

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  IL6001184	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  02/08/2022
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NAME OF PROVIDER OR SUPPLIER  BRITISH HOME, THE	STREET ADDRESS, CITY, STATE, ZIP CODE 8700 WEST 31ST STREET BROOKFIELD, IL 60513
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S 000	Initial Comments  Annual Health Survey	S 000		
S9999	Final Observations  Statement of Licensure Violations:  300.610 a) 300.1210 b) 300.1620 a)  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 300.1210 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.	S9999	Attachment A Statement of Licensure Violations	

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X8) DATE
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S9999	<p>Continued From page 1</p> <p>Section 300.1620 Compliance with Licensed Prescriber's Orders</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 their policy and procedure for pain management and medication administration by not administering the scheduled pain medication as prescribed. This failure applied to one (R133) of one residents reviewed for pain management. This failure resulted in R133 experiencing pain rated at a 9/10 as a result of being given her pain medication two hours late related to her diagnoses of Laminectomy, Joint Replacement Surgery and Chronic Pain Syndrome.</p> <p>Findings include:</p> <p>On 2/07/22 at 10:18 AM, surveyor observed R133 in R133's room moaning and grimacing in pain. R133 stated R133 was admitted to the facility last Wednesday. R133 stated R133's pain level is at a 9, and R133 has been waiting since 8:45 AM to receive R133's scheduled analgesic pain narcotic as prescribed. R133 stated R133 last received</p>	S9999		

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S9999	<p>Continued From page 2</p> <p>R133's pain medication at 2AM, instead of midnight as scheduled. R133 was groaning and stated R133's pain feels like electrical shocks going through R133's legs. R133 stated R133 is at the facility to receive therapy so R133's health can improve, but due to the facility not administering R133's pain medication timely, R133 can't get up and go to therapy or do anything else as R133 normally would. R133 stated some staff don't even know when R133's pain medication is scheduled, and believe it is to be administered as needed. R133 stated R133 should be receiving R133's pain medication every six hours. R133 stated it takes an hour for R133's pain medication to kick in, therefore, receiving it late causes R133 to experience a significant amount of pain.</p> <p>R133 stated during a Care Plan meeting on Thursday 2/03/2022, with V16 (R133's Power of Attorney) and V2 (Director of Nursing) present, R133's pain medication regimen was discussed, and it was decided R133's pain medication would be scheduled every 6 hours, after R133 reported it had not been administered timely. R133 stated V2 (DON Director of Nursing) assured R133 her pain medication would be scheduled and administered on time. V15 (Licensed Practical Nurse, LPN) stated the previous nurse from overnight administered R133's analgesic pain narcotic at 2:30 AM, which should have been administered earlier.</p> <p>On 2/7/22 at 10:29 AM, R133 was reviewed during medication administration. Review of the MAR medication administration record indicates: Hydromorphone 2mg (milligrams) by mouth every 6 hours for severe pain. Administered late.</p> <p>Upon review of R133's medication administration</p>	S9999		

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S9999	<p>Continued From page 3</p> <p>record, it indicates scheduled times as 6AM, 12 noon, 6PM and 12AM.</p> <p>On 2/07/22 at 3:11 PM, V2, DON Director of Nursing, was asked about the 7AM-12 Noon medication administration times. V2 stated, "The (electronic health record system) defaults some medications to that time. It doesn't give a time frame for twice a day medications. We have a window to accommodate the resident." V2 was inquired of the medication administration times and stated, " We prefer one hour before and one hour after."</p> <p>V2 was inquired of R133's scheduled pain medication administration. V2 stated, "(R133's) Dilaudid (Hydromorphone) is scheduled every 6 hours. After we had a care conference with her, she prefers to have it scheduled to help with pain management for her therapy. It's scheduled 6AM, 12 Noon, 6PM, and 12AM. The nurses should be administering the medications as scheduled. (R133) told me it was working fine until she got the Dilaudid late last night at 2AM. She was concerned because she was supposed to get it at 8AM. When it was close to 9AM she rung her call light for her medicine. My plan is to find out why the night nurse gave the medication late. I will address the nurses to give the medication on time. The pain medicine has got to be on time."</p> <p>Review of R133's care plan indicates: Pain- I have pain due to surgical site on my lower back. (G) My pain will be controlled with my current pain medications. (A) Notify my physician/NP (nurse practitioner) of pain medication effectiveness. (A) Medicate me with Baclofen 10mg po (by</p>	S9999		

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S9999	<p>Continued From page 4</p> <p>mouth) every 6 hours PRN (as needed), Hydromorphone 2mg po every 6 hours PRN. Monitor me for possible S/E (side effects) nausea, dizziness, confusion, hypotension, muscle weakness, drowsiness, headache, notify my MD (medical doctor)/ NP (nurse practitioner).</p> <p>Review of R133's MAR (Medication Administration Record) indicates: V15, LPN, documented administering R133's Hydromorphone 2mg (milligrams) by mouth every 6 hours for severe pain at 12 noon. Review of the R133's Controlled Drug Receipt indicates: V15, LPN, administered the Hydromorphone 2mg (milligrams) by mouth every 6 hours for severe pain at 10:29 AM on 02/07/22. V15 did not document a nurse's note indicating the medication administration not given as scheduled. V15 also documented R133's pain level as a 7 out of 10 on the MAR. During interview, R133 stated R133's pain level was at a 9, and R133 had been waiting since 8:45 AM to receive R133's scheduled analgesic pain narcotic as prescribed.</p> <p>There were multiple nursing staff documentations of R133 not receiving the Hydromorphone 2mg (milligrams) by mouth every 6 hours for severe pain as scheduled on the Controlled Drug Receipt.</p> <p>The 10/2021 Pain Management policy indicates: Policy: The facility must ensure that pain management is provided to residents who require such services, consistent with professional standards of practice, the comprehensive person-centered care plan, and the residents' goals and preferences. Policy Explanation and Compliance Guidelines: The facility will utilize a systematic approach for</p>	S9999		

