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**FOR IMMEDIATE RELEASE**

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**HUMAN RIGHTS AUTHORITY - PEORIA REGION**  
**REPORT OF FINDINGS**

**Case # 19-090-9020**  
**Sharon Healthcare Elms**

**INTRODUCTION**

The Human Rights Authority (HRA) opened an investigation after receiving a complaint of possible rights violations at Sharon Healthcare Elms. The complaint alleged the following:

1. Lack of Accessible Transportation for Residents.

If found substantiated, the allegation would violate the Mental Health and Developmental Disabilities Code (405 ILCS 5/2-102) and the Skilled Nursing and Intermediate Care Facilities Code (77 Illinois Administrative Code 300).

Sharon Healthcare Elms is a skilled care facility. The facility has ninety-eight beds available for residents. At the time of this investigation the census for the facility was sixty-nine. The Illinois Department of Public Health licenses the facility. The facility employs approximately one hundred people including: Certified Nursing Assistants, an Administrator, Registered Nurses, the Director of Nursing, the Activities Director, dietary staff and other non-certified support staff.

**COMPLAINT STATEMENT**

The allegation states that the facility does not have a van available for residents that use a wheelchair which prevents them from accessing activities in the community.

**FINDINGS**

**Staff Interviews (8.8.19)**

The interview took place at Sharon Healthcare Elms in Peoria, Illinois. The facility does not own a wheelchair accessible van but has access to one at a sister facility that is across the street. The van was not available on the day of the visit as it was in the field transporting residents. This accessible van can hold two wheelchairs and three ambulatory individuals. Sharon Healthcare Elms staff also has access to a twelve-passenger van that is available to transport individuals who use wheelchairs, but space is

limited. The HRA staff were able to observe this white van sitting in the parking lot at the sister facility across the street. Sharon Healthcare Elms has its own vehicle that they can use to shuttle residents to doctor's appointments. It is a Honda CRV and can accommodate an individual in a wheelchair, if they can transfer themselves from the wheelchair to the vehicle. The Honda CRV was unavailable for the HRA to look at on the day of the site visit, as it too was being used for transportation. The facility also makes use of public transportation that is available in the community, if necessary. Sharon Healthcare staff can schedule for Citylift, which is accessible public transportation for medical appointments and some activities. The facility also uses an ambulance service for medical emergencies at the facility and for transporting residents back to the facility after being admitted to the hospital. Sharon Healthcare Elms also shares the accessible van every Tuesday, Thursday and Sunday for community activities or appointments.

The facility employs an Activity Director and assistant activity staff that arranges the community experiences and other programming that takes place within the building. Sharon Healthcare Elms asks that residents sign-up for community activities. They provide activity calendars and place them in each person's room and the dining hall. The staff will also go to individual residents and ask if they want to attend the planned activity. When an activity is planned staff will make an announcement over the public address (PA) system and will have a sign-up sheet for those who would like to attend. The facility was without an official Activities Director from November 2018-June 2019 due to this employee being out on medical leave and the facility was not able to fill the position per law. Activities still took place, they were just scheduled by someone else until the new Activities Director started in June. Staff stated that the facility has four or five residents that use a wheelchair and they have been able to go into the community. Some of these activities are going to restaurants, local parks, fireworks, and the Heart of Illinois fair. The facility covers activity costs, and residents may use their own money if they choose to do so. Shopping is also another popular activity. Sharon Healthcare Elms staff did state that often residents do not want to go in the community and will ask staff to purchase items they need. The Activities Director stated that she believes residents who use a wheelchair and residents who are ambulatory participate and attend community activities equally. It is not more than the other. The HRA asked if someone wanted to go out on a day the facility was not scheduled for the accessible van and if that would be possible. Staff indicated that if someone wanted ice cream they could use the facility car or the larger passenger van if it were available. If the appropriate mode of transportation was not available on that day, then the staff would try to take the person out the next day. The activities staff document resident involvement via a Participation Log. The facility does not keep sign-up sheets for activities and does not keep any other logs that would show a person attended a community activity.

The HRA had a consent for information signed by the legal guardian for an individual who resides at Sharon Healthcare Elms that uses a wheelchair. The HRA asked if the resident accesses the community. The Sharon Healthcare Elms staff stated that this person rarely goes into the community, but he is invited. He will usually go on an outing to a restaurant if he is invited. He is only able to use the accessible van that is in use on Tuesday, Thursday, and Sunday for community activities because he requires a Hoyer lift to transfer. If there were other medical appointments then they would use

CityLift or the ambulance service in an emergency. The guardian of this individual has not requested that he attend more community activities. This individual's Care Plan does not identify community activities as one of his goals or an area of need.

