

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: IL6001697	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED C 01/17/2020
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NAME OF PROVIDER OR SUPPLIER CHICAGO RIDGE NURSING CENTER	STREET ADDRESS, CITY, STATE, ZIP CODE 10602 SOUTHWEST HIGHWAY CHICAGO RIDGE, IL 60415
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S 000	Initial Comments Statement of Licensure Violations Investigation of Complaint: 2090075/IL00118889 2090074/IL00118890	S 000		
S9999	Final Observations 300.610a) 300.1210b) 300.1210d)6) 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 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	S9999		

Attachment A
Statement of Licensure Violations

Illinois Department of Public Health
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE
Electronically Signed

TITLE

(X6) DATE

02/07/20

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S9999	<p>Continued From page 1</p> <p>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>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.</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 neglect a resident.</p> <p>These Regulations were not met as evidenced by:</p> <p>Based on interviews and record reviews, the facility failed to comprehensively assess, re-evaluate, and supervise 1 of 4 residents (R5) reviewed for smoking safety. The facility failed to follow their abuse policy and manage a resident with a history of aggressive behavior for one (R5) out of four (R4, R5, R6, R9) residents reviewed for abuse. The facility failure to follow their smoking and contraband policy resulted in R5 obtaining a cigarette lighter, smoking in areas deemed unsafe/ prohibited by the facility, and subsequently setting her roommate's (R1) hair on</p>	S9999		
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S9999	<p>Continued From page 2</p> <p>fire. This resulted in R1 sustaining first and second degree burns to her scalp and left ear.</p> <p>Findings include:</p> <p>R5 was admitted on 8/9/2019 and has a BIMS (brief interview for mental status) score of 15 which indicates cognition is intact. R5's PASSR (Preadmission Screening) was dated 9/2/2014. The PASSAR screen denotes R5 needs services for aggression/anger management. A review of the progress notes reflects that on the day of admission, R5 was caught smoking in the bathroom. R5 was informed of the no smoking in the facility rule.</p> <p>The Criminal History Analysis Security Recommendation Report prepared on 9/6/19, indicates R5 is a moderate risk which means R5 requires closer supervision and more frequent observation than standard or routine for most residents in an open facility. Regular monitoring should be attentive to behavioral changes that may signal a need for closer observation or sustained visual monitoring on a time-limited basis. Periodic assessments should ascertain whether the level of supervision is sufficient. R5's state criminal history background indicates she has a history of battery/bodily harm and knowingly damage to property.</p> <p>On 8/17/19, a Psychiatric Evaluation was done by V18 (Nurse Practitioner). The Comprehensive plan recommendation included: continue to provide assistance with ADL (Activities of Daily Living), encourage to group therapy/activities provided by the facility, continue to monitor behavioral issues, and to continue current medications.</p>	S9999		
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S9999	<p>Continued From page 3</p> <p>On 8/26/19, a Social Service (S.S.) initial interview for SMI/Substance Abuse Disorder was completed by V6 (psychiatric rehabilitation service coordinator) for R5. This assessment is completed for newly admitted residents to the facility with mental illness and substance disorders. A review of the assessment indicates R5 reported that she experienced symptoms of hearing voices, seeing things, and homicidal/suicidal thoughts. On this assessment, R5 answered "yes" to a question in regards to ever trying to injure or kill another person. R5 also answered "yes" to a question in regards to have you ever caused harm by setting a fire.</p> <p>On 8/26/19, A Smoking Risk Review was completed by V6 (PRSC) for R5. The recommendations and outcomes were that R5 may independently be able to handle smoking materials.</p> <p>On 8/27/19, A Screening Assessment for Indicators of Aggression and/or Harmful Behavior was completed by V6. The assessment recommends R5 is potentially able to integrate with structure, direction, and supportive counseling.</p> <p>Progress note documentation on 10/4/19 at 9am reflect, R5 had an argument with her roommate 10/4/19 at 10am. R5 was then moved to Room 322. Further progress note documentation on 10/4/19 reflects R5 was upset about the move and wanted to leave AMA (Against Medical Advice). R5 became more agitated, verbally abusive, and threatening violence. The physician was notified and R5 was given Haldol 5mgs. R5 continued verbally abusive and threatening behaviors and subsequently sent out to the hospital for a psychiatric evaluation.</p>	S9999		

