an order status of active.</p> <p>(continued on next page)</p>		

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<p>F 0805</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>R29's care plan documents a focus area dated 05/11/22 of R29 is in need of a therapeutic diet to meet his nutritional needs with an intervention dated 07/30/22 of: diet order of mechanical soft texture, thin consistency, fortified pudding with lunch and supper. R29's care plan also documents a focus area dated 02/12/24 of: R29 has his own teeth which are noted to be in poor overall condition and as a result he is noted to be at an increased risk for dental complications. Documented interventions include: therapeutic mechanically altered diet per doctor's orders dated 2/12/24.</p> <p>R29's MDS dated [DATE] documents a BIMS score of 03, indicating R29 has severe cognitive impairment.</p> <p>On 07/21/24 at approximately 11:47 AM, R29 was served brown sugar meatloaf that was not ground and did not have gravy over the top, and broccoli florets that were not chopped. Some of the broccoli florets were approximately 1.5 inches wide at the floret portion by 2 inches long.</p> <p>On 07/22/24 at approximately 11:39 AM, R29 was served carrots that were not soft chopped. The carrots were approximately 1.75 inches wide by 1.0 inch long.</p> <p>On 07/23/24 at approximately 11:40 AM, R29 was served Italian blend vegetables that were not soft chopped. The Italian blend vegetables had pieces that were over 2 inches in length.</p> <p>3. R33's face sheet documents diagnoses including: neurocognitive disorder with Lewy bodies, muscle wasting and atrophy, anorexia, Parkinson's disease without dyskinesia, dementia, Alzheimer's disease, cerebral infarction, and hemiplegia and hemiparesis following cerebral infarction affecting right dominant side.</p> <p>R33's Medication Review Report dated 07/24/24 documents a dietary order dated 04/10/23 of no added salt diet: mechanical soft texture with an order status of active.</p> <p>R33's care plan documents a focus area dated 05/01/23 of: R33 is in need of a therapeutic mechanically altered increased calorie diet to meet his nutritional needs with an intervention dated 05/01/23 of: therapeutic increased calorie, mechanically altered diet per doctor's orders, offer subs (substitutes) for food items not liked and or eaten.</p> <p>R33's MDS dated [DATE] documents no BIMS was conducted due to resident is rarely/never understood.</p> <p>On 07/21/24 at approximately 11:48 AM, R33 was served brown sugar meatloaf that was not ground and did not have gravy over the top, and broccoli florets that were not chopped. Some of the broccoli florets were approximately 1.5 inches wide at the floret portion by 2 inches long.</p> <p>On 07/22/24 at approximately 11:39 AM, R33 was served carrots that were not soft chopped. The carrots were approximately 1.75 inches wide by 1.0 inch long.</p> <p>On 07/23/24 at approximately 11:40 AM, R33 was served Italian blend vegetables that were not soft chopped. The Italian blend vegetables had pieces that were over 2 inches in length.</p> <p>4. R10's face sheet documents diagnoses including: Alzheimer's disease, dysphagia, type 2 diabetes mellitus, dementia, nutritional deficiency, and gastro-esophageal reflux disease.</p> <p>(continued on next page)</p>		

