

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: IL6001465	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 03/15/2024
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NAME OF PROVIDER OR SUPPLIER CARLTON AT THE LAKE, THE	STREET ADDRESS, CITY, STATE, ZIP CODE 725 WEST MONTROSE AVENUE CHICAGO, IL 60613
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S 000	Initial Comments	S 000		
S9999	<p>Annual Licensure and Certification</p> <p>Final Observations</p> <p>Statement of Licensure Violations (1 of 3)</p> <p>300.610a) 300.1210a) 300.1210b)4) 300.1210c) 300.1210d)2)3)</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 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>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</p>	S9999		

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

TITLE

(X6) DATE
04/01/24

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S9999	<p>Continued From page 1</p> <p>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 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>4) All nursing personnel shall assist and encourage residents so that a resident's abilities in activities of daily living do not diminish unless circumstances of the individual's clinical condition demonstrate that diminution was unavoidable. This includes the resident's abilities to bathe, dress, and groom; transfer and ambulate; toilet; eat; and use speech, language, or other functional communication systems. A resident who is unable to carry out activities of daily living shall receive the services necessary to maintain good nutrition, grooming, and personal hygiene.</p> <p>c) Each direct care-giving staff shall review and be knowledgeable about his or her residents'</p>	S9999		

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S9999	<p>Continued From page 2</p> <p>respective resident care plan.</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 were not met evidenced by:</p> <p>Based on interviews and record reviews, the facility failed to a.) evaluate a high-risk resident's (R285) nutritional status within 14 days of admission; b.) implement a person-centered comprehensive care plan with nutritional interventions and goals addressing R285's nutritional risk factors; c.) follow their policy to obtain resident's weights monthly for 4 (R40, R49, R91, R106); d.) identify and address weight loss in a timely manner when significant changes occurred for 5 (R40, R49, R 91, R106, R285). These failures resulting in significant/severe weight loss for 4 (R40, R49, R106, R285) out of 5 residents reviewed for nutrition in a sample of 39.</p> <p>Findings include:</p> <p>1. R40 was admitted to the facility on 03/08/2016</p>	S9999		

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S9999	<p>Continued From page 3</p> <p>and has diagnosis which includes but not limited Dysphagia, Dementia, Age-Related Osteoporosis, Respiratory Failure with Hypoxia, Unspecified Abdominal Pain, Fatigue, Major Depressive Disorder, Post-Traumatic Stress Disorder, Chronic Pain.</p> <p>R40's MDS (Minimum Data Set) from 02/01/24 BIMS (Brief Interview for Mental Status) was 08/15 indicating moderate cognitive impairment.</p> <p>R40's MDS dated 02/06/24 section K- Swallowing/Nutritional Status K0300 for Weight Loss 5% of more in the last month or low of 10% or more in the last 6 months "yes, not on prescribed weight-loss regimen."</p> <p>R40's Weight Summary undated documents in part, R40's weights as follows: (02/20/2023) 205 pounds; (08/15/2023) 196.6 pounds; (09/20/2023) 186.2 pounds; (11/21/2023) 177.8 pounds; (01/25/2024) 167.6 pounds; (02/22/2024) 166.6 pounds.</p> <p>R40's Order Summary Report printed 03/13/24 documents in part, fortified pudding two times a day for supplement with order date of 05/16/23 and 03/13/24 and Glucerna after meals if not consuming >75% of meals ordered on 05/11/23, meal monitoring: record percentage eaten after meals ordered 05/02/2023, and Mirtazapine 7.5 mg by mouth at bedtime for depression ordered 05/01/2023.</p> <p>R40's Dietary Evaluation completed by V25 (Registered Dietitian) dated 11/09//23 documents in part R40's November 2023 weight pending, October 2023 weight not available, September 2023 weight 186.2 pounds, and August 2023 weight 196.6 pounds. with 5.3% weight loss times</p>	S9999		

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S9999	<p>Continued From page 4</p> <p>one month with recommendation to obtain current weight and continue with oral nutritional supplement. V25 Dietary Evaluation documents in part R40 receiving Glucerna after meals and fortified pudding twice a day. No changes to dietary interventions made.</p> <p>R40's Weight Warning progress note completed by V25 dated 12/21/23 documents in part R40's November weight 177.8 pounds and 9.6% weight loss in 3 months, 12.8% weight loss in 5 months, resident with decreased intake consuming approximately 50% of meals on average and varied acceptance of oral supplements, goal changed to no further weight loss. No changes to dietary interventions were made.</p> <p>R40's Dietary Evaluation completed by V25 dated 01/31/24 documents in part R40's January weight 167.6 pounds, 14.8% weight loss x5 months, weight loss related to varied intake per staff resident will skip some meals if she's sleeping or feeling depressed with recommendation to obtain current weight. No changes made to dietary interventions.</p> <p>R40's Weight Warning progress note completed by V40 (Registered Dietitian) dated 03/06/24 documents in part -10.5% weight change in six months, usual body weight 200-220 pounds, weight loss related to varied intake per staff resident will skip some meals if she's sleeping or feeling depressed, staff to provide oral supplements if resident is skipping meals. No changes made to dietary interventions.</p> <p>On 03/14/24 at 10:35 AM, V25 (Registered Dietitian) stated a significant weight loss trigger is defined as a weight loss trigger of 5% in 1 month, 7.5% in 3 months, and 10% in 6 months. V25</p>	S9999		

