

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: IL6016190	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED C 06/25/2021
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NAME OF PROVIDER OR SUPPLIER MANOR COURT OF PEORIA	STREET ADDRESS, CITY, STATE, ZIP CODE 6900 NORTH STALWORTH PEORIA, IL 61615
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S000	Initial Comments Complaint Investigation: 2124274/ IL135097	S 000		
S9999	Final Observations Statement of Licensure Violations 300.610a) 300.1210a) 300.1210b) 300.1210c) 300.1210d)3)5) 300.3240a) 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. Section 300.1210 General Requirements for Nursing and Personal Care a) Comprehensive Resident Care Plan. A facility, with the participation of the resident and the resident's guardian or representative, as applicable, must develop and implement a	S9999	Attachment A Statement of Licensure Violations	

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>comprehensive care plan for each resident that includes measurable objectives and timetables to meet the resident's medical, nursing, and mental and psychosocial needs that are identified in the resident's comprehensive assessment, which allow the resident to attain or maintain the highest practicable level of independent functioning, and provide for discharge planning to the least restrictive setting based on the resident's care needs. The assessment shall be developed with the active participation of the resident and the resident's guardian or representative, as applicable. (Section 3-202.2a of the Act)</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 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>c) Each direct care-giving staff shall review and be knowledgeable about his or her residents' respective resident care plan.</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>3) Objective observations of changes in a resident's condition, including mental and emotional changes, as a means for analyzing and determining care required and the need for further medical evaluation and treatment shall be made by nursing staff and recorded in the resident's medical record.</p>	S9999		
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S9999	<p>Continued From page 2</p> <p>5) A regular program to prevent and treat pressure sores, heat rashes or other skin breakdown shall be practiced on a 24-hour, seven-day-a-week basis so that a resident who enters the facility without pressure sores does not develop pressure sores unless the individual's clinical condition demonstrates that the pressure sores were unavoidable. A resident having pressure sores shall receive treatment and services to promote healing, prevent infection, and prevent new pressure sores from developing.</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 regulations are not met as evidenced by:</p> <p>Based on interview and record review, the facility neglected to follow their Pressure Injury Prevention and Treatment Protocol for R1 who was admitted to the facility with a pressure ulcer and failed to accurately complete and document wound assessments for 2 of 3 residents (R1, R2) reviewed for pressure ulcers in the sample of 3. These failures resulted in R1 being re-admitted to the hospital for multiple surgical debridements and a diversion colostomy.</p> <p>Findings include:</p> <p>The facility's Pressure Injury Prevention and Treatment Protocol (revised 07/16) documents the following: "3. All high and moderate risk residents may have the following, and if so, they will be addressed on the care plan: D. Turning and positioning schedule, E. Skin checks. 7.</p>	S9999		
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S9999	<p>Continued From page 3</p> <p>When a resident is admitted to the facility or develops a pressure injury in the facility, the following will occur: A. Assess the pressure injury for location, size ((measure length x (times) width x depth)), wound bed, drainage, odor, tunneling, undermining or sinus tract, wound edges/ surrounding tissue and pain at site. B. Determine the injury's correct stage of development. C. If pressure injury is showing no improvement, Physician will be notified so change of treatment may be obtained. E. Pressure ulcer will be care planned. H. Weekly individual treatment report will be done and put on clinical chart. J. For those residents that cannot turn themselves, transfer self out of bed or cannot turn and position themselves in bed, staff will be responsible for."</p> <p>The facility's Change in a Resident's Condition policy (revised 12/02) documents "1. The nurse will notify the resident's attending physician when: b. There is a significant change in the resident's [physical, mental, or psychosocial status]," and "4. The nurse will record in the resident's medical record any changes in the resident's medical condition or status."</p> <p>R1's medical record documents admission to the facility on 6/10/21 and diagnoses of Disease of the Spinal cord, Paraplegia, Morbid Obesity, and Pressure Ulcer of Sacral Region. R1's Braden Scale for predicting pressure sore risk dated 6/10/21 documents R1 is is at moderate risk for developing pressure sores. R1's Care Plan documents R1 is at risk for developing pressure sores, but does not document any pressure sores.</p> <p>R1's History and Physical note dated 5/24/21 from the hospital and included in the transfer records sent to the facility documents paralysis of</p>	S9999		

