

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 146059	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 05/09/2024
NAME OF PROVIDER OR SUPPLIER Grove Health & Rehab Ctr, The		STREET ADDRESS, CITY, STATE, ZIP CODE 873 Grove Street Jacksonville, IL 62650	

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 0550</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 dignified existence, self-determination, communication, and to exercise his or her rights.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 32874</p> <p>Based on interview and record reviews the facility failed to promote residents' dignity by answering call lights and addressing residents' needs for 4 of 11 residents (R1, R5, R6 and R7) reviewed for dignity in the sample of 22.</p> <p>Findings include:</p> <p>1. On 5/6/2024 at 9:50 AM R1 stated it takes hours to get call lights answered.</p> <p>R1's Minimum Data Set (MDS) dated [DATE] documents that R1 is cognitively intact.</p> <p>2. On 5/6/2024 at 9:59 AM R5 stated it takes a while for call lights to get answered. R5, stated if she needs something she will sit in doorway of her room and staff will get to her when they can.</p> <p>R5's MDS dated [DATE] documents that R5 is moderately impaired.</p> <p>43847</p> <p>3. R6's Face Sheet, dated 5/9/2024 documents admitted [DATE] and diagnoses of hemiplegia, paralysis, and history of falls.</p> <p>R6's MDS dated [DATE] documents R6 is cognitively intact.</p> <p>On 5/6/2024 at 11:00 AM R6 stated that there isn't enough staff, that answering call lights is an issue. R6 stated that evening shift is the biggest problem with not having enough staff. R6 stated that staff help her to the bathroom, but she must wait for a long time.</p> <p>4. R7's Face Sheet, dated 5/9/2024 documents admitted [DATE] and diagnoses of COPD (chronic obstructive pulmonary disease), repeated falls, fracture with healing of right foot.</p> <p>R7's Minimum Data Set, dated dated [DATE] documents that R7 is cognitively intact.</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 0550</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>On 5/6/2024 at 10:30 AM R7 stated that staff are slow to answer call lights. R7 stated that there aren't enough staff to take care of everyone, especially on evenings. R7 stated that she wants to get out bed, but it takes two people and there isn't enough staff to get her out of bed. R7 stated that she must wait for staff to change her or give her the bedpan, that it takes two people to change her, and, in the evenings, there isn't always two people around.</p> <p>5. R10's Face Sheet dated 5/9/2024 documents admitted [DATE] and diagnoses of syncope, repeated fall, congestive heart failure and COPD.</p> <p>R10's MDS dated [DATE] documents that R10 is cognitively intact.</p> <p>On 5/6/2024 at 10:15 AM R10 stated that she has had to wait 45 minutes for her call light to be answered. R10 state the staff are good but they are always short staffed and over worked.</p> <p>The Resident Council Minutes, dated April 2024 documents department concerns, Nursing: call light time.</p> <p>On 5/9/2024 at 8:50AM V10, Assistant Director of Nursing (ADON) stated he expects call lights to be answered timely.</p> <p>Facility provided call light policy dated 7/1/2023 documents Resident call light will be responded to within a reasonable amount of time.</p>

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<p>F 0690</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Provide appropriate care for residents who are continent or incontinent of bowel/bladder, appropriate catheter care, and appropriate care to prevent urinary tract infections.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 33112</p> <p>Based on observation, interview and record review, the facility failed to provide complete incontinent care to prevent urinary tract infections for 2 of 4 residents (R19, R20) reviewed for incontinent care in the sample of 22.</p> <p>Findings include:</p> <p>1. R19's Admission Record, print date of 5/9/24, documents that R19 was admitted on [DATE] and has diagnoses of Alzheimer's Disease and Chronic Kidney Disease Stage 3.</p> <p>R19's Minimum Data Set (MDS), dated [DATE], documents that R19 is severely cognitively impaired, is dependent on staff for toileting hygiene, and has an indwelling urinary catheter.</p> <p>On 5/7/24 at 7:45 PM, V17 Certified Nurse Aide (CNA) and V18 CNA transferred R19 to bed. V17 removed R19's incontinent brief. R19 was rolled over on to his left side. With a washcloth that was wet with peri-wash, V17 washed the back of R19's scrotum. R19 was rolled over onto his back. V17 with another wet washcloth wiped R19's penis and the front of his scrotum. V17 failed to cleanse the penile glans (head), indwelling catheter tubing, rectal area, and buttocks.</p> <p>2. R20's Admission Record, print date of 5/9/24, documents that R20 was admitted on [DATE] and has diagnoses of Alzheimer's Disease and Down Syndrome.</p> <p>R20's MDS, dated [DATE], documents that R19 is severely cognitively impaired, is dependent on staff for toileting hygiene, and is always incontinent of bowel and bladder.</p> <p>On 5/7/24 at 7:55 PM, V17 and V18 transferred R20 to bed. V17 removed R20's pants. The seat of R20 pants were wet. V18 removed R20's incontinent brief. The brief was wet with urine and had feces. V18 with a washcloth that was wet with peri wash, cleansed R20's groin, labia, and the urinary meatus. V18 pushed the washcloth to the bottom of R20's peri area. R20 was rolled over onto her left side. V18 brought the soiled washcloth up through the rectal area cleansing the feces. With another wet washcloth V18 cleansed the rectal area. A new incontinent brief was then placed on R20. V18 failed to cleanse the inner thighs which were noted to be red, the back of the thighs, and the buttocks.</p> <p>On 5/9/24 at 11:32 AM, V2, Director of Nurse, stated that when incontinent care is provided the resident should be cleansed completely and any areas that were soiled should be cleansed. V2 further stated that if a resident has an indwelling urinary catheter the catheter tubing should be cleansed and the meatus.</p> <p>The Incontinence Care Policy, dated 7/1/23, documents, 8. Wash all soiled skin areas and dry very well, especially between skin folds; changing gloves and performing hand hygiene as required to prevent cross-contamination.</p>		