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NAME OF PROVIDER OR SUPPLIER Aperion Care St Elmo		STREET ADDRESS, CITY, STATE, ZIP CODE 221 East Cumberland St Elmo, IL 62458	
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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<p>F 0805</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>R10's Medication Review Report dated 07/24/24 documents a dietary order dated 05/18/24 of general diet: mechanical soft texture, nectar consistency, double portions with an order status of active.</p> <p>R10's care plan documents a focus area dated 05/17/21 of R10 is in need of a therapeutic mechanically altered diet to meet his nutritional needs with an intervention dated 03/24/23 of: LCS (Low Concentrated Sweets) diet, mechanical soft texture, thin consistency, double portions to assist with weight maintenance, and offer fortified pudding between meals. R10's care plan documents a focus area dated 05/17/21 of R10 has no teeth and does not use dentures so as a result he is noted to be at an increased risk for dental complications with an intervention dated 03/21/19 of: therapeutic mechanically altered diet per doctor's orders, offer subs for food items not liked or eaten.</p> <p>R10's MDS dated [DATE] documents a BIMS score of 00, indicating R10 has severe cognitive impairment.</p> <p>On 07/21/24 at approximately 11:50 AM, R10 was served brown sugar meatloaf that was not ground and did not have gravy over the top, and broccoli florets that were not chopped. Some of the broccoli florets were approximately 1.5 inches wide at the floret portion by 2 inches long.</p> <p>On 07/22/24 at approximately 11:40 AM, R10 was served carrots that were not soft chopped. The carrots were approximately 1.75 inches wide by 1.0 inch long.</p> <p>On 07/23/24 at approximately 11:37 AM, R10 was served Italian blend vegetables that were not soft chopped. The Italian blend vegetables had pieces that were over 2 inches in length.</p> <p>The facility document titled Diet Spreadsheet dated Day 22 documents: dental soft (mechanical soft) ground brown sugar meatloaf with gravy, mashed potatoes and gravy, soft chopped broccoli, cream pie, and soft dinner roll/margarine.</p> <p>The facility document titled, ground brown sugar meatloaf with gravy day 22 documents in part: 6. Place prepared meatloaf in a washed and sanitized food processor; grind to the size and texture of fine hamburger. Place in steam table pans and add a small amount of prepared broth or gravy to keep moist. To serve: portion #8 dip of moist, ground meat onto plate and ladle appropriate amount of gravy/sauce over the top to keep moist.</p> <p>The facility document titled, soft chopped broccoli day 22 documents in part: 4. Chop broccoli into bite-sized pieces. Transfer to steam table pans. Cover and hold until ready to serve.</p> <p>The facility document titled, Diet Spreadsheet day 23 documents: dental soft (mech soft) ground lemon chicken with sce (sauce), soft rice pilaf with gravy or sauce, soft chopped vegetables, and mixed fruit dump cake.</p> <p>The facility document titled, soft chopped vegetables day 23 documents in part: 3. Drain carrots slightly, leaving enough liquid in pan to retain heat. Chop carrots into bite-sized pieces.</p> <p>The facility document titled, Diet Spreadsheet day 24 documents: dental soft (mech soft): beef ravioli with marinara sauce, soft chopped Italian blend vegetables, butterscotch bars, garlic bread, soft.</p> <p>(continued on next page)</p>		

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NAME OF PROVIDER OR SUPPLIER Aperion Care St Elmo		STREET ADDRESS, CITY, STATE, ZIP CODE 221 East Cumberland St Elmo, IL 62458	

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<p>F 0805</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>The facility document titled, soft chopped Italian blend vegetables day 24 documents in part: 4. Chop vegetables into bite-sized pieces. Transfer to steam table pans. Cover and hold until ready to serve.</p> <p>On 07/24/24 at 12:23 PM, V2 (Director of Nursing) stated the food should follow the recipes in the kitchen and the meat ground and the vegetables chopped for the mechanical soft diet.</p> <p>The facility policy dated 2017 documents in part: the section titled, General Principles & Guidelines: 4. Meat is ground or chopped into bite-sized pieces (1/2 inch or smaller) and should be mixed or served with gravy, broth or another type of moistening agent. 6. Vegetables are cooked soft, moist and fork tender with no large chunks or pieces. The section titled, Food Guide: documents in part: vegetables: all vegetables should be chopped or diced into bite-sized pieces (1/2 inch or smaller).</p>

