STATE OF ILLINOIS
DEPARTMENT OF PUBLIC HEALTH
STATEMENT OF VIOLATIONS AND PLAN OF CORRECTION

COLONIAL APARTMENTS — Facility Name
0038125 — I.D. Number

920 WEST FORTH CENTRALIA, ILLINOIS 62801 — Address

Reviewed By

11/14/05 — Date of Survey

ANNUAL — Type of Survey

Surveyed By

As a result of a survey conducted by representative(s) of the department, it has been determined the following violations occurred. Please respond to each violation. The response must include specific actions which have been or will be taken to correct each violation. The date of which each violation will be corrected must also be provided. Forms are to be submitted with the original signature.

IMPORTANT NOTICE: THE STATE AGENCY IS REQUESTING DISCLOSURE OF INFORMATION THAT IS NECESSARY TO ACCOMPLISH THE STATUTORY PURPOSE AS OUTLINED UNDER PUBLIC ACT 83-1530. DISCLOSURE OF THIS INFORMATION IS MANDATORY. THE FORM HAS BEEN APPROVED BY THE FORMS MANAGEMENT CENTER.

"A" VIOLATION(S):

350.610a)
350.1060h)
350.3240a)

The facility shall have written policies and procedures governing all services provided by the facility which shall be formulated with the involvement of the administrator. The policies shall be available to the staff, residents and the public. These written policies shall be followed in operating the facility and shall be reviewed at least annually.

There shall be available sufficient, appropriately qualified training and habilitation personnel, and necessary supporting staff, to carry out the training and habilitation program. Supervision of delivery of training and habilitation services shall be the responsibility of a personal who is a Qualified Mental Retardation Professional.

AN OWNER, LICENSEE, ADMINISTRATOR, EMPLOYEE OR AGENT OF A FACILITY SHALL NOT ABUSE OR NEGLECT A RESIDENT. (Section 2-107 of the Act)

This STANDARD is not met as evidenced by:

Based on interview, record verification, and observation, the facility failed to implement their policy which resulted in R13 being left on a community event when the facility:

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350.1060h)
350.3240a)
(Cont'd.)

1) Failed to develop a policy for individuals while on a community outings.
2) Failed to supervise individuals when returning from the activity.
3) Failed to report the complete incident to the Department of Public Health.
4) Failed to document a descriptive summary of the incident.

The policy of this agency is to immediately report all accidents or incidents which have a significant effect on the health, safety, or welfare of a resident or residents.

Procedures:
The facility shall notify the Department of Public Health of any incident or accident which has or is likely to have a significant effect on the health, safety or welfare of a resident. Any emergency that requires the services of a physician, hospital, police, fire department, corner or other service provider, shall be reported to the Department of Public Health, either at the regional office or the state complaint registry number within 24 hours of the incident.

The facility Administrator and the resident's legal guardian or representative will be immediately notified of the incident. The guardian or legal representative will also be notified of the plan of action for treatment or corrective action in a timely manner.

A descriptive summary of each incident or accident shall be recorded in the progress notes or nurses notes for each resident involved.

1) Failed to develop a policy for individuals while on a community outing:

R13 is a 38 year old ambulatory male who functions in the moderate range mental retardation with additional diagnosis of Downs Syndrome.

Per review of a January 4, 2005, "Speech Assessment, R13 is capable of communicating his basic needs and desires, asking questions and supplying information, to make choices, to request opportunities and to express his emotions. Speech is of fair to good intelligibility for familiar family and friends depending upon his level of motivation to communicate. At times he mumbles and his intelligibility decreases. R13 is not on a communication program at this time."

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350.3240a)
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During morning observation on 11/3/05 between 6:45am-8:00am, R13 was repeatedly asking R8 for writing pens. Surveyor had difficulty understanding R13 and asked E8 to interpret R13's request for writing pens.

Per review of R13's IPP, R13 needs assistance with his correspondence, such as: dialing the telephone, writing letters. He also needs assistance for outings into the community. R13 enjoys going out for social and recreational activities, although he has slowed down somewhat as he has gotten older. R13 is at times uncooperative and likes to be dramatic, but usually is appropriate for his living and working environment.

