

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  145890	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED  04/17/2025
NAME OF PROVIDER OR SUPPLIER  Eldorado Rehab & Healthcare		STREET ADDRESS, CITY, STATE, ZIP CODE  1001 A Jefferson Street Eldorado, IL 62930	

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 0656</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Develop and implement a complete care plan that meets all the resident's needs, with timetables and actions that can be measured.</p> <p><b>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 39744</b></p> <p>Based on interview and record review, the facility failed to develop a comprehensive person centered Care Plan for 1 (R43) of 19 residents reviewed for comprehensive care plans in a sample of 33.</p> <p>Findings include:</p> <p>R43's Admission Record documents an admitted to the facility on [DATE] with diagnoses including dementia, Alzheimer's dementia, acute kidney failure, urinary tract infection, atrial flutter, diverticulosis, diabetes mellitus type 2 and general anxiety disorder.</p> <p>R43's Care Plan in the Electronic Health Record (EHR) documented only two focus areas that included: Advanced directives and long term residency. The Care Plan is undated but lists an admitted [DATE].</p> <p>On 4/16/2025 at 9:15AM, V31 (Care Plan Coordinator) reviewed R43's EHR and said R43's Care Plan was never developed as far as she could tell. V31 said it only has two focus areas, advance directives and long term residency. V43 said it looks like R43's Care Plan was started but not finished. V43 said she was not the Care Plan Coordinator at the time R43's Care Plan was supposed to be developed. V31 said she might have a Baseline Care Plan for R43 in her desk drawer, but she would have to look. V31 agreed a Baseline Care Plan in her locked office in the drawer was not accessible to the staff for guiding R43's care.</p> <p>On 4/16/2025 at 9:05AM, V2 (Director of Nursing) said she did not know why, but R43's Care Plan had not been completed. V2 said R43's Care Plan should have more than advanced directives and long term residency as focus areas on it. V2 agreed R43 did not have a personalized comprehensive care plan developed after she was admitted to this facility.</p> <p>On 4/17/2025 at 10:30am, V21 (Corporate Nurse) said she could not find a Comprehensive Care Plan for R43.</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>Provide care and assistance to perform activities of daily living for any resident who is unable.</p> <p><b>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 39744</b></p> <p>Based on interview and record review, the facility failed to ensure residents who require assistance with bathing receive frequency of showers as scheduled/preferred for 3 (R35, R39, R7) of 4 residents reviewed for Activities of Daily Living assistance in a sample of 33.</p> <p>Findings include:</p> <p>1. R35's Admission Record in the Electronic Health Record (EHR) document R35 was admitted to this facility on 11/22/2021 with diagnoses of cerebral infarction, muscle wasting, muscle atrophy, hemiplegia and hemiparesis. R35's Minimum Data Set (MDS) dated [DATE] documented R35 had a Brief Interview for Mental Status (BIMS) score of 12, indicating R35 is cognitively intact. This same MDS documented R35 has impairment of one side of his upper and lower extremities, needs set up/clean-up assistance for showering or bathing and does not reject care.</p> <p>On 4/14/2025 at 1:30PM, R35 said he is supposed to get two showers per week but does not get them. R35 said he wants his showers twice per week, but most of the time he only gets one shower per week and has to go 7 or 8 days in between showers. R35 said he was scheduled for showers on Tuesday and Friday evenings.</p> <p>R35's Skin Monitoring Comprehensive CNA (Certified Nursing Assistant) Shower Review received from V1 (Administrator) documented R35 received 12 of the 20 scheduled showers from February 1, 2025 through April 9, 2025. R35 received showers on 2/5, 2/11, 2/14, 2/21, 2/28, 3/7, 3/13, 3/18, 3/25, 4/2, 4/8, and 4/9 and refused showers on 2/18 and 3/28.</p> <p>2. R39's Admission Record in the EHR documented R39 was admitted to this facility on 9/1/2024 with diagnoses of dementia and hemiplegia with right dominant side affected. R39's MDS dated [DATE] documented R39's cognitive impairment is too severe to participate in the testing. This same MDS documented R39 has physical impairment to both upper and lower extremities and is dependent on staff for all activities of daily living.</p> <p>On 4/14/2025 at 12:39PM, R39 was observed in the facility's dining room with very dry flaky skin noted to his scalp and face.</p> <p>On 4/15/2025 at 12:30PM, R39 was observed in the facility's dining room with the same dry flaky skin noted to his scalp and face.</p> <p>R39's Skin Monitoring Comprehensive CNA Shower Review documentation received from V1 from February 1, 2025 through April 9, 2025 documented that R39 received showers on 2/2, 2/8, 2/12, 2/19, 3/12, 3/19, 3/26, 3/31, 4/2 and 4/9 and received bed baths on 2/26, 3/5, and 3/15.</p> <p>The facility's shower schedule with revision date of 10/02/2024 documented R39's showers are scheduled on Wednesdays and Saturdays.</p> <p>On 4/16/2025 at 2:05pm, V22 (Certified Nursing Assistant/CNA) said R39 does not refuse showers and all the residents are supposed to be showered twice per week.</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 - Few</p>	<p>On 4/16/2025 at 9:15AM, V9 (Licensed Practical Nurse/LPN) said residents are supposed to get showered twice per week according to the shower schedule which goes by room number.</p> <p>On 4/16/2025 at 9:25AM, V12 (CNA) said residents get two showers per week. If a resident refuses, then they are supposed to document the refusal on the shower sheet and turn it in to the nurse.</p> <p>On 4/16/2025 at 9:35AM, V2 (Director of Nursing/DON) said showers are to be given twice per week according to the shower schedule. V2 said she expects the residents to be showered as scheduled.</p> <p>51792</p> <p>3. R7's Admission Record documented R7 was admitted to the facility on [DATE] and include diagnoses of muscle weakness (generalized), unsteadiness on feet, and other reduced mobility. R7's MDS dated [DATE] documented a BIMS score of 14, indicating R7 was cognitively intact. In the section titled Functional Abilities under Self-Care, the MDS documented R7 requires substantial/maximal assist for showering/bathing, meaning the helper does more than half the effort .</p> <p>On 04/14/25 02:25PM, R7's hair appeared greasy and unkempt/uncombed. R7 stated We don't get our showers on time. We often only get a shower once a week.</p> <p>On 04/16/25 at 10:05 AM, R7 stated that her shower days are scheduled for Mondays and Thursdays.</p> <p>On 04/16/25 09:07AM, R7's Skin Monitoring Comprehensive CNA Shower Review documentation received from V1 from February 1, 2025 through April 12, 2025 documented that R7 received showers on printed shower sheets obtained from V1 documented R7 had showers on the following days: 2/2/25, 2/9/25, 2/14/25, 2/18/25, 2/24/25, 2/28/25, 3/5/25, 3/10/25, 3/13/25, 3/20/25, 3/27/25, 3/31/25, 4/7/25, 4/8/25, and 4/12/25.</p> <p>The facility policy titled Bath, Shower/Tub with a revision date of February 2018, documents the purpose of this procedure is to promote cleanliness, provide comfort to the resident and to observe the condition of the resident's skin. Guideline #5 documents Each resident shall have at least one complete bath and hair wash weekly and as many additional baths and hair washes as necessary for satisfactory personal hygiene.</p>