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S9999	<p>Continued From page 5</p> <p>stated residents at high nutritional risk are residents who have had a weight loss, have wounds, change in appetite/intake, or are on tube feedings. V25 stated V25 documents on residents monthly if they trigger for weight loss and/or if they are on tube feedings. V25 stated V25 follows residents on tube feedings and those who trigger for a weight loss more often because they are at a higher nutritional risk and more susceptible to change in condition. V25 stated a resident receiving tube feedings who also has a wound(s) would place that resident at a higher nutritional risk so V25 sees them monthly rather than waiting to see them quarterly because V25 wants to do interventions more often on them and follow them more closely. V25 stated if a weight loss trigger occurs V25 would add or adjust nutrition interventions and notify the nurse practitioner and/or physician.</p> <p>V25 stated if a resident is receiving tube feedings as their only source of nutrition, then they should not be losing weight. V25 stated sometimes this may happen if they need more calories than accounted for and their nutritional needs would need to be re-adjusted. V25 stated if a resident receiving tube feedings has had a weight loss, then V25 would need to recalculate the resident's needs based on the current weight. V25 stated the goal for residents receiving tube feedings and/or with pressure wounds is not for them to lose weight. V25 stated V25 wants their weight to be stable, so they have proper nutrition for the wound(s) to heal. V25 stated if a resident is not receiving adequate nutrition there is a potential for malnutrition to occur and wounds to get worse, poor wound healing and furthering weight loss.</p> <p>2. V25 stated in August 2023, R91 weighed 196.6</p>	S9999		

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S9999	<p>Continued From page 6</p> <p>pounds and at that time V25 had a care plan for desired gradual weight loss. In September 2023 R91 weighed 186.2 pounds. V25 stated from August 2023 to September 2023 R91 lost 10.4 pounds (-5.3% weight change) and this triggered as a significant weight loss. V25 stated V25 spoke with staff who reported that R91 was eating the same, no change so V25 was not concerned and thought R91's September 2023 weight was an error and requested a reweight. V25 stated V25 did not document on R91's reported weight loss trigger in September 2023 or implement any interventions because V25 thought the weight loss reported was an error. V25 stated R91's reweight was not done in September 2023 and in October 2023 R91's weight was not done or available.</p> <p>V25 stated that in November 2023 R91's weight was 177.8 pounds and that R91 had lost an additional 8 pounds since September 2023. V25 stated from August 2023 to November 2023 R91 lost a total of 18.8 pounds (-9.6% change) in 3 months and this triggered as a significant weight loss. V25 stated in November 2023 is when V25 found out R91 was skipping meals related to feeling more depressed and sleeping more often. V25 stated because of the weight loss and change in eating habits V25 recommended for R91 to start on oral supplement after meals and fortified pudding twice per day with lunch and dinner. V25 stated this weight loss was preventable because R91 did not have any supplements ordered because V25 did not think R91 had any issues with calorie intake. V25 stated the goal at this time was to stabilize R91's weight, and for R91 not to have any further weight loss.</p> <p>V25 stated there was no weight done for R91 in</p>	S9999		

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S9999	<p>Continued From page 7</p> <p>December 2023. V25 stated V25 does not know why R91 was not weighed but should have been weighed because V25 uses weights to track to assess if the dietary interventions are working.</p> <p>V25 stated in January 2024 R91 weight was down to 167.6 pounds. V25 stated R91 lost an additional 10 pounds from November 2023 to January 2024 (two-month period) and from July 2023 to January 2024 R91 lost 35.4 pounds (-17.4% change) six months. V25 stated this weight loss over 6 months triggered as a significant weight loss and it was not a planned weight loss. V25 stated that this amount of weight loss puts a resident at higher risk for malnutrition, and wound development. V25 stated she assessed R91 on 01/31/24 and recommended to obtain another weight and continue with the same interventions.</p> <p>V25 stated in February 2024 R91's weight was 166.6 pounds and a significant weight change happened from August 2023 to February 2024 because R91 lost 30.3 pounds in six months which was a -15.4% change. V25 stated six months ago R91's care plan was for gradual weight loss based on obesity however since R91 started to lose weight because of skipping and sleeping through meals related to depression R91's weight loss was not planned and R91's nutrition care plan goal was updated. V25 stated there is no nutrition assessment addressing this weight loss in February 2024. V25 stated V25 cannot always get to all the assessments because there are so many to do that V25 cannot always address the weight issue in the month it occurs.</p> <p>V25 stated V25 does not have any of the monthly weights for March yet and that V25 is still waiting</p>	S9999		