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S9999	<p>Continued From page 4</p> <p>On 1/17/2020 at 10:09 AM, V6 (PRSC) stated she conducted the Social Service Initial Interview for SMI/Substance Abuse Disorder (S.S.) in which R5 participated in the interview. V6 stated she asked R5 to elaborate on the question regarding causing harm by setting fires, but R5 did not want to provide more details on what occurred. V6 stated the history of setting fire could be a factor, but at the time of the assessment, she did not see R5 as a smoking risk because she did not have her own smoking materials. V6 stated when she was responsible for R5 she had not been caught smoking in undesignated areas.</p> <p>A review of progress notes dated 11/17/2019, 12/11/2019, and 12/16/19, all reflect smoking violations that include R5 smoking in her bedroom or bathroom. Each time R5 was re-educated on the facility smoking policy by V9 (Psychiatric Rehabilitation Service Coordinator-PRSC).</p> <p>On 12/23/19, a Smoking Safety Screen was completed by V9 (PRSC) for R5. Per review of the smoking safety screen, R5 is aware of the facility smoking policy but continues to not follow protocol. Staff will continue to give cues, reminders, and redirection as needed. R5 is aware of the smoking destination but choses to not use it which at times she smokes in her room. Staff will continue to give her reminders. R5 is safe to smoke with supervision.</p> <p>During interview on 1/14/20 V9 (PSRC) stated, Question 8 on the Smoking Safety Screen should have been answered "yes" in regards to if resident needs the facility to store lighter and cigarettes. V9 stated R5 should have had a Smoking Safety Screen completed after the 2nd</p>	S9999		
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S9999	<p>Continued From page 5</p> <p>violation. After the 2nd encounter room searches are conducted. The room and the person are searched with their consent.</p> <p>On 1/14/2020 at 1:38 PM, V11 (Director of Clinical Services) stated R5 was to smoke with supervision which means there are designated smoking times, and smoking material is handled by staff. V11 stated he was aware that R5 was non-compliant with the smoking policy. V11 stated social services may conduct a random room searches if residents are suspected of having contraband. The room searches are to be documented. V11 stated room searches were done on 12/11/19 and 12/16/2019 in which smoking material was found in R5's room and removed. V11 stated it is safety issue if someone is smoking in the bathroom, and everyone must be kept safe.</p> <p>On 12/26/19 at 0600 progress notes denote R5 was smoking in the bathroom.</p> <p>On 1/16/2020 at 3:13 PM, V19 (Licensed Practical Nurse) stated on 12/26/19 at approximately 5:00 AM, she smelled cigarette smoke in R5's bathroom. V19 stated she asked R5 if she was smoking and R5 admitted to smoking. V19 stated she reported the occurrence to the oncoming nurse and charted on the 24 hour report sheet to inform Social Services.</p> <p>There was no documentation of a room search being completed after the 12/26/19 occurrence.</p> <p>On 1/14/2020 at 1:43 PM, V14 (Certified Nursing Assistant) stated she has observed R5 smoking in the bathroom in the past, but she was not asked to do a room search. She stated she reported her observation to social services, and</p>	S9999		
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S9999	<p>Continued From page 6</p> <p>she was not aware R5 required supervision with smoking. V14 stated that on 1/3/2020 around 10:50 PM she assisted R1 to the bathroom. At that time, R5 was in her bed sleeping. At approximately 11:40 PM, V14 stated she heard screams, and when she entered the room she observed R1's hair on fire. V14 stated, R5 was standing in the bathroom holding a lighter.</p> <p>On 1/14/2020 at 3:25PM, V15 (Registered Nurse) stated on 1/3/2020 at approximately 10:30 PM, she rounded on R1 and R5. At that time, she stated R1 was sleeping, and R5 was in bed but not asleep. V15 stated around 11:40 PM, she heard screaming, and when she entered the room she saw a flame on R1's head. The fire was put out, and 911 was called. V15 stated she asked R1 what happened, and R1 pointed to R5. V15 stated she assessed R1, and observed burns to her head. V15 stated when she entered the room, R5 was in the bathroom doorway smoking a cigarette. V15 stated R5 had a lighter, and she took it away from her. V15 stated R5 flushed the cigarette down the toilet. She stated R5 did not say where she got the lighter from. V15 stated she asked R5 if she set R1's hair on fire, and R5 replied I did this and what are you going to do. She stated R5 did not give a reason for why she lit R1's hair on fire.</p> <p>A review of the Unusual Occurrence Report Form for R1 was completed by V15 on 1/4/2020 indicates the occurrence occurred 1/3/2020 at 11:40 PM. R5 set her roommate (R1) hair on fire while she was asleep. The occurrence is described as the following: R1 was screaming and V15 and V14 ran to see what was going on. R1 was noted with a fire (flame) on her hair. The fire was put out, and R1 was asked what happened, and R1 stated her roommate (R5) did</p>	S9999		
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S9999	<p>Continued From page 7</p> <p>it.</p> <p>A review of the Investigation assessment dated 1/6/2019 denotes V15 heard a yell from a room, and when she went to the room, she observed R1 hair on fire. The fire was put out. R5 was noted to be smoking in the bathroom. Per report, R5 stated "yes I did, what are you going to do about it *****". R1 received first aid, while staff was doing 1:1 supervision with R5. R1 had blisters to right top of her scalp and to the top of both ears. R5 was sent to the hospital for a psychiatric evaluation.</p> <p>A review of the hospital records dated 1/4/2020 for R1 denotes she had a burn to her scalp with erythema (redness) and a small blister to the right parietal. R5 was diagnosed with 1st degree and 2nd degree burns to the scalp.</p> <p>A review of the hospital records dated 1/4/2020 for R5 denotes she presented with homicidal ideation towards roommate. Her admitting diagnosis to the hospital was paranoid schizophrenia. R5 reported to hospital staff she did light her roommate on fire because she did not like her and she just wanted to. R5 was not permitted to return back to the facility.</p> <p>On 1/14/20 at 11:45 AM, R1 was observed with dry scabbed areas over her scalp and an open area to left ear. Approximately 75% of her hair was short. On 1/16/2020 at 12:53 PM, an interview was conducted with R1 and V20 (certified occupational therapy assistant) interpreting for R1. R1 stated someone lit her hair and ear on fire, and her head is burned and she wants to go home. R1 stated she has pain to her ear and her scalp, and the medication the nurse applies to her ears help.</p>	S9999		

