

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER / SUPPLIER / CLIA IDENTIFICATION NUMBER 145338	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 08/17/2020
NAME OF PROVIDER OF SUPPLIER WESTMONT MANOR HLTH & RHB		STREET ADDRESS, CITY, STATE, ZIP 512 EAST OGDEN AVENUE WESTMONT, IL 60559	
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)		
F 0558 Level of harm - Minimal harm or potential for actual harm Residents Affected - Some	<p>Reasonably accommodate the needs and preferences of each resident. **NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on observation, interview and record review, the facility failed to answer call lights in a timely manner. This applies to 4 residents (R2, R3, R4, and R5) in the sample of 4 reviewed for call lights and 7 residents (R6, R7, R8, R10, R11, R12, and R13) in the supplemental sample. On 8/11/2020 at 11:05am, R2 was in her room in a wheelchair and had a cast on her right lower leg. R2 has [DIAGNOSES REDACTED]. R2 stated she goes to [MEDICAL TREATMENT] each day at 6:00am and this morning she put on her call light at about 5:00am because it always takes a long time for the CNA (Certified Nurse Assistant) to get here. R2 stated she is completely blind, in addition to being non-weight bearing, on her right leg. R2 stated she really just needs her clothes brought to her and she can then dress herself. R2 went on to state she waited for an hour and finally the [MEDICAL TREATMENT] technician arrived because she was due at the [MEDICAL TREATMENT] clinic. The technician got R2's clothes for her, then the CNA arrived. The most recent assessment for R2, dated 7/31/2020 shows R2 to have intact cognition and memory. R3 is R2's roommate. The most recent assessment for R3 is dated 2/18/2020 and show R3 to be intact in cognition and memory. R3 has [DIAGNOSES REDACTED]. On 8/11/2020 at 11:10am, R3 stated it does take a very long time to get help and she needs help to empty her ostomy bag. On 8/11/2020 at 12:00pm, V4 ([MEDICAL TREATMENT] technician) stated she did go to the room of R2 that morning to get her. She found R2 trying to change her own pull-up. R2 asked for her clothes, then the CNA arrived. V4 stated the contracted service that employs her tells them they should not ever transport residents for liability reasons, but, V4 stated, the CNAs rarely are able to get the 6 daily residents to the [MEDICAL TREATMENT] clinic, so we have to transport some of them. V4 stated she checked on the other [MEDICAL TREATMENT] patients and found them all still in bed. On 8/11/2020 at 11:30am, V3 (social service director) does hear residents complain of long waits for call light response. On 8/11/2020 at 1:26pm, R4 was in bed and the call light button was on the floor next to the bed. R5 was in the other bed in the room. R5's call light button was clipped to the side of the mattress sheet and was hanging down nearly to the floor, out of reach of R5. R4 stated when she was on the second floor, she was frequently late getting to [MEDICAL TREATMENT], but not as often on the first floor. R4 stated that when she is returned from [MEDICAL TREATMENT] (before noon daily), she doesn't urinate for 4 or 5 hours and staff doesn't come to check on her during that time. If she puts on the call light, it takes a long time. R4 stated she hasn't timed them but it's often more than a half hour. R4 stated she is not able to turn herself due to a stroke. R5 stated she agreed with what R4 had said. R5 stated as well, she asked for water when the CNA brought her lunch tray about an hour ago. R5 indicated she still had no water and asked surveyor for her call light. At 1:35pm, R5 then pushed her call light button. 7 minutes later a staff member looked in the door, said nothing and left. One minute later the CNA walked past the room, then came back. V6 (agency CNA) entered and silently turned off the call light then removed R4's lunch tray from the room. She did not retrieve R4's call light button from the floor. Returning, she asked R5 if she had not eaten, R5 stated no, she was waiting for water. The CNA still did not notice R 4's call light on the floor. R4's most recent assessment for mental acuity is dated 7/2/2020 and shows her to have intact cognition and memory. R5's most recent assessment for mental acuity, dated 6/5/2020, show her to be mentally intact with some deficit. During the investigation, R6, R7, R8, R10, R11, R12, and R13 were interviewed and each complained of very long call light wait times. All but R10 have mobility issues and need assistance with transfers and toileting. R6 stated she soiled herself that morning while awaiting an answer to her call light. R8 stated she has soiled herself several times while waiting for assistance to the bathroom. The Resident Council Minutes were reviewed and the notes from the February 10, 2020 meeting cited complaints about call light wait times; the meeting of March 31, 2020 cited poor performance of CNA's; The minutes of April 27, 2020 cites CNA cell phone use; May 20, 2020 minutes complains of poor performance of nursing staff; the minutes for June 22, 2020 are far more brief than the rest; and the minutes for July 28, 2020 cite long waits and call lights being turned off without the need of the resident being fulfilled.</p>		

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
---	-------	-----------

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.