| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: | (X2) MULTIPLE CONSTRUCTION | (X3) DATE SURVEY COMPLETED |
|---|---|---|---|
| | ASL510065 | A. BUILDING: _____ B. WING _____ | 01/23/2025 |

| NAME OF PROVIDER OR SUPPLIER | STREET ADDRESS, CITY, STATE, ZIP CODE |
|---|---|
| TRUSTWELL LIVING OF SPRINGFIELD | 2451 W WHITE OAK DRIVE SPRINGFIELD, IL 62704 |

| (X4) ID PREFIX TAG | SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION) | ID PREFIX TAG | PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY) | (X5) COMPLETE DATE |
|---|---|---|---|---|
| A 000 | Initial Comment<br><br>1. Complaint Investigation<br><br>Complaint 2540055/IL183534<br><br>Complaint cannot be substantiated. No violations cited.<br><br>2. Incident Report Invesgtigation<br><br>IL 184543<br><br>Allegation cannot be substantiated. No violations cited.<br><br>3. Complaint Investigation<br><br>Complaint 2540339/IL 184494 | A 000 | | |
| A4020 | Section 295.4020 Mandatory Services<br><br>This Regulation is not met as evidenced by:<br>Violation<br><br>Section 295.4020 Mandatory Services<br>Each establishment shall provide or arrange for the following mandatory services:<br>e) An emergency communication response system, which is a procedure in place 24 hours each day by which a resident can notify building management, an emergency response vendor, or others able to respond to his or her need for assistance;<br><br>Based on record review and interview the establishment failed to ensure R1's emergency communication response system was responded to in a timely manner. | A4020 | | |

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| A4020 | Continued From page 1<br><br>Findings include:<br><br>Z1, R2's power of attorney, was interviewed on 01-22-2024. Z1 states that R2 was very independent in doing things for herself. Z1 states it was on November 18 when R2 wasn't feeling well and had stomach pains that got worse. Z1 states that R2 pressed the call pendant but the stomach pain got more severe and R2 called her on cell phone around 11:40pm. Z1 states when she got to facility, she looked everywhere and couldn't find staff. States that she looked in kitchen, breakroom, other resident apartments and that after 15 minutes of looking for staff that she saw a nurse who was getting ready to leave. Z1 states the nurse told her she didn't even know the resident's light had went off. Z1 states that corporate staff was to do an investigation on the call lights and that she never heard anything more about it. Z1 states that she spoke with the interim regional director last week about this and that R2 was moved out of the establishment on the 13th of January.<br><br>R2 was admitted to the establishment on 02-29-2024. R2's diagnoses include coronary artery disease and hypertension.<br><br>R2's service plan includes documentation that R2 is independent with all activities of daily living, including medications.<br><br>R2's 11-19-2024 progress note includes documentation that R2 was sent out to the local emergency room due to abdominal pain and emesis at 12:40am in an ambulance. Further documentation includes that R2's power of attorney was present at the establishment during this time. | A4020 | | |

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| A4020 | Continued From page 2<br><br>R2's 11-20-2024 progress note includes documentation that R2 was admitted to the hospital on 11-19-2024.<br><br>R2's 11-21-2024 progess note includes documentation that R2's hospital admission diagnosis is "small obstruction of bowel." Further documentation is that R2will possibly be discharged from the hospital over the weekend.<br><br>R2's 12-19-2024 progress note includes documentation that R2 was re-admitted to the establishment after being in rehabilitation.<br><br>E2 was interviewed on 01-22-2025 regarding the establishment's call light system. E2 states that R2's call pendant was checked the previous week along with all other resident pendants. E2 states that R2's pendant was pressed while in the front office and that staff took six minutes to show up. E2 also states that residents have the number to the front office along with cell phone numbers for management staff. E2 further states that the establishment started a new system of checking each resident off in a book and that the nurses will check each shift with the residents to ensure they had meals. E2 states that this was started on 01-21-2025. E2 states that they also started getting each resident weight and vital signs yesterday and that this will be done monthly or more often if physician ordered. E2 states that R2 does not have any dietician consults and that there are no previous weights on file for R2.<br><br>Employee time card reports were reviewed for staffing on 11-18-2024. The report includes documentation of a nurse working from 3:40pm until 2:00am, a nursing assistant working from 8:30pm until 7:35am, and a certified nursing | A4020 | | |

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| A4020 | Continued From page 3<br>assistant working from 8:00pm until 2:30am.<br><br>E1, Corporate staff, was interviewed on 01-22-2025. E1 states that she has not been made aware of R2's family or any other families complaining about call lights not working. E1 states that she doesn't have any complaints about call lights written on her grievance log and that she spoke with R2's neice last week and that this wasn't brought up by the neice. E1 states that R2 was out of the building with family during the dates in question.<br><br>R2's call pendant report was reviewed for 11-17-2024 through 11-19-2024. The report contains documentation that R2 pressed the pendant on 11-18-2024 at 11:43pm and that the pendant call was responded to on 11-21-2024 at 2:49pm. After reviewing R2's progress notes with E1, E1 states that she was told wrong about the resident's location and that she is not aware of an investigation into R2's call pendant not being responded to. | A4020 | | |