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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 0880</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Provide and implement an infection prevention and control program.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 49663</p> <p>Based on observation, interview, and record review the facility failed to maintain aseptic technique while performing catheter for 1 of 2 residents (R6) reviewed for catheter/ incontinence care in a sample of 35.</p> <p>Findings include:</p> <p>R6's Face Sheet documents an admitted to the facility of 3/18/24 with diagnoses including: type 2 diabetes mellitus without complications, urinary tract infection, site not specified, muscle weakness, chronic kidney disease, and flaccid neuropathic bladder, not elsewhere classified.</p> <p>R6's Order Summary Report with a print date of 7/24/24 documents an order of catheter care per facility policy every 24 hours as needed dated 5/20/2024.</p> <p>R6's Care Plan dated 7/05/2024 documents a focus area of (R6) has the diagnosis of Neurogenic bladder and is in need of an indwelling, foley catheter to meet his urinary drainage needs. Documented interventions include Catheter care as scheduled per facility policy with an initiation date 2/21/24.</p> <p>R6's Minimum Data Set (MDS) dated [DATE] documents in section C, Cognitive Patterns, a Brief Interview for Mental Status (BIMS) score of 14, indicating R6 is cognitively intact. Section H, Bladder and Bowel, of the same MDS documents that R6 has an indwelling catheter.</p> <p>On 07/22/24 at 2:05PM, V5 (Certified Nurse Assistant/CNA) was observed providing perineal and indwelling urinary catheter care for R6. V5 gathered supplies and sat the water basin and 4-5 washcloths down on the toilet lid in the hallway bathroom while washing her hands with soap and water, then filled the basin with warm water. V5 then picked up supplies from the toilet lid and started walking down the hallway to R6's room. V5 dropped the squeeze bottle that held soap and water for perineal care on the hallway floor outside R6's room. V5 then entered R6's room and placed the water basin and washcloths on R6's bedside table with no barrier or disinfecting process to the area. V5 then exited R6's room to the hallway, placed her barrier gown on, picked up the squeeze bottle containing soap and water, re-entered R6's room and placed the squeeze bottle on the bedside table with the other supplies. V5 sanitized her hands and donned gloves. V5 explained procedure to R6 prior to starting care. V5 started care with supplies.</p> <p>On 7/23/2024 at 11:30 AM, V11 (Infection Preventionist Nurse) stated the expectation is for staff to follow the facility policy and procedure with infection control practices during perineal care/catheter care. V11 stated she would expect staff not to place basin and wash clothes on a toilet lid prior to using them for perineal/catheter care. V11 stated she would expect new supplies to be gathered if contaminated. V11 stated her expectations would be to obtain a new soap and water squeeze bottle after being on the floor and a barrier to be placed or disinfecting process completed on the bedside table prior to placing supplies for perineal/urinary catheter care.</p> <p>On 7/24/2024 at 8:53 AM, V5 (CNA) stated she has been employed with this facility for a year. V5 stated she did have training on indwelling catheter, genital, and perineal care upon hiring.</p> <p>(continued on next page)</p>		

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<p>F 0880</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>The facility policy titled Infection Prevention and Control Program (revision date 11/28/2017) documents under Guidelines step 4 that each departmental policy and procedure manual includes specific infection control measures, sanitation and aseptic techniques as they relate to the responsibilities and function of the particular department.</p> <p>The facility policy titled Urinary Catheter Care (revision date 2/14/19) documents Purpose: to establish guidelines to reduce the risk of or prevent infections in resident with an indwelling catheter. Step 16 under guidelines documents Routine hygiene (e.g., cleansing of the meatal surface during daily bathing or showering) is appropriate. (Source: CDC Guidelines for Prevention of Catheter Associated Urinary Tract Infections 2009) Encrustations on the foley catheter should be removed from the meatus outward with clean wash cloth, rinsed with clean water on an as needed basis.</p>

