

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: IL6008718	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED C 09/26/2022
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NAME OF PROVIDER OR SUPPLIER SOUTH ELGIN REHAB & HCC	STREET ADDRESS, CITY, STATE, ZIP CODE 746 WEST SPRING STREET SOUTH ELGIN, IL 60177
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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
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S 000	Initial Comments Complaints: 227513/IL151382	S 000		
S9999	Final Observations Statement of Licensure Violations: 300.610a) 300.1210b)4) 300.1210c)2)3) 300.1210d)5) 300.1220 a)1)2) 300.1220b)1)2)3)7) 300.3220f) 300.3240a) Section 300.610 Resident Care Policies a) The facility shall have written policies and procedures, governing all services provided by the facility which 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. These policies shall be in compliance with the Act and all rules promulgated thereunder. These written policies shall be followed in operating the facility and shall be reviewed at least annually by this committee, as evidenced by written, signed and dated minutes of such a meeting. 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	S9999	Attachment A Statement of Licensure Violations	

Illinois Department of Public Health LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X8) DATE
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NAME OF PROVIDER OR SUPPLIER STREET ADDRESS, CITY, STATE, ZIP CODE

SOUTH ELGIN REHAB & HCC

**746 WEST SPRING STREET
SOUTH ELGIN, IL 60177**

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Continued From page 1

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:

4) All nursing personnel shall assist and encourage residents so that a resident's abilities in activities of daily living do not diminish unless circumstances of the individual's clinical condition demonstrate that diminution was unavoidable. This includes the resident's abilities to bathe, dress, and groom; transfer and ambulate; toilet; eat; and use speech, language, or other functional communication systems. A resident who is unable to carry out activities of daily living shall receive the services necessary to maintain good nutrition, grooming, and personal hygiene.

c) Each direct care-giving staff shall review and be knowledgeable about his or her residents' respective resident care plan.

2) All treatments and procedures shall be administered as ordered by the physician.

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.

d) Pursuant to subsection (a), general nursing care shall include, at a minimum, the following and shall be practiced on a 24-hour,

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S9999	<p>Continued From page 2</p> <p>seven-day-a-week basis:</p> <p>5) A regular program to prevent and treat pressure sores, heat rashes or other skin breakdown shall be practiced on a 24-hour, seven-day-a-week basis so that a resident who enters the facility without pressure sores does not develop pressure sores unless the individual's clinical condition demonstrates that the pressure sores were unavoidable. A resident having pressure sores shall receive treatment and services to promote healing, prevent infection, and prevent new pressure sores from developing.</p> <p>Section 300.1220 Supervision of Nursing Services</p> <p>a) Each facility shall have a director of nursing services (DON) who shall be a registered nurse.</p> <p>1) This person shall have knowledge and training in nursing service administration and restorative/rehabilitative nursing. This person shall also have some knowledge and training in the care of the type of residents the facility cares for (e.g., geriatric or psychiatric residents). This does not mean that the director of nursing must have completed a specific course or a specific number of hours of training in restorative/rehabilitative nursing unless this person is in charge of the restorative/rehabilitative nursing program. (See Section 300.1210(a).)</p> <p>2) This person shall be a full-time employee who is on duty a minimum of 36 hours, four days per week. At least 50 percent of this person's hours shall be regularly scheduled between 7 A.M. and 7 P.M.</p> <p>b) The DON shall supervise and oversee the</p>	S9999		

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S9999	<p>Continued From page 3</p> <p>nursing services of the facility, including:</p> <ol style="list-style-type: none"> 1) Assigning and directing the activities of nursing service personnel. 2) Overseeing the comprehensive assessment of the residents' needs, which include medically defined conditions and medical functional status, sensory and physical impairments, nutritional status and requirements, psychosocial status, discharge potential, dental condition, activities potential, rehabilitation potential, cognitive status, and drug therapy. 3) Developing an up-to-date resident care plan for each resident based on the resident's comprehensive assessment, individual needs and goals to be accomplished, physician's orders, and personal care and nursing needs. Personnel, representing other services such as nursing, activities, dietary, and such other modalities as are ordered by the physician, shall be involved in the preparation of the resident care plan. The plan shall be in writing and shall be reviewed and modified in keeping with the care needed as indicated by the resident's condition. The plan shall be reviewed at least every three months. 7) Coordinating the care and services provided to residents in the nursing facility. <p>Section 300.3220 Medical Care</p> <p>f) All medical treatment and procedures shall be administered as ordered by a physician. All new physician orders shall be reviewed by the facility's director of nursing or charge nurse designee within 24 hours after such orders have been</p>	S9999		