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S9999	<p>Continued From page 8</p> <p>on reweights for February 2024. V25 stated all weights are entered into the resident's electronic health record and there are no separate weight binders.</p> <p>3. R285's clinical records show an initial admission of 1/10/24 with listed diagnoses not limited to Anoxic Brain Damage, Anemia, Type 2 Diabetes Mellitus with Unspecified Complications, Gastrostomy Status, and Dysphagia Oropharyngeal Phase. R285's Minimum Data Set (MDS) dated 1/14/24 shows R285 has severe cognitive skills. R285's physician order sheet (POS) with active orders as of 3/12/24 documents in part: Enteral feeding- Tube type: (gtube), Jevity 1.5, Rate: (65 ml/hr), start at (7am) and Turn off @ 5am during ADLs and PRN and NPO (Nothing by mouth) diet, NPO texture, NPO consistency.</p> <p>R285's electronic health record (EHR) documents the following weights: 2/21/2024 09:41 137.6 Lbs 1/11/2024 11:06 158.0 Lbs 1/10/2024 20:45 158.0 Lbs</p> <p>On 3/14/24 at 11:55 AM, observed V29 (Restorative Aide) and V28 (Restorative Licensed Practical Nurse) re-weighed R285 using a total body mechanical lift and R285's weight read 134.0 Lbs.</p> <p>R285's electronic health records (EHR) do not show any dietary notes or nutritional assessments were completed since admission of 1/10/24 to 2/13/24. R285's EHR shows R285 was not evaluated by V40 (Registered Dietitian/RD) until 2/14/24. V40's note dated 2/14/24 at 1:09 PM documents in part, "Resident is at risk for malnutrition r/t NPO [Nothing by Mouth] status,</p>	S9999		

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S9999	<p>Continued From page 9</p> <p>dependence on TF [Tube Feeding]." R285's progress notes show that R285's severe weight loss on 2/21/24 was not addressed by V40 until 3/6/24. R285's progress notes from 2/21/24 to 3/8/24 show no documentation of R285's weight loss was communicated to V37 (R285's Physician), V38 (In-house Nurse Practitioner), or V39 (R285's Nurse Practitioner).</p> <p>R285's EHR does not show a person-centered comprehensive care plan with nutritional interventions addressing R285's medical nutrition therapy and risks for nutritional needs since admission date of 1/10/24. R285's EHR shows R285's weight loss was not addressed in the care plan until 3/14/24.</p> <p>On 3/14/24 at 10:24 AM, V25 (RD) was interviewed. V25 stated V25 is the full time RD in the facility and V40 is helping out. V25 stated that R285 was NPO which means nothing by mouth and all of R285's nutrition is coming from the tube feeding. V25 stated that R285 is at high nutritional risk based on tube feedings for nutrition and wounds. V25 stated that R285 was admitted in January and was not assessed by V40 (RD) until February. V25 stated that R285 was not triggered in the system as a new admission, and therefore was not seen by a Dietitian until after a month. V25 stated R285 was admitted on 1/10/24 and was seen by V40 on 2/14/24 and again on 3/6/24 for the weight loss. V25 stated R285 weighed 158 Lbs on 1/10/24 and 137.6 Lbs on 2/21/24. V25 stated that the admission weight could have been an inaccurate weight. V25 stated that R285 was not re-weighed. V25 stated that R285 has significant weight loss from January to February and that the weight loss could have been caused by R285 not getting enough calories from the tube feeding and/or increased nutritional needs</p>	S9999		

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S9999	<p>Continued From page 10</p> <p>due to wounds. V25 stated that the goal for R285's nutritional status would be for stable weight and not for R285 to lose weight. V25 stated that R285's weight loss was unplanned. V25 stated that there is no order for R285 to receive weekly weights. V25 stated that V25 uses weights as a tool to determine if residents are meeting their nutritional needs. V25 stated that if V25 had evaluated R285 on admission, V25 would have ordered weekly weights, supplements, and re-evaluate the tube feeding if R285 is getting enough calories. V25 stated that if residents are losing weight, then that would suggest they are not getting enough calories. V25 stated that R285's tube feedings were not held, and there is no report of R285 refusing or not tolerating the tube feedings. V25 stated that R285 was reassessed In March two weeks after the weight loss was identified. V25 stated that R285 was not seen earlier because it was a busy month, and V25 was getting a lot of weight triggers. V25 stated that R285's doctor was not notified but should have been notified about the weight loss. V25 stated that R285 does not have a nutrition care plan but there should be one and the weight loss should be care planned. V25 stated that it is important to have a nutritional care plan to track and make sure everyone taking care of the resident is aware of the weight loss and to implement nutritional interventions.</p> <p>On 3/15/24 at 10:31 AM, a phone interview conducted with V39 (R285's Nurse Practitioner). V39 stated, "I don't think I have been notified of [R285's] weight loss. I would ask for a re-weigh because sometimes the scales are different, a Dietician eval and blood work to look for any causes of weight loss such as thyroid issues. If weight loss occurs, at least there should be an evaluation as soon as possible."</p>	S9999		

