

Illinois Department of Public Health

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| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: IL6008213 | (X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____ | (X3) DATE SURVEY COMPLETED C 01/19/2024 |
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| NAME OF PROVIDER OR SUPPLIER SANDWICH REHAB & HCC | STREET ADDRESS, CITY, STATE, ZIP CODE 902 EAST ARNOLD STREET SANDWICH, IL 60548 |
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| S 000 | Initial Comments Complaint Investigation 2410362/IL168724 | S 000 | | |
| S9999 | Final Observations Staement of Licensure Violations: 1 of 2 300.610a) 300.1010h) 300.1210b) 300.1210d)2)3) 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 300.1010 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. | S9999 | | |

Illinois Department of Public Health
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE
Electronically Signed

TITLE

(X6) DATE
02/11/24

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| S9999 | <p>Continued From page 1</p> <p>The facility shall obtain and record the physician's plan of care for the care or treatment of such accident, injury or change in condition at the time of notification. (B)</p> <p>Section 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.</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>2) All treatments and procedures shall be administered as ordered by the physician.</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>These requirements are not met as evidenced by:</p> <p>Based on observation, interview, and record review the facility failed to implement interventions to prevent the worsening of pressure ulcers, failed to perform weekly</p> | S9999 | | |

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| S9999 | <p>Continued From page 2</p> <p>assessments and measurements of a pressure wound, and failed to perform scheduled dressing changes for a pressure ulcer for 1 of 3 residents (R1) reviewed for pressure ulcers. These failures resulted in the deterioration and increase in size of R1's pressure ulcer from a stage 3 to unstageable.</p> <p>The findings include:</p> <p>R1's admission assessment showed he was admitted to the facility on 10/26/22. R1's face sheet showed he has diagnoses of age-related physical debility, mixed hyperlipidemia, Parkinson's Disease, Type 2 Diabetes Mellitus, Benign Prostatic Hyperplasia, Hypertension, and muscle weakness.</p> <p>R1's 12/20/23 facility assessment to determine risk for skin breakdown showed R1 to be a high risk. This assessment showed the interventions in place for R1 at that time was a pressure relieving device in his chair and a turning and repositioning program.</p> <p>R1's care plan initiated 8/7/23 showed, "Resident has wound that appears to be related predominately to pressure. Major contributing factors include Parkinson's immobility, unstageable pressure wound noted to coccyx. Please see treatment records for current measurements... Administer treatments as ordered and monitor for effectiveness. See current orders in eChart Orders/eTAR (electronic Treatment Administration Record) ... Assess/record/monitor wound healing at least weekly. Measure length, width, and depth where possible. Assess and document status of wound perimeter, wound bed, and healing progress. Report improvements and declines to the MD</p> | S9999 | | |

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| S9999 | <p>Continued From page 3</p> <p>(physician)... Monitor/document/report PRN (as needed) changes in current wound and/or skin status: appearance, color, wound healing, s/sx (signs and symptoms) of infections such as redness, swelling, drainage, foul smell, decline in function and reduced mobility, wound size, stage. Report adverse findings to practitioner..."</p> <p>On 1/16/24 at 12:18 PM, V11 (R1's Daughter) said she feels that her father is not getting the treatment he needs at the facility for his pressure sore. V11 said R1 was recently sent to the emergency room, and she saw his pressure sore on his coccyx. V11 said R1's pressure sore was completely black and was extremely deteriorated from the last time she had seen his wound. V11 said, "I was so appalled by it because he was in the hospital back in December and his wound was looking pretty good." V11 said she was told the wound care doctor comes to the facility every two weeks, but she has never received any updates regarding her father's wound. V11 said in December R1's wound was pink around the edges, had no black on it, and the center was a little mucous looking.</p> <p>R1's 12/20/23 Admission/Readmission Nursing Evaluation showed, "... Sacrum, Pressure, Stage N/A (Not Applicable) ... Resident has some small openings on his sacrum". This assessment showed no measurements or description of R1's wound.</p> <p>R1's November 2023 eTAR (electronic Treatment Administration Record) showed an order started 10/1/23 for "Site: Coccyx, cleanse with NSS (normal saline solution), pat dry, apply Medihoney and Calcium Alginate, cover with foam silicone border, every day and PRN (as needed)". This eTAR showed R1's dressing change was not</p> | S9999 | | |

