STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	IL6009989	A. BUILDING: _____ B. WING _____	08/28/2018

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
OREGON LIVING AND REHABILITATION CENT	811 SOUTH 10TH STREET OREGON, IL 61061

(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 Annual Licensure and Certification Survey	S 000		
S9999	Final Observations Statement of Licensure Violations 1 of 2 Licensure Findings 300.610a) 300.1210a) 300.1210b)2)4)5) 300.1210d)2)3) 300.1420 300.3220f) 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 a) Comprehensive Resident Care Plan. A facility, with the participation of the resident and the resident's guardian or representative, as	S9999	**Attachment A** **Statement of Licensure Violations**	

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S9999	Continued From page 1 applicable, must develop and implement a 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 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. Restorative measures shall include, at a minimum, the following procedures: 2) All nursing personnel shall assist and encourage residents so that a resident who enters the facility without a limited range of motion does not experience reduction in range of motion unless the resident's clinical condition demonstrates that a reduction in range of motion is unavoidable. All nursing personnel shall assist and encourage residents so that a resident with a limited range of motion receives appropriate treatment and services to increase range of motion and/or to prevent further decrease in range of motion.	S9999		

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S9999	Continued From page 2 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. 5) All nursing personnel shall assist and encourage residents with ambulation and safe transfer activities as often as necessary in an effort to help them retain or maintain their highest practicable level of functioning. 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. 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. Section 300.1420 Specialized Rehabilitation Services If physical therapy, occupational therapy, speech therapy or any other specialized rehabilitative	S9999		

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service is offered, it shall be provided by, or supervised by, a qualified professional in that specialty and upon the written order of the physician.

Section 300.3220 Medical Care

f) All medical treatment and procedures shall be administered as ordered by a physician. All new physician orders shall be reviewed by the facility's director of nursing or charge nurse designee within 24 hours after such orders have been issued to assure facility compliance with such orders. (Section 2-104(b) of the Act)

Section 300.3240 Abuse and Neglect

a) An owner, licensee, administrator, employee or agent of a facility shall not abuse or neglect a resident.

These Regulations were not met as evidence by:

Based on observation, interview and record review the facility failed to provide ordered restorative services after a resident was discharged from skilled therapy. This failure resulted in a decline in activities of daily living, a decline in range of motion (ROM) and an inability to receive a prosthetic device as planned and for discharge home.

This applies to 1 of 1 residents (R32) reviewed for mobility and range of motion in the sample of 19.

The findings include:

On 08/22/18 at 11:30 AM, R32 was sitting in a reclining wheelchair with the overbed table in

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front of R32 playing cards. R32 had a right below the knee amputation (BKA) and R32's left foot was on the floor. R32's left foot points down in a resting position.

On 08/21/18 at 12:45 PM, R32 said R32 does not have a prosthetic. R32 continued to say, "I'd like to be able to walk again and go home to run my business." R32 said, "I thought I was supposed to get therapy and prosthetic, but I haven't had it yet."

On 08/22/18 at 11:30 AM, R32 said "I was supposed to have physical therapy when I started having issues with my right leg, but I've never had it, it's been like 4 months." R32 said, "my foot slants down like that (pointing to R32's left foot that slants down toward the floor), so I can't walk anymore." R32 said, "They (the facility) were supposed to talk to me about a special shoe (AFO), but they haven't done that yet either." R32 states, "There's a girl that comes in and moves my arms around, but they don't do anything with my legs."

On 08/23/18 at 08:48 AM R32 denies having shrink wrap (elastic sock used to shape the stump for fitting a of prosthetic) for R32's stump. States, "I had one in my other room, but since they moved me down here, about 3 months ago, I haven't seen it since I moved rooms."

