

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>IL6008593</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>C</b> <b>10/29/2020</b>
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NAME OF PROVIDER OR SUPPLIER  <b>GROVE AT THE LAKE,THE</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>2534 ELIM AVENUE ZION, IL 60099</b>
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S 000	Initial Comments	S 000		
S9999	<p>Complaint Investigation #2018151/IL 127742</p> <p>Final Observations</p> <p>Statement of Licensure Violations:</p> <p>300.610a) 300.1210b) 300.1210d)2) 300.3240a)</p> <p>Section 300.610 Resident Care Policies</p> <p>a) The facility shall have written policies and procedures governing all services provided by the facility. The written policies and procedures shall be formulated by a Resident Care Policy Committee consisting of at least the administrator, the advisory physician or the medical advisory committee, and representatives of nursing and other services in the facility. The policies shall comply with the Act and this Part. The written policies shall be followed in operating the facility and shall be reviewed at least annually by this committee, documented by written, signed and dated minutes of the meeting.</p> <p>Section 300.1210 General Requirements for Nursing and Personal Care</p> <p>b) The facility shall provide the necessary care and services to attain or maintain the highest practicable physical, mental, and psychological well-being of the resident, in accordance with</p>	S9999	<p><b>Attachment A</b> <b>Statement of Licensure Violations</b></p>	

Illinois Department of Public Health  
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE \_\_\_\_\_ TITLE \_\_\_\_\_ (X6) DATE \_\_\_\_\_

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S9999	<p>Continued From page 1</p> <p>each resident's comprehensive resident care plan. Adequate and properly supervised nursing care and personal care shall be provided to each resident to meet the total nursing and personal care needs of the resident</p> <p>d) Pursuant to subsection (a), general nursing care shall include, at a minimum, the following and shall be practiced on a 24-hour, seven-day-a-week basis:</p> <p>2) All treatments and procedures shall be administered as ordered by the physician.</p> <p>Section 300.3240 Abuse and Neglect</p> <p>a) An owner, licensee, administrator, employee or agent of a facility shall not abuse or neglect a resident. (Section 2-107 of the Act)</p> <p>These requirements were not met evidenced by:</p> <p>Based on interview, and record review, the facility failed to assess and document a newly admitted resident's condition and failed to provide enteral nutrition and medication for that resident in a timely manner. This failure resulted in R8 not receiving any of his scheduled medications or feedings for 23 hours.</p> <p>This applies to 1 of 3 residents(R8) reviewed for necessary care and services in a sample of 10.</p> <p>The findings include:</p> <p>R8's Physician's Order Sheet dated February 21, 2020 shows that R8 has diagnoses including Cerebral Infarction, Acute Respiratory Failure,</p>	S9999		

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Continued From page 2

Gastrostomy, Tracheostomy, Type 2 Diabetes, Chronic Kidney Disease, Hypertension, Heart Failure and Kidney Transplant (History of).

R8's Progress Notes dated 2/21/20 state, "Resident arrived at the facility via stretcher from hospital approximately 6:15PM. Resident was accompanied by family, his wife, and daughter. Resident is receiving oxygen via trach.

Resident is NPO (Nothing by mouth) and gets nutritional via peg-tube. Both trach, and peg tube are new to resident. Both were placed on approximately 2/10/2020. This writer went to do a head to toe assessment, this writer was informed by family that patient is non-verbal and can nod to hearing Spanish speaking verbal cues..."

On 10/27/20 at 3:15PM V9 (Registered Nurse) stated, "His daughter and his wife were with him when he was admitted. I went in with the CNA and greeted them and got him settled. I spoke with the daughter. The wife and the patient did not speak English. We get 3-4 admissions a night on that hall so it is not uncommon for 2-3 nurses to be working on the admission. One will do the assessment, and one will do the orders. I did not give him any medication that night. I did not discuss his medications with the daughter. A STAT KUB (Kidneys, Ureter, Bladder X-ray) had to be done before we could give him anything. The KUB is called into (X-Ray Company).

