Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	IL6004188	A. BUILDING: ______ B. WING ______	C 09/25/2023

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
TWIN LAKES REHAB & HEALTH CARE	310 EADS AVENUE PARIS, IL 61944

(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 Facility Reported Incident Investigation of 8/25/23 IL163999	S 000		
S9999	Final Observations Statement of Licensure Violations: 300.610a) 300.1210b) 300.1210d)6) 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	S9999	**Attachment A** **Statement of Licensure Violations**	

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE TITLE (X6) DATE

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S9999	Continued From page 1	S9999		

care needs of the resident.

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:

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.

These requirements are not met as evidenced by:

Based on interview and record review the facility failed to ensure one resident (R1) of three residents reviewed for accidents in a sample list of three was not entrapped in the mechanism of a recliner chair prior to lowering the footrest. This failure caused (R1) to sustain a 12 Centimeter laceration requiring 13 sutures to close.

Findings include:

R1's Diagnoses list printed 9/25/23 includes the following diagnoses: Age-Related Osteoporosis, Hypertension, Gastro-Esophageal Reflux Disease, Anxiety Disorder, Chronic Atrial Fibrillation, Repeated Falls, and Dementia.

R1's Brief interview of Mental Status dated 6/29/23 documents R1 scored 3/15 on her Brief Interview of Mental Status indicating R1 is severely cognitively impaired.

R1's Progress Note dated 8/25/2023 at 10:13PM documents "CNA (V3, Certified Nurse's Aide) getting (R1) ready to transfer and was putting

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S9999	Continued From page 2	S9999		

recliner down. (R1's) legs were in between recliner and where it closes, (V3) didn't notice (R1's) legs were hanging off due to blanket covering (R1's) legs. Resident stated 'Oww' and (V3) noted legs were hanging off sideways where recliner closes. (V3) moved blanket and noted resident right leg bleeding. (V3) notified Nurse (V7, Licensed Practical Nurse LPN). (V7) went in and assessed (R1's) right leg and large skin tear/laceration down front of right shin to almost (R1's) ankle. Bleeding profusely. Applied pressure and (abdominal gauze) with tape to area to try and stop bleeding. NP (Nurse Practitioner) notified at 9:06PM and gave order to Send to Emergency Room. Notified daughter 9:20PM. 911 called at 9:30PM. Director of Nursing /Administrator notified at 9:40PM."

R1's Progress Note dated 8/25/2023 at 11:50PM documents "Received report from Emergency Room nurse. (R1) received sutures in Right Lower Extremity and (nylon wound closure strips) applied over them. (R1) will need to return in 10-14 days to Emergency Department to have them removed. No immersing leg in water, sponge baths only. Family was notified and updated on condition as well."

R1's Progress Note dated 9/12/2023 1:22PM documents "New order received to remove sutures from right shin. 13 sutures were removed without difficulty. Steri Strips applied with (nonstick gauze) and wrapped with (stretch gauze) until fully healed. Will continue to monitor. New treatment order to change dressing daily to right shin until healed. Leave (nylon wound closure strips) in place until fall off on their own. Report any signs/symptoms of infection."

On 9/25/23 at 12:53PM V3, CNA (Certified

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S9999	Continued From page 3 Nurse's Aide) stated. "I was taking care of (R1) on 8/25/23 evening shift. (R1) put (R1's) call light on. I went in to get (R1) ready for the CNA's to transfer to bed. I was a Nursing Assistant then. I have since passed the test and have my certificate. (R1) had a blanket over her legs so I did not see her right leg was in the space between the chair and the footrest. I lowered the footrest. R1 screamed Owe. I put the footrest back up and (R1) was bleeding quite a bit. I got the nurse who came in right away. The nurse put pressure on the cut, and we sent (R1) to the hospital. (R1) came back with stitches and a bandage." On 9/25/23 at 1:00PM V6, Nurse Practitioner stated "The laceration absolutely was caused by (R1) catching her leg in the recliner. The facility could have prevented this by taking off the blanket and making sure (R1's) leg was not caught." On 9/25/23 at 10:00AM V2 Director of Nursing stated, "At the time (R1's) leg was injured by the recliner (V3) had taken her CNA classes and passed her test but was not yet on the registry. The blanket should have been removed and (V3) should have made sure (R1's) feet and legs were on the footrest before it was lowered." On 9/25/23 at 2:00PM V1, Administrator stated the facility has no specific policy in regard to incidents (other than falls) which cause injury. (B)	S9999		