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S9999	<p>Continued From page 11</p> <p>4. R49 was initially admitted to the facility on 05/16/23, hospitalized four times with the most recent readmission on 09/18/23 with diagnosis not limited to Chronic Obstructive Pulmonary Disease, Benign Prostatic Hyperplasia with Lower Urinary Tract Symptoms, Anemia, Constipation, Severe Protein-Calorie Malnutrition, Retention of Urine, Contracture of Muscle, Unspecified Lower Leg Contracture of Muscle, Unspecified Upper Arm, Schizoaffective Disorder, Dysphagia, Vitamin D Deficiency, Pressure Ulcer of Sacral Region, Stage 4, Pressure Ulcer of Right Hip, Stage 4, Pressure Ulcer of Left Hip, Stage 4, Abnormal Weight Loss, Hypo-Osmolality and Hyponatremia. Review of the Annual Minimum Data Set (MDS), an assessment tool, reflected R49 had a Brief Interview for Mental Status (BIMS) of 09 indicating moderate cognitive impairment.</p> <p>R49's Physician order document in part: Regular diet Puree texture, thin liquids consistency date 09/20/23. 1:1 feeding dated 09/18/23.</p> <p>On 03/12/24 at 12:17 PM, R49 was observed in bed being fed a pureed diet by staff. R49 consumed 100% of meal.</p> <p>Braden score 13 dated 05/17/23. Braden score 10 dated 03/08/24.</p> <p>R49 weights dated 02/21/24 89.6 Lbs., 01/15/24 89.0 Lbs., 09/22/23 113.0 Lbs., 09/19/23 114.0 Lbs., 08/15/23 115.0 Lbs.</p> <p>R49's weight summary did not reflect any weights noted after 09/22/23 until 01/15/24 which reflected a 21.24% weight loss in 4 months.</p>	S9999		

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S9999	<p>Continued From page 12</p> <p>R49's Physician order document in part: Mirtazapine Oral Tablet 7.5 MG (milligram) 1 tablet by mouth at bedtime for Antidepressants -Start Date- 09/18/23 2100. Multivitamin-Minerals Oral 1 tablet by mouth one time a day for Supplement -Start Date- 09/19/23 0900. Thiamine HCl Oral Tablet 100 MG 1 tablet by mouth one time a day for treatment -Start Date- 09/19/23 0800. Arginaid two times a day -Start Date- 09/18/2023 1700. Vitamin C Oral Tablet 500 MG (Ascorbic Acid) 1 tablet by mouth one time a day for Supplement -Start Date- 09/23/23 0900. House Supplement after meals 120 ml (milliliter) if Medpass -Start Date- 10/04/23 1800. Vitamin D3 50, Vitamin D3 Tablet 50000 UNIT 1 tablet by mouth one time a day every Monday, Friday for vitamin D def (Deficiency) -Start Date- 01/15/24 0800. Fortified Pudding with meals -Start Date- 01/17/24 1200.</p> <p>Dietary Evaluation dated 01/17/24 document in part: Weight/Medications: 1. Most Recent Weight: 89.0 (Lbs.). 5b. Weight loss during the last 3 month: Weight loss greater than 3 kg (6.6 lbs.). Significant Change Nutrition Note: Diet: Regular diet, puree texture, thin liquids 1:1 Feeding Assist Supplements: Arginaid BID (twice a day); House Supplement after meals. Labs: 1/9 hct (hematocrit) 26.8, hgb (hemoglobin) 8.6, alb (albumin) 2.5, vit. D 16.2. Skin: See wound rounds for full assessment - PU (pressure ulcer) x 8, Weight: 89.0# 1/15, 113.0# 9/22, 114.0# 9/19, 115.0# 8/15, 115.0# 6/15, 116.0# 5/28, 117.0# 5/16; BMI (body mass index): 14.4 (underweight) desirable BMI for age >65: 23-29.9 kg/m2 Per staff, resident's, appetite varies. R49 will sometime skip a meal if he doesn't like the taste and may request snacks instead. Continue house supplement after meals for weight</p>	S9999		

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S9999	<p>Continued From page 13</p> <p>management. Sometimes accepts ONS (oral nutritional supplements). Continue Arginaid BID to support wound healing. More wounds have opened since last assessment- resident likely not meeting needs orally to support wound healing. Weight loss noted, undesirable. Likely r/t (related/to) resident's varied intake of meals, but resident's weight is also taken with a wheelchair which may be inconsistent. RD (Registered Dietitian) added fortified pudding with meals to add a preferred food with extra calories. Continues to meet criteria for malnutrition r/t inadequate energy intake as evidenced by intake <75% of estimated needs, observed muscle wasting and fat loss, significant weight loss. Goals: no further weight loss, intake >=50% of 3 meals daily, supplement acceptance, wound healing. Continue monitoring meal intake, weight monthly, and labs as available. Follow up PRN (as needed).</p> <p>49's Dietary Evaluation dated 12/28/23 document in part: Weight/Medications: 1. Most Recent Weight: 113.0 (Lbs.) 9/22/23.</p> <p>Progress note dated 02/21/24 13:33 document in part: Weight Change Note Data: Weight Warning: Value: 89.6 Vital Date: 24-02-21 09:25:00.0 -10.0% change [21.4% , 24.4] Action: Resident triggered significant weight loss Weight: 89.6#, 2/21, (-21.4% x 6 mo (months)) 89.0#, 1/15, 113.0#, 9/22, 114.0#, 9/19, 115.0#, 8/15, 115.0#, 6/15, 116.0#, 5/28 117.0#, 5/16, Height: 66" BMI: 14.5 (underweight) desirable BMI for age >65: 23-29.9 kg/m2 Diet: Regular diet, puree texture, thin liquids 1:1 Feeding Assist Weight loss x 6 mo, stable x 1 month. Per staff, resident's appetite varies, but recently is good. He (R49) will sometime skip a meal if he doesn't like the taste and may request snacks instead. Appetite may</p>	S9999		