I talked to his daughter about the G-tube and the trach and she told me they were both new for him. Usually when we call for a KUB they tell us it is a 2-4 hours wait. Then we get the results pretty much right away. We can go into the system and look them up or the fax them over. We can't give any meds or start the tube feeding until the KUB

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S9999	<p>Continued From page 3</p> <p>is done. "</p> <p>On 10/27/20 at 9:30AM, V12 (Licensed Practical Nurse) stated, "I had called them (X-ray company) but I don't remember what time I called. They usually give us a time and then they will call us ½ hour before they come. They are supposed to come within 4 hours but we have been having a problem with them not always coming within that 4 hours. Any new admission with a G-Tube we have to call and order a stat KUB. We have no control how long it takes them to come or when we get the results. That is our only option to call. No other companies available to us."</p> <p>On 10/28/20 at 1:00PM V14(RN) stated, "I just helped the other nurse with the orders on the night he came in. I didn't see him- he wasn't my patient. The next day, he was my patient. We couldn't give nay meds until the G-Tube was checked. I checked his blood sugar because he wasn't getting any feeding and it was low. I don't remember what it was. I talked to the Nurse Practitioner that was there and she gave the order for the Glucagon if is blood sugar was below a certain number. We were going to start and IV line since we couldn't give him any food. The nurses were trying to start the IV but I don't remember if they ever got it started. (X-Ray Company) was called and they said they would come as soon as they could. The X-Ray tech came towards the end of my shift. I never started the feeding either, I couldn't give him anything. I don't remember my head to toe assessment for him. I remember he had family at the bedside and his daughter was very concerned about his medications and his feedings. I tried to explain to them about our protocol to do the X-Ray first. "</p>	S9999		

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S9999	<p>Continued From page 4</p> <p>R8's Progress Notes dated 2/22/20 at 2:02 PM state, "Resident did not get a KUB to confirm PEG placement. Will wait for confirmation after KUB is done to administer medications and tube feeding."</p> <p>R8's Progress Notes dated 2/22/20 at 3:00PM state, " Resident's KUB result came back for the peg-tube placement. Peg-tube is in place..."</p> <p>On 10/27/20 at 3:30PM V10 (Registered Nurse) stated, "He was brand new to me- I'm not sure how long he had been there but he was new to me. I asked for a very thorough report- I like to get as much information as I can. I knew he had a G-Tube and I was told they were coming to do the KUB that day. I went in to assess him and saw he was sleeping. His daughter told me he was non-verbal most of the time but could respond at times. His daughter said he had just been sleeping. I did his vitals and they were ok. I tried to arouse him and I spoke to him in Spanish and he nodded his head. His daughter asked if we were going to start the tube feeding. I did his blood sugar and it was low- I don't remember what the number was but it was low. He was off of his G-Tube feeding for a while. I hooked up his food and I checked his blood sugar about an hour later and it was in the low 90's. I checked on him frequently. I was wondering why it took so long to get the Stat KUB for G-Tube confirmation. I was thinking to myself, Why do I have to make sure things are done? "</p> <p>R8's Progress Notes dated 2/22/20 at 5:27PM state, "Blood Sugar (BS) is low."</p> <p>R8's Progress Note dated 2/22/20 at 11:00PM states, "At approximately 8:00 PM, prior to the incident, resident observed sleeping, no signs</p>	S9999		
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S9999	<p>Continued From page 5</p> <p>and symptoms of distress noted. V/S within normal limits, B/P: 133/60, P: 92, R: 18, T: 98.0, O2: 98 via trach. This writer rounded on resident at approximately 9:00PM and resident was observed sleeping. Chest was rising up and down with regular breathing. Wife at bedside sleeping on the bedcott. Bedtime medications were given at that time via PEG tube. Assigned CNA rounded on resident at approximately 10:14PM to change resident's brief with another CNA. Afterwards, assigned CNA notified Respiratory Therapy (RT) regarding suctioning the resident due to resident noted with gargling sound and RT immediately went to the resident's room and suctioned the resident. RT was calling for help, heard by the other nurse and notified this writer that resident was unresponsive at approximately 10:17PM. This writer noted RT in the room and the resident unresponsive. All pulses were checked and resident noted with no breathing and no pulse. 10:18 PM, Code Blue was called and CPR was started immediately and oxygen was increased to 6L via trach and ambu bag was initiated by RT. AED was used on the resident and no shock was advised by machine. 9-1-1 was called at approximately 10:19PM by another nurse. EMTs arrived at approximately 10:25PM and took over and started doing CPR to the resident. EMTs left with the resident at 10:35PM with EMTs still performing CPR. Wife and daughter aware of clinical situation, wife was present while performing the code. At approximately 10:36PM, (R8's physician) was notified of resident's current health status."</p> <p>R8's Progress Notes dated 2/23/20 at 10:50PM state, "Called Hospital ER and obtained information on cause of death. Cause of death was cardiac arrest. Notified Director of Nursing."</p>	S9999		

