

Illinois Department of Public Health

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| STATEMENT OF DEFICIENCIES<br>AND PLAN OF CORRECTION | (X1) PROVIDER/SUPPLIER/CLIA<br>IDENTIFICATION NUMBER:<br><br><b>IL6000186</b> | (X2) MULTIPLE CONSTRUCTION<br>A. BUILDING: _____<br><br>B. WING: _____ | (X3) DATE SURVEY<br>COMPLETED<br><br><b>07/26/2018</b> |
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NAME OF PROVIDER OR SUPPLIER

STREET ADDRESS, CITY, STATE, ZIP CODE

**AMBASSADOR NURSING & REHAB CENTER**

**4900 NORTH BERNARD  
CHICAGO, IL 60625**

| (X4) ID<br>PREFIX<br>TAG | SUMMARY STATEMENT OF DEFICIENCIES<br>(EACH DEFICIENCY MUST BE PRECEDED BY FULL<br>REGULATORY OR LSC IDENTIFYING INFORMATION)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | ID<br>PREFIX<br>TAG | PROVIDER'S PLAN OF CORRECTION<br>(EACH CORRECTIVE ACTION SHOULD BE<br>CROSS-REFERENCED TO THE APPROPRIATE<br>DEFICIENCY) | (X5)<br>COMPLETE<br>DATE |
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| S9999                    | <p><b>Final Observations</b></p> <p>Statement of Licensure Violation:<br/>1 of 1</p> <p>300.610a)<br/>300.1210b)<br/>300.1210d)3)<br/>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</p> | S9999               |                                                                                                                          |                          |

**Attachment A**  
**Statement of Licensure Violations**

Illinois Department of Public Health

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

TITLE

(X6) DATE

Illinois Department of Public Health

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| NAME OF PROVIDER OR SUPPLIER<br><br><b>AMBASSADOR NURSING &amp; REHAB CENTER</b> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                               | STREET ADDRESS, CITY, STATE, ZIP CODE<br><b>4900 NORTH BERNARD<br/>CHICAGO, IL 60625</b>                                 |  |                                                        |
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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>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. (A, B) (Section 2-107 of the Act)</p> <p>This Requirement is not met as evidenced by:</p> <p>Based on observation, interview and record review, the facility failed to provide physician-ordered pain medications prior to performing wound care for 1 of 13 residents (R95) reviewed for pain from a sample of 28 residents. This failure caused R95 to endure</p> | S9999                                                                         |                                                                                                                          |  |                                                        |

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| S9999                                                                 | <p>Continued From page 2</p> <p>excruciating pain during wound care procedures for a facility-acquired stage-4 pressure sores.</p> <p>Findings include:</p> <p>Per facility face sheet dated 7/25/18, R95 is an 82 year old resident with diagnoses in part but not limited to Parkinson's Disease, Type 2 Diabetes Mellitus, Transient Cerebral Attack, and Generalized Muscle Weakness.</p> <p>R95's BIM (Brief Interview for Mental Status) score was unable to be recorded on the latest MDS (minimum data set) dated 6/16/18 as it shows severe cognitive impairment.</p> <p>On 7/24/18 at 9:30 AM V5 (Wound Care nurse) and V6 (Certified Nurses Aide) were prepared to conduct wound care on R95 who was in a supine position with head of bed at 45 degrees. Resident was turned to her right side by V6(C.N.A) and R95 was audibly moaning and groaning with a grimacing facial expression. V5 and V6 did not ask R95 if she was okay and proceeded as V5 peeled off the sacral dressing as R95's moaning grew louder. The exposed wound revealed a softball sized wound with purplish darkened edges. Asked to describe the wound, V5 stated, "It's a stage 4 pressure injury of the sacrum. She's been on hospice for six months but she got this wound in the facility. It last measured 4.5 X 7.5 X 0.4 centimeters deep has undermining from 12:00 to 12:00 and tunneling between 9:00 and 10:00. She has about 30 percent slough which has decreased to 25 percent slough wound edges are unattached. She also has a DTI (Deep Tissue Injury) on her left toe. Hospice comes about once a week every Monday. It's really a non healing wound. The size has increased and there's more tunneling. I pack it with betadine</p> | S9999                                                                            |                                                                                                                          |                                                 |

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| S9999                                                                            | <p>Continued From page 3</p> <p>gauze and cover it with foam dressing. At the end of treatment a wedge cushion was placed on resident's left side at 9:54 am.</p> <p>V5 proceeded to show wound of left big toe and placed betadine to left open toe area. Asked if R95 is in pain, V5 stated, "She's like that. She got something at 6 AM." Asked about a gauze covering the left upper ankle area V5 stated, "Its just a foam cover to protect her foot. she doesn't have a wound there. Asked if it can be seen, V5 removed the gauze cover to reveal a wound and again R95 moaned aloud but continued on with the procedure. V5 stated, "It looks like the dressing was not effective so I have to measure it and document this new wound. It measures 0.5 cm x 0.3 x no depth. It's non-blanchable redness located on left foot upper dorsal foot. I use a protective dressing to put over it.</p> <p>At 10:01 AM after the completion of the wound treatments, V5 (Wound care nurse) asked her CNA (V6) to go out and ask the floor nurse if she can be given anything in between (meaning pain medications).<br/>Asked what they should do when a resident shows signs and symptoms of pain, V5 stated, "I was told she got something at 6:00 AM. I asked V6 to ask the nurse to get an order."<br/>Asked again what she would do if R95 was exhibiting signs and symptoms of pain, V5 repeated, "I was told she got something at 6:00."</p> <p>R95's Physician order sheet dated 7/25/18 shows: "Acetaminophen (Tylenol) 325 mg. Give 2 tablets by mouth every 6 hours as needed for elevated temperature but not specific to wound care. There were no other physician orders received to pre-medicate R1 prior to his daily wound care procedures.</p> | S9999                                                                         |                                                                                                                          |  |                                                        |