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S9999	<p>Continued From page 4</p> <p>issued to assure facility compliance with such orders. (Section 2-104(b) of the Act)</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 Regulations were not met as evidenced by:</p> <p>Based on observation, interview, and record review, the facility failed to ensure residents received pressure ulcer treatment as ordered by the physician. The facility also failed to follow dietitian recommendations for residents with pressure ulcers.</p> <p>This failure resulted in R2 and R4 developing pressure ulcers at the facility.</p> <p>This applies to 2 of 3 residents (R2, R4) reviewed for pressure ulcers.</p> <p>The findings include:</p> <p>1. On September 20, 2022, at 12:48 PM, R2 was lying in bed. R2's bedside table was adjacent to her bed. A lunch tray was on top of the bedside table. R2 was unable to reach her silverware or food due to the distance of the food tray from the resident. R2 was not able to make position changes in bed without staff assistance. R2 was not able to be interviewed due to her cognitive status. R2 was observed multiple times on September 20 and 21, 2022, and was never observed in another position than lying on her</p>	S9999		

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S9999	<p>Continued From page 5</p> <p>back in bed, with the head of the bed slightly elevated. No staff were observed changing R2's position in bed or getting her up in a chair.</p> <p>R2's undated face sheet shows R2 was admitted to the facility on June 4, 2022. R2 has multiple diagnoses including, hemiplegia following cerebral infarction, chronic kidney disease, hypertension, heart failure, diabetes, anemia, and asthma.</p> <p>R2's MDS (Minimum Data Set) dated August 22, 2022, shows R2 has severe cognitive impairment, requires extensive assistance with eating and dressing, and is totally dependent on facility staff for all other ADLs (Activities of Daily Living), including bed mobility.</p> <p>The facility's undated Weekly Wound Report shows R2 was admitted to the facility with a right heel pressure ulcer. The report continues to show R2 developed a right lateral ankle pressure ulcer measuring 1.3 cm. (Centimeters) x 0.6 cm. x 0 cm (Length x Width x Depth), an unstageable left heel pressure ulcer measuring 1.9 cm. x 2.7 cm. x 0.2 cm., and a right lower lateral calf unstageable pressure ulcer measuring 7.4 cm. x 2.2 cm. x 0.2 cm. The facility could not provide the date of onset for the three pressure ulcers R2 developed at the facility since her admission on June 4, 2022, despite multiple requests.</p> <p>The following physician orders are present in the medical record:</p> <p>September 7, 2022: "Sponge boot to right heel." September 14, 2022: "[Heel protector boot] left heel." September 21, 2022: "[Heel protector boot] left heel."</p>	S9999		
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S9999	<p>Continued From page 6</p> <p>The facility does not have documentation to show heel protector/sponge boots were applied to R2's feet daily as ordered by the physician."</p> <p>Documentation from the facility's Monthly Weight Grid dated September 9, 2022, shows the following weights for R2:</p> <p>June 2022 - 120.0 pounds July 2022 - 128.0 pounds August 2022 - 126.0 pounds September 9, 2022 - 115 pounds (-8.73 percent weight loss in one month)</p> <p>On August 23, 2022, V4 (Dietitian) recommended to increase R2's sugar-free protein supplement to four times a day and start a frozen fortified ice cream supplement three times a day. Facility documentation shows V4's recommendation dated August 23, 2022, was not carried out by the facility until September 1, 2022, and R2 experienced a weight loss of 11 pounds between August 2022 and September 9, 2022.</p> <p>On September 21, 2022, at 11:47 AM, V1 (AIT-Administrator in Training) said, the physician order for a dietitian consult was put on the 24-hour report by the nurse, but never relayed to the dietitian.</p> <p>On September 22, 2022, at 1:50 PM, V4 (Dietitian) said, "When I put in dietary recommendations, I expect the staff to follow up immediately. The addition of the frozen nutritional dessert would have given [R2] 870 extra calories, and the sugar-free supplement was to give her extra protein because she developed pressure ulcers at the facility. The previous month there was one wound and then</p>	S9999		

