

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: IL6003628	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED C 11/30/2023
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NAME OF PROVIDER OR SUPPLIER APERION CARE GLENWOOD	STREET ADDRESS, CITY, STATE, ZIP CODE 19330 SOUTH COTTAGE GROVE GLENWOOD, IL 60425
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S 000	Initial Comments Complaint Investigation 2399430/IL166606	S 000		
S9999	Final Observations Statement of Licensure Violations: 300.610a) 300.1210a) 300.1210b) 300.1210d)3)5) 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 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	S9999	<p>Attachment A Statement of Licensure Violations</p>	

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE _____ TITLE _____ (X6) DATE _____

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S9999	<p>Continued From page 1</p> <p>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>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> <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>	S9999		

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S9999	<p>Continued From page 2</p> <p>This REQUIREMENT is not met as evidenced by:</p> <p>Based on observation, interview, and record review the facility failed to follow their pressure ulcer prevention policy by not preventing a resident from developing a facility acquired Stage 3 pressure ulcer and failed to have effective interventions and physician orders in place for the treatment of the pressure ulcer once acquired. This failure applied to one (R3) of one resident reviewed for pressure ulcers and resulted in R3 not receiving the care and services required to aid in the healing and prevention of pressure ulcers. R3 developed a new stage 3 pressure ulcer to his left ischium.</p> <p>Findings include:</p> <p>R3 is 72 years old and have resided at the facility since 2/01/2023, with past medical history including, but not limited to Paraplegia, Type 2 diabetes without complication, colostomy status, acquired absence of left leg above knee, neuromuscular dysfunction of bladder, ataxia following other cerebrovascular disease, pain, major depressive disorder, hypertensive chronic kidney disease, Kidney failure, benign prostatic hyperplasia, etc.</p> <p>11/27/2023 at 11:30AM, observed resident in his bed, awake and alert but said that he is tired, just came back from dialysis. Resident was noted to have a urinary catheter. R3 stated that it is supra pubic, and he also has a colostomy bag.</p> <p>11/27/2023 at 1:40PM, resident was observed still</p>	S9999		

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S9999	<p>Continued From page 3</p> <p>lying on his back in the same position and stated that he is feeling a little better. Review of facility pressure ulcer log documented that R3 has a stage 3 pressure ulcer to left thigh back, facility acquired and identified on 9/22/2023.</p> <p>11/28/2023 at 11:30AM, observed wound care for resident with V5 (Licensed Practical Nurse/LPN) and V7 (Wound Care Tech) noted a large area of excoriation on the residents back left thigh with some whitish substance, resident's stoma site was noted with some brownish crusty substances and resident stated that the area is sore to touch. V5 wiped away the substances and stated that the wound doctor just changed the treatment to reduce the drainage. V5 proceeded to remove the old dressing, applied the new treatment. Neither V5 nor V7 repositioned the resident after the wound care or offered to reposition him. Surveyor presented this observation to V5 who stated that R3 refuses care and prefers to lie on his back and will not allow staff to reposition him. Surveyor pointed out that R3 was not offered an opportunity to be repositioned after the wound care treatment so how does he refuse if the care is not even offered and V5 did not have an answer to that question.</p> <p>11/28/2023 at 2:30PM, R3 was observed in his room still lying in the same position since the wound care observation. Surveyor asked resident why he is still in the same position, and he said that he cannot turn, and that staff will not help him. R3 was asked if he refuses care from staff and he said no, he never refused any type of care from staff; they just don't help.</p> <p>Braden (pressure ulcer risk) score assessment dated 5/02/2023 scored R3 as 11 indicating high risk for alteration in skin integrity.</p>	S9999		

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S9999	<p>Continued From page 4</p> <p>Minimum Data Set assessment (MDS) dated 10/26/2023 section C (Cognition) scored R3 with a BIMs score of 14 (cognitively intact), section GG (functional abilities and goals) coded R3 as being dependent on staff for all ADL care.</p> <p>Care plan initiated 2/01/2023 states: I have a potential for impairment to skin integrity r/t need for assistance with mobility and HX of pressure injury, interventions include Avoid skin-to-skin contact, Encourage, and assist with turning and repositioning at regular intervals every shift as tolerated and when requested for comfort, Minimize pressure over boney prominences, etc. Pressure ulcer care plan initiated 2/01/2023 stated that resident has pressure ulcer related to immobility, LLE amputation and fragile skin. Interventions include Encourage and assist with turning and repositioning at regular intervals every shift as tolerated and when requested for comfort.</p> <p>Wound care note dated 10/16/2023 documented a stage 3 pressure ulcer to the left ischium measuring 2.6 X 2.0 X 0.1cm, surface area 7.54cm, >25 days duration, 70% granulation tissue and 30% skin. Recommendation: turn side to side in bed every 1-2 hours if able, offload wound, reposition per facility protocol.</p> <p>11/27/2023 at 3:38PM, V5 (LPN/Wound Care) said that the doctor saw R3 today and put in an order for zinc oxide, he was previously getting treatment with zinc oxide before he went to the hospital. V5 does not have any treatment orders since the resident came back from the hospital, he does not get daily dressing change because he does not allow her to do the dressing change. V5 said, "what good will it do to have an order</p>	S9999		

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S9999	<p>Continued From page 5</p> <p>when he will not let me change his dressing?" V5 added that the previous order was for three times a week and she cannot recall when resident went to the hospital or how long he has been at the facility without a wound care order, resident has a stage 3 facility acquired pressure ulcer that was identified on 9/22/2023.</p> <p>11/28/2023 at 2:05PM, V2 (Director of Nursing) said that if a resident is refusing care, everybody should be involved, the doctor, family, IDT, and they are supposed to provide education, document in the progress note and it should be care planned. V2 confirmed that V2 has never been notified by anyone that R3 refuses ADL and wound care.</p> <p>There was no care plan noted that addressed R3 refusing care.</p> <p>Pressure ulcer policy revised 1/15/2018 states its purpose as to prevent and treat pressure sores/pressure injury. Guidelines: 2. Inspect the skin several times daily during bathing, hygiene, and repositioning measures, may use lotion on dry skin. 5. Turn dependent resident approximately every two hours or as needed and position resident with pillow or pads protecting bony prominences as indicated.</p> <p>"B"</p>	S9999		
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