

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: IL6014575	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED C 11/12/2023
NAME OF PROVIDER OR SUPPLIER ASCENSION RESURRECTION LIFE		STREET ADDRESS, CITY, STATE, ZIP CODE 7370 WEST TALCOTT AVENUE CHICAGO, IL 60631		
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S 000	Initial Comments Complaint Investigation: 2389009/IL166039 2388483/IL165391	S 000		
S9999	Final Observations Statement of Licensure Violations I of II: 300.1810) Section 300.1810 Resident Record Requirements 1) All Cook County facilities with Colbert Class Members shall submit to the Colbert Lead Defendant Agency, or successor Colbert Lead Defendant Agency, on a monthly basis, an accurate census of all Medicaid-eligible residents, the previous month's voluntary and involuntary discharges conducted under Section 300.3300, including any voluntary and involuntary discharges scheduled to be conducted within 48 hours after the end of the reporting month. This monthly census must be submitted on the form prescribed by the Colbert Lead Defendant Agency using secure (encrypted) email, no later than the fifth business day of each month. This REQUIREMENT is not met as evidenced by: Based on interview and record review, the facility failed to submit accurate monthly census of all Medicaid eligible residents to Colbert Lead Defendant Agency. This failure affected 53 out of 63 residents reviewed who are Medicaid eligible. Finding include:	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	Continued From page 1 The facility's monthly census of all 53 Medicaid eligible residents reviewed for submission. On 11/11/23 at 10:55 AM, V7 ((Social Service) stated, "The last time I submitted the Colbert census was August 30, 2023, via email. I received an email for the census to be submitted via (name of system). V4 (Admission Coordinator) took responsibility for submitting the required information to (name of system). I did receive an email on August 30, 2023, read (As of August 5, 2023, Census of 83 was reported by your facility and only 5 compliant censuses (that included RIN numbers and 78 non-compliant that are missing Medicaid/RIN number). I tried calling but got no answer." On 11/11/23 at 11:03 AM, V4 stated, "I been submitting information via (name of system) for the facility since June 2023. I have never known anything about submitting a monthly census report. I only update the new admissions in the (name of system)." On 11/12/23 at 2:30 PM, V2 (Executive Director) stated, "V4 is responsible for submitting information to (name of system). I am not sure what information we have not submitted or any corrections that are needed. I will call and correct the issue." Email to V7 from Illinois.gov staff dated 8/30/23 at 10:21 AM- read: As of August 5,2023, it was found that this facility did not report ALL of their census reporting requirements timely for the month of July 2023. "AW"	S9999		

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S9999	<p>Continued From page 2</p> <p>Statement of Licensure Violations II of II: 300.610a) 300.1210b) 300.1210d)3)5) 300.2410a)</p> <p>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.</p> <p>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.</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: 3) Objective observations of changes in a resident's condition, including mental and</p>	S9999		
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S9999	<p>Continued From page 3</p> <p>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.</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 300.2410 Furnishings</p> <p>a) Each resident shall be provided with a separate bed suitable to meet the needs of the resident. Each bed shall be at least 36 inches wide, have a headboard, be of sturdy construction and in good repair.</p> <p>This REQUIREMENT is not met as evidenced by:</p> <p>A. Based on observation, interview, and record reviews the facility failed to make reasonable accommodations for two (R1, R2) of four residents. This failure resulted in R1 sustaining a facility acquired pressure ulcer to left heel.</p> <p>B. Based on observation, interviews, and record reviews the facility failed to follow their wound prevention policy for two residents (R1, R2). The facility failed to ensure one (R1) did not develop a pressure wound. The facility also failed to ensure R2 did not develop bilateral reddened heels despite being on a low air loss mattress. This</p>	S9999		