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S9999	<p>Continued From page 8</p> <p>1/15/2020 at 9:35 AM, V2 (Assistant Administrator) stated residents can lose their smoking privileges if they are not compliant with the policy. Staff is not constantly monitoring residents while smoking on the patio.</p> <p>On 1/15/2020 at 10:03 AM, during interview with V16 and V17 (Licensed Practical Nurse), V16 stated R5 has gotten verbally aggressive with staff in the past if R5 was asked to do something by staff members. V17 (Licensed practical nurse) stated R5 has been verbally aggressive towards other residents in the past.</p> <p>On 1/15/2020 at 10:14 AM, V22 (Certified Nursing Assistant) stated she has observed cigarette butts and smelled smoke in R5's bathroom. She stated she was not instructed to do a room search. V22 stated she was not aware that R5 needed supervision with smoking, nor did she ever escort her to the patio to smoke. V22 stated R5 was an independent smoker as she would come and go and she pleased.</p> <p>On 1/15/2020 at 10:37 AM, V17 (Licensed Practical Nurse) stated R5 was an independent smoker and she was not aware she required supervision with smoking. She stated R5 continued to smoke up until the day she was discharged. She stated approximately three weeks ago, she observed R5 asking other residents for cigarettes. V17 stated approximately one month ago, she observed smoke in R5 bathroom, and R5 admitted to smoking. V17 stated she did not search R5 or her belongings.</p> <p>On 1/15/2020 at 12:39 PM, during interview with V11 (Social Service Director) and V9 (PSRC), V11 stated he was not aware R5 had a history of</p>	S9999		