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S9999	<p>Continued From page 4</p> <p>lower extremities. Also included in R1's transfer record was a Physician note dated 6/7/21 documenting a midline coccyx wound. These records were provided on 6/23/21 by V1, Administrator.</p> <p>R1's Admission Observation Report dated 6/10/21 and completed by V6, Registered Nurse (RN) documents "Alteration in skin? No."</p> <p>R1's Pressure Injury Information/Observation dated 6/10/21 and completed by V11, Licensed Practical Nurse (LPN) documents under Description "new admit," and there is no documentation of any coccyx wound or measurements of the wound.</p> <p>On 6/23/21 and 6/24/21, V6 was not available for interview as V6 would not answer attempted phone calls.</p> <p>On 6/24/21 at 9:01am, V11 stated she did not check R1's skin when he was admitted, but completed the Pressure Injury Information/Observation form for V6 who told her R1's skin was intact. V11 stated she knew she should not document what she did not do, or document for other nurses, but V11 was busy with two admissions to the facility and she was trying to help him out.</p> <p>R1's medical record including all Progress notes from admission (6/10/21) through 6/14/21 do not document the presence of a pressure sore, measurements or assessments of R1's pressure sore, or any skin checks following admission.</p> <p>On 6/24/21 at 12:20pm, V17, Certified Nursing Assistant (CNA), stated on 6/14/21 she was cleaning R1 up and the pressure sore on his</p>	S9999		

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S9999	<p>Continued From page 5</p> <p>coccyx looked "very bad," dark red and the skin was peeling off. V17 stated she told V9, LPN, about how bad R1's pressure sore was at about 6:30pm. On 6/24/21 at 2:30pm, V1, Administrator, confirmed that V17 worked 6/14/21 and then not again until 6/18/21.</p> <p>On 6/23/21 at 2:26pm, V9, LPN who worked the 6:00pm-6:00am shift on 6/14/21, stated a CNA had reported to her that R1's pressure sore looked worse, so she told V4, RN, day nurse, the next day (6/15/21).</p> <p>The communication faxed to V18, R1's Primary Care Physician (PCP), notifying V18 of R1's pressure sore was sent on 6/15/21 at 3:40pm and documents "Unstageable pressure ulcer noted to coccyx/buttock measuring 15.4 cm (centimeters) by 11.2 cm, with necrotic tissue present."</p> <p>On 6/23/21 at 10:40am, V4, RN, stated that on 6/15/21 the CNAs had reported R1 had a "skin issue" so she looked at the wound and also had V1, Administrator, look at the wound. V4 stated she sent a fax to the (Physician) office to notify V18, PCP, of R1's coccyx wound. V4 stated R1 needed a lot of help, and he couldn't move his legs, but could move his arms, and he was not on a turning and positioning program until 6/15/21.</p> <p>On 6/24/21 at 9:55am, V14, LPN, stated that on 6/16/21 she had V15, Advance Practice Nurse (APN) examine R1's pressure sore on his coccyx, V15 conferred with V18, PCP, and a decision was made to transfer R1 to the Emergency Department (ED) for evaluation on 6/16/21.</p> <p>On 6/24/21 at 11:28am, V15, APN, stated she was not aware of R1 having a pressure sore until 6/16/21.</p>	S9999		

