

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>IL6010912</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>C</b> <b>04/16/2015</b>
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NAME OF PROVIDER OR SUPPLIER  <b>MANORCARE OF PALOS HEIGHTS EAST</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>7850 WEST COLLEGE DRIVE PALOS HEIGHTS, IL 60463</b>
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S9999	<p>Final Observations</p> <p>Statement of Licensure Violations:</p> <p>300.610a) 300.1210b) 300.1210d)6) 300.1220b)3) 300.3240a)</p> <p>Section 300.610 Resident Care Policies 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 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 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. Restorative measures shall include, at a minimum, the following procedures</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>	S9999	<p><b>Attachment A</b> <b>Statement of Licensure Violations</b></p>	
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Illinois Department of Public Health  
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

05/01/15

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S9999	<p>Continued From page 1</p> <p>6) All necessary precautions shall be taken to assure that the residents' environment remains as free of accident hazards as possible. All nursing personnel shall evaluate residents to see that each resident receives adequate supervision and assistance to prevent accidents. Section 300.3240 Abuse and Neglect 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 as evidenced by:</p> <p>Based on interview and record review facility failed to follow the manufacture instruction's for the use of a lift and injury-reducing devices for one resident out of three residents (R1) reviewed for falls in a sample of four.</p> <p>This failure resulted in the facility not following their lifts device manual policy and not reading the manufacturer ' s operating instructions for the sit-stand mechanical lift which subsequently resulted in R1 sustaining an oblique fracture.</p> <p>Findings include:</p> <p>R1's nurse note dated 2-15-15 written at 11:55 pm denotes R1 is alert and oriented times one with Dementia. CNA stated that when she was transferring R1 using the sit stand lift, R1 buckled her knees and let go of hand rails at 8:15 pm R1 was transferred to the bed and not moved any further. R1 had increased pain to right arm with noted swelling, 911 called at 8:18 pm Doctor was made aware at 8:25 pm and stated to notify emergency department of R1 ' s condition.</p>	S9999		
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S9999	<p>Continued From page 2</p> <p>E7 (Registered Nurse) stated on 4-16-15 at 11:00 am she was working on 2-15-15 and was walking down the hall when the CNA (E1) had called for help. E7 stated she entered R1's room and saw E1 holding R1 around her waist and noted R1 next to the machine being held by E1 around her waist. E7 stated was told by E1 that R1 had let go and her arms went up and had slid thru the machine. E7 stated they laid R1 down assessed and noticed that R1 ' s right arm was swollen and red. Called the doctor and sent R1 to the hospital. E7 stated R1's normal status was alert times 1-2 with some confusion.</p> <p>R1' s hospital x-ray report dated 2-15-15 denotes X-ray with 2 views the right humerus were obtained. Findings: A commuted fracture is demonstrated involving the mid shaft of the right humerus. The distal fracture is displaced laterally approximately 1.3 centimeters. Per nursing home record, they were trying to lift the patient (R1) when her left arm got stuck and they noticed the deformity of the right arm. Consultation report right arm pain secondary to fracture right humerus.</p> <p>R1's incident report dated 2-15-15 denotes R1 sustained injury to left arm during transfer with sit-stand lift. R1 ' s knees buckle.</p> <p>Z1 (Doctor) stated on 4-15-15 at 1:20 pm the cause of R1's fracture in her right arm was more than likely from it getting stuck in the lift machine when the certified nurse aide (CNA) was transferring her.</p> <p>E1 (Certified Nurse Aide) stated on 4-10-15 at 3:30 PM R1 was not able walk or stand by herself. E1 stated she was in R1 ' s room on 2-15-15 by herself getting R1 ready for bed. E1</p>	S9999		

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Continued From page 3

stated R1 was sitting in her wheel chair and approached R1 with the sit to stand machine. E1 stated she told R1 that she was going to put her on the machine and placed the sling around her waist-lower back. E1 stated she pulled ropes to tighten sling and placed R1 ' s feet on the foot rest. E1 stated there were no straps for the feet/legs and was not aware of any lower leg straps.

E1 stated she instructed R1 to hold on to the poles. E1 stated she stood in front of R1 and started to lift R1 up with the remote control to the lift. E1 stated was lifting from R1 from the wheel chair R1 next the bed when R1 suddenly started screaming saying " she was dying ". E1 stated moment's later R1 knees gave out her, feet slipped off the foot rest and legs were separated from the knee rest (not leaning against the knee board). E1 stated R1 was dangling thru the waist strap when she went around the machine to grab her and R1 had already let go of the poles and slid down thru the waist strap and her arms were up in the air. E1 stated grabbed R1 by her waist before she slid all the way to the floor. E1 stated she called for help and E7 came to their aide. E1 stated before that incident on 2-15-15 she thought because R1 needed staff to support her when standing she believed that R1 should had been using the other mechanical lift (full sling) no the sit-stand but was just doing what she was told and what was written on the Kardex. E1 stated she did not read the sit-stand lift operating instructions and was not told do by her managers to do so either.

