Illinois Department of Public Health STATEMENT OF DEFICIENCIES (X1) PROVIDER/SUPPLIER/CLIA (X2) MULTIPLE CONSTRUCTION (X3) DATE SURVEY AND PLAN OF CORRECTION IDENTIFICATION NUMBER: COMPLETED A. BUILDING: С IL6001796 B. WING 08/03/2022 NAME OF PROVIDER OR SUPPLIER STREET ADDRESS, CITY, STATE, ZIP CODE 7433 NORTH CLARK STREET **CLARK MANOR** CHICAGO, IL 60626 SUMMARY STATEMENT OF DEFICIENCIES (X4) ID PROVIDER'S PLAN OF CORRECTION (X5)(EACH DEFICIENCY MUST BE PRECEDED BY FULL PREFIX PREFIX (EACH CORRECTIVE ACTION SHOULD BE COMPLETE REGULATORY OR LSC IDENTIFYING INFORMATION) TAG TAG CROSS-REFERENCED TO THE APPROPRIATE DATE DEFICIENCY) S 000 **Initial Comments** S 000 Investigation of Facility Reported Incident of 07-24-2022/IL149608 S9999 Final Observations S9999 Statement of Licensure Violation: 300.610a) 300.1030a)3) 300.1210b) 300.1210d)6) Section 300.610 Resident Care Policies 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 300.1030 Medical Emergencies The advisory physician or medical advisory committee shall develop policies and procedures to be followed during the various medical emergencies that may occur from time to time in long-term care facilities. These medical emergencies include, but are not limited to, such things as: Attachment A Statement of Licensure Violations 3) Traumatic injuries (for example, fractures,

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

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behavior.

psych intake to follow up on R2's status, per RN (Registered Nurse), R2 is admitted for Aggressive

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(Milligram), R1 Diagnoses laceration of left lower

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medication cart inside of the nurse's station. It

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STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: IL6001796 NAME OF PROVIDER OR SUPPLIER STREET AD			(X2) MULTIPLE CONSTRUCTION A. BUILDING: B. WING		(X3) DAT	(X3) DATE SURVEY COMPLETED C 08/03/2022	
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(X4)10 PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)		ID PREFIX TAG	PROVIDER'S PLAN OF CORRECT (EACH CORRECTIVE ACTION SHOU CROSS-REFERENCED TO THE APPRO DEFICIENCY)	DRE COMPLETO		
	to the hospital on 07 infection. There was swollen which might that is infected to the have any other would know of. R1 is a dial prone to infections. Was a ware that there was on 08/02/22 at 03:0 Nurse) stated "I walk to the hospital. R1 was always sleeping in had no altercation when R1 returned frocovered with a clean was open to air with before 07/31/22 R1's R1 had no other would to the left leg. On 07/hospital and R1 had Infection and Edema On 08/02/22 at 03:41 stated "on 07/25/22 I was admitted with the Behavior."	7/31/22 with a wound is no drainage, it was just to be from the wound laceration eleft lower leg. R1 did not inds to the left lower leg that I betic and diabetics are more V1 (Administrator) was made is a knife that was used." 7 PM V11 (Licensed Practical ked in when R1 was going out was alert and oriented x 3, assistance, non-compliant, allway and argumentative. R1 ith any other residents and elected elected floor. On 07/24/22 om the hospital R1's leg was dry dressing and the arm 8 or 9 sutures. The night is legs were not swollen and and other than the laceration (/31/22 I contacted the diagnoses of Wound to left leg." PM V12 (Registered Nurse) called the hospital and R2 ediagnosis of Aggressive PM V13 (Certified Nurse were at the nurse station screaming for help. When	S9999	DEFICIENCY			
	Assistant) stated "we and heard someone a we got there R1 was us and immediately la room. I did not notice was a bent sharp objewas trying to treat R1	were at the nurse station screaming for help. When sitting in the chair, R2 saw oft and went into his (R2's) R2 holding anything, but it ect on the floor. The nurse and picked up the knife with nothing like what we have in					

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paranoid and delusional behavior. R2 has been

