

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  IL6004212	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING: _____	(X3) DATE SURVEY COMPLETED  C 08/10/2022
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NAME OF PROVIDER OR SUPPLIER  ILLINI HERITAGE REHAB & HC	STREET ADDRESS, CITY, STATE, ZIP CODE 1315 CURT DRIVE, SUITE B CHAMPAIGN, IL 61821
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S 000	Initial Comments  Complaint #2266043/IL149658	S 000		
S9999	Final Observations  Statement of Licensure Violations  300.610a) 300.696d)4) 300.1210b) 300.1610a)1) 300.1620a)  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 300.696 Infection Prevention and Control  d) Each facility shall adhere to the following guidelines and toolkits of the Centers for Disease Control and Prevention, United States Public Health Service, Department of Health and Human Services, Agency for Healthcare Research and	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>Quality, and Occupational Safety and Health Administration (see Section 300.340):</p> <p>4) Guideline for Prevention of Surgical Site Infection</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>Section 300.1610 Medication Policies and Procedures</p> <p>a) Development of Medication Policies</p> <p>1) Every facility shall adopt written policies and procedures for properly and promptly obtaining, dispensing, administering, returning, and disposing of drugs and medications. These policies and procedures shall be consistent with the Act and this Part and shall be followed by the facility. These policies and procedures shall be in compliance with all applicable federal, State and local laws.</p> <p>Section 300.1620 Compliance with Licensed Prescriber's Orders</p>	S9999		

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S9999	<p>Continued From page 2</p> <p>a) All medications shall be given only upon the written, facsimile, or electronic order of a licensed prescriber. The facsimile or electronic order of a licensed prescriber shall be authenticated by the licensed prescriber within 10 calendar days, in accordance with Section 300.1810. All orders shall have the handwritten signature (or unique identifier) of the licensed prescriber. (Rubber stamp signatures are not acceptable.) These medications shall be administered as ordered-by the licensed prescriber and at the designated time.</p> <p>These requirements are not met as evidenced by:</p> <p>Based on observation, interview and record review, the facility failed to follow physician orders for 3 of 3 residents (R1, R2, R3) reviewed for nursing care in the sample of 3. These failures resulted in R1 being admitted to a local hospital with infected chest incision and right lower leg infection requiring intravenous antibiotic medication.</p> <p>Findings include:</p> <p>R1's Physician Order Sheet (POS) dated 5/26/22 through 5/31/22, document R1's diagnoses as: Moderate to Severe Mitral Regurgitation, Non-stemi Myocardial Infarction, and Non-Rheumatic Aortic Valve Insufficiency. R1's Emergency Department notes dated 5/31/22, document R1's diagnoses as: Hypertension, Coronary Artery Disease, recent Triple Bypass and Mitral Valve Repair.</p> <p>R1's hospital discharge transfer orders dated 5/26/22, document R1 going to a Skilled Nursing facility on this day with a diagnosis of status post Coronary Artery Bypass Graft. R1's incomplete</p>	S9999		
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S9999	<p>Continued From page 3</p> <p>Nursing Admission Assessment dated 5/26/22, documents R1 arrived at the facility at 1:45 PM. There is no documentation in R1's Nursing notes for R1 admission. The only Nursing Notes in R1's medical record are on 5/28/22 at 2:40 PM, 5/29/22 at 3:30 PM, 5/29/22 2-10 PM, 5/30/22 at 1:40 PM, 5/30/22 at 10:00 PM, 5/31/22 at 4:00 AM, and 5/31/22 at 10:50 AM. R1's Medical Administration Record (MAR) dated 5/26/22, documents no medications were given to R1 on this date. The medications include: Citrucel, Pantoprazole, Atorvastatin, Certrazine, Finasteride, Warfarin, Docusate, Ferrous Sulfate, and Testosterone not given 5/27/22 through 5/31/22.</p> <p>R1's MAR documents an order on 5/29/22, for Clindamycin 300 milligrams (mg) by mouth three times a day for 7 days. This medication was not given on on 5/29/22. This medication was observed to be in the facility's convenience box in the medication room on 8/4/22 at 11:30 AM, having 6 capsules available for use. An order for Probiotic by mouth twice a day for 14 days was also not given on 5/29/22 and was not given on 5/30/22, noon dose. An order on 5/30/22 was given to discontinue Clindamycin (due to allergy) and start Doxycycline 100 mg by mouth twice a day for 7 days. R1's MAR documents Doxycycline only being given on 5/31/22 at 1200 noon. Doxycycline was also observed in the convenience box on 8/4/22 at 11:30 AM, having 6 capsules available for use.</p> <p>R1's discharge orders from 5/26/22 document orders for a fluid restriction of 2 liters or less in 24 hours, which there is no documentation of this order being carried out 5/26/22 through 5/31/22. There are no dietary/nutrition notes in R1's chart. Another order from R1's discharge orders</p>	S9999		