On 08/23/18 at 09:09 AM, V6 (former Social Service Director/Admissions) said my understanding was the doctor came in and told R32, R32 cannot get a prosthesis because R32's noncompliant. V6 denies any interaction with a prosthetic company. V6 states, "I believe that would be physical therapy." V6 said obtaining the prosthetic has been on R32's mind for a long

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time. V6 said, "If [R32] is refusing or noncompliant it should be in nurses notes and/or the behavioral notes.

On 08/23/18 at 09:25 AM, V7, Physical Therapy Assistant (PTA) said, "I personally don't know much about R32; I've been here two months and I've never seen (R32)." V7 said R32 is currently not receiving physical therapy (PT), but R32 was on the PT schedule September through October 2017. V7 read the computer screen and said R32 was seen for BKA and muscle weakness, but was discharged October 20, 2017. V7 said the PT department does arrange prosthetics consultations. V7 said the prosthetic company comes in, does the fitting, and provides all the training with the prosthetic. V7 said, "When I started in June, I did ask about a prosthetic for R32; I asked the company about it and the company said R32 was noncompliant."

On 08/23/18 at 09:40 AM, V8, Restorative Nurse, said R32 currently is on an active range of motion (ROM) and a bed mobility program for restorative services, but no strengthening program. V6 said strengthening exercises are a different set of exercises that would work on R32's muscles and ROM is for joint mobility. V6 said the facility was providing amputation care exercises in preparation for R32's prosthetic leg, but it was stopped when R32 was hospitalized in April and it was never restarted. V8 said the amputation care exercises maintain the strength and mobility in the leg, so R32 will be ready for a prosthetic leg. V8 said she is working with V7 regarding R32's prosthetic leg, but it's been a month or two since we discussed it." V8 said "[R32] could potentially walk again with a prosthetic leg, but the longer it takes, R32 may not be able to walk again." V8 said Restorative evaluations are done quarterly

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with Minimum Data Set (MDS) calendar and as needed. V8 said, "I have to rely on the restorative aides and certified nursing aides (CNAs) to report a decline to the nurse or myself."

On 08/23/18 at 03:51 PM, V2, Director of Nursing (DON) said, "I was told it's not the right grade of stump and the prosthesis will not fit." V2 said if a decline is identified with an Activity of Daily Living (ADL), then the nurse should screen for therapy. A resident's decline should be discussed in the Interdisciplinary Team (IDT) meeting we have weekly. V2 said if R32 didn't have coverage for the leg prosthetic, then R32 would be a charity case and the facility pays for screening/therapy. V2 said, "No, the (PT)evaluation was not done when it was ordered in January according to what I can see." V2 said the nurse should obtain an order for a PT/OT evaluation after an extended hospital stay. V2 said if nursing staff get an order and notify the DON, care plan nurse, or restorative nurse, then they would notify PT and follow-up if PT did not evaluate a resident with an order for PT.

On 08/23/18 at 02:16 PM, V10, physician (MD), said he expected R32 was receiving PT/OT and Restorative Services needed to give R32 the best chance at getting a prosthesis and walking again.

R32's admission record printed August 22, 2018 showed diagnoses to include: diabetes, benign neoplasm of meninges (brain mass), muscle weakness, metabolic encephalopathy, right BKA, and peripheral vascular disease.

R32's MDS dated July 4, 2018 shows R32 was re-admitted to the facility on May 9, 2018 from an acute hospital stay. This MDS showed R32 is cognitively intact; requires extensive assistance

