

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: IL6004477	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED C 03/10/2021
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NAME OF PROVIDER OR SUPPLIER HILLTOP SKILLED NSG & REHAB	STREET ADDRESS, CITY, STATE, ZIP CODE 910 WEST POLK STREET CHARLESTON, IL 61920
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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
S 000	Initial Comments Complaint Investigation 2161466/IL131493 2161548/IL131591	S 000		
S9999	Final Observations Statement of Licensure Violations 300.610a) 300.1010h) 300.1210b) 300.1210c) 300.1210d)2) 300.1210d)3) 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 300.1010 Medical Care Policies h) The facility shall notify the resident's physician of any accident, injury, or significant change in a resident's condition that threatens the health,	S9999	Attachment A Statement of Licensure Violations	

Illinois Department of Public Health LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
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S9999	<p>Continued From page 1</p> <p>safety or welfare of a resident, including, but not limited to, the presence of incipient or manifest decubitus ulcers or a weight loss or gain of five percent or more within a period of 30 days. The facility shall obtain and record the physician's plan of care for the care or treatment of such accident, injury or change in condition at the time of notification.</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 resident to meet the total nursing and personal care needs of the resident.</p> <p>c) Each direct care-giving staff shall review and be knowledgeable about his or her residents' respective resident care plan.</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>2) All treatments and procedures shall be administered as ordered by the physician.</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</p>	S9999		

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NAME OF PROVIDER OR SUPPLIER STREET ADDRESS, CITY, STATE, ZIP CODE

HILLTOP SKILLED NSG & REHAB

**910 WEST POLK STREET
CHARLESTON, IL 61920**

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S9999	<p>Continued From page 2</p> <p>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. (Section 2-107 of the Act)</p> <p>These requirements were not met as evidenced by:</p> <p>Based on interview and record review, the facility failed to identify a change in condition, failed to provide oversight of self-care to the feet, and failed to assess and notify the physician of refusal of care for R4. These cumulative failures resulted in avoidable wound deterioration leading to tissue necrosis of R4's right foot. R4 is one resident (R4) of six residents reviewed for wounds in the sample list of six.</p> <p>Findings include:</p> <p>R4's undated Face Sheet documents the following diagnoses for R4: arteriosclerotic heart disease of native coronary artery without angina pectoris, chronic combined systolic (congestive) and diastolic (congestive) heart failure, type 2 diabetes mellitus without complications, ischemic cardiomyopathy, ventricular tachycardia, hypertensive heart disease with heart failure, unspecified arteriosclerosis of autologous vein bypass graft(s) of the extremities, bilateral legs, long term (current) use of insulin, long term (current) use of anticoagulants.</p> <p>R4's Minimum Data Set dated 1/5/2021, documents diagnoses as diabetes and unspecified arteriosclerosis of autologous vein bypass graft of the extremity, bilateral legs. R4's</p>	S9999		

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S9999	<p>Continued From page 3</p> <p>hospital discharge Skin Assessment sheet dated 11/1/2017, documents a diabetic foot ulcer.</p> <p>The facility's Preventative Skin Care Policy dated 9/15/19, documents it is the responsibility of the Charge Nurse and the Nursing Assistant to ensure that preventative skin care is completed.</p> <p>The facility's Foot Assessment Policy dated 9/15/19, documents all residents with Diabetes will have a Foot Assessment completed upon admission and quarterly and it is the responsibility of the Charge Nurse to ensure that an assessment is completed on each resident as indicated and if issues are identified appropriate treatment/follow-up will be initiated.</p> <p>R4's Initial Wound Evaluation and Management Summary dated 12/31/2019, documents diabetic wound of the right, plantar foot for at least 1-day duration. R4's Wound Evaluation and Management Summaries dated 12/31/2019, documents diabetic wound of right plantar foot and 1/7/2020 (same area), 1/14/2020 diabetic wound of the right foot, 1/21/2020 diabetic wound of the right heel, 1/28/2020 diabetic wound of the right foot, 2/11/2020 diabetic wound of the right, plantar foot, 2/18/2020 diabetic wound of the right, plantar foot.</p> <p>R4's Skin Inspection Assessments dated throughout January 2021, February 2021, March 2021, do not document any right foot issues for R4. V6 (Licensed Practical Nurse/LPN) completed Skin Inspection Assessments for R4 on 2/1/21 and 2/15/21, both documenting R4's skin as "clear" with no mention of R4's right foot/ankle.</p> <p>R4's Care Plan dated 3/5/2021, documents for</p>	S9999		