On Saturday, October 29, 2005, R13 and 8 other clients and 3 staff went to town's Halloween parade. When interviewing E4 on 11/7/05 at approximately 3:00pm, E4 stated the facility took two vans to the parade due to R9's need for a wheelchair for outings. E4 stated she drove the van with the individual in the wheelchair, and R13 did not ride to the parade in that van. E3 confirmed on 11/8/05 that she drove the other van, and R13 did ride to the parade in E3's van.

E4 continue to state that at the parade, E4 took R13 to the restroom. On the way from the restroom R13 tripped over a concrete block and had some minor scrapes. E4 added, the group started to leave the parade after 9:00pm. E3 and E7 led the group towards the vehicles while E4 gathered up the blankets that the group brought from the facility.

E4 stated that she drove the same vehicle back to the facility. E4 confirmed that she did not do a head count of the individuals. E4 stated it was 9:35pm when they entered the facility and does not remember seeing R13 before clocking out at 9:40pm.

Z2 stated in interview on 11/7/05 at 3:10pm, he received a call at 9:44 pm on 10/29/05 and arrived at the scene at 9:45pm, that a male subject is yelling and screaming at everyone at that location. When Z2 arrived to R13's location, R13 was surrounded by young adults who were attempting to calm him. Z2 stated that all he could get R13 to say was that he wanted to go home and could not give any information such as his name or where he lived. Z2 remember R13 from several years ago when he walked away from the facility and assumed R13 was still a resident of the facility.

Z2 contacted the facility and asked whether they were missing any of their individuals. Z2 asked the staff to describe R13 and the description fit the individual. Z2 returned R13 to the facility at approximately 10:00pm.

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Interview held with E6 on 11/8/05 at approximately 10:30am, E6 currently works the midnight shift (11:00-7:00), E6 came in early on 10/29/05 to stay with the other 4 individuals who decided not to attend the activity. E6 stated when the individuals returned around 9:30pm, it was very hectic with the individuals being excited from the parade. Some individuals went to their rooms to get ready for bed, while others stayed in the living area talking about the activity. E6 stated she does not remember seeing R13 enter the facility.

According to E6, about ten minutes later the phone rang, it was the local police, asking if the facility was missing one of their individuals. At that time the staff started a head count and realized it was R13. The police officer on the phone asked the staff to describe the individual and confirmed that it was R13. The officer returned R13 to the facility around 10:00pm (according to the police report).

E6 stated that R13 was a little upset when entering the facility. R13 was afraid that he was going to get in trouble. After staff calmed R13 down, he went to his room to get ready for bed and slept through the night.

Per interview with E1 and E2 on 11/2/05 at approximately 2:30pm, they confirmed that the facility did not have a policy concerning Community Outings prior to the incident on 10/29/05.

Per interview with E6 on 11/9/05, after the officer returned R13 to the facility, the administrator, nurse and R13's guardian were immediately contacted. The nurse instructed the staff to complete a body check on R13 for any injuries. R13 had minor scrapes on his knees from when he tripped over a concrete parking block at the parade. An injury report was completed by E3 for the scraped knees. There is no evidence that staff documented the incident of R13 being left at the parade and the local authorities returning him to the facility.

The facility policy for emergency procedures for Missing Residents: The location of every resident must be known when residents are not in the presence of the shift leader, nor in the facility or vicinity thereof. Appropriate measures will be taken to determine the location of missing residents.

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Procedures:

a) At the change of shifts, the shift leader will document or relay the whereabouts of residents off grounds and expected time of return with the on-coming shift leader. Shift leaders and designees are to determine the whereabouts of all residents every one-hour throughout their respective shift. From bedtime until awakening all residents will be accounted for every half hour at the very minimum. This will vary depending upon the individual's needs and level of independence.

b) Residents engaged in activities away from the facility will be subject to continual surveillance by staff in charge of the activity based on the nature of the activity and the number of staff and residents present.

There is no evidence that the facility staff implemented this policy.

(A)

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