

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: IL6003529	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED C 01/11/2024
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NAME OF PROVIDER OR SUPPLIER ALEDO REHAB & HEALTH CARE CENTER	STREET ADDRESS, CITY, STATE, ZIP CODE 304 S.W. 12TH STREET ALEDO, IL 61231
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S 000	Initial Comments Complaint Survey: 23210471/IL167847 & 23210511/IL167906	S 000		
S9999	Final Observations Statement of Licensure Violations 1 of 2 300.1210b) 300.1210d) 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. 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: 2) All treatments and procedures shall be administered as ordered by the physician. These Requirements were not met as evidenced by: Based on observation, interview and record review the facility failed to ensure a ureteral stent was removed for one resident (R2) of three residents reviewed for urinary catheters.	S9999		

Illinois Department of Public Health LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE Electronically Signed	TITLE	(X6) DATE 01/25/24
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S9999	<p>Continued From page 1</p> <p>This failure resulted in the ureteral stent becoming infected requiring removal after being transferred to the Emergency Department.</p> <p>Findings include:</p> <p>Hospital Records dated 10/26/23 at 3:21pm indicates R2 had bilateral hydroureteronephrosis (urinary obstruction of urine), chronic indwelling (urinary) catheter with recent stent placement by urology service.</p> <p>Hospital Care Timeline indicates: On 10/18/23 R2 was Admitted from ED (Emergency Department) at 8:01pm On 10/20/23 R2 had a Cystoscopy with right stone extraction via laser lithotripsy On 10/25/23 R2 had Cystoscopy and right ureteral stent placement Discharged on 10/26/23 at 6:12pm Hospital Discharge Follow-Up dated 10/26/23 indicates to go to a Urology appointment on 11/9/23 at 11:00am.</p> <p>Hospital ID (Infectious Disease) and Pulmonary Consult/Brief Hospital Course dated 12/23/23 at 11:18am indicates R2 is a 55-year-old with history of Autism, Seizure Disorder, Subdural Hematoma who recently had a right ureteral stent placement on 10/25/23 due to Nephrolithiasis and could not make it to the follow-up appointment on 12/8/23 for removal. Consult indicates R2 presented to the ED from the nursing home with hypoxia and fever (on 12/14/23). Consult indicates in the ED R2 was found to have an acute indwelling urinary catheter induced UTI (Urinary Tract Infection) and Septic Shock resolved.</p> <p>Hospital Radiology Exam dated 12/14/23 indicates "There is a ureteral stent present on the right. There is calcification near the distal portion of the stent which may be within the urinary</p>	S9999		
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S9999	<p>Continued From page 2</p> <p>bladder." Hospital Clinical Impression: Ureteral stent retained. Differential Diagnoses: Sepsis, pneumonia, CHF (Congestive Heart Failure), UTI, cellulitis. Consideration of Admission: This patient was critically ill and required constant attention, providing direct management of acute potentially life-threatening situations involving acute impairment or failure of one or more vital organ systems, and/or high likelihood of imminent or rapid deterioration. Hospital Care Time indicates: Admitted from ED on 12/15/23 at 12:11pm, Cystoscopy with irrigation of Pus, right ureteral stent removal. Discharged on 12/23/23 at 5:02pm.</p> <p>Transportation Calendar indicates R2 had a scheduled appointment at a physician's office on 11/9/23 at 11am. Transportation Trip Log indicates R2 was transported to a follow-up appointment (from hospital discharge instructions) on 11/8/23 - not 11/9/23.</p> <p>December 2023 Calendar did not include an appointment on 12/8/23 (date stent was to be removed). Trip Log does not have an entry indicating R2 was transported to an appointment on 12/8/23 for stent removal.</p> <p>Progress Notes did not contain documentation of R2 being transported to a medical appointment on 11/8/23, 11/9/23 or 12/8/23.</p> <p>On 1/11/24 at 2:45pm V1, Administrator stated that she may have been the transport driver on 11/8/23 but does not recall the actual transport of</p>	S9999		