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<p>F 0912</p> <p>Level of Harm - Potential for minimal harm</p> <p>Residents Affected - Some</p>	<p>Provide rooms that are at least 80 square feet per resident in multiple rooms and 100 square feet for single resident rooms.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 39744</p> <p>Based on observation, interview and record review the facility failed to provide at least 80 square feet per resident in two multiple occupancy resident bedrooms. This affected 4 of 4 (R6, R23, R28 and R11) residents reviewed for room sizes in a sample of 35.</p> <p>Findings include:</p> <p>Observation on 7/23/2024 at 9:00am revealed R6 and R23 share a bedroom with two beds, two dressers, a recliner, two walking assistive devices, two over the bed tables and had limited area to move around inside the room.</p> <p>Observations on 7/23/2024 at 9:05am revealed R28 and R11 share a bedroom with two beds, one large recliner, two dressers, two walking assistive devices, to over the bed tables and had limited area to move around inside the room.</p> <p>During a tour with V7 (Maintenance Director) on 7/23/2024 at 9:00am, V7 was asked to measure R6, R23, R28 and R11's bedroom sizes. V7 used a measuring tape to measure the length and width of R6 and R23's bedroom and stated, 11 by 14 feet (which is the equivalent to 154 sq. ft. (square feet)/77 sq. ft. per resident bed). At approximately 9:05am, V7 measured R28 and R11's bedroom with a tape measure and stated, 11 by 13.7 feet (which is the equivalent to 150.7 sq. ft./75.4 sq. ft. per resident bed).</p> <p>On 7/24/2024 at approximately 10:15am, when asked V1 (Administrator) was asked if residents were notified during admission that some of the rooms in the facility did not meet the requirement of having 80 sq ft per resident, V1 stated no. V1 said rooms 19-31 did not meet the required 80 sq ft per resident bed and rooms 19-31 are all certified for double occupancy.</p> <p>The facility's Daily Census sheet with print date of 7/20/2024 documents R2, R6, R7, R10, R11, R15-R17, R20, R21, R23, R28-R30, R32-R35, R38 and R43 currently reside in rooms 19-31.</p> <p>Inquiries regarding the size of these rooms during the survey from 7/21/2024 to 7/24/2024 found no concerns or negative interviews from residents or families of residents who reside in the waived rooms. On 7/23/2024 at 9:30am R6, R23, R32, R11 and R28 all voiced no concerns with the size of their rooms during interviews.</p> <p>Observations and measurements of these rooms during the survey, determined adequate space exists to meet the medical and personal needs of the residents living in these waived rooms.</p> <p>Review of Resident Council Minutes from the past 6 months indicated no concerns related to the size of the rooms included in the waiver.</p> <p>room [ROOM NUMBER]: 143.17 square (sq) feet (ft)= (71.59 sq ft per resident bed)</p> <p>room [ROOM NUMBER]: 156.8 sq ft = (78.4 sq ft per resident bed)</p> <p>(continued on next page)</p>		

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F 0912 Level of Harm - Potential for minimal harm Residents Affected - Some	room [ROOM NUMBER]: 148.4 sq ft = (74.2 sq ft per resident bed) room [ROOM NUMBER]: 148.4 sq ft = (74.2 sq ft per resident bed) room [ROOM NUMBER]: 151.2 sq ft = (75.6 sq ft per resident bed) room [ROOM NUMBER]: 151.2 sq ft = (75.6 sq ft per resident bed) room [ROOM NUMBER]: 151.2 sq ft = (75.6 sq ft per resident bed) room [ROOM NUMBER]: 152.3 sq ft = (76.14 sq ft per resident bed) room [ROOM NUMBER]: 152.3 sq ft = (76.14 sq ft per resident bed) room [ROOM NUMBER]: 152.3 sq ft = (76.14 sq ft per resident bed) room [ROOM NUMBER]: 144.2 sq ft = (72.1 sq ft per resident bed) room [ROOM NUMBER]: 150.87 sq ft = (75.44 sq ft per resident bed) room [ROOM NUMBER]: 152.28 sq ft = (76.14 sq ft per resident bed)