

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>IL6000483</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>04/12/2024</b>
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NAME OF PROVIDER OR SUPPLIER  <b>FOREST VIEW REHAB &amp; NURSING CENTER</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>535 SOUTH ELM ITASCA, IL 60143</b>
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S 000	Initial Comments  Annual Licensure Survey	S 000		
S9999	Final Observations  Statement of Licensure Violations:  300.610a) 300.1210b) 300.1210c) 300.1210d)2)  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.  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.	S9999		

Illinois Department of Public Health LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE  Electronically Signed	TITLE	(X6) DATE  04/26/24
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S9999	<p>Continued From page 1</p> <p>c) Each direct care-giving staff shall review and be knowledgeable about his or her residents' 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>6) All necessary precautions shall be taken to assure that the residents' environment remains as free of accident hazards as possible. All nursing personnel shall evaluate residents to see that each resident receives adequate supervision and assistance to prevent accidents.</p> <p>These requirements were not met as evidenced by:</p> <p>Based on interview and record review the facility failed to use the proper equipment to transfer a resident resulting in a left femur fracture that required surgical repair. This applies to 1 of 2 (R7) residents reviewed for hospitalizations in a sample of 32.</p> <p>Findings include:</p> <p>R7 was originally admitted to the facility on 7/7/17. R7 has diagnoses that includes diabetes, obesity, anxiety, major depressive disorder, weakness, Parkinson's disease. R7 has previous documented fractures bimalleolar (ankle) fracture of lower leg (9/22/20) and a nondisplaced fracture the fifth metatarsal (foot) bone (7/1/23). R7's MDS (Minimum Data Set) dated 2/12/24 shows she is cognitively intact with a BIMS (Brief</p>	S9999		

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S9999	<p>Continued From page 2</p> <p>interview for Mental Status) score of 15. R7 is dependent on staff assistance for toileting, transfers, and repositioning. R7's care plan dated 2/29/24 documents current transfer needs of total assistance of two staff using a patient lift due to due to a femur fracture.</p> <p>On 4/10/24 at 1:56 PM, R7 stated she broke her leg while staff were transferring her to bed. R7 stated staff were supposed to use the sit-to-stand to transfer her but used a gait belt. R7 stated they now must use a patient lift to transfer her. Review of nursing progress notes documents on 2/5/24 R7 was transferred to the hospital emergency department for further evaluation and treatment due to a left acute femoral neck fracture.</p> <p>On 4/11/24 at 11:58 AM, V19 LPN (Licensed Practical Nurse) stated she recalled when R7 suffered a femur break. V19 stated V21 CNA. (Certified Nursing Assistant) asked her to assist in transferring R7 back to bed. V19 stated a few hours later R7 complained of left hip pain. V19 stated they used a gait belt to transfer R7 back to bed. V19 stated she did not know R7 was supposed to use the sit to stand for transfers until after the occurrence. R7's physical therapy discharge summary dated 7/26/23 documents for safe transfer techniques using sit to stand up lift transfers and safety precautions in order to preserve current level of function.</p> <p>On 04/11/24 at 2:59 PM, V2 ADON (Assistant Director of Nursing) stated R7 was transferred using a stand and pivot to the bed. V2 stated, "If staff are supposed to use the sit to stand to transfer it is a problem not using the correct transfer mode. If the pivot is too intense it could contribute to the break. Staff should be following</p>	S9999		

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S9999	<p>Continued From page 3</p> <p>the proper transfer to assure residents are not injured. The mode of transfer is in the EMR (Electronic Medical Record) for staff to reference. Staff should reference the transfer mode before transferring the resident".</p> <p>On 04/12/24 at 9:34 AM, V20 stated she ordered an Xray for R7 when a nurse called and stated R7 had complaints of pain. The Xray results showed R7 had a left femur fracture and was sent out to the hospital. R7's fracture resulted in her having a surgery to repair the fracture. V20 stated R7 has decreased bone density making her bones more fragile and prone to break. V20 stated it is important to handle residents with decreased bone density carefully because they are at risk for fractures. Transferring someone with decreased bone density incorrectly could contribute to a fracture. V21 CNA was not able to be reached for interview during this survey.</p> <p>The facility initial investigation report prepared by V19 dated 2/4/24 at 10:00 PM documents R7 was assisted back to by V19 and V21 using a turn and pivot at which point R7's leg twisted. R7 complained of pain immediately complained of left hip pain when she was assisted to lay down. Witness interviews from the facility investigation showed V21 CNA stated she and V19 LPN transferred R7 back to bed using a stand and pivot. During the transfer R7's leg twisted. R7 complained of pain when V21 lifted her leg to assisted her to lay down.</p> <p>On 2/9/24 the facility investigation documents R7 denied having had any falls. R7 stated the fracture occurred during transfer by staff. R7 stated she had pain when her left leg twisted during the transfer.</p>	S9999		

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S9999	<p>Continued From page 4</p> <p>R7's physical therapy evaluation and plan of treatment for aftercare following joint replacement surgery dated 2/9/24 new recommendation for transfers is now the use of a mechanical patient lift.</p> <p>The facility policy and procedure, "Sit to Stand Lift", dated 10/10/11 states the purpose is to assure that all residents that are assessed to require extensive high assistance in transfer are transferred safely with no injury to resident or care handler. (A)</p>	S9999		