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S9999	Continued From page 7 of two or more staff members for bed mobility, toilet use, personal hygiene, and dressing; is totally dependent on two or more staff members for transfers; has had no days of Occupational Therapy (OT); received Active ROM 7 days in the last 7 calendar days; and received 7 days of bed mobility in the last 7 calendar days. R32's physician order sheet (POS) printed August 23, 2018 showed the order, "PT to eval and treat," was revised on January 22, 2018 and discontinued on August 22, 2018. R32's PT Evaluation & Plan of Treatment dated September 28, 2017 showed R32 has diagnoses of right BKA and muscle weakness (generalized). This document showed R32's personal goal to walk again and return home to run R32's business. This document showed R32 demonstrates a good rehab potential. R32's Therapy Progress Report dated October 4, 2017 showed R32 continues to demonstrate good rehab potential. R32's Therapy Progress Report dated October 11, 2017 showed R32 continues to be unable stand two minutes in parallel bars with stand by assist to prepare for gait. This document showed a note to screen for possible prosthetic. This document shows R32 continues demonstrate good rehab potential. R32's Physical Therapy Discharge Summary dated October 20, 2017 showed R32 continues to be unable to stand two minutes in the parallel bars with stand by assist to prepare for gait; PT to screen for possible prosthetic. This document showed discharge recommendations for the Restorative Nursing Program to facilitate R32 in	S9999		

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maintaining the current level of performance and in order to prevent decline. The document showed the development and instruction of the following Restorative Nursing Programs was completed in the Interdisciplinary Team (IDT) meeting and the following recommendations were made: bed mobility program, Active ROM, and Passive ROM.

There are no Physical Therapy notes after October 20, 2017.

R32's faxed order for a Transtibial Prosthesis (Prosthetic leg) showed the order was written on November 2, 2017 and noted by facility staff on December 11, 2017.

R32's Patient Notes provided by the prosthetic company showed a consult for a transtibial prosthetic was completed on October 20, 2017. This note showed R32 is in need of stump shrinkers to shape R32's residual limb for a prosthesis (two were provided) and R32 is need of an Ankle Foot Orthotic (AFO) on the left to control and reduce plantar flexion contracture.

R32's Patient Notes provided by the prosthetic company dated December 8, 2017 showed the shrinker fit and function were evaluated and look great. This documents showed R32's residual limb is shaped well and ready to be fit with a prosthesis. The note showed the prosthetic company will start the approval process for a K-1 Prosthesis.

R32's Patient Note provided by the prosthetic company dated January 12, 2018 showed liner fit and function were evaluated and fit well. This documents showed measurements and a mold were taken over the liner.

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R32's Phone Conversation note provided by the prosthetic company dated February 7, 2017 showed the prosthetic company is awaiting authorization from R32's insurance company. This document showed the facility PTA reported R32's shrinker was removed because R32 developed sores.

R32's Phone Conversation note provided by the prosthetic company dated May, 4, 2018 showed the prosthetic company is not going to provide a prosthesis to R32 since R32's condition is so much worse.

R32's Phone Conversation note provided by the prosthetic company dated June 13, 2018 showed V7 (PTA) was called to explain after the conversation on May 4, 2018 with facility PTA, the prosthetic company was not moving forward due to R32's worsened condition.

R32's Nursing Restorative Schedule for August 2018 showed R32 is receiving the Bed Mobility Program six to seven times a week and the Active ROM program six to seven times a week to all extremities.

The Nursing Home Visit from the physician dated September 30, 2017 showed R32 was admitted after a prolonged hospitalization after a right BKA and severe coccygeal (buttock) decubitus ulcer. This document showed R32's goal is to return home once his ulcers are healed.

The Nursing Home Visit from the physician dated December 6, 2017 showed R32 is anxious to get R32's prosthesis and get back home. The document continued to show R32 is motivated to become ambulatory. It also showed R32 has

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been compliant with PT and OT and R32's upper and lower extremity strength should be adequate for R32 to adjust to the prosthesis. It showed the overall prognosis for R32 is good.

The Nursing Home Visit from the physician dated April 2, 2018 showed R32 is frustrated and feels (R32) is not getting the physical therapy (PT) (R32) needs. This document showed the plan is to continue physical therapy and occupation therapy.

The Nursing Home Visit from the physician dated May 28, 2018 showed R32 was recently hospitalized from April 29, 2018 to May 9, 2018 (10 days), underwent a left second toe amputation and has residual right-side weakness in the upper extremity from the removal of a brain mass earlier this year. This document showed the plan is to continue PT and OT.

