

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: IL6005896	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED C 08/22/2023
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NAME OF PROVIDER OR SUPPLIER MAYFIELD CARE AND REHAB	STREET ADDRESS, CITY, STATE, ZIP CODE 5905 WEST WASHINGTON CHICAGO, IL 60644
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(X4) ID 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 CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
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S 000	Initial Comments Facility Reported Incident of 7/17/23/IL162748 - F600G	S 000		
S9999	Final Observations Statement of Licensure Violations: 300.610a) 300.1210b) 300.3210t) 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 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. Section 300.3210 General	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	Continued From page 1 t) The facility shall ensure that residents are not subjected to physical, verbal, sexual or psychological abuse, neglect, exploitation, or misappropriation of property. The regulations were not met as evidenced by: Based upon record review and interview the facility failed to follow the abuse prevention policy, failed to implement mood/behavior interventions, and failed to ensure that two of four residents (R4, R5) reviewed for abuse remained free from abuse. These failures resulted in R4 being struck by R5 thereby sustaining right forehead raised area, bruise, abrasion, and skin tear which required first aid. Findings include: R4's diagnoses include major depressive disorder, human immunodeficiency virus and encounter for palliative care. R4's (7/17/23) progress notes state resident was hit by another resident, causing a skin tear to her forehead. The other resident was passing by and just proceed to hit her in the head. There was no conversation exchanged between the two residents. The area was cleaned with normal saline solution, pat dry, and covered with an island border gauze. The (7/17/23) preliminary incident investigation report states (R5) made physical contact with (R4). Body assessment completed with bruise noted to (R4) forehead. The (7/17/23) final abuse investigation report states when (R4) got off the elevator (R5) was in resident's face and hit (R4). (R4) was noted with	S9999		

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S9999	<p>Continued From page 2</p> <p>a raised area with an abrasion to her right forehead.</p> <p>R4's (7/22/23) BIMS (Brief Interview Mental Status) determined a score of 15 (cognitively intact).</p> <p>On 8/22/23 at 11:09am, R4 was lying in bed and verbally unresponsive likely due to dying process. A small linear scar was observed above R4's right eyebrow, V18 (Family) affirmed R4's scar resulted from injury sustained during (7/17/23) incident.</p> <p>R5's diagnoses include dementia, schizoaffective disorder and violent behavior.</p> <p>R5's care plan includes (2/4/23) Resident has a mood problem related to irritability, anger, and delusional disorder. Interventions: administer medications as ordered. Provide resident with a program of activities that is meaningful and of interest. Encourage and provide opportunities for exercise and physical activity. (4/10/23) Resident sometimes have behaviors which include bumping into others, hitting during care, kicking, shouting and spitting. Interventions: help me to avoid situations or people that are upsetting to me. Attempt interventions before my behaviors begin. Refer me to my psychologist/psychiatrist as needed.</p> <p>R5's (5/9/23) BIMS (Brief Interview Mental Status) determined a score of 5 (severely impaired).</p> <p>On 8/14/23 at 1:14pm, R5 refused to respond during interview.</p> <p>On 8/22/23 at 10:13am, V1 (Administrator) stated, I got a call stating that (R5) hit (R4)</p>	S9999		
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S9999	<p>Continued From page 3</p> <p>abruptly when walking by. She (R4) had an abrasion to the head and refused to go to the hospital. He (R5) was sent out for a psychological evaluation, and they changed his meds. He's (R5) a 1:1 now." V1 stated, "Everyone's saying he (R5) had no reason, and he (R5) don't remember what happened. He (R5) has a diagnosis of dementia, nothing triggered him or anything."</p> <p>The (10/2022) abuse prevention policy states in part this facility desires to prevent abuse and mistreatment by establishing a resident sensitive and resident secure environment. This will be accomplished by a comprehensive quality management approach involving the following: On the comprehensive care plan, staff will identify residents with increased vulnerability for abuse, neglect, exploitation, mistreatment, or history of trauma, who have needs, triggers and behaviors that might lead to conflict. Through the care planning process, staff will identify any problems and approaches, which would reduce the chances of abuse, neglect, exploitation, mistreatment or misappropriation of resident property for these residents. Staff will continue to monitor the goals and approaches on a regular basis and update as necessary.</p> <p>(B)</p>	S9999		