

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>IL6007843</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>R-C 01/12/2024</b>
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NAME OF PROVIDER OR SUPPLIER  <b>PALOS HEIGHTS REHABILITATION</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>13259 SOUTH CENTRAL AVENUE CRESTWOOD, IL 60418</b>
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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  First Certification Revisit to Survey Date 11/28/23, Complaint Investigations: 2397876/IL164637, 2396393/IL162723, 2396757/IL163228, 2395277/IL161366, Facility reported incident of 04.13.23/IL158957 & Facility reported incident of 09.07.23/IL164547.	S 000		
S9999	Final Observations  Statement of Licensure Violations:  300.610a) 300.1210b)5) 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	S9999		

Illinois Department of Public Health  
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

Electronically Signed

TITLE

(X6) DATE

01/22/24

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S9999	<p>Continued From page 1</p> <p>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:</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>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 were not met as evidenced by:</p> <p>Based on interview and record review, the facility failed to prevent a resident from falling with injury for one of one resident (R21) reviewed for accidents in a sample of 10. This failure resulted in actual harm when R21 fell during toileting and sustained a large avulsion fragment in the tip of the lateral malleolus.</p> <p>Findings include:</p>	S9999		
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S9999	<p>Continued From page 2</p> <p>On 01/11/2024 at 10:30AM during record review, Facility Incident Report Form dated 12/21/2023 indicated R21 had a fall on 12/18/2023, x-rays done on 12/21/2023 which revealed suspected acute left femoral neck fracture, sent out to hospital for confirmatory CT scan. X-ray in the hospital revealed large avulsion fragment noted in the tip of the lateral malleolus.</p> <p>On 01/11/2024 at 12:08PM during interview with R21, R21 stated that she had a fall in the facility. R21 said that she was about to use her bedside commode. R21 said she was backing while reaching back to get a hold of the arm rest of the bedside commode, R21 thought she was holding onto it already so she sat down but because R21 is unable to feel much on her back R21 did not know if she was on the bedside commode already, then R21 felt she was sliding down and landed on the floor. R21 said that a CNA (Certified Nursing Assistant) was with her but R21 was not sure what the CNA was doing because she was behind her and R21 thought she was being watched by the CNA during the process. R21 said that the CNA did not use a gait belt (a safety device made of cloth that buckles securely around a resident's waist and provides a secure grasping surface to aid during transfer and ambulation) on her prior to being assisted with transfer and toileting.</p> <p>On 01/11/2024 at 12:33PM during interview with V13 (CNA), V13 said she assisted R21 with toileting on her bedside commode. V13 said V15 (Licensed Practical Nurse) and her assisted R21 on 12/18/2023 to transfer her to bedside commode using her walker. V13 said that when R21 was transferred, V15 left the room. V13 said that when R21 was done using the bedside</p>	S9999		
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S9999	<p>Continued From page 3</p> <p>commode, she asked R21 to stand up while holding onto her walker so she can perform perineal care to R21 but R21 told her that R21 needed to sit down so R21 sat in the middle of the bedside commode with only R21's heel touching the floor. V13 said that she instructed to flatten her foot so she can be more stable but R21 said she cannot then R21 said she began sliding down to the floor. V13 said that she assisted R21 in lowering her down to the floor. V13 said that she did not put the gait belt on R21 when R21 stood up for perineal care.</p> <p>On 01/11/2024 at 1:21PM during interview with V15, V15 said that she was called by V13 and noted R21 on the floor beside the bedside commode. V15 said that she did not observe any gait belt on R21 when she saw her.</p> <p>On 01/11/2024 at 2:27PM during interview with V16 (Therapy Director), V16 said that gait belts should always be applied on residents if staff are assisting them with any activities of daily living (ADLs) or any treatments.</p> <p>On 01/11/2023 at 3:00PM during interview with V2 (Director of Nursing), V2 said that gait belt use can help break a fall because staff will have something to grab the resident with.</p> <p>R21's Social Service Assessment dated 12/16/2023 indicated diagnoses of not limited to unspecified abnormalities of gait and mobility, need for assistance with personal care, morbid (severe) obesity due to excess calories, pain and neuralgia and neuritis, and R21's BIMS (brief interview for mental status) score is 15. Facility's Mobility/Transfers Communication to Nursing dated 12/12/2023 indicated it is an admission evaluation, and R21's transfer status is minimal</p>	S9999		
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S9999	<p>Continued From page 4</p> <p>assist, hands on by 1 staff.</p> <p>R21's Hospital Emergency Provider Notes dated 12/21/2023 indicated admission date of 12/21/2023, chief complaint of fall and leg pain, physical exam including some tenderness to palpation over the lateral aspect of the left ankle, Xray left ankle final result clinical indication of fall 2 days ago and medial ankle pain, and Xray of left ankle final result finding of large avulsion fragment noted in the tip of the lateral malleolus. R21's Hospital Emergency Provider Notes dated 12/22/2023 indicated admission 12/22/2023, history and plan including R21 presenting from nursing home requesting for advanced imaging of R21's ankle and R21 has confirmed ankle fracture. Facility's Mobility/Transfers Communication to Nursing dated 12/12/2023 indicated it is an admission evaluation, and R21's transfer status is minimal assist, hands on by 1 staff. Requested for facility's policy on transfers - facility unable to provide.</p> <p>Review of the facility document entitled Gait Belt Use Guideline with effective date of 02/23 indicated:</p> <p>Purpose: The device provides a secure grasping surface to aid during transfer and ambulation. Commonly used for residents who are at risk for falls and those who require assistance during transfer. A gait belt can support lower to the floor if the resident begins to fall or loses balance during transfer or ambulation.</p> <p>Completing the Procedure:</p> <p>-If the resident loses weight bearing ability during ambulation or transfer, maintain your grip on the gait belt, pull the resident as close to your body as possible and gently slide them to the floor using the large muscles in your upper leg.</p>	S9999		

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