

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  IL6007330	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING: _____	(X3) DATE SURVEY COMPLETED  C 04/11/2019
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NAME OF PROVIDER OR SUPPLIER  TIMBERCREEK REHAB & HEALTHCARE CENT	STREET ADDRESS, CITY, STATE, ZIP CODE 2220 STATE STREET PEKIN, IL 61554
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(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  Complaint Investigation  1922529/IL111112	S 000		
S9999	Final Observations  Statement of Licensure Violations  300.1210b) 300.1210d)5) 300.3240a)  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: 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.	S9999	<p><b>Attachment A</b> <b>Statement of Licensure Violations</b></p>	

Illinois Department of Public Health LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE  Electronically Signed	TITLE	(X6) DATE 04/25/19
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S9999	<p>Continued From page 1</p> <p>Section 300.3240 Abuse and Neglect a) An owner, licensee, administrator, employee or agent of a facility shall not abuse or neglect a resident. (Section 2-107 of the Act)</p> <p>These Requirements are not met as evidenced by:</p> <p>Based on record review and interview, the facility failed to reposition a resident as needed in order to prevent a pressure ulcer for one of three residents (R1) in a sample of three reviewed for pressure ulcers. This failure resulted in R1's coccyx pressure ulcer deteriorating to unstageable with necrosis requiring surgical debridement.</p> <p>Findings include:</p> <p>R1's Nursing Admission Assessment sheet dated 2/12/19 notes that R1's coccyx is excoriated and "almost resolved." R1's care plan dated 2/12/19 notes that R1 requires staff assistance to turn and position every two hours.</p> <p>On 2/21/19 facility wound clinic notes that R1 has a "Pressure wound" measuring 1 cm x 0.7 cm x 0.1 cm.</p> <p>R1's hospital records note that R1 was admitted to the hospital on 2/26/19 for unrelated issue and coccyx wound measured 2.5 cm x 2.5 cm x 0.5 cm.</p> <p>R1's was readmitted to the facility on 3/12/19 from the hospital and on 3/14/19 facility wound clinic noted R1's coccyx wound to measure 2.5 cm x 2.5 cm.</p>	S9999		
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S9999	<p>Continued From page 2</p> <p>Hospital records note that R1 was admitted to the hospital on 4/7/19 due to confusion and lethargy. On 4/8/19 hospital records note that R1's coccyx wound measures 6 cm x 8 cm x 0.5 cm. Hospital wound recommendations note that wound is completely necrotic and plan is to take R1 into surgery on 4/9/19. Hospital postoperative notes dated 4/10/19 note that after surgical debridement R1's coccyx wound measured 7.5 cm x 7 cm with 13 cm of tunneling and bone exposed.</p> <p>On 4/10/19 at 12:15 P.M. V5 (Medical Doctor/Surgeon) stated that R1's coccyx wound had no necrotizing fasciitis and was a direct result of prolonged periods of pressure on that area and/or sitting in one position too long.</p> <p>On 4/10/19 at 11:40 A.M. V4 (Regional Wound Ostomy Nurse Coordinator) stated that it was her professional opinion that R1's pressure sore on her coccyx would have been preventable with timely repositioning and proper care.</p> <p>On 4/11/19 at 10:20 A.M. V6 (R1's son) stated that that when he would visit R1 at the facility, he noticed that R1 would sit for extended periods of time without any repositioning by staff.</p> <p>(B)</p>	S9999		