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<p>F 0700</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Try different approaches before using a bed rail. If a bed rail is needed, the facility must (1) assess a resident for safety risk; (2) review these risks and benefits with the resident/representative; (3) get informed consent; and (4) Correctly install and maintain the bed rail.</p> <p><b>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY**</b> 51792</p> <p>Based on observation, interview, and record review, the facility failed to ensure bed rails/enablers were installed in accordance with manufacturer's recommendations and specifications for 1 (R7) of 1 resident reviewed for bed rails in the sample of 33.</p> <p>Findings include:</p> <p>R7's Admission Record documented R7 was admitted to the facility on [DATE] and included diagnoses of muscle weakness (generalized), unsteadiness on feet, other reduced mobility, cerebral infarction, unspecified, and hemiplegia, unspecified affecting left nondominant side.</p> <p>R7's Minimum Data Set (MDS) dated [DATE] lists her functional limitation in range of motion impairment as on one side for upper extremity and lower extremity. R7 MDS documented she uses a wheelchair as a mobility device, and requires substantial/maximal assistance in the following areas: upper and lower body dressing, roll left and right: The ability to roll from lying on back to left and right side and return to lying on back on the bed, and for lying to sitting on side of bed: The ability to move from lying on the back to sitting on the side of the bed and with no back support.</p> <p>R7's Care Plan dated 12/26/24 documented a Focus Area of the resident is at risk for falls deconditioning, gait/balance problems, incontinence. Corresponding interventions listed for this focus area are low bed and mobility bar to bed.</p> <p>On 04/14/25 at 10:00 AM, R7's bed was observed to have bed rails/enablers attached to the bed frame via zip ties. R7 stated that she was moved from her usual room, and unable to take her mattress and bed frame with her, but these rails were from her previous bed. R7 said that the staff told her that they could not bolt the bed rails/enablers she used to this specific bed frame in the new room, because it would void the warranty. R7 stated she was told the bed rails were not made for this bed frame, and the facility did not have the correct bed rails for that bed frame. R7 said that the bed rails/enablers are loose and do not assist her bed mobility as much as when they were bolted to the bed. At this time, surveyor grabbed a hold of the bed rails to check for stability and noted them to be wobbly/unstable. The rails were easily moved back and forth and up/down.</p> <p>On 04/15/25 at 01:26 PM, the bedrails/enablers on R7's bed were again observed to be attached to R7's bedframe via zip ties and were not anchored with nut and bolt or otherwise securely attached.</p> <p>On 04/15/25 at 01:32 PM, V10 (Licensed Practical Nurse/LPN) stated R7 does use the enablers to reposition herself. V10 stated that she has seen R7 use them frequently to reposition herself in bed and to pull herself up in bed. V10 further stated, if R7 did not have them, it would be more difficult for her to reposition herself without the assistance of staff.</p> <p>(continued on next page)</p>		