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S9999	<p>Continued From page 4</p> <p>focus area Diabetes Mellitus, to check all of body for breaks in skin and treat promptly as ordered by doctor and refer to podiatrist/foot care nurse to monitor/document foot care needs; (initiated 11/1/2017); for focus area Self-care Deficit, shower/bed bath at least two times a week and as needed (initiated 1/23/2020); for focus area Potential for impaired skin integrity, to observe skin integrity during AM/PM care, notify doctor promptly of skin breakdown, bath/shower per schedule, evaluate skin weekly (all initiated 11/1/2017). R4's bath sheets dated 2/4, 2/9, 2/16, 2/18/21, document R4 refused. R4's bath sheets dated 2/11, 2/23, 2/25/21, document refused, gives self-partial bed bath.</p> <p>R4's Physician Order Sheet dated 3/4/21, documents an order to apply moisturizer to bilateral lower extremities twice a day and as needed for dry diabetic foot every day and evening, start date 1/15/2020, discontinue 3/5/2021. R4's Treatment Administration Record (TAR) dated December 2020, document this treatment as completed on all days/evenings in December except 12/14/20 (days); January 2021, all days/evenings as completed; February 2021, all days/evenings completed except 2/4/21 (evening); and March 2021, all days/evenings completed from the first through the fifth of the month. There is no order in R4's medical record that states R4 may self-apply moisturizer to R4's bilateral lower extremities.</p> <p>R4's nursing notes dated 1/12/21 through 3/7/21, do not document the doctor being notified of refusals for care.</p> <p>On 3/9/21 at 12:19 PM V2 (Director of Nursing/DON) stated when the nurses are charting body skin assessments as completed</p>	S9999		

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S9999	<p>Continued From page 5</p> <p>then the whole body should be viewed/assessed. V2 stated the nurses should have been documenting R4's treatment refusals and should have let the doctor know R4 was refusing treatment. V2 stated, "R4 never saw the doctor for that foot (right) and when we finally saw R4's foot, R4 was sent out. We smelled an odor in R4's room last week. When we talked to R4 on Friday, R4 stated R4 got band aids from R4's brother and was dressing R4's foot himself." V2 stated the nurses should have been documenting R4's treatment refusals and should have let the doctor know R4 was refusing treatment.</p> <p>On 3/10/21 at 11:24 AM and 12:14 PM, V5 (LPN) stated V5 did not check R4's feet because R4 was going out to smoke. V5 stated, "For a skin inspection we are supposed to look at everything but R4 wouldn't let me (V5) look at R4's feet. R4 is coherent and when I (V5) asked R4 if we should look at anything else, R4 said 'no.'" V5 stated V5 did check R4's hands and gave R4 insulin so technically R4 didn't refuse all care. V5 stated V5 is aware R4 is diabetic, R4 gets insulin. V5 stated, "If someone is diabetic, we should focus on joints areas, heels, coccyx, anywhere that sores can form." V5 stated V5 should have reported refusals to the doctor. V5 stated, "In the Treatment Administration Record (TAR), the lotion for R4 is PRN (as needed) and I (V5) always encourage R4 to do it so I (V5) trust him (R4). R4's Skin Inspection Assessments dated 1/11/21 and 1/18/21, completed by V5, both document R4's skin as "clear" with no mention of R4's right foot/ankle.</p> <p>On 3/10/21 at 1:09 PM V7 (LPN) stated, "If a resident refuses care, we should notify the doctor. I (V7) did not notify the doctor and I (V7) don't have a reason why I didn't. Refusals (of care)</p>	S9999		

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S9999	<p>Continued From page 6</p> <p>should be documented in the nursing notes. R4 wouldn't let me (V7) put lotion on R4's feet only from the top of his ankle socks to bottom of knees." V7 stated V7 did not document R4's refusal of moisturizer and V7 did not let anyone know about it. V7 stated V7 is aware R4 is diabetic and V7 knows what to look at, they (diabetics) are prone to getting sores on their feet. R4's Skin Inspection Assessment dated 2/25/21, completed by V7, document R4's skin as "clear" with no mention of R4's right foot/ankle.</p> <p>R4's Wound Care Progress Notes - Final Report - from the hospital dated 3/6/2021, documents: skin - multiple areas of necrosis to the right foot including the entire fifth toe and lateral aspect of the foot, the plantar aspect of the foot near the area of the first metatarsal head, the medial aspect of the first metatarsal head and great toe, and just proximal to the anterior/lateral/posterior ankle. The foot is malodorous. There is no active exudate, however, several of the necrotic areas are very boggy; Peripheral vascular - bilateral lower extremities warm to cool from knees to toes, skin dry and flaking, sparse to no hair growth, toenails are thickened and yellow, distal aspect of right foot is dusky with delayed capillary refill, right dorsalis pedis pulse not palpable or audible with handheld Doppler (ultrasound), right posterior tibial pulse is not palpable, but is audible with Doppler; assessment/plan - patient has extensive necrosis to the right foot and signs of Peripheral Artery Disease, recommend computerized tomography (CT) to lower extremities to further assess arterial blood flow status to guide decision making regarding debridement/amputation, concerned foot may not be salvageable at this point.</p> <p>On 3/10/21 at 10:24 AM V3 (Medical Doctor)</p>	S9999		

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S9999	Continued From page 7 stated, "R4 is diabetic and a smoker and R4 has had issues with both feet from diabetes. The nurses did not inform me (V3) they were not putting moisturizer on R4's feet. The nurse should have notified me (V3) if R4 was refusing lotion to his feet. V3 stated if the nurses were applying the lotion twice a day, they should have seen R4's feet and what was going on with them. Feet should be assessed when someone has diabetes and if the nurses had been doing the lotion all along, I (V3) don't think R4's foot would have gotten so bad because they could have called me (V3) sooner and R4 could have gotten treatment." (A)	S9999			