

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: IL6015481	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED C 08/29/2025
NAME OF PROVIDER OR SUPPLIER ILLINOIS VETERANS HOME AT LASALLE		STREET ADDRESS, CITY, STATE, ZIP CODE 1015 O'CONNOR AVENUE LA SALLE, IL 61301		
(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
S 000	Initial Comments Investigation of Facility Reported Incident of 8/10/25/IL197069	S 000		
S9999	Final Observations Statement of Licensure Violations: 340.1300 a) 340.1505 g) Section 340.1300 Facility 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 with the involvement of the administrator. 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 the facility's advising physician or the medical advisory committee, as evidenced by a dated signature. 340.1505 Medical, Nursing and Restorative Services g) All necessary precautions shall be taken to assure that the resident's 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. This REQUIREMENT was not meet evidenced by: Based on observation, interview, and record review, the facility failed to ensure hot beverage temperatures were monitored and served under	S9999		

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

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S9999	Continued From page 1 150 degrees to prevent a resident from sustaining a 2nd degree burn. This applies to 1 of 3 residents (R1) reviewed for accidents in the sample of 3. The findings include: R1's Final Incident Report, dated 8/16/25, shows, "On 8/11/25, staff was assisting (R1) with morning care and noted reddened areas. When asked what happened, (R1) stated he spilled tea on himself the previous night at dinner. A large discrete, irregular, 14.0 cm (centimeters) x 11.0 cm x 0.2 cm light red, non-blanchable 2nd degree burn is present to the anterior/lateral thigh. An open wound is present light red, round and gaping measuring 0.6 cm x 1.0 cm x 0.2 cm ... an oval shaped, vertically oriented, 6.0 cm x 2.3 cm soft raised, amber-tinged serous fluid filled intact blister along the lateral edgeit was determined the dietary hot beverage dispenser runs between 175 to 200 degrees Fahrenheit, which increases the risk of injury." On 8/29/25 at 9:09 AM, R1 was observed in his room sitting in his wheelchair. R1 said, "I burned myself." R1 said he was in the dining room, and he spilled tea on himself; he said it was "hot." R1 said he did not report to staff and the aide reported to the nurse in the morning. On 8/29/25 at 9:17 AM, V3 (Registered Nurse-RN) assisted R1 to a standing position. A dressing was in place to his left outer thigh. V3 said R1 is alert and oriented x3, he can feed himself, needs one person assistance with transfers, and has limited mobility to his right side. R1 spilled coffee on himself and did not report to staff. Staff should be temping hot beverages prior to serving; hot beverages should	S9999		

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S9999	Continued From page 2 not be served above 150 degrees. On 8/29/25 at 9:20 AM, a sign posted in the kitchenette in bold "temperature of beverage must be checked prior to giving resident and cannot exceed 150 degrees." On 8/29/25 at 11:32 AM, V4 and V5 (Both Dietary Staff), during the noon meal, were serving hot liquids from the beverage cart. The temperature of the coffee and hot water was 174 degrees before adding ice cubes. On 8/29/25 at 12:55 PM, V2 (Director of Nursing-DON) said V8 (Veterans Nursing Assistant Certified-VNCA) were assisting R1 with his morning cares and saw the redness on this thigh, and R1 reported he spilled tea on himself the day before. V8 reported to nursing R1's blister on his thigh. V2 confirmed dietary was not monitoring hot beverage temperatures prior to serving drinks to residents. On 8/29/25 at 1:11 PM, V6 (Stationary Engineer Assistant Chief) said, "The hot beverage machine is programmed for optimal brewing of hot liquids at 180 degrees to 200 degrees. There was an issue in the past with someone getting burned, and I adjusted the setting to lowest brewing setting at 180 degrees. The risk of a scald injury can occur when the temperature is 120 degrees, and the length of exposure could cause burns. The machine is set at lowest temperature and staff need to make sure it's safely served." On 8/29/25 at 1:39 PM, V3 (Dietary Manager) said prior to R1's incident, they were not monitoring hot beverage temperatures prior to serving. Staff should not serve hot liquids above 150 degrees.	S9999		

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S9999	Continued From page 3 V8's witness statement, dated 8/11/25, shows during AM cares she found a big burn blister on his left leg and (R1) said he split toea on his lap at dinner the night before. The facility's Hot Beverage Temperatures Policy states, "Temperatures of hot beverages will be taken prior to service ...hot beverages will be served at 150 degrees or below. (B)	S9999			