

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: IL6002844	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 03/30/2022
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NAME OF PROVIDER OR SUPPLIER ELMWOOD TERRACE HEALTHCARE CTR	STREET ADDRESS, CITY, STATE, ZIP CODE 1017 WEST GALENA BOULEVARD AURORA, IL 60506
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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	S 000		
	Annual Licensure			
S9999	<p>Final Observations</p> <p>Statement of Licensure Violations:</p> <p>300.610a) 300.1210 b)5) 300.1210 c) 300.1210d)6)</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 care and personal care shall be provided to each resident to meet the total nursing and personal</p>	S9999	<p style="text-align: center;">Attachment A Statement of Licensure Violations</p>	

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>care needs of the resident.</p> <p>5) All nursing personnel shall assist and encourage residents with ambulation and safe transfer activities as often as necessary in an effort to help them retain or maintain their highest practicable level of functioning.</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>6) All necessary precautions shall be taken to assure that the residents' environment remains as free of accident hazards as possible. All nursing personnel shall evaluate residents to see that each resident receives adequate supervision and assistance to prevent accidents.</p> <p>These requirements are not met as evidenced by:</p> <p>Based on interview and record review the facility failed to ensure 2 staff were present and a gait belt was used to safely transfer a resident. This failure resulted in R32 sustaining a left leg laceration requiring emergency medical care, sutures and staples. This applies to 1 of 12 residents (R32) reviewed for safety/supervision in the sample of 12.</p> <p>The findings include:</p> <p>R32's face sheet shows she has diagnoses including: Alzheimer's disease, history of falls,</p>	S9999		
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S9999	<p>Continued From page 2</p> <p>generalized anxiety disorder, muscle weakness and unspecified abnormalities of gait and mobility.</p> <p>R32's 11/16/2021 facility assessment shows she has a memory problem, is cognitively impaired, she has behaviors which include hitting staff, and she requires extensive assistance of 2 staff for transfers.</p> <p>R32's active care plan shows she has a self-care deficit and requires staff assistance for her Activities of Daily Living (ADL's). The same care plan shows she is at risk for falls and requires 2 staff assistance for transfers, and a sit to stand lift may be needed based on her behaviors.</p> <p>A facility injury report completed on 12/12/2021 by V5 (Registered Nurse/RN), shows on 12/12/2021 at 6:30 PM, R32 was being assisted to bed by a Certified Nursing Assistant/ CNA (V3). V3 came and reported to V5 that she found blood on R32's bed sheets so she thinks R32 must have scraped her leg on the wheelchair during the transfer. The same report shows when V5 assessed R32's leg, she had a laceration to her right lateral leg which measured 3 centimeters (cm.) X 2 cm. X 2 cm. deep.</p> <p>Nursing progress notes show on 12/12/2021 at 7:15 PM, R32 was sent to a local emergency room for treatment of the laceration. The same notes also show R32 returned to the facility on 12/12/2021 at 11:25 PM and had 4 staples and 3 sutures in her right posterior leg.</p> <p>R32's facility Wound Evaluation Management and Summary Reports show the injury R32's sustained during the transfer required ongoing treatment with an ointment and dressing changes</p>	S9999		

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S9999	<p>Continued From page 3 and did not fully heal until 3/22/2022.</p> <p>On 3/29/2022 at 12:41 PM, V3 was contacted by phone and said on 12/12/2021, she had transferred R32 from her wheelchair to her bed by herself with no gait belt, and she did not use a sit to stand lift. V3 said R32 was becoming combative so all she was thinking about was getting her in bed. She said once she got R32 in bed she saw blood on the sheets, so she went and got a nurse. V3 said she thinks R32's leg was cut on the wheelchair leg rest during the transfer. V3 said 2 staff and a gait belt were required to safely transfer R32. V3 said when R32 becomes combative a sit to stand lift was often used to transfer her. V3 said she thinks the injury could have been prevented if she had gotten another CNA to help her transfer R32 and if she had used the sit to stand lift.</p> <p>On 3/29/2022 at 1:05 PM, V4 (Certified Nursing Assistant/ CNA) said R32 requires 2 staff and the sit to stand lift to safely transfer her and has for a long time, "probably almost a year". She also said gait belts are required to be used always for all transfers. V4 additionally said if R32 was becoming combative she would have gotten another person to help transfer her as well as used the sit to stand lift.</p> <p>On 3/29/2022 at 1:19 PM, V2 (Director of Nursing) said staff should always use a gait belt to transfer a resident. V2 said R32 can be both a 2-person pivot transfer and a sit to stand transfer. V2 verified the injury R32's sustained during the transfer was not fully healed until 3/22/2022.</p> <p>The facility's undated Gait Belt policy shows, " ...All residents who require assist with transfers and do not require an electric lift will utilize a gait</p>	S9999		

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S9999	Continued From page 4 belt with all transfers unless contraindicated. The staff person will utilize safe transfer technique, moving with the resident, with the knees bent and a strong grasp of the transfer belt ..." (B)	S9999		