

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: IL6004253	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 08/10/2018
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NAME OF PROVIDER OR SUPPLIER HERITAGE HEALTH-MENDOTA	STREET ADDRESS, CITY, STATE, ZIP CODE 1201 FIRST AVENUE MENDOTA, IL 61342
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S 000	Initial Comments Annual Health Survey Statement of Licensure Violations	S 000		
S9999	Final Observations Statement of Licensure Violations 300.610a) 300.1210b) 300.1210d)5) 300.3240a) 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 300.1210 General Requirements for Nursing and Personal Care b) The facility shall provide the necessary	S9999	<h2>Attachment A</h2> <h3>Statement of Licensure Violations</h3>	

Illinois Department of Public Health LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
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S9999	<p>Continued From page 1</p> <p>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>Section 300.1210 General Requirements for Nursing and Personal Care</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>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 agent of a facility shall not abuse or</p>	S9999		
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S9999	<p>Continued From page 2</p> <p>neglect a resident.</p> <p>These Regulations were not met as evidenced by:</p> <p>Based on observation, interview, and record review, the facility failed to assist a resident to turn and reposition in bed for one (R29) of four residents reviewed for pressure ulcers in a sample of 21. This failure resulted in the resident acquiring two pressure ulcers.</p> <p>Findings include:</p> <p>The facility's Wound and Ulcer Policy and Procedure, revised 1/10/18, documents "It is the policy of this facility to provide nursing standards for assessment, prevention, treatment, and protocols to manage residents at any level of risk for skin breakdown and for wound management." This policy continues to state "High Risk Protocol: Residents with existing ulcers will be deemed as high risk for impaired skin integrity despite the Braden Risk Assessment Score. The resident may be placed on a turn and position schedule if clinically indicated. Approaches will be placed in the resident's care plan." It also states "Care interventions for staff involved in the resident's care are communicated via the resident care plan."</p> <p>R29's Braden/Skin Assessment, dated 7/25/18 documents R29 is at high risk for skin breakdown.</p> <p>R29's Minimum Data Set/MDS assessment, dated 6/8/18 documents R29 is cognitively intact,</p>	S9999		
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S9999	<p>Continued From page 3</p> <p>and requires total dependence with 2 assist for transfers and bed mobility; R29 has diagnoses of Diabetes Mellitus and Gout.</p> <p>R29's Ulcer/Wound documentation, dated 7/30/18, documents R29's initial assessment with an in-house acquired stage II pressure ulcer measuring 1.0 cm (centimeters) x 1.0 cm x 0.1 cm.</p> <p>On 08/07/18, at 11:02 AM, R29 lay supine in bed.</p> <p>On 08/08/18 at 01:52 PM, R29's left buttock wound care was performed by V3/Registered Nurse/RN. R29's open area to R29's left coccyx was irregular in shape, red with granulation tissue and no drainage. A smaller, irregular, pink open area was also noted just above coccyx, in the midline, with scant drainage. At this time, V3/RN stated that V3 believed that the smaller wound above the coccyx is new as of today. R29 remained in supine position after R29's wound care was completed.</p> <p>On 08/08/18 at 03:00 PM, V3/RN confirmed that the smaller wound above R29's coccyx is new today measuring 0.6 cm x 0.2 cm and is a Stage II, superficial wound. V3 stated "I know he doesn't like certain positions. He can't turn himself and needs assistance to turn."</p> <p>R29's Ulcer/Wound documentation, dated 8/8/18, documents R29 with a Stage II pressure ulcer on R29's "other-coccyx" with measurements of 0.6cm x 0.2cm x 0.1cm and developed "in-house."</p> <p>On 08/09/18 at 9:47 AM, R29 stated the air mattress was just put on R29's bed today.</p>	S9999		
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S9999	<p>Continued From page 4</p> <p>On 08/10/18 at 12:45 PM, R29 lay supine in bed. R29's air mattress power unit is not lit up while in the on position, flattened and visibly low on air.</p> <p>On 08/10/18 at 12:50 PM, R29 stated that staff have not turned him every two hours; and no one has turned him off his back side since or before he got his wounds. R29 stated "Not at all" has two people come in to get me off of my bottom except for last night. And I think it was an accident because I asked for a bigger pillow and then it got me off of my bottom and it didn't hurt."</p> <p>On 08/10/18 at 01:05 PM, V3/RN confirmed that R29's air mattress was unplugged from the wall. V3 doesn't not know how or when it happened.</p> <p>On 08/10/18 at 01:10 PM, V5 (Certified Nursing Assistant/CNA) stated that V5 is unaware of R29 having any wounds. V5 asks R29 about repositioning when rounding every two hours. R29 doesn't always want to be turned.</p> <p>On 08/10/18 at 01:15 PM, V6/CNA stated that V6 is unsure if R29 has any wounds. At this time, V6 pulled up the CNA documentation in R29's electronic medical record and it did not show where R29 is supposed to be turned and repositioned every two hours. V6 stated "I have put a pillow under him at times, but sometimes he says it hurts his leg."</p> <p>R29's Care Plan, dated 7/30/18, documents that R29 has an open area to R29's coccyx with an intervention of "(R29) needs extensive assist of 2 to turn/reposition every 2 hours or as needed or requested."</p> <p>On 08/10/18 at 01:35 PM, V2 (Director of Nursing/DON) stated that the CNAs are told in</p>	S9999		
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S9999	Continued From page 5 report from the nurses about residents who have wounds every shift. V2 confirmed at this time that according to R29's care plan, R29 is to be turned and repositioned every two hours. V2 stated "(R29) should be able to tell you if they are turning him." (B)	S9999		