### **FINDINGS (Including record review, mandates, and conclusion)**

#### **Complaint #1 – Lack of Accessible Transportation for Residents.**

The HRA was provided with the healthcare records of the individual for whom the HRA obtained consent. This included physical and occupational therapy reports as well as the facility's medical report. The individual is stated as needing a wheelchair full-time. All physical and occupational therapy as well as medical appointments are conducted on site according to the admission record. The individual's psychiatrist, medical specialist, and dentist are off site but records of these visits were not provided. Neither the physical or occupational therapy reports list car transfer or community mobility as goals nor were tests to improve these skills done. The medical report lists overall patient goals which includes social goals. Exterior outings were not listed as a goal and the report stated that the individual was to continue selecting activities independently in accordance with his interests.

The HRA was also provided with activity records. The records documented the activities held each day on a per month basis. The records given accounted for activities from June of 2018 to August of 2019. The activity list only included activity titles and did not record location or method of transportation. However, the HRA was able to note that the facility provided an average of 7 outings per month that were enough of a distance away from the facility to require transportation. These outings were always scheduled for either Tuesday, Thursday, or Sunday when the facility had access to the wheelchair accessible van from their sister facility. These outings included such activities as shopping, van rides, local restaurants, the riverfront, the local library, and movie theaters. The activity record also listed a specific "Wheelchair Resident Outing" on June 19, 2018. The individual did not list himself as attending this specific event. Attendance is recorded independently by the individuals who note which activities they attended. The independent attendance records indicated that the individual attended a few outings to establishments outside of the facility. The individual attended an outing to Dunkin Donuts on March 5, 2019 and attended an outing to the local library on March 25, 2019. The individual attended a Dunkin Donuts outing on April 2, 2019 and another local library outing on April 29, 2019. The attendance record also indicated the individual attended a couple outings after the complaint had been made. The individual reported attendance on a van ride outing on June 9, 2019 and reported attendance on an unspecified outing on July 29, 2019.

The HRA received the facility policy for Resident Transportation and Community Transportation for Activities. In the section titled "Resident Transportation" the policy states that "Whenever a resident has an appointment, the facility will work on arranging transportation for the resident." The section also lists specific methods of transportation and states "We may arrange transport by way of our Complex w/c van" and "We may arrange transport by way of City Lift, for w/c residents only." In the section titled

“Community Transportation for Activities” the policy states that “Transportation is available for both w/c and ambulatory residents” and lists the same possible transportation options as in the “Resident Transportation” section with the addition of the “Facility Passenger van.”

**The Skilled Nursing and Intermediate Care Facilities Code (77 Illinois Administrative Code 300.1410a)** reads “The facility shall provide an ongoing program of activities to meet the interests and preferences and the physical, mental and psychosocial well-being of each resident, in accordance with the resident's comprehensive assessment. The activities shall be coordinated with other services and programs to make use of both community and facility resources and to benefit the residents ... g) The facility shall provide a specific, planned program of individual (including self-initiated) and group activities that are aimed at improving, maintaining, or minimizing decline in the resident's functional status, and at promoting well-being. ... h) The activity program shall be multifaceted and shall reflect each individual resident's needs and be adapted to the resident's capabilities. The activity program philosophy shall encompass programs that provide stimulation or solace; promote physical, cognitive and/or emotional health; enhance, to the extent practicable, each resident's physical and mental status; and promote each resident's self-respect by providing, for example, activities that support self-expression and choice. Specific types of activities may include: ... 4) Service activity (e.g., volunteer work for the facility, other individuals and/or the community); ... 6) Community involvement (e.g., community groups coming into the facility for intergenerational programs, special entertainment and volunteer visits; excursions outside the facility to museums, sporting events, entertainment, parks) ... j) Residents' participation in and response to the activity program shall be documented at least quarterly and included in the clinical record. The facility shall maintain current records of resident participation in the activity program.”

### **CONCLUSION:**

The HRA reviewed facility policy, procedure and the record of an individual at the facility. The record of the individual's outings indicated that the facility provided the individual with outings outside of the facility. The facility policy also stated that they provided accessible transportation through a vehicle they share with another facility, and when that is not available, the facility is able to utilize other modes of transportation. The individual does require a wheelchair at all time and the records and policy indicate that the individual was provided transportation outside of the facility to community outings, which is in compliance with The Skilled Nursing and Intermediate Care Facilities Code (77 Illinois Administrative Code 300) Because of this, the HRA finds this complaint **unsubstantiated** but offers the following **suggestions**:

- Record the nature of each event, including transportation if necessary and record the attendance of residents at each event. If the facility is not doing this, assure they are in compliance with the documentation requirements in 77 Illinois Administrative Code 300.

- Meet with the resident and guardian to ascertain any further activity or community outing interests.

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## RESPONSE

Notice: The following page(s) contain the provider response. Due to technical requirements, provider responses appear verbatim in retyped format.

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