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S9999	Continued From page 4  documents to walk a minimum of three times a day. On 8/9/22 at 9:27 AM, V8 Physical Therapy Assistant (PTA) stated R1 walked 175 feet one time on 5/29/22 and walked 25 feet one time on 5/30/22. An order from R1's discharge orders documents to use the incentive spirometer 10-15 breaths every 1-2 hours, there is no documentation of this being done 5/26/22 through 5/31/22. These discharge orders also document wound care for chest tube care - wash daily and cover with dry dressing, examine wounds everyday; chest incision - use clean washcloth, wipe down chest incision once with soap and water, use another clean washcloth and rinse incision starting at the top and going down incisions, pat dry with clean towel; leg incision - clean each leg incision separately, start with lowest incision, wipe each incision from top to bottom, dry incisions with clean washcloth, leave open to air unless drainage, apply gauze 4 x 4 to any incisions where skin touches groin or draining, change everyday as needed, also apply 4 x 4 or absorbent cloth between and under breasts. There is no documentation in R1's chart documenting these orders were carried out. There is no Treatment Administration Record (TAR) in R1's medical record so no documentation of any treatments being completed.  R1's Nursing Notes dated R1 was sent to the Emergency Department (ED) on 5/31/22 at 10:50 AM due to R1 experiencing discomfort with right lower extremity with redness, swelling, and warmth. On 8/4/22 at 10:21 AM, V4 Nurse Practitioner, stated no one saw R1 from 5/26/22 until 5/31/22. V4 stated R1 should have been seen within 1-2 days especially the reason R1 was at the facility (post-coronary artery bypass graft). V4 stated R1 should have been seen	S9999		

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S9999	<p>Continued From page 5</p> <p>before 5/31/22 by myself (V4) or the doctor V5. V4 stated R1 needed to be sent to the ED due to R1's sternum surgical area looking infected and had drainage. V4 stated V4 did not look at R1's legs at that time. V4 stated V4 did not do any type of note in R1's chart about what was going on with R1. R1's ED notes dated 5/31/22, document: patient had triple bypass and mitral valve repair on 5/19/22, discharged to long term care facility on 5/26/22, sent to ED for concern for infection at the surgical sites, patient had wound care nurse see R1 over the weekend and there was concern for infection in R1's lower midsternal surgical wounds, prescribed doxycycline on 5/29/22 but has yet to receive any antibiotic, patient does have redness to the right leg and redness with some drainage from the abdomen, R1 and wife V6 noted over the weekend wound was draining and saturated through R1's shirt, R1 notes R1 has some redness to right medial calf where graft was performed.</p> <p>R1's hospital notes dated 5/31/22, document R1 admitted to the hospital with Vancomycin intravenously. R1's Hospital notes from 6/3/22 document R1's right lower leg has a Klebsiella Oxytoca infection and receiving Rocephin and Vancomycin and Ceftriaxone due to positive swab of right lower leg. These hospital notes also document R1's right lower leg was cleaned with betadine and using a scalpel, the surgical site was opened and old sutures removed, small amount of murky fluid drainage present, wound cleaned and packed with saline wet to dry dressing and plan for wound vac placement on 6/4/22.</p> <p>R1's Hospital Discharge Summary dated 6/14/22, documents R1 being in the hospital from 5/31/22 through 6/14/22 with positive blood cultures</p>	S9999		

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S9999	<p>Continued From page 6</p> <p>growing two different organisms and needing two antibiotics, vancomycin and cefnizone, wound cultures growing Klebsiella Oxytoca in right lower leg surgical site, transitioned to Keflex, placed on wound vac and went home with antibiotic and wound vac on 6/14/22.</p> <p>On 8/4/22 at 11:30 AM, V2 LPN, stated there is no treatment sheet or as needed (PRN) sheet for R1 that V2 can find. V2 stated if it wasn't charted, it wasn't done. V2 stated there is a convenience box in the medication room where there are several antibiotics and other medications for immediate use. V2 stated there is no nursing note for R1's admission and there was no complete assessment done including a body assessment. V2 stated it doesn't look like the treatment orders for R1 were clarified and they were not even being done because there is no TAR sheet to even document they were being done. On 8/8/22 at 8:45, V2 stated the Treatment Administration Record for R1 shows treatment for R1's chest wound as being done on 5/29/22 and 5/30/22 for the 2-10 PM shift but no other treatments were done.</p> <p>On 8/4/22 at 2:40 PM, V1 Administrator stated it looks like there was a failure all around for R1's admission and V1 cannot tell who did the original admission.</p> <p>On 8/4/22 at 3:25 PM, R3's wound dressing was observed with no date, time, or initials on bandages. At this same time R3 stated R3's wound dressings are not changed every day. On 8/4/22 at 3:34 PM, R2 right leg wound dressing is soaked through to the linens on R2's bed, no date, time, or initials on bandages. At this same time R2 stated R2's wound dressings do not get changed everyday.</p>	S9999		

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S9999	<p>Continued From page 7</p> <p>The facility's Resident Council Meeting Minutes notes dated 5/20/22, document "nurses not doing treatments".</p> <p>The facility's undated Nursing Documentation Guidelines Policy, documents three day documentation on every shift is required on all new admissions, MD should be notified after one missed treatment or one missed medication, be aware of facility policies and procedures on draining wounds; skin, wound, and pressure ulcer documentation - regular observations of skin surfaces, the progress, deterioration of any new problems; medication administration - the date, time, and initials of the person administering the medications is to be documented on the Medication Administration Record and PRN (as needed) sheets; fluid intake documentation - the amount of fluid consumed at each meal and between meals; treatment documentation - date and time each treatment administered, name and initial of person administering treatments, treatments should be documented on the Treatment Administration Record (TAR).</p> <p>The facility's undated Admissions Policy documents each resident shall have a complete physical examination within 72 hours after admission,</p> <p>The facility's Conformance with Physician Medication Orders Policy dated Reviewed 9/27/17, documents all medications shall be given as prescribed by the physician at the designated time.</p> <p>The facility's Medication Administration Policy date Revised 11/18/17, documents medications</p>	S9999		



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S9999	Continued From page 8  must be prepared and administered within one hour of the designated time, check medications against the resident's allergy list, and document any medication not administered for any reason on the back of the MAR with the date, the time, the medication and dosage, and reason for omission and initials.  (A)	S9999			