PRINTED: 08/23/2022 FORM APPROVED Illinois Department of Public Health STATEMENT OF DEFICIENCIES (X1) PROVIDER/SUPPLIER/CLIA (X2) MULTIPLE CONSTRUCTION (X3) DATE SURVEY AND PLAN OF CORRECTION **IDENTIFICATION NUMBER:** A. BUILDING: COMPLETED C B. WING IL6001796 08/03/2022 NAME OF PROVIDER OR SUPPLIER STREET ADDRESS, CITY, STATE, ZIP CODE 7433 NORTH CLARK STREET **CLARK MANOR** CHICAGO, IL 60626 SUMMARY STATEMENT OF DEFICIENCIES (X4) ID PROVIDER'S PLAN OF CORRECTION PREFIX (EACH DEFICIENCY MUST BE PRECEDED BY FULL (X5) COMPLETE (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE PREFIX REGULATORY OR LSC IDENTIFYING INFORMATION) TAG TAG DATE DEFICIENCY) S9999 Continued From page 12 S9999 refusing medication. R2 is difficult to redirect. V6 stated "R2 was paranoid and mentioned that people are looking at him (R2) and trying to do things to him (R2)." On 08/03/22 at 10:24 AM per telephone interview V17 (Licensed Practical Nurse) stated "on 07/24/22 when R1 came back from the hospital R1's left arm was open to air, had no drainage, with 7 sutures and the left leg was covered with a dry dressing. I removed the dressing to clean the left leg and there was dried blood with 2 sutures and no signs of infection." 08/04/22 at 02:16 PM per telephone interview V15 (Nurse Practitioner) stated "I received a call on 07/24/22 and was told that there was an altercation. After a few days I saw R1 and R1 had stitches to the left arm and left leg. The left arm was open to air with multiple stitches. I did not see the left leg because it was wrapped with a dressing. The laceration was done with something sharp, but I do not know what type of tool was used. I recently spoke with the Director of Nursing and was told R1 left leg wound was infected. R1 came back to the facility today (08/04/22) with continuous IV (Intravenous) infusion, antibiotic IV piggyback. I believe the infection was from the laceration that was on the left leg." Document Titled "Facility Reported Incident/Abuse Report Initial Form dated 07/24/22 document in part: Type of Abuse: Physical. Alleged Victim: R1, Alleged Perpetrator: R2, On

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07/24/22 V16 (Security/Receptionist) reported to V5 (Social Service Director) that R1 alleged that there was an altercation with R2. R1 was assessed by nursing and noted a cut on the left leg and arm. R1 was sent to the hospital.

Illinois Department of Public Health STATEMENT OF DEFICIENCIES (X1) PROVIDER/SUPPLIER/CLIA (X2) MULTIPLE CONSTRUCTION (X3) DATE SURVEY AND PLAN OF CORRECTION IDENTIFICATION NUMBER: A. BUILDING: COMPLETED C B. WING IL6001796 08/03/2022 NAME OF PROVIDER OR SUPPLIER STREET ADDRESS, CITY, STATE, ZIP CODE 7433 NORTH CLARK STREET **CLARK MANOR** CHICAGO, IL 60626 SUMMARY STATEMENT OF DEFICIENCIES (X4) ID PROVIDER'S PLAN OF CORRECTION (X5) COMPLETE PRÉFIX (EACH DEFICIENCY MUST BE PRECEDED BY FULL PREFIX (EACH CORRECTIVE ACTION SHOULD BE REGULATORY OR LSC IDENTIFYING INFORMATION) TAG CROSS-REFERENCED TO THE APPROPRIATE TAG DATE **DEFICIENCY**) S9999 Continued From page 13 S9999 Document Titled "Abuse Report Final Form" dated 07/24/22 document in part: R1 reports that he (R1) was sitting in a chair on the 5th floor hanging out when R2 came up to him (R1) and cut him (R1) on the arm and leg. The staff working on the floor all report being at the nursing station and hearing R1 yelling. R1 was seated in the chair bleeding from his (R1) left leg and arm. Policy: Titled "Abuse and Neglect" reviewed 01/17/22 document in part: It is the policy of the facility to provide professional care and services in an environment that is free from any type of abuse. Physical: Physical abuse includes but not limited to infliction of injury that occur other than by accidental means and requires medical attention. (B)

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