

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>IL6003610</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>C</b> <b>02/16/2018</b>
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NAME OF PROVIDER OR SUPPLIER  <b>GLENVIEW TERRACE NURSING CTR</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>1511 GREENWOOD ROAD GLENVIEW, IL 60025</b>
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S 000	Initial Comments	S 000		
	<p>Complaint # 1796304/IL97719</p> <p>S9999 Final Observations</p> <p>Statement of Licensure Violations:</p> <p>300.610a) 300.1210b)d)3 300.3240a)</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 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</p>	S9999	<p><b>Attachment A</b></p> <p><b>Statement of Licensure Violations</b></p>	

Illinois Department of Public Health LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X8) DATE <b>03/15/18</b>
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S9999	<p>Continued From page 1</p> <p>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>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 are not met as evidence by:</p> <p>Based on interviews and record reviews, this facility failed to meet professional standards of quality care for one resident (R5) out of three residents reviewed for an acute change in condition and timeliness of transport in a sample of 14. This failure resulted in a delay in R5 receiving intensive monitoring and hospital-level treatment for a displaced gastrostomy tube resulting in peritonitis (inflammation within abdomen).</p>	S9999		
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S9999	<p>Continued From page 2</p> <p>Findings include:</p> <p>Review of the medical record notes R5 was admitted to this facility on 8/6/17 with diagnoses including: cervical fracture, dysphagia, generalized muscle weakness, tracheostomy, gastrostomy, anxiety disorder, depression, history of falls, crest syndrome, and pneumonia.</p> <p>On 2/15/18 at 1:45pm, V9 LPN stated that the resident's gastrostomy tube should be checked by auscultation with stethoscope for correct placement and also for gastric residual volume before administering any feeding, water, or medication. V9 stated that residents with gastrostomy tubes should be monitored for nausea, vomiting, abdominal distention, abdominal pain, and aspiration of tube feedings.</p> <p>On 2/15/18 at 2:45pm, V10 RN stated that the resident's gastrostomy tube should be checked by auscultation with stethoscope for correct placement and also for gastric residual volume before administering any feeding, water, or medication. V10 stated that residents with gastrostomy tubes should be monitored for nausea, vomiting, abdominal distention, abdominal pain, and aspiration of tube feedings.</p> <p>On 2/16/18 at 6:50am, V8 RN stated that residents that receive intermittent feeding via gastrostomy tube, the gastrostomy tube should be checked for any gastric residual volume at the beginning of each shift and before each use.</p> <p>Review of R5's POS (physician order sheet), dated 8/6/17, notes the following orders: monitor lungs for congestion every shift, feeding via</p>	S9999		
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S9999	<p>Continued From page 3</p> <p>gastrostomy tube at 63ml (milliliters)/hour x 20 hours/day, water flush 175ml every 4 hours, intake and output every shift, check gastrostomy tube placement with each use, and check gastrostomy tube for residual, hold feeding if greater than or equal to 100ml (milliliters) and notify physician.</p> <p>Review of R5's medical record, dated 8/8/17, notes: At 2:55pm, R5 complained of abdominal pain/tenderness which is evidenced by R5's reaction to touch upon abdominal palpation. Pain medication given with no relief. V3 NP (nurse practitioner) assessed R5, ordered abdominal x-ray immediately and bladder scan x 1 due to poor urine output. Bladder scan showed 57ml in R5's bladder. Outside diagnostic company notified of R5's need for urgent abdominal x-ray. At 9:30pm, R5 still complaining of abdominal pain, 5 out of 10,, skin cool and clammy, blood pressure 82/54, heart rate 104 beats/minute, respirations 20, oxygen saturation 90% on HHTC (high humidity tracheostomy collar) with oxygen at 3 liters. As needed pain medication given and pushed fluid via gastrostomy tube. Indwelling catheter with 20ml output. At 10:10pm, blood pressure 80/60, heart rate 113 beats/minute, respirations 30/minute, oxygen saturation 84% HHTC oxygen 3 liters. At 10:35pm, blood pressure 85/61, heart rate 105 beats/minute, respirations 30/minute, oxygen saturation 86% HHTC oxygen 5 liters. R5 complained of abdominal pain 5 out of 10. 911 emergency medical services called. R5 transported to hospital at 11:05pm.</p> <p>There is no documentation found that R5's feeding was held at any time on 8/8/17 between 2:55pm and 11:05pm when R5 was complaining</p>	S9999		

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S9999	<p>Continued From page 4</p> <p>of abdominal pain unrelieved by pain medication or exhibiting signs of distress (low blood pressure, rapid heart rate, increased respirations, decreasing oxygen saturation with oxygen).</p> <p>Review of R5's abdominal x-ray result, dated 8/8/17 at 8:40pm, notes gastrostomy tube tip overlies the region of the stomach, proper positioning within the stomach of the gastrostomy tube cannot be positively confirmed without installation of positive contrast material followed by x-rays, and should be considered prior to gastostomy tube utilization.</p> <p>Review of V23's ( Nurse Practitioner) progress note, dated 8/8/17, R5 seen and examined at bedside. R5 verbalizes via whiteboard pain in abdomen. Denies nausea, vomiting. Abdomen distended and tender throughout all quadrants with palpation. Abdominal x-ray result noted. Plan: continue feeding via gastrostomy tube, monitor for shortness of breath, fever, chills.</p> <p>Review of R5's MAR (medication administration record), dated 8/7-8/9, notes R5 received feeding via gastrostomy tube from 8/7 until R5 left facility 8/8 at 11:05pm.</p> <p>Review of R5's hospital medical record, dated 8/8/17, notes peritonitis/septic shock likely secondary to tube feeding contents seeping into intra-abdominal cavity. CT (computerized topography) scan of R5's abdomen/pelvis demonstrating displaced gastrostomy tube with large amount of intra-abdominal fluid.</p> <p>This facility's enteral tube feeding via continuous pump policy, dated 07/2016, notes report complications (gastric distention, respiratory distress) promptly to the supervisor and the</p>	S9999		

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S9999	Continued From page 5 attending physician.  (A)	S9999		