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| S9999 | <p>Continued From page 4</p> <p>documented as completed on 11/2/23, 11/6/23, 11/9/23, 11/10/23, 11/14/23, 11/15/23, 11/16/23, 11/17/23, 11/21/23, 11/22/23, 11/23/23, 11/26/23, 11/29/23, and 11/30/23 (14 of 30 scheduled dressing changes were not completed).</p> <p>R1's December 2023 eTAR (electronic Treatment Administration Record) showed an order for "Site: Coccyx, cleanse with NSS (normal saline solution), pat dry, apply Medihoney and Calcium Alginate, cover with foam silicone border, every day and PRN (as needed)" started 10/01/2023. This treatment was not documented as completed 12/1/23, 12/7/23, 12/8/23, 12/9/23, 12/10/23, 12/13/23, and 12/14/23. This order was placed on hold on 12/15/23 when R1 went to the acute care hospital for evaluation and treatment. The same eTAR showed a new order started 12/21/23 for Cadexomer Iodine 0.9%, Apply to sacrum topically one time a day for pressure ulcer. (On 1/18/23, V1 [Regional Clinical Director] indicated the order for Cadexomer Iodine originated from R1's acute care hospital stay 'After Visit Summary'. R1's 'After Visit Summary' dated 12/20/23 showed an order for 'Cadexomer Iodine 0.9% Gel, 1 Application topically daily.' This order did not have directions for the location of the application. R1's medical record showed no evidence of a clarification order or notification to R1's wound care doctor regarding the change to his prescribed treatment.) R1's same December 2023 eTAR showed an order for checking R1's skin every Monday, Wednesday, and Friday based on his high risk for skin breakdown starting 12/22/23. These assessments were not documented as completed on 12/22/23, 12/25/23, 12/27/23, 12/29/23, and 12/31/23 (5 of 5 scheduled skin assessments were not completed).</p> | S9999 | | |

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| S9999 | <p>Continued From page 5</p> <p>R1's weekly wound assessments were reviewed and were noted to be missing for the week of October 23, 2023, November 13, 2023, November 20, 2023, November 27, 2023, December 11, 2023, December 25, 2023, and January 1, 2024. (6 of 12 weekly wound assessments were not completed.) R1's weekly wound assessment provided by the facility dated 12/19/23 showed R1's wound measured 2.5 cm x 2 x 0.1 cm. R1 was not in the facility on 12/19/23. On 1/17/24 at 1:45 PM, V1 (Regional Clinical Consultant) emailed this surveyor stating the measurements from the 12/19/23 wound assessment were taken from the last completed wound assessment on 12/5/23. R1's wound had not been assessed by the facility staff from 12/5/23 through 1/10/24. The facility's wound log dated 1/10/24 showed R1's coccyx wound was unstageable and measured 5.8 cm x 3.5 cm x 0.1 cm.</p> <p>R1's January 2024 eTAR showed an order started 1/3/24 for "Cadexomer Iodine 0.9% External Gel to be applied daily to R1's sacrum topically for pressure ulcer. Cleanse with normal saline solution or wound cleanser and apply iodoform and cover with dressing." The facility was unable to determine where this order came from.</p> <p>R1's January 2024 eTAR showed a new order for treatment for R1's pressure wound on his coccyx starting 1/10/24 to "Apply to coccyx topically every day shift for wound care for 7 days. Cleanse with normal saline, pat dry. Skin prep peri wound. Apply Dakins 0.25% soaked gauze and cover with foam dressing every day and PRN for 7 days." This order was active from 1/10/24 through 1/12/24. This treatment was not documented as completed 1/10/24.</p> | S9999 | | |