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S9999	<p>Continued From page 6</p> <p>R1's Progress Notes dated 6/16/21 at 11:16am documents, "Patient (R1) sent to ER (Emergency Room) OSF to be evaluated for unstageable coccyx and sacrum deep tissue injury."</p> <p>R1's hospital record dated 6/16/21-6/23/21 documents that R1 was sent straight from the ED (Emergency Department) for debridement of the wound. V19, Physician Assistant, Certified, documented on 6/16/21 in his notes "Chart reviewed from recent hospitalization and wound/ostomy evaluation showed small area redness on the sacrum at the time of discharge (6/10/21). There is now extensive necrotic/cellulitic tissue most likely suggestive of necrotizing fasciitis."</p> <p>R1's wound culture of the coccyx dated 6/16/21 documents culture was positive for Pseudomonas, Enterococcus feacalis, and Escherichia coli.</p> <p>R1's hospital Interval History and Physical Note dated 6/23/21 and written by V20, Medical Doctor (MD), documents further debridement of the wound is needed and recommended a diverting colostomy.</p> <p>A hospital consultation note by V21, MD, dated 6/21/21 for R1, documents R1 stated, "The care in the nursing home was very poor, he was rarely turned while in bed, he would be left for hours after soiling himself and was treated unprofessionally while being cleaned up."</p> <p>On 6/23/21 R1 was unavailable for interview due to being in surgery, and on 6/24/21 did not answer the phone.</p>	S9999		

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S9999	<p>Continued From page 7</p> <p>On 6/24/21 at 9:20am, V12, CNA, stated R1 was not routinely turned and positioned, but they would position him so that he would not "slouch forward." V12 stated R1 was frequently incontinent of stool and had to be changed frequently. V12 stated she saw that R1's bottom was red, but that she thought it was because he was laying on it.</p> <p>On 6/24/21 at 12:20pm, V17, CNA, stated R1 could not reposition himself and it required two CNAs to move him. V17 stated they would offer to roll him to his side, but "mostly they moved him up in bed (while on his back)."</p> <p>R1's Medication Administration Record (MAR) documents R1 was not on a turning and repositioning program until 6/15/21. R1's Care Plan dated 6/11/21 directs staff to "Assist resident with turning and repositioning."</p> <p>On 6/24/21 at 2:00pm, V1, Administrator, stated that she could find no other documentation regarding R1's pressure sore from admission until 6/15/21. At this time, V1 provided the annual RN and LPN Task Competency Reviews for V4, RN; V6, RN; V9, LPN; and V11, LPN which included "Responsibility of Nurse: 5. Assessing Resident: a. Admission observation, b. Focused observation. 6. Identifying changes in condition. 7. Notifying doctors of any changes in resident condition. Procedures: 3. Skin and Wound Care, 5. Pressure Injury Prevention/Treatment Program. Documentation: 1. Event Charting, 5. Progress Note Documentation." V1 stated V4, V6, V9, and V11 are aware of their responsibilities.</p> <p>V4's Annual Task Competency Review is dated 10/20/20; V6's is dated 8/17/20; V9's is dated</p>	S9999		

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S9999	<p>Continued From page 8</p> <p>3/23/21, and V11's is dated 3/10/21.</p> <p>2. R2's medical record documents he was admitted to the facility on 6/11/21 and Admission Skin Observation Report and Event Report dated 6/11/21 document Stage 1 pressure ulcers to the right and left gluteal areas.</p> <p>R2's Progress Notes and medical record do not document any measurements or assessments of these pressure ulcers from 6/12/21-6/22/21.</p> <p>R2's Progress Notes dated 6/23/21 document the pressure ulcers are healed and the treatment was changed.</p> <p>On 6/24/21 at 10:00am, V1 stated there are no weekly wound assessments for R2's pressure ulcers and no other wound assessments until 6/23/21 for R2. V1 stated she spoke to V14, Licensed Practical Nurse (LPN) who was responsible for documenting, measuring, and assessing R2's pressure ulcers on 6/18/21, and stated V14 said someone told her the ulcers were healed so she did not check or document them. V14 stated wound assessments are expected to be completed weekly.</p> <p>(A)</p>	S9999		