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S9999	<p>Continued From page 3</p> <p>R2. V1 could not explain how the stent removal appointment on 12/8/23 was missed.</p> <p>On various dates/times between 1/9/23 and 1/11/23 discussions with V1, Administrator requesting documentation of R2's medical appointments, no documentation of any medical appointments from 11/8/23, 11/9/23 or 12/8/23 were found or presented.</p> <p>No facility documentation was found or presented to indicate R2 had a ureteral stent placed on 10/25/23.</p> <p>(B)</p> <p>Statement of Licensure Violations 2 of 2</p> <p>300.610a) 300.1210b) 300.1210d)5 300.3240a)</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</p>	S9999		
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S9999	<p>Continued From page 4</p> <p>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>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> <p>Section 300.3240 Abuse and Neglect</p> <p>a) An owner, licensee, administrator, employee or</p>	S9999		

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S9999	<p>Continued From page 5</p> <p>agent of a facility shall not abuse or neglect a resident. (Section 2-107 of the Act)</p> <p>These Requirements were NOT MET as evidenced by:</p> <p>Based on observation, interview and record review the facility failed to assess, document and obtain treatment for sacral/buttock wounds, and failed to develop/revise a pressure ulcer wound care plan including initiating interventions for one of four residents (R2) reviewed for pressure ulcers in a sample of eight. This failure resulting in multiple pressure wounds across R2's buttocks and sacrum.</p> <p>Findings include:</p> <p>Facility Policy/Decubitus Care/Pressure Areas dated 1/18 documents: It is the policy of this facility to ensure a proper treatment program has been instituted and is being closely monitored to promote the healing of any pressure ulcer. Upon notification of skin breakdown, the QA (Quality Assurance) form for Newly Acquired Skin Condition will be completed and forwarded to the Director of Nurses. The pressure area will be assessed and documented on the Treatment Administration Record or the Wound Document Record. Complete all areas of the Treatment Administration Record (TAR) or Wound Documentation Record. Documentation of the pressure area must occur upon identification and at least once each week on the TAR or Wound Documentation Form. When a pressure ulcer is identified additional</p>	S9999		
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S9999	<p>Continued From page 6</p> <p>interventions must be established and noted on the care plan in an effort to prevent worsening or re-occurring pressure ulcers.</p> <p>Assessment Scale For Predicting Pressure Ulcer Risk indicates on 10/16/23, 10/26/23 and 12/23/23 R2 was identified as high risk for pressure ulcer development.</p> <p>Nursing Admission Assessment dated 12/23/23 indicates R2 had a "Stage 3 cluster" sacral wound on that date.</p> <p>TAR dated 12/23/23 indicates to cleanse R2 sacral wound with normal saline solution or wound cleanser, apply silver alginate and cover with silicone dressing every other day.</p> <p>TAR dated 1/4/24 indicates to apply in-house barrier cream to R2's sacrum every shift. and indicates the treatment was discontinued on 1/11/24.</p> <p>Infectious Disease Progress Note dated 12/28/23 indicates R2 had current assessment diagnosis of right buttock/sacral region wound, unstageable.</p> <p>Physiican Progress Note dated 12/29/23 indicates R2 was seen status post sepsis secondary to right hip decubitus ulcer wound infection.</p> <p>Facility Weekly Wound Tracking dated 12/2023 and 1/2024 indicate wound assessments for left medial heel, left lateral hip, left lateral foot, right lateral heel and right lateral hip for R2. No assessments were documented for R2's sacral/buttock wounds.</p> <p>On 1/5/24 R2 was observed on multiple times throughout the day positioned on his left side.</p>	S9999		