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| S9999 | <p>Continued From page 6</p> <p>R1's 1/11/24 Health Status Note entered at 8:46 AM showed, "Resident unable to swallow morning medications or food. Resident unable to maintain posture in wheelchair, leaning to the left. When attempting to communicate with resident, he was unable to speak, only inaudible mumble... Contacted MD and POA (Power of Attorney). Resident sent to ED (Emergency Department) for evaluation per MD recommendation."</p> <p>R1's 1/11/24 Order Administration Note showed R1's wound care to his coccyx was not performed 1/11/24 due to R1 being at the emergency department.</p> <p>R1's 1/11/24 Health Status Note entered at 5:00 PM showed, "Resident returned via ambulance.... Resident placed in his bed."</p> <p>R1's 1/12/24 Health Status Note entered at 12:22 PM showed, "Clarification orders for wet to dry to coccyx received see orders."</p> <p>R1's current physician order showed, "1/12/24 Cleanse wound with NS (normal saline), wet to dry gauze cover with ABD pad and secure with tape q (every) day. Every evening shift for wound care."</p> <p>R1's January 2024 eTAR showed R1's wound care to his wound on his coccyx was not documented as completed 1/14/24.</p> <p>On 1/16/24 at 10:08 AM, R1 was lying in his bed with oxygen in place. R1's eyes were opened but he would not respond. V5 CNA (Certified Nursing Assistant) and V6 CNA were in R1's room to reposition R1. V5 and V6 turned R1 to his left side to show this surveyor R1's pressure wound</p> | S9999 | | |

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| S9999 | <p>Continued From page 7</p> <p>on his coccyx. There was no dressing on R1's wound. R1's wound had red edges periwound and was 100 % black necrotic tissue within the wound.</p> <p>On 1/16/24 at 10:08 AM, V5 and V6 were interviewed together. V5 said R1's wound does not usually have a dressing on it because it is left "open to air". V5 said she knows it is left open to air because she worked yesterday (1/15/24) and there was no dressing on it all day yesterday either.</p> <p>On 1/16/24 at 10:34 AM, V9 LPN (Licensed Practical Nurse) was rounding with V10 (Wound Care Physician). V9 said R1's current treatment is for a wet to dry dressing to his pressure ulcer on his coccyx because that is what the orders were from the hospital when he returned.</p> <p>On 1/16/24 at 10:37 AM, V10 (Wound Care Physician) said he had not seen R1's wound for about 5-6 weeks and it is definitely worse than it was. V10 "scored" R1's coccyx wound with his scalpel and said, "There is very little bleeding which means this necrotic tissue is pretty thick."</p> <p>On 1/16/24 at 2:12 PM, V8 CNA said if they notice a dressing has come off of a resident they usually try and get the nurse to come down and redo the dressing. V8 said she worked the evening shift on 1/14/24 and when she put R1 to bed he did not have a dressing in place. V8 said she removed R1's incontinence brief when she realized the dressing was not in place and she assisted R1 to bed to let his wound "air out". V8 said, "We CNAs think it is best to leave the dressing off and remove the brief to leave it open to air out." The facility's nursing schedule was reviewed for 1/14/24 and confirmed V8 was</p> | S9999 | | |

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| S9999 | <p>Continued From page 8</p> <p>working the night she reported the wound was without a dressing and left open to air out through the night.</p> <p>On 1/16/23 at 11:50 AM, V4 LPN (Licensed Practical Nurse) said the facility does not have a dedicated wound care nurse. V4 said the nurses do not do the wound measurements unless the wound has changed significantly.</p> <p>On 1/19/24 at 8:07 AM, V1 (Regional Clinical Director) said nurses are required to do skin checks. V1 said the skin checks are documented on the TAR (Treatment Administration Record). V1 said if the resident has a wound the nurses would document the assessment under a "Skin Only" assessment in the electronic record. V1 said if a resident is being followed by the wound care physician and they go to an acute care hospital, the wound physician should be notified when the resident returns and if the hospital made any changes to the resident's orders for wound care. V1 said dressing changes should be completed as ordered by the physician for healing. V1 said the dressing changes are ordered for a reason and need to be completed. V1 said dressing changes should be documented in the TAR when completed.</p> <p>On 1/18/24 at 1:54 PM, V10 (Wound Care Doctor) said he does not go to the facility weekly and expects the facility nursing staff to complete wound assessments weekly and update him with changes to the wounds. V10 said the facility has been having a lot of changes to the Administrative and Nursing Staff over the last several months which has caused some difficulties with care being completed. V10 said he was unaware that R1 had gone to the hospital and that the hospital had made changes to R1's wound care orders.</p> | S9999 | | |