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S9999	<p>Continued From page 14</p> <p>also fluctuate with abdominal pain and sometimes feeling "down". Continue house supplement after meals for weight management and fortified pudding. Sometimes accepts ONS. Continue Arginaid BID to support wound healing. Resident likely not meeting needs orally to support wound healing. Encourage oral intake to support wound healing and no further weight loss. Goals: no further weight loss, intake >=50% of 3 meals daily, 50% supplement acceptance, wound healing. Continue monitoring meal intake, weight monthly, and labs as available. Follow up PRN.</p> <p>R49's Care Plan document in part: Focus: Actual Weight Loss: R49 has experienced weight loss and is at risk for continued weight loss. Date Initiated: 01/17/24. Interventions: Make a referral to the MD (Medical Doctor)/Registered Dietitian if there is a 5% weight loss over 30 days, or a 10% weight loss over 180 days. Date Initiated: 01/17/24. Provide one-to-one staff intervention and attention. Date Initiated: 01/17/24. Provide/serve the resident's nutritional diet as ordered. Prescribed diet is [Regular diet, puree texture, thin liquids]. Monitor/record intake with every meal. Date Initiated: 01/17/24. Weight will be obtained as ordered by MD Date Initiated: 01/17/24. Focus: R49 has an actual impairment to skin integrity related to Left ischial tuberosity - Stage 4 PI (pressure injury), Right ischial tuberosity -Stage 4 PI, Sacrum - Stage 4 PI, left lateral foot- Stage 3 PI, Right, Trochanter - Stage 4 PI, left trochanter/hip - UTS (unstageable) PI Date Initiated: 05/30/23. Interventions: Skin: Low air loss mattress for wound management and prevention of pressure injuries Date Initiated: 05/30/2023. Focus: R49 has the potential for further impairment of skin integrity.</p> <p>On 03/12/24 at 12:17 PM, R49 was observed in</p>	S9999		
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S9999	<p>Continued From page 15</p> <p>bed being fed a pureed diet by staff. R49 consumed 100% of meal.</p> <p>On 03/13/24 at 12:09 PM, surveyor observed R49 lying in bed on a low air loss mattress with the setting on 160 pounds. R49's food tray was observed on the overbed table. R49 was asked by the surveyor if he was trying to lose weight. R49 responded, I was not trying to lose weight, I don't know what happened. Surveyor asked if R49 has any wounds, R49 responded, yes, I have wounds and they changed my dressings today.</p> <p>On 03/13/24 at 09:37 AM, V25 (Registered Dietician) stated "I have worked here for 2 years. Restorative takes the residents weights, gives them to me and I input them in the computer to see if there were any discrepancies and ask for reweights. The residents are supposed to be weighed once a month unless there are orders for weekly weights. The residents are weighed when we get the admission, and they should be reweighed when they are readmitted. There is no way for me to verify if the weights are done once a month. During Quarterlies or once a month usually I will catch missing weights when they give me the list and I don't see a weight. I see all the residents in the facility, do the MDS (Minimum Data Set) and care plans. I will talk to the NP (Nurse Practitioner) when I see a weight loss and get consult. I would want the resident weights to be stable and proper nutrition for their wounds to heal. For a resident with wounds, I would not want for them to have weight loss because of Malnutrition, worsening wounds and further weight loss. I was requesting R49 weights and was not receiving them." Surveyor asked V25 if the weights were requested and not received what is done, V25 responded "I continue to ask for them. R49 had a weight loss of 21.2% over 4</p>	S9999		

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S9999	<p>Continued From page 16</p> <p>months, which is a very significant weight loss. If the weights were being done monthly per policy the weight loss should have and could have been caught prior to the weight loss occurring. The weight loss could have caused R49 wounds to get worst or R49 developing new wounds. R49 is receiving House supplements 120 ml (milliliter) of med pass after meals, fortified pudding with meals and Arginaid twice a day. R49 is accepting some of the supplements. On 02/21/24 R49 weight was 89.6, that was his last weight and R49 was weighed with a mechanical lift. R49 initial weight was 117. The Nurse practitioner already knew about the weight loss because they consulted me. R49's oral intake was good. R49's weight loss has contributed to wounds, nutritional requirements are higher with wounds, and they need more calories."</p> <p>On 03/14/24 at 10:39 AM, surveyor observed V33 (Restorative Aide) weigh R49 with the total body mechanical lift weight scale with a weight of 92 pounds. V33 stated "I do all the weights on the fourth floor. I take the weights to the restorative supervisor, and they put them in the computer."</p> <p>On 03/13/24 at 10:56 AM, V25 (Registered Dietician) stated "there is no documentation for the requested reweights."</p> <p>On 03/13/24 at 11:20 AM, surveyor informed V25 (Registered Dietician) that R49's weight was observed with a reading of 92.0 pounds V25 stated "R49's current weight of 92.0 pounds there is a 2.68% weight gain in one month."</p> <p>On 03/14/24 at 11:24 AM, V28 (Restorative/Licensed Practical Nurse) stated "The restorative aides take the resident weights, fill out the weights on the census sheet, I give it to</p>	S9999		

