

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: IL6004212	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED C 12/07/2022
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NAME OF PROVIDER OR SUPPLIER ILLINI HERITAGE REHAB & HC	STREET ADDRESS, CITY, STATE, ZIP CODE 1315 CURT DRIVE, SUITE B CHAMPAIGN, IL 61821
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S 000	Initial Comments Complaint Investigation #2269570/IL153892	S 000		
S9999	Final Observations Statement of Licensure Violations 300.610a) 300.1010h) 300.1210b) 300.1210d)5) 300.3220f) 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. 300.1010 Medical Care Policies h) The facility shall notify the resident's physician of any accident, injury, or significant change in a resident's condition that threatens the health, safety or welfare of a resident, including, but not limited to, the presence of incipient or manifest decubitus ulcers or a weight loss or gain of five percent or more within a period of 30 days. The facility shall obtain and record the physician's	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>plan of care for the care or treatment of such accident, injury or change in condition at the time of notification.</p> <p>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 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> <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>300.3220 Medical Care</p> <p>f) All medical treatment and procedures shall be administered as ordered by a physician. All</p>	S9999		

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S9999	<p>Continued From page 2</p> <p>new physician orders shall be reviewed by the facility's director of nursing or charge nurse designee within 24 hours after such orders have been issued to assure facility compliance with such orders.</p> <p>These Regulations are not met as evidenced by:</p> <p>Based on observation, interview and record review the facility failed to complete pressure ulcer treatments as ordered, complete weekly pressure ulcer monitoring, thoroughly assess pressure ulcers upon admission, obtain treatment orders for a newly identified wound and have documentation of identification of a new wound for two of four residents (R5, R4) reviewed for pressure ulcers in the sample list of nine. This failure resulted in R5's unstageable pressure ulcer deteriorating and increasing in size.</p> <p>Findings include:</p> <p>The facility's Pressure Sore Prevention Guidelines policy with a revised date of January/2018 documents, "Any resident scoring a High or Moderate risk for skin breakdown will have scheduled skin checks on the Treatment Record. Skin checks will be completed and documented by the nurse."</p> <p>The facility's Aseptic Wound and Skin Treatment Procedure with a revised date of January/2018 documents, "Purpose: To prevent contamination of the wound, protect wound from mechanical injury, to stimulate, restore, and promote circulation and healing, prevent further deterioration of skin tissue, prevent necrosis of deeper body structures, and to promote resident comfort." "Document procedure on treatment</p>	S9999		

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S9999	<p>Continued From page 3 sheet."</p> <p>1.) R5's Physician's Order Sheet dated 11/1/22 through 11/30/22 documents diagnoses including Skin Picking, Advanced Dementia, Neuropathy, Obesity and Diabetes. R5's Physician's Order dated 11/30/22 documents a treatment order for the left heel to cleanse with normal saline, pat dry, apply calcium alginate, cover with a foam dressing, secure with rolled gauze and change daily. R5's Physician's Order dated 11/30/22 documents a treatment order for the right buttock to cleanse with normal saline, pat dry, apply calcium alginate, cover with a bordered foam dressing and change daily. R5's Physician's Order dated 11/30/22 documents a treatment order for the right heel to cleanse with normal saline, pat dry, cover with a foam dressing and change three times a week.</p> <p>R5's Treatment Administration Record dated 12/1/22 through 12/31/22 documents an order to apply skin protective wipe every shift and documents three shifts, 10:00 PM to 6:00 AM, 6:00 AM to 2:00 PM and 2:00 PM to 10:00 PM. There are not signatures indicating this treatment was completed at all in December. This Treatment Administration Record documents an order for the right heel to cleanse with normal saline, pat dry, apply three times a week and documents to be completed on the 10:00 PM to 6:00 AM shift and is to be completed on 12/2/22, 12/5/22, 12/7/22 and 12/9/22. This treatment is not signed out as completed on 12/5/22.</p> <p>On 12/6/22 at 1:55 PM, V12 Licensed Practical Nurse removed R5's left heel protector boot and the dressing that was on the left foot was dated 12/3/22. The dressing had drainage soaking through. V12 confirmed the date was 12/3/22 and</p>	S9999		