Facilities Minimum data Set Manual instructions for activities of daily living assistance steps for assessment denotes talk with direct care staff from each shift that has cared for the resident to learn what the resident does for him/herself

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S9999	<p>Continued From page 4</p> <p>during each episode of each ADL activity as well as the type and level of staff assistance provided.</p> <p>R1's minimum data set section (MDS) dated 11-14-14 and 2-14-15 denotes transfer from bed, chair, wheelchair standing position extensive assistance staff provide weight bearing support and Two + person physical assist. Section G0303-moving from seated to standing position not steady, only- able to stabilize with staff.</p> <p>R1's minimum data set Section C- Cognitive Patterns dated 11-14-14 and 2-14-15 denotes R1 unable to complete interview score-99. Section C0700 short term memory problem. Section C0800 long term memory problem.</p> <p>E8 (Minimum Data Set Coordinator) stated on 4-16-15 at 10:15 am section G does denote that R1 required two + people for physical assist when transferring from the chair to the bed and to stabilize R1. E8 stated does not know why two people were not transferring R1, which would be a question for nursing manger to answer. E8 stated that R1 was coded to need two + physical assist which meant a minimum of two people were required to assist R1 to stand but if she required more it would be up to staff discretion. E8 stated R1 ' s care plan is supposed to be updated by nursing.</p> <p>E6 (Registered Nurse Manager) stated on 4-16-15 at 10:50 am was the nurse supervisor over the floor that R1 was residing on. E6 stated she did not know the MDS had coded R1 as needing two + person assist to stabilize her with transfer form bed to chair. E6 stated if known that would have questioned the MDS staff about their assessment. E6 stated R1's care plan and Kardex should have been updated by the MDS</p>	S9999		

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S9999	<p>Continued From page 5</p> <p>staff to reflect their assessment. E6 stated she never read the operating instructions manual for the sit-stand mechanical lift and was not aware that R1 needed to be assessed for leg straps. E6 stated had no knowledge of who who did R1's transfer screening assessment worksheet because the facility does not keep a record or copy of it. E6 stated that whoever did the R1's transfer assessment put their results on the Kardex and care plan and that was what they follow.</p> <p>E5 (Director of Nursing) stated on 4-10-15 at 4:15 PM that she never read the Operating instructions for sit-stand lift and was not aware that leg straps could be used or that a resident needed to be assessed for them. E5 stated did not know if R1 was assessed for leg straps because there is no documentation in R1's record about assessment for leg straps. E5 stated there is no patient transfer assessments in R1 records for the sit-stand mechanical lift. E5 stated the lift assessment was done but the record of it was not kept. E5 stated R1's patient transfer assessment sheets were thrown away so the facility has no record of R1's assessment for the sit-stand mechanical lift. E5 stated staff did not need to read the operating instruction manual for the sit-stand mechanical lift because the in-service that staff receives from the facility is enough training. E5 stated that their policy is to do the patient transfer assessment and then record results on the residents Kardex.</p> <p>Facility's operating instructions for sit-stand mechanical lift denotes Warning: Only use this or other methods after a satisfactory professional assessment has been carried out on the individual patient. Warning: Determine whether the patient requires the lower leg straps. Failure</p>	S9999		

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S9999	<p>Continued From page 6</p> <p>to understand and obey this warning may result in injury to you or to others. Lower leg straps an optional accessory used to ensure the lower parts of the patient ' s leg stay close to the knee rest (proactive pad) for correct lifting procedure.</p> <p>Facility's lift and injury-reducing devices manual denotes Patient-Care Employees: during performance or patient-handling tasks, use proper body mechanics techniques, and operate mechanical lifts, friction-reducing devices and other approved equipment/aids according to manufacturer's operating instructions.</p> <p>Number of employees required when operating a lift: Although one person can operate most models of hydraulic lift, it ' s advisable to have two staff members present to stabilize and support the patient. As such, a two-person lift is required when using lift equipment. Under special circumstances and proper assessment of the patient, a one-person lift may be acceptable. The care plan team must determine and approve the procedure for less than two-person. When a patient' s mobility or ability to assist may vary throughout the course of day or from day to day, this change in mobility status is noted in the patient ' s Care Plan.</p> <p>The nurse supervisor assist with ongoing patient screenings on admission and with change of condition. Manage patient identification of lifts and friction-reducing devices on Kardex.</p> <p>R1's care plan denotes is at risk for falls due to decreased safety awareness unsteady gait, muscle weakness incontinence and two person transfers initiated 8-2-09 and last updated 11-4-14 interventions provide assist to transfer, report change in mental status and ADL functions; R1's Kardex dated 11-5-15 denotes ADL (activity</p>	S9999		

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S9999	Continued From page 7 of daily living) assist-usually one person.  (B)	S9999		