The Provider Note from the Nurse Practitioner dated July 19, 2018 showed R32's left foot is numb with foot drop (toes pointing down to the floor, numbness, &/or difficulty to raise toes toward head). This document continued to show the plan is to continue with restorative therapy, the stump shrinker, and awaiting prosthetic.

R32's care plan regarding an ADL self care deficit dated September 28, 2017 showed interventions to include: prosthetic consult and bed mobility program with Restorative Nursing.

R32's limited physical mobility care plan related to weakness dated September 28, 2017 showed interventions to include active ROM with Restorative Nursing, monitor, document, report any signs and symptoms of immobility (including contractures forming or worsening); PT and OT

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referrals as ordered and as needed.

R32's care plan dated October 10, 2017 showed R32 verbalized a desire to return to the community.

The facility's Strengthening Exercises - Below Knee Amputation dated October 31, 2012, showed, "These exercises will help you strengthen your muscles to best use of prosthetic leg."

The facility's undated Passive Range of Motion Policy and Procedure showed, "It is the policy of [the facility] that every resident will receive appropriate treatment and services to increase range of motion or to prevent avoidable decline in range of motion."

The facility's undated Therapy Program showed, "Therapy services play a vital role in maintaining or regaining residents abilities." This documented showed, "[The facility] strives to provide these services..."

(B)

2 of 2 Licensure Findings

300.610a)
300.1210a)
300.1210b)5)
300.1210d)3)6)
300.3240a)

Section 300.610 Resident Care Policies

a) The facility shall have written policies and procedures governing all services provided by the

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S9999	Continued From page 12 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 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 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) 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	S9999		

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resident to meet the total nursing and personal care needs of the resident. Restorative measures shall include, at a minimum, the following procedures:

5) All nursing personnel shall assist and encourage residents with ambulation and safe transfer activities as often as necessary in an effort to help them retain or maintain their highest practicable level of functioning.

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:

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.

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.

Section 300.3240 Abuse and Neglect

a) An owner, licensee, administrator, employee or agent of a facility shall not abuse or neglect a resident.

These Regulations were not met as evidence by:

Based on observation, interview and record

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OREGON LIVING AND REHABILITATION CENT	811 SOUTH 10TH STREET OREGON, IL 61061

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review the facility failed to provide safety and supervision, and failed to revise and update interventions for a resident with repeated falls. These failures resulted in R24 sustaining a fracture and head injuries.

This applies to 1 residents (R24) reviewed for safety in the sample of 19.

The findings include:

On 08/22/18 at 09:24 AM, R24 was sitting in R24's room alone, self propelling R24's wheelchair with bare feet. R24 said the first time I fell here I had a head injury. R24 said another time I was walking by myself and fell. R24 said I've fallen couple times since then. R24 said I broke my wrist, had lots of bruises, and hit my head at least once. R24 stated, "I had several nasty falls here."

On 08/23/18 at 09:22 AM, V6 (former Social Services/Admissions) said R24 had some falls and is not aware of R24's weakness.

On 08/23/18 at 09:40 AM, V8 (Restorative/Administrative Nurse) said R24 has fallen multiple times. V8 said R24 has poor safety awareness and feels R24 can do it on R24's own. V8 said all falls are reported to me, the falls are discussed in the Interdisciplinary Team (IDT) meetings, the IDT team discussed interventions, and new interventions should be entered in the care plan immediately.

On 08/23/18 at 03:51 PM, V2, Director of Nursing (DON), said when a fall occurs the facility will look at fall and figure out what needs done at the time. V2 said the next day in IDT the facility will look at the cause of the fall; what interventions

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were in place; and what can be done to prevent future falls. V2 said the IDT reviews the interventions with each fall and attempt to initiate new interventions right away. V2 said R24's care plan should have been updated with new interventions after each fall.

R24's Admission Record printed August 23, 2018 showed diagnoses to include: hypertension, urinary tract infection, traumatic subdural hemorrhage without loss of consciousness, heart failure, history of falling, dementia, and restless leg syndrome.