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S9999	<p>Continued From page 4</p> <p>failure resulted in R1 developing a deep tissue pressure injury to his left heel.</p> <p>Findings include:</p> <p>1.) R1's clinical record documents in part, R1 is a 91-year-old admitted to the facility on 7/22/23, with the medical diagnosis of but not limited periprosthetic fracture, status post open reduction and internal fixation to right hip from fall at home, right hip pain, atrial fibrilla, heart disease, convulsions, and anxiety disorder. R1's minimum data set (MDS) Brief Interview Mental Status Score (13), indicates R1 is cognitively intact.</p> <p>R1's clinical notes documents in part: Nursing note 7/22/23 at 5:57 PM Received R1 from hospital, alert and oriented x3. R1 states, "the beds is too small, and my room is dirty." R1 expressed concerns to V9 (R1's Former Facility Physician). Writer spoke with V9 regarding R1 concerns and is actively looking for another bed.</p> <p>Wound Assessment Report date 8/10/23- wound type: Pressure Ulcer, acquired. Left heel unstageable due to suspected deep tissue injury (DTI). Measurements 2.80cm x 2.40cm (centimeters).</p> <p>On 11/11/23 at 8:00 AM, V10 (R1's Family Member) stated, "R1 developed a sore on his left heel due to his heel being pressed against the foot board for three months. V11 (Agency Registered Nurse) was made aware the day R1 was admitted to the facility, the bed was too small, not long enough. I also expressed my concern that R1's bed was not long enough to V2 (Executive Director), V3 (Director of Nursing), and nothing was done about it."</p>	S9999		
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S9999	<p>Continued From page 5</p> <p>2.) R2's clinical record documents in part, R2 is an 82-year-old admitted to the facility on 2/10/2021, with the medical diagnosis of pneumonia, acute respiratory failure, Parkinson's Disease, dementia, acute kidney disease, and essential hypertension.</p> <p>On 11/11/23 at 10:26 AM, surveyor and V8 (Registered Nurse) observed R2 resting in a low air loss mattress bed. R2's knees were bent, and his feet was pressed against the foot board.</p> <p>On 11/11/23 at 10:28 AM, Asked R2 if he was comfortable, R2 said "No". Asked R2 did his feet hurt, R2 said "Yes". V8 and nursing staff manually lifted and slid R2 up off the foot board to the very top of the bed. V8 removed R2's socks, observed R2's bilateral heels were reddened, and tender to touch.</p> <p>On 11/11/23 at 10:40 AM, V8 stated, "R2 has been here in the facility for a long time. R2 is alert and oriented x 1-2, able to answer basic questions related to the present. R2's memory is not good but is aware of the present. R2 is currently on an air mattress because he wishes to stay in bed most of the time as a preventative measure. R2 does not have any pressure ulcers. I will rub skin cream on his feet and see if the redness goes away."</p> <p>On 11/11/23 at 2:08 PM, V5 (Wound Care Nurse) stated, "R1 acquired a left heel wound on 8/10/23. The left heel was a fluid filled blister dark in color. A DTI is caused by pressure. On 8/10/23 R1's left heel DTI measured 2.8cm x 2.4cm, 8/18/23 measured the same, 8/25/23 left heel measured 2.7cm x 2.2cm, 9/1/23 left heel</p>	S9999		

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S9999	<p>Continued From page 6</p> <p>measured the same, on 9/13/23 left heel measured 2.7cm x 2.0cm, and on 9/16/23 R1 discharged home. If R2's heels were pressed against the foot board and his heels were red, it could potentially be a stage one pressure ulcer. I will assess R1's feet. If a resident foot is pressed against the foot board, it could potentially cause a pressure ulcer injury. Some high-risk factors are poor nutrition, immobility, incontinence, vary of diseases, and circulation problems. Some preventative measures are pressure reducing mattress, repositioning, nutritional support, and offloading pressure points."</p> <p>On 11/11/23 at 2:40 PM, V3 (Director of Nursing) stated, "I was not made aware that R1's bed was too short. R1 or R1's family did not make me aware the bed length needed adjusting. R2 does not have any pressure ulcer, but his Braden score indicates R2 is at high risk for a pressure ulcer. If a resident's feet is pushed or pressed against the foot board, it could potentially cause a pressure ulcer. Any at risk residents should have their feet off loaded, to prevent pressure injuries."</p> <p>On 11/11/23 at 11:31 AM, V6 (Plant Operations Director) stated, "I remember R1. I did not receive any concerns regarding his bed being too short. I could have accommodated R1, but I did not know. I could have placed a bed extender on R1 bed to give him 4 more inches in length. Today I been here for two hours, I was not made aware that R2's bed needed to be extended. R2 has an air loss mattress which is 80 inches in length. I will go now and place an extender on R2's bed which will extend the bed four more inches."</p> <p>On 11/12/23 at 2:42 PM, V2 (Executive Director) stated, "I was not made aware that R1</p>	S9999		

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S9999	<p>Continued From page 7</p> <p>complained to the nurse on 7/22/23, of his bed being too small as documented in R1's nursing notes. R1's concerns should have been taking care of immediately and documented on a concern form. I will in-service all staff regarding resident's concerns. The facility should make reasonable accommodations to meet the resident's needs."</p> <p>Policy: Document in part -Federal Nursing Home Resident Rights: -A facility environment must treat each resident with respect and dignity and care for each resident in a manner and in an that promotes maintenance or enhancement of his or her quality of life, recognizing each resident's individuality and preferences.</p> <p>Policy documents in part: Prevention of Pressure Injuries Protocol dated -1/2018 -Interventions and Preventive Measures -Place resident at risk of developing pressure injuries are placed on the pressure reducing surface. -Routinely assess and document the condition of the resident's skin. The care process should include efforts to stabilize, reduce or remove underlying risk factors. -Because a resident at risk can develop a pressure injury within 1-4 hours of the onset of pressure, the at-risk resident needs to be identified and have interventions implemented promptly to attempt to prevent pressure ulcers. -Consider off-loading pressure hourly if the head of bed is greater than 30 degrees.</p> <p>Pressure Injury Assessment/Treatment dated 1/2018</p>	S9999		

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S9999	Continued From page 8 -Stage one-skin remains intact at this stage. Intact skin with a localized area of non-blanchable erythema, which may appear differently in dark pigmented skin. "B"	S9999		