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| S9999 | <p>Continued From page 9</p> <p>V10 said he needs to be notified if the hospital makes changes to his wound care orders so he can ensure a proper treatment is in place. V10 said the order change from the hospital to Cadexomer Iodine would have been changed if he was notified because applying iodine to an open would be cytotoxic. V10 said the Cadexomer Iodine order did not make sense as treatment for R1's wound. V10 said not maintaining consistent wound care orders can negatively affect the wound. In addition, V10 said it would not be appropriate to have the wound "open to air" because the wound would not be protected and there would be nothing to absorb any drainage. V10 said leaving the wound "open to air" would impede healing. V10 said it would be critically important for the nurses to assess and update him on the condition of wounds. V10 said if he is not updated in a timely manner it could be detrimental to the patient.</p> <p>The facility's policy and procedure revised 1/18 showed, "Skin Condition Monitoring, Policy: It is the policy of this facility to provide monitoring, treatment, and documentation of any resident with skin abnormalities... Procedure: ... 3. Any skin abnormality will have a specific treatment order until area is resolved... Documentation of the skin abnormality must occur upon identification and at least weekly thereafter until the area is healed. Documentation must include the following: a. Characteristic 1. Size, 2. Shape, 3. Depth, 4. Odor, 5. Color, 6. Presence of granulation tissue or necrotic tissue. b. Treatment and response to treatment. Observe and measure pressure ulcers at regular intervals...."</p> <p>The facility's policy and procedure revised 1/18 showed, "Decubitus Care/Pressure Areas, Policy: It is the policy of the facility to ensure a proper</p> | S9999 | | |

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| S9999 | <p>Continued From page 10</p> <p>treatment program has been instituted and is being closely monitored to promote the healing of any pressure ulcer... The pressure area will be assessed and documented on the Treatment Administration Record or the Wound Documentation Record.... Document size, stage, site, depth, drainage, color, odor, and treatment... Documentation of the pressure area must occur upon identification and at least once each week on the TAR or Wound Documentation Form... Reevaluate the treatment for response at least every two to four weeks. Most pressure areas will respond to treatment in this amount of time. If no improvement is seen in this time frame, contact the physician for a new treatment order... When a pressure ulcer is identified additional interventions must be established and noted on the care plan in an effort to prevent worsening or re-occurring pressure ulcers."</p> <p>(B)</p> <p>2 of 2</p> <p>300.610a) 300.1210b) 300.1210d)2)3) 300.3220f)</p> <p>Section 300.610 Resident Care Policies</p> <p>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</p> | S9999 | | |

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| S9999 | <p>Continued From page 11</p> <p>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.</p> <p>Section 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.</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>2) All treatments and procedures shall be administered as ordered by the physician.</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>Section 300.3220 Medical Care</p> <p>f) All medical treatment and procedures shall be administered as ordered by a physician. All new physician orders shall be reviewed by the</p> | S9999 | | |

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| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: IL6008213 | (X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____ | (X3) DATE SURVEY COMPLETED C 01/19/2024 |
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| S9999 | <p>Continued From page 12</p> <p>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. (Section 2-104(b) of the Act)</p> <p>These requirements are not met as evidenced by:</p> <p>Based on observation, interview, and record review the facility failed to ensure a catheter was maintained per physician orders, failed to ensure orders were in place for a resident with a catheter, and failed to provide catheter care for 2 of 3 residents (R1 and R4) reviewed for indwelling catheters. This failure resulted in R1 being diagnosed with a urinary tract infection on 1/16/24.</p> <p>The findings include:</p> <p>1. R1's admission assessment showed he was admitted to the facility on 10/26/22. R1's face sheet showed he has diagnoses of age-related physical debility, mixed hyperlipidemia, Parkinson's Disease, Type 2 Diabetes Mellitus, Benign Prostatic Hyperplasia, Hypertension, and muscle weakness. .</p> <p>R1's care plan initiated 8/1/23 showed, "The resident has a foley catheter: Neurogenic bladder, terminal condition... Catheter care every shift..."</p> <p>On 1/16/24 at 12:18 PM, V11 (R1's Daughter) said she feels her father is not getting the care he needs for his catheter. V11 said her dad's catheter is supposed to be changed every two weeks and he became septic from a urinary tract infection in September 2023. V1 said during her dad's last hospital stay the nurse at the hospital was very concerned about the condition of his</p> | S9999 | | |