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S9999	<p>Continued From page 5</p> <p>recognition, assessment, treatment and monitoring of pain.</p> <p>Recognition:</p> <ol style="list-style-type: none"> <li>1. In order to help a resident attain or maintain his/her highest practicable level of physical, mental and psychosocial well-being and to prevent or manage pain, the facility will:               <ol style="list-style-type: none"> <li>a. Recognize when the resident is experiencing pain and identify circumstances when the pain can be anticipated.</li> <li>b. Evaluate the resident for pain upon admission, during ongoing scheduled assessments, and when a significant change in condition or status occurs (e.g after a fall, change in behavior or mental status, new pain or an exacerbation of pain).</li> <li>c. Manage or prevent pain, consistent with the comprehensive assessment and plan of care, current professional standards of practice, and the resident's goals and preferences.</li> </ol> </li> <li>2. Facility staff will observe for nonverbal indicators which may indicate the presence of pain. These indicators include but not limited to:               <ol style="list-style-type: none"> <li>b. Loss of function or inability to perform activities of daily living (ADLs) (e.g. rubbing a specific location of the body or guarding a limb or other body part).</li> <li>c. Fidgeting, increased or recurring restlessness.                   <ol style="list-style-type: none"> <li>i. Negative vocalizations (e.g. groaning, crying, whimpering, or screaming).</li> </ol> </li> </ol> </li> <li>3. Facility staff will be aware of verbal descriptors a resident may use to report or describe their pain. Descriptors include but are not limited to:               <ol style="list-style-type: none"> <li>d. Hurting or aching.</li> <li>h. Numbness, tingling, shooting or radiating.</li> </ol> </li> </ol> <p>Pain Management and Treatment:</p> <ol style="list-style-type: none"> <li>1. Based upon the evaluation, the facility in collaboration with the attending physician/prescriber, other health care</li> </ol>	S9999		

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S9999	<p>Continued From page 6</p> <p>professionals and the resident and/or the resident's representative will develop, implement, monitor and revise as necessary interventions to prevent or manage each individual resident's pain beginning at admission.</p> <p>4. Factors influencing the choice of treatments include:</p> <ul style="list-style-type: none"> <li>a. The cause, location and severity of resident's pain</li> <li>b. The resident's current medical condition</li> <li>c. The resident's current medications</li> <li>d. The resident's desired level of relief and tolerance for adverse consequences (e.g. partial pain relief for fewer significant adverse consequences).</li> </ul> <p>6. Pharmacological interventions will follow a systematic approach for selecting medications and doses to treat pain. The interdisciplinary team is responsible for developing a pain management regimen that is specific to each resident who has pain or who has the potential for pain. The following are general principles the facility will utilize for prescribing analgesics:</p> <ul style="list-style-type: none"> <li>a. Evaluate the resident's medical condition, current medication regimen, cause and severity of the pain and course of illness to determine the most appropriate analgesic therapy for pain.</li> <li>c. Consider administering medication around the clock instead of PRN (pro re nata/on demand) or combining longer acting medications with PRN medications for breakthrough pain.</li> <li>f. Reassess and adjust the medication dose to optimize the resident's pain relief while monitoring the effectiveness of the medication dose to optimize the resident's pain relief while monitoring the effectiveness of the medication and work to minimize or manage side effects.</li> <li>h. Opioids will be prescribed and dosed in accordance with current professional standards</li> </ul>	S9999		

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S9999	<p>Continued From page 7</p> <p>of practice and manufacturers' guidelines to optimize their effectiveness and minimize their adverse consequences.</p> <p>Monitoring, Reassessment and Care Plan Revision:</p> <p>b. If re-assessment findings indicate pain is not adequately controlled, the pain management regimen and plan of care will be revised as indicated.</p> <p>The 2006 Preparation and General Guidelines 11A2: Medication Administration- General Guidelines states:</p> <p>Policy: Medications are administered as prescribed in accordance with good nursing principles and practices and only by persons legally authorized to do so. Personnel authorized to administer medications do so only after they have been properly oriented to the facility's medication distribution system (procurement, storage, handling, and administration). The facility has sufficient staff and a medication distribution system to ensure safe administration of medications without unnecessary interruptions.</p> <p>Procedures:</p> <p>A. Preparation: 6. Five Rights- Right resident, right drug, right dose, right route and right time are applied for each medication being administered. A triple check of these Five Rights is recommended at three steps in the process of preparation of a medication for administration: (1) when the medication is selected, (2) when the dose is removed from the container, and finally (3) just after the dose is prepared and the medication put away.</p> <p>B. Administration: 2. Medications are administered in accordance with written orders of the prescriber.</p> <p>10. A schedule of routine dose administration times as established by the facility and utilized on the administration records.</p>	S9999		



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S9999	<p>Continued From page 8</p> <p>11. Medications are administered within 60 minutes of scheduled time, except before, with or after meal orders, which are administered based on mealtimes. Unless otherwise specified by the prescriber, routine medications are administered according to the established medication administration schedule for the facility.</p> <p>D. Documentation: 6. If a dose of regularly scheduled medication is withheld, refused, not available, or given at a time other than the scheduled time (e.g, the resident is not in the facility at scheduled dose time, or a starter dose of antibiotic is needed), the space provided on the front of the MAR (Medication Administration Record) for that dosage administration is initialed and circled. An explanatory note is entered on the reverse side of the record. If a vital medication is withheld, refused, or not available the physician may be notified. Physicians should always be notified of any change of condition. Nursing documents the notification and physician response.</p> <p>(B)</p>	S9999		