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S9999	<p>Continued From page 7</p> <p>there were four pressure ulcers. I increased the protein for wound healing."</p> <p>On September 22, 2022. at 3:56 PM, V11 (Wound Physician) said, "If the dietitian orders a nutritional supplement for wound healing, the facility needs to do that. Why am I ordering heel protector boots if they are not going to put them in use? I go in the room and the resident does not have them on, so I order them again and again. I ordered the protocol for her to be moved every two hours to keep her from getting pressure ulcers. If she doesn't get repositioned, she will get pressure ulcers. With no DON (Director of Nursing) to follow through on the orders, how can you improve the pressure ulcers?"</p> <p>2. R4's undated face sheet shows R4 was admitted to the facility on May 20, 2022. The facility's nursing progress notes show R4 was transferred from the facility to the local hospital on August 24, 2022, and did not return to the facility. R4 had multiple diagnoses including, cerebral infarction due to stenosis of the left carotid artery, dysphagia, hemiplegia, major depressive disorder, seizures, and encephalopathy.</p> <p>R4's MDS dated May 31, 2022, shows R4 had moderately impaired cognition, required extensive assistance with dressing and eating, and was totally dependent on facility staff for all other ADLs.</p> <p>Physician orders dated May 20, 2022, show, "Turn and reposition per facility protocol. The facility does not have documentation to show R4 was turned and repositioned July 1-31, 2022, and August 5, 10, 13, 14, 19, 20, and 21, 2022.</p> <p>Physician orders dated May 20, 2022 show,</p>	S9999		

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S9999	<p>Continued From page 8</p> <p>"Daily skin checks." The facility does not have documentation to show R4 received daily skin checks July1-31, 2022, and August 3, 13, 14, and 21, 2022.</p> <p>Facility documentation shows R4 developed an unstageable pressure ulcer on his left hip, and a DTI (Deep Tissue Injury) to his right foot on August 3, 2022. R4 was seen by V11 (Wound Doctor) at the facility on August 3, 2022. V11 documented wound treatment, including surgical debridement of R4's two pressure ulcers, and "Plan to discuss patient's abnormal BMI (Body Mass Index) with current dietitian. It the patient does not currently have a dietitian following, recommend dietary consultation for abnormal BMI."</p> <p>Physician orders dated August 3, 2022, show, "Cleanse left lateral hip with normal saline and apply calcium alginate with Silvadene and cover with foam dressing with border daily." The facility does not have documentation to show R4 received the wound care as ordered on August 7, 21, and 22, 2022.</p> <p>Physician orders dated August 3, 2022 show, "Right distal medial foot - clean with normal saline and apply betadine daily for 30 days." The facility does not have documentation to show the wound treatment was completed as ordered on August 7, 21, and 22, 2022.</p> <p>Physician orders dated August 3, 2022 show, "Apply sponge boots to bilateral lower extremities." The facility does not have documentation to show sponge boots were applied to R4.</p> <p>The facility's Monthly Weight Grid, dated August</p>	S9999		