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| S9999                                                                            | Continued From page 4<br><br>Further review of R95's MAR (Medication Administration Records) for June 2018 and July do not show any type of pain medication given to R1 prior to wound care.<br><br>Review of R95's current care plans do not address pain related to pressure sore treatments.<br><br>7/25/18 interview at 11:00 AM with V2 (Director of Nursing) states, "I expect that the nurses treat pain and manage pain for every resident experiencing pain. Depending on the resident condition as each is individual, nurses should evaluate and treat pain as they see it. If their current pain regime isn't working, it should be re evaluated and obtain needed pain medications from the doctor."<br><br>7/25/18 interview at 3:00 PM with V11(Physician) states, I'm the hospice doctor on the purple team where we see a group of patients but I am familiar with ( R95). Our goal is supporting the family, managing end of life issues, and yes pain management is one of those as our objective is to keep the resident comfortable and pain free. I recommend that before wound care they (staff) pre-medicate any resident at least one hour prior to conducting any wound care. There are a couple of options staff can do if the patient is experiencing pain during wound care and one of them would be (and depending on how far along they are with the wound care) either finish the wound care if almost done or give more pain medication if it is within the timeframe the nurses can give more. If she was already exhibiting signs and symptoms of pain then I would not have started the procedure at all. Stage 3 or 4 pressure ulcers are very painful. I believe she | S9999                                                                                    |                                                                                                                          |  |                                                        |

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| S9999                                                                 | <p>Continued From page 5</p> <p>should have had the Roxanol 5 mg upon admission to hospice as that is a standing order for all our patients and I see as I have her chart in front of me that that should be part of her medications the staff should have been providing.</p> <p>Review of facility medication administration records for June and July of 2018 do not show any pain medications administered prior to the wound care procedure conducted on 7/25/18.</p> <p>Facility's undated policy titled, Management of Pain" states, "Our mission is to facilitate resident independence, promote resident comfort and preserve resident dignity. The purpose of this policy is to accomplish that mission through an effective pain management program, providing our residents the means to receive necessary comfort, exercise greater independence, and enhance dignity and life involvement. We will achieve these goals through: promptly and accurately assessing and diagnosing pain; encouraging residents to self report pain; aggressively assessing pain in nonverbal and cognitively impaired residents; Monitoring treatment efficacy and side effects; Monitoring and minimizing anticipated pain when possible; Using non-pharmacological and complimentary and alternative medicine when appropriate. Nursing observation is an important part of the pain assessment, especially in the non verbal resident. Nursing will observe behaviors that may indicate pain in the nonverbal or cognitively impaired resident. Pain may be indicated when there are changes in the following: facial expressions, vocal behaviors, body movements, routines, mental status."</p> <p>Abstract literature from "Ostomy Wound</p> | S9999                                                               |                                                                                                                          |  |                                              |

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| S9999                                                                 | Continued From page 6<br><br>Management" dated 2009 states in part, "Pain is an ever-present problem in patients with pressure ulcers. The literature established that 1) pressure ulcers cause pain; 2) pain assessment was typically found to be self-reported using different versions of the McGill Pain Questionnaire, Faces Rating Scale, or Visual Analog Scale; 3) pain assessment instruments should be appropriate to patient cognitive level and medical challenges; 4) in some cases, topic medications can ease pain and although information on systemic medication is limited, pain medications have been found to negatively affect appetite; and 5) wound treatment is painful, pain on nutrition, and pressure ulcer pain considerations for special groups (e.g., children, end-of life patients, and bariatric patients.) The NPAP (National Pressure Ulcer Advisory Panel) presents this white paper as the current scientific knowledge base on the topic.<br><br>Pain is an ever-present problem in patients with pressure ulcers. As a protective physiologic mechanism, pain is defined as an unpleasant sensory and emotional experience associated with actual or potential tissue damage. Irrespective of a patient's age or health status, pressure ulcer pain needs to be assessed and treated because it has widespread physical and psychosocial implications for the patient, family and clinician. Pathophysiology of Pressure Ulcer Pain: Pressure ulcer pain may be caused by tissue trauma from sustained loads, inflammation, damaged nerve endings, infection, dressing changes, debridement, operative procedures, and other treatments. The skin has more sensory nerves than any other body organ. As the pressure ulcer cellular damage expands, chemicals are released that irritate nociceptive nerve terminals. Nociceptive pain is an appropriate physiological response to a painful | S9999                                                               |                                                                                                                          |                          |                                              |

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