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S9999	<p>Continued From page 9</p> <p>harming others and of setting fires and that history should be care planned. He stated a person having a history of setting fires, needs to have some level of monitoring. V11 stated certified nursing assistants and nurses are to monitor residents who are on supervised smoking.</p> <p>V9 also stated R5 should not have been safe to handle her own smoking material with her history of setting fires, and this history should have been care planned. V9 stated she suspected R5 of smoking in her room after 12/16/19, but no room searches were documented after 12/16/19. V9 stated R5 told her she was getting cigarettes from other people. V9 stated we can't stop R5 from getting cigarettes from others because we are not around her 24/7. V9 stated she does not know who monitors R5 while she is smoking when V9 is not there.</p> <p>V9 stated R5 did not attend group for anger management when R5 was moved to the third floor in October 2019. V9 stated she encouraged R5 to attend group sessions, but V9 did not have 1:1 anger management sessions with R5 when she was moved to the third floor.</p> <p>A review of the Weekly 1:1 charting indicates the last 1:1 anger management session was done on 9/8/19 with R5. There is no documentation for October, November, or December of 2019 and January 2020 of R5 refusal to attend anger management or 1:1 sessions for anger management.</p> <p>On 1/16/2020 at 9:32 AM, V13 (Medical Doctor) stated 1st degree burns are defined as redness of the skin. Second degree burns mean blisters form and then open, causing the first layer of the</p>	S9999		
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S9999	<p>Continued From page 10</p> <p>skin to open. V13 stated on examination of R1, he observed R1 with 1st degree burns to her scalp, and second degree burns to her left ear. He stated she has no complaints or sign or symptoms of pain. The current treatment is to apply antibiotic cream until the skin is healed. The purpose of the antibiotic cream is so the areas do not become infected. V13 stated the scalp and left ear are healing.</p> <p>On 1/16/2020 at 9:48 AM, V18 (Nurse Practitioner) stated homicidal ideation is defined as hurting others. The last psychiatric evaluation was completed on 12/31/19 for R5. V18 stated R5 was alert and oriented x3, and based on his observation, R5 is aware of what she is doing. V18 stated R5 stated R5 did not have any psychiatric issues. V18 stated if R5 made the statement she lit her roommates (R1) hair on fire, then he would believe R5. V18 stated R5 has a history of anger issues, and she should be in group for anger management. He stated the purpose for anger management is to help recognize anger issues and manage symptoms of anger and irritation. He stated 1:1 therapy for anger management could also be effective if R5 chooses not to attend group anger management. V18 stated he does not know if R5 was attending group or 1:1 sessions for anger management.</p> <p>A review of the Care Plan did not reflect group or 1:1 sessions as an intervention for anger management.</p> <p>On 1/17/2020 at 12:10 PM, V5 (Administrator) stated the smoking patio opens at 6 AM, closed at meal time, and then closed for the night at 10 pm. The independent smokers were allowed to smoke anytime the patio was open and were allowed to handle their own smoking material. V5</p>	S9999		
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S9999	<p>Continued From page 11</p> <p>stated if a resident was on supervised smoking, they were on a schedule. V5 stated she was aware R5 was non-compliant with the smoking policy, but she did not know where R5 was getting smoking materials or lighters from.</p> <p>Facility Safe Smoking Safety Policy-undated</p> <p>Smoking is only allowed in the designated area established by management. Indoor smoking is prohibited by state or local law and the interior of the facility will remain smoke-free at all times. The organization has the right to enforce a policy prohibiting residents from keeping any smoking materials in their possession for health, safety and security reasons.</p> <p>Smokers will be evaluated to determine their ability to comply with safety rules and their ability to carry materials.</p> <p>Residents requiring supervision shall receive their monitoring consistent with their assessment and plan of care.</p> <p>Individuals who are non-compliant, potentially dangerous, exercise poor judgment and show a lack of concern for the welfare of others will be counseled accordingly. The facility maintains the right to limit and restrict access to smoking products, matches and lighters for person deemed unsafe. Smoking privileges will be revoked if there is a pattern of persistent, hazardous behavior.</p> <p>All persons interested in retaining smoking privileges must follow the guidelines set forth in this policy.</p> <p>The following behaviors and/or conditions will</p>	S9999		
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Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: IL6001697	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED C 01/17/2020
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NAME OF PROVIDER OR SUPPLIER CHICAGO RIDGE NURSING CENTER	STREET ADDRESS, CITY, STATE, ZIP CODE 10602 SOUTHWEST HIGHWAY CHICAGO RIDGE, IL 60415
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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
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S9999	<p>Continued From page 12</p> <p>jeopardize and cause revocation of the person' independent privileges: Smoking in any non-designated area, such as residents' rooms, bathrooms, hallways, elevators, stairways and/or smoke-free courtyard.</p> <p>Self-harmful/injurious behaviors, such as burning clothing, hands, fingers, face or lips. This category includes residents who are generally "careless" while smoking and may present a significant risk of fire setting.</p> <p>Residents on supervised smoking are not permitted to have/carry any smoking materials in their possession at any time</p> <p>Residents living quarters shall be randomly searched/checked for smoking material/contraband</p> <p>Policy on Room Searches, Contraband Items and Removal of Contraband dated October 7, 2011</p> <p>This organization reserves the right to conduct inspections if there is reason to suspect/believe that a resident has contraband items/materials in his/her possession. These items include, but are not limited to, alcohol, illicit street drugs, weapons (including any sharp objects), and smoking material (if the individual has proven to be dangerous and irresponsible with smoking related items).</p> <p>The following items are not allowed in the resident's possession if he/she has been assessed as an unsafe smoker (i.e.) smoking in residents' room, other unauthorized areas, causing burns or otherwise exposing self or peers to a dangerous situation by dropping lit matches or cigarettes.</p>	S9999		
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Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: IL6001697	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED C 01/17/2020
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S9999	<p>Continued From page 13</p> <p>Abuse Policy-Undated:</p> <p>This facility affirms the right of our residents to be free from abuse, neglect, exploitation, misappropriation of property or mistreatment. This facility therefore prohibits abuse, neglect, exploitation, misappropriation of property, and mistreatment of residents. In order to do so, the facility has attempted to establish a resident sensitive and resident secure environment. The purpose of this policy is to assure that the facility is doing all that is within is control to prevent occurrences of abuse, neglect, exploitation, misappropriation of property and mistreatment of residents.</p> <p>Resident assessment: As part of the resident's life history on the admission assessment, comprehensive care plan, and MDS (minimum data set) assessments, staff will identify residents with increased vulnerability for abuse, neglect, exploitation, mistreatment or misappropriation of resident property, or who have needs and behaviors that might lead to conflict.</p> <p>Facility will assess, prevent and manage aggressive reactions of resident in a way that protects both residents and staff.</p> <p>(A)</p>	S9999		
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