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S9999	<p>Continued From page 6</p> <p>On 10/28/20 at 3:50PM, V13 (CNA) stated, "(R8) wasn't really responsive when I went in there but he didn't really look any different than when I had seen him the night before. After we changed him we noticed he was producing some more secretions from lying on his back maybe. So I went and got (V11 Respiratory Therapist). I saw her in passing so it was maybe 15-20 seconds after I left the room. I told (V11) that (R8) needed to be suctioned. (V11) said (R8) wasn't responsive so I ran to get the crash cart and I notified reception to call a code blue. I just helped to gather supplies and was on stand-by to assist if needed. The paramedics came and then they left with hi while doing CPR. "</p> <p>On 10/29/20 at 9:45AM, V11 stated, "(R8) had been given care by the CNA. They came and told me that he needed to be suctioned. When I got there he was unresponsive and had no pulse. So I called a code and started CPR. After I got help with the CPR I suctioned him but didn't get much out. I had seen him a few hours before that and didn't really notice anything unusual. His wife was at the bedside and they were both sleeping."</p> <p>On 10/29/20 at 11:10AM V15 (Nurse Practitioner) stated, "I never saw this patient but I gave orders for the tube feeding. I think the nurse was just preparing for when we got the X-Ray so she could start the tube feeding. We have to have clearance for the PEG Tube and the facility has to rely on outside sources/agencies to do that. This guy if I remember correctly had a hemorrhagic stroke and that makes him very high risk for another one. Especially within the first 30 days after the first one. His medications are important ones and it is very unfortunate that he had to wait to get his medications and I am very sorry that happened. However he was also very high risk."</p>	S9999		

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S9999	<p>Continued From page 7</p> <p>R8's Death Certificate dated 2/22/20 shows his cause of death as Pontine Cerebrovascular Accident with Locked-in Syndrome and Hypertension.</p> <p>R8's Medication Administration Record (MAR) dated February 2020 shows that R8 did not receive any medications from the time he was admitted to the facility on 2/21/20 at 6:15PM until 2/22/20 at 5:00PM. Medications R8 should have received on 2/21/20 at 9:00PM include Kepra 500mg (Anticonvulsant), Metoprolol 25mg (Antihypertensive) and Tacrolimus 0.5mg (Immunosuppressant). Medications R8 should have received on 2/22/20 at 9:00AM include Amlodipine 10mg (Antihypertensive), Azathioprine 75mg (Immunosuppressant), Lasix 40mg (Diuretic), Prednisone 5mg (Immunosuppressant), Kepra 500mg (Anticonvulsant), Losartan Potassium 50mg (Antihypertensive), Metoprolol 25mg (Antihypertensive), Tacrolimus 0.5mg (Immunosuppressant) and Hydralazine 50mg (Antihypertensive 3 doses missed at 12:00AM, 6:00AM and 12:00PM). R8's MAR shows that R8 should have received enteral feeding of Glucerna 1.5 for 18 hours daily from 11:00AM until 5:00AM. This feeding was not started until approximately 5:30PM on 2/22/20. (23 hours after his admission to the facility).</p> <p>R8's EMR (Electronic Medical Record) accessed on 10/27/20 shows no documented Blood Sugars at 6:00AM or 12:00PM as ordered. There are no documented orders to start an IV and there is no documentation related to concerns of R8's low blood sugar. There is also no documented nursing assessment of R8's condition between the admission assessment on 2/21/20 at 6:15PM</p>	S9999		



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S9999	Continued From page 8 and the final assessment on 2/22/20 at 8:00PM.  The KUB X-Ray results show the test was performed on 2/22/20 at 1:12PM. The results show the G-tube is placed properly.  On 10/28/20 at 10:50AM V2 (Director of Nursing) stated, "We called the (X-ray company) and they told us that whoever took the order on their end did not write it down as a Stat order. They just wrote it down as a regular order. This has happened before."  The facility Protocol entitled, Regulatory Project to Mark Enteral Feeding Tubes and Validate Placement with an X-Ray dated 9/23/19 states, "Use a Sharpie to mark around the actual G-Tube at the insertion site. Get an X-Ray of the abdomen immediately to show whether the marked G-Tube is in the stomach."  "A"	S9999		