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S9999	<p>Continued From page 7</p> <p>On 1/5/24 at 2:15pm two staff assisted R2 to turn onto his right side. R2 was verbally resistant and at times attempted to push staff hands away from his body. R2's body- from mid back to under R2's buttocks- was laying on top of multiple thick cloth layers of linen that had been folded in half. R2 was noted with dressings to both hips. No dressing was in place across the multiple open areas across R2's upper buttocks and sacrum. The open areas were weeping a bloody drainage which was also noted on the incontinent brief that had covered the open areas. At that time, V11, CNA (Certified Nurse Assistant) attempted to place a small rolled pillow under R2's left side prior to R2 being returned to his left side. R2 rolled completely over the pillow which did not keep R2 positioned off of his left side. At that time V11 stated that R2 only likes to be on his left side and the pillows really weren't effective to keep him positioned off of that side.</p> <p>On 1/10/24 at 11:35am R2 was positioned on his left side in bed on top of multiple layers of thick cloth linens. R2 had a dressing over right hip with the bottom portion of the dressing saturated with bloody drainage and seeping out the bottom of the dressing. R2 also had a dressing over left hip. R2's upper buttocks/sacrum and coccyx had multiple scattered open areas, some with slough in the wound beds. No dressing was in place over any of the open areas and there was visible wound drainage on the incontinent brief. V2, DON (Director of Nursing)/Treatment Nurse was present during R2's assessment and stated that she was not aware R2's wounds across sacrum had become "this bad." At that time, V2 stated she did not know why R2 did not have an air mattress and wasn't sure what the facility policy was on obtaining air mattresses for residents.</p>	S9999		
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S9999	<p>Continued From page 8</p> <p>On 1/11/24 at 9:30am V2, DON/Treatment Nurse stated that she has only been the wound care nurse for two months and had not written any notes on the observation of R2's sacral wounds from "yesterday." V2 stated "I started (R2) on a turn schedule today. I hadn't seen that area (sacral) in awhile. I didn't know it had become so bad. Those are definitely are not superficial wounds. I haven't notified (R2's) physician yet."</p> <p>On 1/11/24 at 9:40am V3, Infection Preventionist Nurse stated "All of our mattresses are pressure relieving mattresses, we don't have air mattresses."</p> <p>At that time V1, Administrator stated "We can rent an air mattress if it's recommended or ordered."</p> <p>On 1/11/24 at 12:30pm V10, Wound NP (Nurse Practitioner) assessed and measured R2's wounds. The following are wound sites, measurements and wound descriptors: Right hip: 6cm (centimeters) X 4.5cm X 3.5cm (depth) with tunneling at three different areas of the wound with the greatest tunnel at 8cm. The wound had thick greenish gray fibrous slough within the wound bed that was malodorous. Right buttock: 3cm X 5cm X 0.1 depth Left buttock: 8cm X 6cm X 0.1cm (depth) Coccyx: 2.5cm X 1cm X 0.2cm Right/left buttock and coccyx wound beds covered with slough weeping bloody drainage. Right heel: 4cm X 4cm (no depth) Right lateral plantar: 0.5cm X 1cm X 0.2 (depth) Left mid plantar: 2cm X 1.5cm X (no depth) Left hip: 5cm X 5cm X (no depth), entire wound covered with black thick eschar directly over hip bone. Left inferior hip: 3cm X 2cm X 0.1cm, wound bed pink with scattered slough.</p>	S9999		
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S9999	<p>Continued From page 9</p> <p>During assessments of R2's wounds V10 noted the multiple layers of thick linens (folded mattress pads and bath blankets under R2) and stated the padding is negating any benefits of the pressure relieving mattress. V10 stated that she will be recommending an air mattress for R2's bed "An (air mattress) is a standard of practice for anyone with pressure wounds." V10 also noted bilateral sheepskin boots R2 was wearing and stated there is no benefit or pressure relief of R2's wounds with that style of boot. V10 stated that due to the "bogginess" of the skin and tissue across R2's buttocks and sacrum, the three wounds will likely become one large wound across entire buttock/sacral area.</p> <p>V2, DON/Treatment Nurse was present during the assessment of R2's wounds by V10, NP. V2 stated that R2 did not have a cushion for his reclining chair which R2 had been sitting in earlier that day. The chair was in R2's room and was an older model reclining chair covered with a stiff vinyl fabric.</p> <p>R2's Current Wound Care Plan indicates that R2 is at High Risk for Pressure Ulcers "Start Date 8/18/22" Care Plan does not include any of R2's current pressure ulcer sites or individualized interventions for those sites. Generic interventions identified in the care plan were all dated 8/18/22.</p> <p>(B)</p>	S9999		
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