R24's Minimum Data Set (MDS) dated June 28, 2018 showed R24 has a Brief Interview for Mental Status (BIMS) score of 6 (severe cognitive impairment); required extensive assistance of two or more staff members for bed mobility, transfers, dressing, toilet use, and personal hygiene; was frequently incontinent of urine; and had a fracture related to a fall in the six months prior to re-admission.

R24's Morse Fall Scale dated July 5, 2018 showed R24 is at "high risk for falling,"

R24's care plan (revised 4/30/18) showed "[R24] is at high risk for falls, R24 has a history of left proximal humerus fracture with frequent falls. The interventions for this care plan include: anticipate and meet resident needs; ensure [R24] is wearing appropriate footwear, non-skid socks/shoes when ambulating.

R24's care plan showed R24 had an actual fall on 6/6/18, 6/12/18, 6/15/18, 6/20/18, and 6/21/18. The care plan showed no new interventions added until 8/8/18 (approximately two months after R24's falls).

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R24's care plan does not include falls on 2/1/18 and 4/29/18 with no new interventions implemented.

R24's Health Status Notes entered by the nurses from January 4, 2018 through July 3, 2018 showed R24 fell eight times with injuries to include closed head injuries (on 4/4/18, 4/29/18, 6/6/18, and 6/12/18) and a left forearm fracture (1/23/18).

R24's Health Status Note dated January 23, 2018 at 9:51 AM, showed R24 was heard yelling for help and found lying on the floor, on the left side, by the sink. R24 did not have shoes on and R24 was complaining of left forearm pain.

R24's Radiology Report dated January 23, 2018, showed R24 suffered a comminuted radial fracture and a ulnar fracture (forearm fracture).

The facility's Patient Report regarding R24's fall on June 12, 2018 at 11:50 AM showed R24 was barefoot and found on the floor with the right side of R24's head on the leg of the bedside table. This document showed blood was dripping on the floor from a laceration on the right side of R24's head. This document also showed R24 had a skin tear on the top of R24's right foot. This document showed R24 was sent to the local emergency department by ambulance.

R24's Health Status Note dated June 15, 2018 at 7:00 PM, showed R24 was found on the floor, lying on R24's back with R24's head between the roommate's bed and recliner. This note showed R24 responded verbally, but R24's speech was garbled. This note showed R24 was unable to follow verbal commands, unable to answer

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questions, was moaning at times, and had increased shortness of breath. This note showed R24 demonstrated increased restlessness and kept moving R24's arms and legs. At 8:00 PM, showed R24 continued to be restless, moving R24's arms and legs frequently. This note showed R24's speech was garbled, R24's pupils were non-reactive to light, R24 was unable to follow verbal commands, and R24 continued to be short of breath. At 8:30 PM, R24 was transported to a local emergency room by the ambulance (R24 fell three days before with no updated interventions implemented).

R24's Nurses' Admission Record dated June 19, 2018 at 5:55 PM, showed R24 returned back to the facility with multiple bruises all over her body; sixteen staples to her right forehead, over a laceration measuring 6.5 centimeters (cm); and three stitches to the top of her right foot, to a 2 cm skin tear.

R24's Nursing Home Visit by the physician dated July 8, 2018 showed R24 was hospitalized last month and R24 had a fall with a scalp injury.

The facility's Fall Management dated May 15, 2018 showed the policy, "To provide for resident safety and to minimize injuries related to falls; decrease falls and still honor each resident's wishes/desires for maximum independence and mobility." This policy showed the purpose, "Assist the resident in obtaining/or maintaining their highest level of function, minimize the risk of falls, and fall related injuries. It is our belief that a proactive approach is key to keeping our residents safe and free of injury related to falls." This document showed the procedure, "4. Report all falls during the morning Interdisciplinary meetings Monday through Friday. All falls will be

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