PRINTED: 06/12/2018 **FORM APPROVED** Illinois Department of Public Health STATEMENT OF DEFICIENCIES (X1) PROVIDER/SUPPLIER/CLIA (X2) MULTIPLE CONSTRUCTION (X3) DATE SURVEY AND PLAN OF CORRECTION **IDENTIFICATION NUMBER:** COMPLETED A. BUILDING: __ C B. WING_ IL6000244 04/25/2018 NAME OF PROVIDER OR SUPPLIER STREET ADDRESS, CITY, STATE, ZIP CODE 510 BROADWAY **HEARTLAND OF NORMAL NORMAL. IL 61761** SUMMARY STATEMENT OF DEFICIENCIES (X4) ID PROVIDER'S PLAN OF CORRECTION (X5) COMPLETE PRÉFIX (EACH DEFICIENCY MUST BE PRECEDED BY FULL (EACH CORRECTIVE ACTION SHOULD BE PREFIX REGULATORY OR LSC IDENTIFYING INFORMATION) TAG CROSS-REFERENCED TO THE APPROPRIATE DATE TAG DEFICIENCY) S 000 Initial Comments S 000 FRI 1/01/18/IL102050 F689 \$9999 Final Observations S9999 Statement of Licensure Violations: 300.610a) 300.1210b)c)d)6 300.3240a) Section 300.610 Resident Care Policies 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

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

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

The facility shall provide the necessary care and services to attain or maintain the highest

TITLE

Attachment A

Statement of Licensure Violations

(X6) DATE 05/25/18

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surgical repair.

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for assessment. Assessment revealed mild pain

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exercises.

all times and to NOT initiate any range of motion

STATE FORM

ZEX211

Illinois Department of Public Health

AND PLAN OF CORRECTION (X1) PROVIDER/SUPPLIE IDENTIFICATION NU	MADED: ` '	(X2) MULTIPLE CONSTRUCTION A. BUILDING:		(X3) DATE SURVEY COMPLETED				
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On 4/24/18 at 2:22 p.m., R1 was sitting wheelchair with his right arm secured in immobilizer. R1 stated he is currently unuse his right arm, and has been unable since he was injured on 1/01/18. R1 stawas admitted to the facility (12/29/17) for related to worsening of his Parkinson's IR1 stated at the time of his admission, hunable to reposition himself in the bed independently and had weakness on his side. R1 stated, prior to the incident (1/2 was always repositioned with two staff mot just one. R1 stated, on the night of the asked a CNA for help to be reposition up towards the head of the bed. R1 stated CNA put his arm under his right arm to pup towards the head of the bed and R1 immediately heard a "pop." R1 stated he two different Orthopedic Surgeons since injury, attempt to get the right shoulder be the socket, but due to the rotator cuff be injured it would not stay in place. R1 stahad to have his right shoulder surgically back into the socket, by (V5 - Orthopedic Surgeon), approximately 5 weeks ago. On 4/24/18 at 11:08 a.m., V3 (Certified Nassistant) stated he was working the ever 1/01/18, when at approximately 9:00 p.m called out for assistance to be reposition bed. V3 stated R1 had slid down toward of the bed and was uncomfortable. V3 sindependently pulled R1 up towards the the bed, as R1 used one leg to help pusi	in his a nable to to use it ated he or therapy Disease. ne was a right D1/18), he nembers, the injury, ned back ted the bull him e has had a the back into ing ated he placed C Nursing ening of n., R1 ned in ls the foot stated he head of h himself,							
when V3 heard a "pop" from R1's right s V3 stated, "my arm was under (R1's) arm moving (R1), but I didn't use much press stated R1 was usually a two person assistences repositioning, but "we were short of staff	n when sure." V3 st for							

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S9999	normally would have assistance. On 4/24/18 at 11:58 of Nursing) indicate when R1's 1/01/18 in had reported he was bed, and "on the thrup, V3 heard a "popstated upon assess deformity of the right conduct the initial in investigation into R1 V3 about exactly ho V2 stated, based on hooked his arm und	wait for help." V3 stated he e tried to get additional staff s.a.m., V2 (Assistant Director d he was the Nurse on shift injury occurred. V2 stated V3 is trying to pull R1 up in the ee count" when V3 pulled R1 infrom R1's shoulder. V2 ment, R1 had an obvious it shoulder. V2 stated he did terview with V3, for the l's injury, but did not question whe was repositioning R1. In R1's injury he assumed V3 ier R1's arm to pull him up is an improper method for	\$9999	DEFICIENCY)				