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S9999	<p>Continued From page 4</p> <p>was supposed to have been changed on 12/5/22 but was not and confirmed there was drainage soaking through the dressing.</p> <p>R5's medical record contains Wound Evaluations from V18 Wound Physician. R4's Wound Evaluation dated 10/26/22 documents the Unstageable Left Heel wound measured 4.5 cm (centimeters) x (by) 8 cm. There is no other wound measurements or assessments until 11/16/22, 21 days later. R5's Wound Evaluation dated 11/16/22 documents the Unstageable Left Heel wound measured 6.5 cm x 10 cm x 0.1 cm and wound progress is documented as Deteriorated.</p> <p>On 12/6/22 at 2:35 PM, V3 Regional Administration confirmed that R5's chart did not contain a thorough assessment of R5's wounds on admission. V3 stated V3 could only find the depth of R5's Left Ischium wound and no other measurements or characteristics.</p> <p>2.) R4's Physician's Order Sheet (POS) dated 12/1/22 through 12/31/22 documents diagnoses including Left Ischium Stage Four Pressure Ulcer, Cellulitis of Left Lower Extremity, Diabetes Type 2, Infected Wound and Chronic Kidney Disease. R4's POS documents treatment orders dated 11/30/22 for the Left Ischium to cleanse with normal saline, pat dry, pack with rolled gauze soaked in 1/4 strength bleach solution, cover with abdominal pad and change twice a day; the Sacrum to cleanse with normal saline, pat dry, apply calcium alginate, cover with foam dressing and change daily; the right ankle to cleanse with normal saline, pat dry, apply calcium alginate, cover with foam dressing and change three times a week; the left heel to cleanse with normal</p>	S9999		

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S9999	<p>Continued From page 5</p> <p>saline, pat dry, apply foam dressing and change three times a week; the left anterior leg to cleanse with normal saline, pat dry, apply calcium alginate, cover with an abdominal pad and change three times a week; the right anterior leg to cleanse with normal saline, pat dry, apply calcium alginate, cover with a silicone foam bordered dressing and change three times a week.</p> <p>R4's Nursing Admission Assessment dated 11/17/22 at 8:15 PM does not document a thorough assessment of all of R4's wounds. The area on the left Ischium has no measurements for width or length. The depth is measured at 7 centimeters but no other characteristics are identified.</p> <p>R4's Treatment Administration Record (TAR) dated 11/18/22 through 11/30/22 documents R4 daily skin check was not signed off as completed on 11/22/22 and 11/30/22. This TAR documents R4's Right Ischium treatment was not signed off as completed on the evening shift of 11/22/22 and 11/23/22 and both shifts on 11/30/22. R4's TAR documents R4's Left Lower Extremity treatment was not signed off as completed on 11/30/22. R4's TAR documents R4's Left Heel treatment was not signed off as completed on 11/30/22. R4's TAR documents R4's Right Leg and Right Foot treatment was not signed off as completed on 11/22/22 and 11/30/22. R4's TAR documents R4's Right Heel treatment was not signed off as completed on 11/22/22 and 11/30/22. R4's TAR documents R4's Left Ischium treatments was not signed off as completed on 11/22/22 both shifts, 11/23/22 both shifts, 11/24/22, 11/25/22, 11/26/22, 11/27/22 on the evening shift and 11/30/22 on both shifts. R4's TAR documents R4's Left Buttock treatment was not signed off as</p>	S9999		
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S9999	<p>Continued From page 6</p> <p>completed on 11/22/22, 11/23/22 and 11/30/22.</p> <p>R4's TAR dated 12/1/22 through 12/31/22 documents R4's Left Ischium treatment was not signed off as completed on 12/5/22 on the evening shift.</p> <p>On 12/5/22 at 4:00 PM, R4 stated that the nurses do not change R4's dressing as they are ordered to be changed. R4 stated the dressings were not changed last night (12/4/22) and had not yet been changed this day (12/5/22). R4 stated R4 really wants the wounds to heal so that they do not have to be treated when R4 goes home.</p> <p>R4's Physician visit with V17 R4's Physician on 11/22/22 documents R4 was concerned that R4's dressings have not been changed consistently since R4 was admitted to the facility.</p> <p>On 12/6/22 at 8:15 AM, V8 Licensed Practical Nurse (LPN) completed dressing changes for R4. When V8 removed R4's incontinent brief and there was a new open area on the right buttocks approximately 0.5 cm (centimeters) circular shape. V8 stated that V8 noticed that area yesterday and left a message for V18 Wound Physician regarding this new area but V8 stated V8 has not received a reply back. V8 confirmed there is no treatment order for this area and V8 did not complete a treatment for this area. V8 left this new area open and put a clean incontinence brief on R4.</p> <p>R4's Minimum Data Set (MDS) dated 11/24/22 does not document any of the wounds that R4 had on admission.</p> <p>On 12/7/22 at 10:45 AM, R4 stated that the nurses miss doing some of R4's treatments.</p>	S9999		

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S9999	<p>Continued From page 7</p> <p>On 12/7/22 at 1:00 PM, V8 LPN confirmed there is still no treatment orders for R4's new wound on R4's buttocks. V8 stated that V18 Wound Physician will be back to the facility on 12/10/22.</p> <p>The facility's Resident Council Meeting Minutes dated 9/23/22 documents concerns regarding wound not being done.</p> <p>On 12/7/22 at 1:45 PM, V3 confirmed the nurse are to sign their initials on the Treatment Administration Record when they complete a treatment. V3 confirmed the Treatment Records are not complete.</p> <p>(B)</p>	S9999		