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S9999	<p>Continued From page 17</p> <p>the dietitian and the dietician enters the weights in the computer. If there are any missing weights the registered dietitian will email me and ask for reweights. I make sure that the residents are reweighed. The weight policy is the weights are done the first week of the month. We weigh all the residents in the facility, and it takes about a week to a week and a half to complete all the weights."</p> <p>5. R106 has diagnosis not limited to Sick-Euthyroid Syndrome, Abnormal Glucose, Dementia in other Diseases Classified Elsewhere, Unspecified Severity, with other Behavioral Disturbance, Hypertensive Heart Disease without Heart Failure, Unspecified Protein-Calorie Malnutrition, Reduced Mobility, Long Term (Current) use of Aspirin, Skin Changes and Frequency of Micturition.</p> <p>Care plan document in part: Focus: Actual Weight Loss: R106 has experienced weight loss and is at risk for continued weight loss. Date Initiated: 12/22/23. Focus: Nutrition-Dementia Focused R106 is at risk for compromised nutritional status, related to dx (diagnosis) of dementia Date Initiated: 05/23/23.</p> <p>R106 weights 02/21/24 125.4 Lbs., 01/12/24 125.4 Lbs., 12/07/23 125.4 Lbs., 09/22/23 138.0 Lbs.</p> <p>R106 weight summary did not reflect any weights noted after 09/22/23 until 12/07/23 which reflected a 10.14% weight loss in 3 months.</p> <p>Dietary Evaluation dated 05/23/23 document in part: Weight/Medications 1. Most Recent Weight: 143.0 (Lbs.). Date: 5/18/23 22:35.</p>	S9999		

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S9999	<p>Continued From page 18</p> <p>Dietary Evaluation dated 08/16/23 document in part: Weight/Medications 1. Most Recent Weight: 140.0 (Lbs.). Date: 8/15/23 11:01.</p> <p>Dietary Evaluation dated 11/09/23 document in part: Weight/Medications 1. Most Recent Weight: 138.0 (Lbs.). Date: 9/22/23 11:56.</p> <p>Dietary Evaluation dated 01/03/24 document in part: Weight/Medications 1. Most Recent Weight: 125.4 (Lbs.). Date: 12/07/23 12:49. b. Weight loss during the last 3 month: Weight loss greater than 3 kg (6.6 lbs.). Re-admission</p> <p>Assessment Resident was sent to the hospital after a fall. Weight in Pounds: (01/24) pending, (12/23) 125.4, (10-11/2023) N/A (not applicable), (9/2023) 138, (8/2023) 140, (7/2023) 136, (6/2023) 134/135x2, (5/2023) 143, BMI: 26.2, within desired range for age. At risk for weight loss r/t (related/to) dementia. Actual weight loss occurred, see progress notes for details. Per staff, resident with good appetite and intake. Skin intact. At risk for malnutrition per MNA (mini nutritional assessment) score of 9/14. Goals: intake >=75% of meals, intake >50% of oral supplements, no further weight loss. Monitor meal intake, labs, weight monthly. Follow up PRN.</p> <p>Dietary Evaluation dated 01/31/24 document in part: Weight/Medications 1. Most Recent Weight:125.4 (Lbs.). Date: 1/12/24 14:35.</p> <p>On 03/12/24 at 12:01 PM, was observed sitting on the bed eating lunch. Staff was observed at R106 bedside queuing and assisting with feeding R106 due to impaired vision. R106 consumed 100% of meal.</p>	S9999		

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S9999	<p>Continued From page 19</p> <p>On 03/13/24 at 09:37 AM V25 (Registered Dietician) stated "R106 percentage of weight loss was 9.1% in three months and that is a significant weight change. I don't know why R106 was not weighed. I was requesting the weights from V28 (Restorative/Licensed Practical Nurse), and I started going to her (V28) for weights. The administrator and Director of Nursing are aware that there was a problem with getting monthly weights. R106 intervention are meal monitoring, fortified pudding with dinner dated 12/22/23 and R106 she already had house supplements. I requested reweights and the reweights were not in there. R106 intake was variable at times."</p> <p>On 03/14/24 at 10:25 AM, surveyor observed V33 (Restorative Aide) weighing R106 with a chair scale with a weight reading of 116.2 pounds.</p> <p>On 03/14/24 at 10:27 AM, V32 (Licensed Practical Nurse) stated "R106 can be feisty, but I have never seen her refuse to be weighed."</p> <p>On 03/13/24 at 11:20 AM, surveyor informed V25 (Registered Dietician) that R106 weight was observed with a reading of 116.2 pounds. V25 stated "R106 last weight on 02/21/24 was 125.4 pounds current weight of 116.2 pounds indicating a 7.3436% weight loss in one month which is another significant weight loss."</p> <p>Policy Titled "Weights" revised 07/28/23 document in part: It is the facility's policy to obtain resident's monthly weight unless otherwise ordered differently by the physician. Procedures: 1. During the 1st week of the month, the restorative staff or designee will weigh each resident to fulfill the monthly weight requirement. 2. The monthly weights will be reflected on the resident's individual chart. 3. The significant</p>	S9999		