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<p>F 0725</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Provide enough nursing staff every day to meet the needs of every resident; and have a licensed nurse in charge on each shift.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 43847</p> <p>Based on interview and record review, the facility failed to provide sufficient staff to provide care in a timely manner for 5 of 22 residents (R6, R7, R10, R1 and R5) reviewed for staffing in the sample of 22.</p> <p>Findings include:</p> <p>1. R6's Face Sheet, dated 5/9/2024 documents R6's admitted [DATE] and diagnoses of hemiplegia, paralysis, and history of falls.</p> <p>R6's Minimum Data Set (MDS) dated [DATE] documents that R6 is cognitively intact.</p> <p>On 5/6/2024 at 11:00 AM R6 stated that there isn't enough staff, that answering call lights is an issue. R6 stated that evening shift is the biggest problem with not having enough staff. R6 stated that staff help her to the bathroom, but she must wait for a long time.</p> <p>2. R7's Face Sheet, dated 5/9/2024 documents admitted [DATE] and diagnoses of COPD (Chronic obstructive pulmonary disease), repeated falls, fracture with healing of right foot.</p> <p>R7's MDS dated [DATE] documents that R7 is cognitively intact.</p> <p>On 5/6/2024 at 10:30 AM R7 stated that staff are slow to answer call lights and there isn't enough staff to take care of everyone especially on evenings. R7 stated she wants to get out bed, but it takes two people and there isn't enough staff to get her out of bed. R7 stated that she must wait for staff to change her or give her the bedpan, that it takes two people to change her, and, in the evenings, there isn't always two people around. R7 stated that typically it takes 20-30 minutes to answer her call light but last night (5/8/2024) it was 4 hours she turned her call light on around 6 PM and the staff couldn't provide her care until 10 PM.</p> <p>3. R10's Face Sheet, dated 5/9/2024 documents admitted [DATE] and diagnoses of syncope, repeated fall, congestive heart failure and Chronic obstructive pulmonary disease.</p> <p>R10's MDS dated [DATE] documents that R10 is cognitively intact.</p> <p>On 5/6/2024 at 10:15 AM R10 stated that she has had to wait 45 minutes for her call light to be answered. R10 state the staff are good but they are always short staffed and over worked.</p> <p>32874</p> <p>4. On 5/6/2024 at 9:40 AM, R1 stated there is not enough staff on nights and weekends</p> <p>R1's MDS dated [DATE] documents that R1 is cognitively intact.</p> <p>(continued on next page)</p>		

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<p>F 0725</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>R1's Face Sheet, dated 5/7/2024, documents R1 has diagnoses of chronic Right heart failure, Type 2 Diabetes with diabetic neuropathy, and chronic obstructive pulmonary disease.</p> <p>5. On 5/6/2024 at 9:59 AM, R5 stated seems not to have enough staff on the evenings as it takes so long to put people to bed.</p> <p>R5's MDS dated [DATE] documents that R5 is moderately impaired.</p> <p>R5's Face Sheet, dated 5/7/2024 document diagnoses acute gastric ulcer with perforation, peritonitis, calculus of kidney, abnormal weight loss and chronic obstructive pulmonary disease.</p> <p>33112</p> <p>6. On 5/7/24 at 2:09 PM, V11, Certified Nurse Aide, (CNA) stated he is responsible for doing the CNA schedule. He stated that he schedules for day shift; 5 CNAs on H1 (hallway), 6 or 5 on H2 (hallway), and 2 on Y2 (hallway). He stated that night shift has 3 CNAs for each of the H1 and H2 halls and 1 CNA for the Y2 hall.</p> <p>On 5/7/24 at 7:39 PM, V20, CNA, was questioned if 1 CNA was enough for Y2-hall. V20 stated, We actually need another CNA up here, with 1 the residents have to wait for help.</p> <p>On 5/7/24 at 7:55 PM, V17, CNA, and V18, CNA, were questioned if 3 CNAs were enough staff for H2 hall, both stated that they get the job done but the residents must wait longer because they have so many residents that require 2 staff to assist them.</p> <p>On 5/7/24 at 8:05 PM, V18 stated, Most of these residents have been up at least since 4:30 PM. When we get here, they are eating or finished with dinner, so we finish that and start bringing them back to the hall.</p> <p>On 5/9/24 at 1:39 PM, V2, Director of Nurses, stated the facility does not have a policy on staff.</p> <p>The facility provided staffing sheet, dated 4/16/24, documents that H1 and H2 only had 2 CNAs apiece.</p> <p>The facility provided staffing sheet, dated 4/18/24, documents that H1 had 2 CNAs and H2 had 2 CNAs after 10 PM.</p> <p>The facility provided staffing sheet, dated 4/21/24, documents that H1 had 2 CNAs after 10 PM and 2 CNAs on H2.</p> <p>The facility provided staffing sheet, dated 4/22/24, documents that H1 and H2 only had 2 CNAs apiece.</p> <p>The facility provided staffing sheet, dated 4/27/24, documents that H1 had 2 CNAs.</p> <p>The facility provided staffing sheet, dated 4/28/24, documents that H1 and H2 only had 2 CNAs apiece.</p> <p>(continued on next page)</p>		

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<p>F 0725</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>The facility provided list of residents requiring a 2 person assist, undated, documents that H1-Hall has 53 residents and 9 require 2-person assist, H2-hall has 48 residents and 14 require 2-person assist, and Y2-Hall has 21 residents and 2 require 2 staff assist.</p>