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S9999	<p>Continued From page 9</p> <p>25, 2022 shows the following weights for R4:</p> <p>April 2022 - 158.00 pounds May 2022 - no weight recorded June 2022 - no weight recorded July 2022 - 134.20 pounds (-15.06 percent weight loss in three months) August 2022 - 120.00 pounds (-10.58 percent weight loss in one month)</p> <p>Facility documentation shows V4 (Dietitian) ordered 120 ml (Milliliters) of nutritional supplement three times a day due to R4's significant weight loss on July 21, 2022.</p> <p>On September 22, 2022, at 1:06 PM, V1 (AIT) said V4's recommendation for 120 ml of nutritional supplement three times a day was never carried out by the facility. V1 said, "The recommendation by the dietitian was never sent to the physician or called to him, so it was never started."</p> <p>On September 22, 2022, at 1:54 PM, V4 (Dietitian) said, "When I ordered the nutritional supplement for [R4], I was looking to increase his calories because he was losing weight, and I wanted to stop the weight loss. The supplement I ordered is very high in calories. He would have gotten an extra 720 calories a day had he been given the supplement." V4 continued to say all residents with weight loss issues are supposed to filter through the Director of Nursing position. "Because the facility does not have a Director of Nursing, there is no one specifically to report the weight loss issues to, and no specific person to follow up and ensure orders are started on the residents."</p> <p>The Facility Data Sheet dated September 20,</p>	S9999		
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S9999	<p>Continued From page 10</p> <p>2022 shows the facility census as 60 residents.</p> <p>The Facility Data Sheet continues to show no staff member identified as the Director of Nursing.</p> <p>During observations in the facility on September 20 and 21, 2022, there was no DON working at the facility.</p> <p>On September 20, 2022, V1 (AIT-Administrator in Training) said there is no DON currently working in the facility. V1 said, "We have not had a DON working at the facility for about three years. We had a gentleman who took the job, but he only lasted three days." V1 continued to say the facility does not have an ADON (Assistant Director of Nursing).</p> <p>On September 26, 2022, at 10:12 AM, V1 said, the facility has not applied for a waiver for the DON position from the State of Illinois as they did not believe they would qualify. V1 continued to say, "We have spoken to RN's (Registered Nurses) but none accepted the position. We have been looking for traveling DON's. We have an RN that comes a few nights a week to help."</p> <p>The facility's undated Director of Nursing job description was provided by V1 on September 26, 2022. The Director of Nursing job summary shows: "To plan, organize, develop and direct the overall operation of our Nursing Service Department in accordance with current federal, state and local standards, guidelines, and regulations that govern our facility and as may be directed by the Administrator and the Medical Director to ensure that the highest degree of quality care is maintained at all times."</p> <p>Facility documentation dated August 24, 2022</p>	S9999		

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S9999	<p>Continued From page 11</p> <p>shows R4 developed the following five additional pressure ulcers on August 24, 2022:</p> <p>Unstageable DTI of the left medial ankle measuring 2.6 cm. x 1.5 cm. x not measurable depth Unstageable DTI of the left heel measuring 3.5 cm. x 4.6 cm. x not measurable depth Unstageable DTI of the right heel measuring 2.6 cm. x 2.3 cm. x not measurable depth Unstageable DTI of the right hip measuring 7.9 cm. x 7.9 cm. x not measurable depth Unstageable DTI of the left upper hip measuring 3.5 cm. x 7.8 cm. x not measurable depth</p> <p>On September 22, 2022 at 3:40 PM, V11 (Wound Care Physician) said, "Nutrition is one of many issues that caused these pressure ulcers, though it is not just the nutrition. If you don't do the wound care, then that is not right. I expect them to do the wound care as ordered. You have to turn the resident. You have to apply the foam boots; you have to do the care."</p> <p>The facility's policy entitled "Decubitus Care/Pressure Areas" revised "1/18" shows: "Policy: It is the policy of this facility to ensure a proper treatment program has been instituted and is being closely monitored to promote the healing of any pressure ulcer. Responsibility: Licensed Nursing Personnel. Procedure: 1) Upon notification of skin breakdown, the QA (Quality Assurance) form for Newly Acquired Skin Condition will be completed and forwarded to the Director of Nurses. ...4) Notify the physician for treatment orders. The physician's orders should include: i) Type of treatment, ii) Frequency treatment s to be performed, iii) How to cleanse, if needed, iv) Site of application, v) no PRN (As needed) order is acceptable for a pressure ulcer.</p>	S9999		
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S9999	Continued From page 12 The order must have specific frequencies. Vi) Initiate physician order on treatment sheet. 5) Documentation of the pressure area must occur upon identification and at least once each week on the TAR (Treatment Administration Record) or Wound Documentation Form. ...7) Nursing personnel are to notify dietary personnel of any pressure areas to seek nutritional support and monthly reviews by the Registered Dietitian." (B)	S9999		