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S9999	<p>Continued From page 20</p> <p>weight changes (monthly (5%), quarterly (7.5%), and every 6 months (10%) will be assessed and addressed by the IDT (Interdisciplinary Team) which includes but not limited to the Dietician, Physician, Medical Specialist, Speech Therapist, Nutritionist, and Nurses.</p> <p>Titled "Assessments" undated document in part: Policy: Documentation of each individual's medical nutrition therapy (MNT) is the responsibility of the registered dietitian (RD) with assistance as assigned to the nutrition support staff. Recognize, evaluate, and address the needs of every individual, including but not limited to the individual at risk or already experiencing impaired nutrition. All documentation will be in accordance with state and federal regulations. Procedure: 1. Initial Assessment: The focus of the comprehensive medical nutrition therapy (MNT) assessment is to identify risk factors that may contribute to undernutrition, protein energy malnutrition, dehydration, unintended weight loss, pressure ulcers and other nutrition problems, as well as identifying other nutritional needs. For Subacute patients/residents, the initial MNT assessment for a new or re-admitted individual is generally initiated and/or completed within 5 days of admission. Information for the MNT assessment will be gathered through interviews with individuals, family and staff, observations, and review of the medical record. The assessment form is filed in the medical record/electronic medical record. A new or re-assessment is completed each time an individual is re-admitted, has a significant change in condition, and as deemed necessary by federal and state guidelines or the RD or designee. 2. Plan of Care: Each time an MNT assessment or re-assessment is completed, a care plan or care plan revision should be completed as appropriate.</p>	S9999		

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S9999	<p>Continued From page 21</p> <p>Care plans are to be completed within 7 days of completion of the assessment, and updated according to the facility's policy, state, and federal guidelines, and as needed due to any significant changes (i.e., weight status, food intake, diet order, etc.) Specific and measurable goals should be stated to maintain or achieve optimal nutritional status. Each time a care plan is updated, a re-assessment or progress note should be completed or revised as appropriate. Progress notes are completed according to facility policy and federal guidelines. When significant changes occur, notes should be updated. Significant changes can include but are not limited to changes in condition, diet order, food intake and weight. Generally, progress notes are written a minimum of every 90 days, and with each significant change in status. Individuals with high-risk conditions will need to be reviewed more frequently. Summary for Nursing Facilities: The initiation of the nutrition assessment is completed within 5 days of admission for Subacute residents and within 14 days of admission for all residents. The RD or designee assesses the nutritional status and completes the nutrition care process.</p> <p>(A)</p> <p>Statement of Licensure Violations (2 of 2)</p> <p>600.615e) 600.615f) 600.615g)</p> <p>Section 300.615 Determination of Need Screening and Request for Resident Criminal History Record Information</p> <p>e) In addition to the screening required by Section 2-201.5(a) of the Act and this Section, a</p>	S9999		

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S9999	<p>Continued From page 22</p> <p>facility shall, within 24 hours after admission of a resident, request a criminal history background check pursuant to the Uniform Conviction Information Act for all persons 18 or older seeking admission to the facility, unless a background check was initiated by a hospital pursuant to the Hospital Licensing Act. Background checks shall be based on the resident's name, date of birth, and other identifiers as required by the Department of State Police. (Section 2-201.5(b) of the Act)</p> <p>f) The facility shall check for the individual's name on the Illinois Sex Offender Registration website at www.isp.state.il.us and the Illinois Department of Corrections sex registrant search page at www.idoc.state.il.us to determine if the individual is listed as a registered sex offender.</p> <p>g) If the results of the background check are inconclusive, the facility shall initiate a fingerprint-based check, unless the fingerprint check is waived by the Director of Public Health based on verification by the facility that the resident is completely immobile or that the resident meets other criteria related to the resident's health or lack of potential risk, such as the existence of a severe, debilitating physical, medical, or mental condition that nullifies any potential risk presented by the resident. (Section 2-201.5(b) of the Act) The facility shall arrange for a fingerprint-based background check or request a waiver from the Department within 5 days after receiving inconclusive results of a name-based background check. The fingerprint-based background check shall be conducted within 25 days after receiving the inconclusive results of the name-based check.</p> <p>These Requirements were not met evidenced by:</p>	S9999		