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<p>F 0700</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>On 04/15/25 01:36 PM, V23 (Certified Nurse Aide/CNA) stated that R7 uses her bedrails/enablers every day to reposition and move herself around in bed. V23 said She (R7) needs them for her bed mobility. She uses it even when we get her up out of bed. She uses them to help her stand even when they are using the gait belt.</p> <p>On 04/15/25 at 01:48 PM, V24 (Maintenance Supervisor) stated that the enablers are attached to the bed using thick/wide zip ties. V24 said these are not the correct rails for this bed, and this was the only way to attach them to the bed until the correct bed rails/enablers come in that the facility has ordered. The facility is currently waiting on the rails designed for that bed. V24 said if he drills holes in the bed, it will void the warranty. V24 said that on R7's old bed, they were bolted on. This surveyor described the observation of R7's bed rails being unstable/loose to V24, and V24 stated he understood that, but this was the best solution the facility could come up with until the correct bed rails/enablers arrived and could be installed. V24 was asked for a user manual or manufacturer's instructions for R7's bed, and V24 stated they did not have one.</p> <p>On 04/16/25 at 10:05 AM, R7's bedrails/enablers were observed to be securely attached to the bed frame using nuts and bolts, two per bed rail/enabler.</p> <p>On 4/16/25 at 10:05 AM, R7 said that her bed rails/enablers had been attached with zip ties about 4 days ago from today and had been attached like that until this morning.</p> <p>The facility's Bed Safety Policy dated December 2007 states, Ensure that bed side rails are properly installed using the manufacturer's instructions and other pertinent safety guidance to ensure proper fit. When using side rails for any reason, the staff shall take measures to reduce related risks.</p>

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<p>F 0744</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Provide the appropriate treatment and services to a resident who displays or is diagnosed with dementia.</p> <p><b>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY**</b> 39744</p> <p>Based on interview and record review the facility failed to develop a plan for appropriate treatment and services for a resident with dementia for 1 (R43) of 19 residents reviewed for dementia care in a sample of 33.</p> <p>Findings include:</p> <p>R43's Admission Record document she was admitted to this facility on 1/18/2025 and include a diagnosis of Alzheimer's dementia. R43's Minimum Data Set (MDS) dated [DATE], documented R43 has severe cognitive impairment and could not participate in cognitive testing. This same MDS documented R43 needs maximum to total assistance for all activities of daily living.</p> <p>R43's Care Plan documented two focus areas that included: Advanced directives and long term residency. The Care Plan is undated but lists an admitted [DATE]. R43's Care Plan did not include a plan for R43's Alzheimer's dementia or cognitive decline.</p> <p>On 4/16/2025 at 9:15 AM, V31 (Care Plan Coordinator) reviewed R43's Care Plan in the EHR and said R43's Care Plan was never developed. V43 said it looks like R43's Care Plan was started but not finished and should have more than two focus areas on it. V31 said R43's Care Plan did not include a plan to treat or provide services for R43's dementia or cognitive decline.</p> <p>On 4/16/2025 at 9:05 AM, V2 (Director of Nursing) said she did not know why, but R43's Care Plan had not been completed. V2 said R43's Care Plan should have more than advanced directives and long term residency as focus areas on it. V2 agreed R43 did not have a comprehensive care plan developed after she was admitted to this facility. V2 said R43's Care Plan should have addressed R43's Alzheimer's dementia and included a plan for treatment and services.</p> <p>On 4/17/2025 at 10:30 AM, V21 (Corporate Nurse) said she could not find a comprehensive plan of care for R43's Alzheimer's dementia or cognitive decline.</p>