

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: IL6008015	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 05/18/2018
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NAME OF PROVIDER OR SUPPLIER

STREET ADDRESS, CITY, STATE, ZIP CODE

APERION CARE MARSEILLES

**578 WEST COMMERCIAL STREET
MARSEILLES, IL 61341**

(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 Certification and Licensure Survey	S 000		
S9999	Final Observations Statement of Licensure Violation Licensure finding 1 Of 2: 300.1210b) 300.1210d)6) 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. Restorative measures shall include, at a minimum, the following procedures: 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: 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.	S9999		

Attachment A
Statement of Licensure Violations

Illinois Department of Public Health

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

TITLE

(X6) DATE

06/11/18

STATE FORM

6899

4JDV11

If continuation sheet 1 of 6

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NAME OF PROVIDER OR SUPPLIER APERION CARE MARSEILLES		STREET ADDRESS, CITY, STATE, ZIP CODE 578 WEST COMMERCIAL STREET MARSEILLES, IL 61341		
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S9999	Continued From page 1 Section 300.3240 Abuse and Neglect a) An owner, licensee, administrator, employee or agent of a facility shall not abuse or neglect a resident. Noncompliance resulted in two deficient practices: A. Based on interview and record review, the facility failed to ensure a resident's gown was secured during transport for one of seven residents (R55) reviewed for falls in the sample of 21. This failure resulted in R55 falling forward out of a wheelchair, sustaining nasal fractures and lacerations requiring 13 sutures. Findings include: A. The facility's Fall Management Guidelines policy (10/2014), documents "Fall reduction/injury prevention strategies that can be implemented upon admission may include, but are not limited to the following: removal of trip hazards, use of appropriate footwear." The facility's investigation dated 4/18/18 documents on 4/18/18 at 7:05pm, R55 was transported from the shower room by V8, Certified Nursing Assistant/CNA, when R55's gown "engaged with the wheel of the wheelchair causing a change of plane in a forward motion." The investigation documents R55's injuries as "lacerations to the right eyebrow, nose, and upper lip, and right wrist, and nasal fracture." R55's Emergency Department (ED) report dated 4/18/18 documents "Open fracture of nasal bone" and "Head laceration." R55's head Computerized	S9999		

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S9999	Continued From page 2 Tomography (CT) dated 4/18/18 documents "Mildly displaced and angulated bilateral nasal bone fractures with overlying soft tissue swelling. Mildly displaced fracture of the bony nasal septum. Component opacification of the maxillary, ethmoid, sphenoid sinuses, new from previous and may indicate component hemorrhage from nasal fractures." R55's ED follow-up Progress Notes dated 4/20/18 document "(R55) had 12 stitches on the forehead and 1 (one) stitch on the base of the nose laceration." R55's Minimum Data Assessment dated 1/23/18 documents R55 is severely cognitively impaired and requires extensive assistance with transfers and activities of daily living. R55's fall risk assessment dated 1/23/18 documents R55 is at risk for falls. R55's fall risk assessment dated 4/18/18 documents R55 is not at risk for falls. On 5/16/18 at 10:15am, V8, CNA, stated (V8) was transporting R55 in a wheelchair from the shower room, when R55 began to lean forward and R55's gown caught in the wheelchair wheel and went under the wheel, causing R55 to fall forward onto (R55's) face. On 5/16/18 at 10:30am, V2, Director of Nursing, stated the root cause of R55's fall was (R55's) gown getting caught in the wheelchair wheel. V2 stated V8 was retrained on fall precautions and keeping residents' gowns tucked underneath them during transport.	S9999			

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S9999	Continued From page 3 Licensure finding 2 of 2 300.1210b) 300.1210d)6) 300.2210b)1)2) 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. Restorative measures shall include, at a minimum, the following procedures: 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: 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 300.2210 Maintenance b) Each facility shall: 1) Maintain the building in good repairsafe and free from the following: cracks in floors, walls, or ceilings; peeling wallpaper or paint;	S9999			

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S9999	Continued From page 4 warped or loose boards; warped, broken, loose, or cracked floor covering, such as tile or linoleum; loose handrails or railings; loose or broken window panes; and any other similar hazards. (B) 2) Maintain all electrical, signaling, mechanical, water supply, heating, fire protection, and sewage disposal systems in safe, clean and functioning condition. This shall include regular inspections of these systems. (A, B) Section 300.3240 Abuse and Neglect a) An owner, licensee, administrator, employee or agent of a facility shall not abuse or neglect a resident. B. Based on observation, interview, and record review the facility failed to maintain a resident bathroom wall heater and bathroom floor tile in safe condition for two residents (R8, R11) of 20 residents reviewed for environmental conditions in the sample of 21. R8 and R11 are not on the sample. . The facility's Maintenance Services Policy (04/2017) documents "1. Maintenance department is responsible for maintaining the buildings, grounds, and equipment in a safe manner at all times. 2. It is the job of all staff to identify areas of concern regarding maintenance of the building." On 05/16/18 at 2:30PM, R8 and R11's resident bathroom's wall heating unit was missing the front cover leaving sharp and jagged edges exposed, and the bathroom floor tile had a hole measuring 5.5 (five and one-half) inches in length, 1.75 (one and three-quarters) inches at the widest width,	S9999			

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S9999	Continued From page 5 and 3/8 (three-eighths) inch deep. On 5/16/18 at 2:30pm, V7, Maintenance Director, confirmed the missing front cover of the heater exposing sharp and jagged edges and the missing chunk of floor tile. V7 stated these areas could be hazardous to residents using the bathroom. V7 stated (V7) was unaware of these conditions, and that work orders had not been completed for them. V7 provided the work orders and none were present for the heater or floor tile. On 5/16/18 at 2:35pm, V14, Certified Nursing Assistant, stated R8 and R11 use the resident bathroom. (B)	S9999			