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: IL6001465	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 03/15/2024
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NAME OF PROVIDER OR SUPPLIER CARLTON AT THE LAKE, THE	STREET ADDRESS, CITY, STATE, ZIP CODE 725 WEST MONTROSE AVENUE CHICAGO, IL 60613
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S9999	<p>Continued From page 23</p> <p>Based on interviews and record reviews, the facility failed to follow-up on two residents' (R180, R435) Criminal History Information Response Process (CHIRP) reports and failed to check a resident's name (R156) with the three required registries for three out of a total sample of seven residents reviewed for identified offender protocol. This has the potential to affect all residents residing in the facility.</p> <p>Findings include:</p> <p>On 03/13/2024 at 1:01 PM, V30 (Admissions Director) stated [V30] runs the residents' CHIRPs on admission or the following day. V30 provided a print-out of the recent CHIRPs done. Date next to the names is 02/27/2024. R180 and R435's status document in part: "In process - held." V30 stated R180 and R435 have pending CHIRPs. V30 stated [V30] did not follow-up regarding the pending status or rerun the CHIRP.</p> <p>R180's face sheet documents in part an admission date of 02/23/2024. R435's face sheet documents in part an admission date of 02/27/2024.</p> <p>On 03/14/2024 at 9:15 AM, V24 (Social Worker) stated [V24] did not follow-up regarding R180 and R435's CHIRP pending status. V24 did not initiate a fingerprint-based check. No waiver for both residents.</p> <p>Reviewed facility's "Identified Offender" policy last revised 06/10/2023. It does not document in part what to do if CHIRP results are pending or inconclusive.</p> <p>On 03/13/2024 at 9:15 AM, V24 stated that the</p>	S9999		
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STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: IL6001465	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 03/15/2024
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S9999	<p>Continued From page 24</p> <p>facility will check the residents against the National Sex Offender Registry, Illinois Sex Offender Registry, and Illinois Department of Corrections before admission or on admission.</p> <p>R156's face sheet and census documents in part an admission date of 02/14/2024.</p> <p>V24 provided surveyor with copies of R156's three registry checks. Date on the reports document in part 12/26/2023.</p> <p>V24 reviewed R156's medical records with surveyor. V24 stated R156 had a first admission on 12/27/2023. R156 discharged home on 1/29/2024. R156 had a second admission to the facility on 02/14/2024. V24 stated no other registry checks on file for R156 pertaining to the second admission to the facility. Facility did not perform name-based check on the three registries with the 02/14/2024 admission. (C)</p> <p>Statement of Licensure Violations (3 of 3)</p> <p>300.625c)2) 300.625g)</p> <p>Section 300.625 Identified Offenders</p> <p>c) If the results of a resident's criminal history background check reveal that the resident is an identified offender as defined in Section 1-114.01 of the Act, the facility shall do the following:</p> <p>2) Within 72 hours, arrange for a fingerprint-based criminal history record inquiry to be requested on the identified offender resident. The inquiry shall be based on the subject's name, sex, race, date of birth, fingerprint images, and</p>	S9999		

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S9999	<p>Continued From page 25</p> <p>other identifiers required by the Department of State Police. The inquiry shall be processed through the files of the Department of State Police and the Federal Bureau of Investigation to locate any criminal history record information that may exist regarding the subject. The Federal Bureau of Investigation shall furnish to the Department of State Police, pursuant to an inquiry under this subsection (c)(2), any criminal history record information contained in its files.</p> <p>g) Facilities shall maintain written documentation of compliance with Section 300.615 of this Part.</p> <p>These Requirements were not met evidenced by:</p> <p>Based on interviews and record reviews, the facility failed to arrange for a fingerprint-based criminal history record inquiry within 72 hours of a positive Criminal History Information Response Process (CHIRP) for five residents (R63, R147, R156, R174) and failed to maintain a resident's (R27) name-based registry check records.</p> <p>Findings include:</p> <p>Facility ran R63's CHIRP report on 02/21/2024. Results came back with a 'HIT' identifying R63 as an identified offender.</p> <p>Facility ran R147's CHIRP report on 02/19/2024. Results came back with a 'HIT' identifying R147 as an identified offender.</p> <p>On 03/14/2024 at 9:44 AM, V24 (Social Worker) stated sending the e-mail request for fingerprinting for R63 and R147 on 03/01/2024. This was greater than 72 hours after R63 and R147's CHIRP results. V24 provided surveyor</p>	S9999		

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S9999	<p>Continued From page 26</p> <p>with the copy of the email. Date was 03/01/2024 at 4:18 PM.</p> <p>Facility ran R156's CHIRP report on 02/15/2024. Results came back with a 'HIT' identifying R156 as an identified offender.</p> <p>Facility ran R174's CHIRP report on 02/02/2024. Results came back with a 'HIT' identifying R174 as an identified offender.</p> <p>On 03/14/2024 at 9:44 AM, V24 (Social Worker) stated sending the e-mail request for fingerprinting for R156 and R174 on 02/20/2024. This was greater than 72 hours after R156 and R174's CHIRP results. V24 provided surveyor with the copy of the email. Date was 02/20/2024 at 2:45 PM.</p> <p>On 03/14/2024 at 9:15 AM, V24 (Social Worker) stated facility did not have a copy of R27's name-based registry checks on the National Sex Offender Registry, Illinois Sex Offender Registry, and the Illinois Department of Corrections Registry. V24 stated R27 has been a resident of the facility for a long time and does not know why the registries are not on file.</p> <p>Facility's "Identified Offender" policy, last revised 06/10/2023, documents in part: "The facility will comply with the state regulations in addressing residents who are identified offenders." "If the results of a resident's criminal history background check reveal that the resident is an identified offender the facility will: ... b. Within 72 hours, arrange for a fingerprint-based criminal history record inquiry to be requested on the identified offender resident." (C)</p>	S9999		