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| S9999 | <p>Continued From page 13</p> <p>catheter.</p> <p>R1's January 2024 eMAR (electronic Medication Administration Record) showed a new order 1/16/24 for Cipro (antibiotic) 250 mg... two times a day for UTI (Urinary Tract Infection) for 10 days.</p> <p>R1's January 2024 eTAR (electronic Treatment Administration Record) showed no orders for catheter care, changing the catheter bag, flushing the catheter, or changing the catheter until 1/16/24 (the day the surveyor was in the facility).</p> <p>R1's December 2023 eTAR showed an order to "Urinary Catheter- Drainage Bag - Change weekly" which started 10/1/23 and was discontinued on 12/19/23 when R1 went to the hospital. This same eTAR showed the urinary drainage bag due to be changed 12/3/23, 12/10/23, and 12/17/23. There was no documentation that the urinary catheter drainage bag was changed at all in the month of December 2023.</p> <p>R1's December 2023 eTAR showed an order for "Urinary Catheter Care every shift for catheter use started ... This eTAR shows that catheter care was documented as being completed 24 out of the 43 scheduled (19 missed between 12/1/23 and 12/15/23 when R1 went to the acute care hospital for evaluation and treatment.)</p> <p>R1's December 2023 eTAR showed no catheter orders were restarted upon R1's return to the facility on 12/20/23. No catheter care was documented from 12/20/23 through 1/16/24 (the day the surveyor was in the facility).</p> <p>On 1/19/24 at 8:07 AM, V1 (Regional Clinical Director) said there should be catheter orders in</p> | S9999 | | |

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| S9999 | <p>Continued From page 14</p> <p>place for residents who have indwelling catheters. V1 said these are important to make sure that the resident's catheter is being taken care of properly and to monitor for infections. V1 said catheter care, catheter changes, catheter flushes, and catheter drainage bag changes should be documented as completed on the resident's eTAR.</p> <p>2. R4's face sheet showed he was admitted to the facility on 7/27/23 with diagnoses to include anxiety disorder, dementia, hypertension, left bundle-branch block, non-st elevation myocardial infarction, abnormalities of gait and mobility, macular degeneration, aphasia, dysphagia, low back pain, protein calorie malnutrition.</p> <p>R1's 11/9/23 Skilled Charting showed he has a catheter in place.</p> <p>On 1/16/24 at 12:48 PM, R4 said he has a catheter and uses a leg bag. R4 said he is not sure why he has a catheter but that he went to the hospital from home and then came to the facility with a catheter. R4 said he tries to take care of his catheter himself. R4 said he was supposed to have an appointment with a physician about the catheter and would like to have it removed. R4 said the facility staff tell him it would be more painful to remove the catheter than to just leave it in. R4 said he does not recall having the catheter changed at all since he has been in the facility. R4 said the facility staff do not clean his catheter. R4 said if he does not shower for a week or so it starts to get really itchy around his penis where the catheter goes in but that if he takes a shower then it stops itching so much. R4 said the longer he goes without a shower the itchie he gets around his catheter.</p> | S9999 | | |

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| S9999 | <p>Continued From page 15</p> <p>R4's January 2024 Physician Order Sheet showed no orders for a foley catheter, no orders for catheter care, no orders to change the catheter bag, and no orders for flushing or changing the catheter. R4's Physician Order Sheet showed no evidence that R4 had a catheter in place.</p> <p>V1 (Regional Clinical Director) said if a resident has a catheter there should be orders in place to care for the catheter.</p> <p>The facility's policy and procedure revised 3/15/23 showed, "Catheter Care, Purpose: Catheter care is provided daily and as needed to all residents who have an indwelling catheter to reduce the incidence of infection."</p> <p>(B)</p> | S9999 | | |