

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: IL6002828	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 10/10/2024
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NAME OF PROVIDER OR SUPPLIER ELMHURST EXTENDED CARE CENTER	STREET ADDRESS, CITY, STATE, ZIP CODE 200 EAST LAKE STREET ELMHURST, IL 60126
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S 000	Initial Comments Annual Health Survey	S 000		
S9999	Final Observations Statement of Licensure Violatiions: ONE OF TWO 300.610a) 300.1010h) 300.1210b) 300.1210d)5) 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 300.1010 Medical Care Policies h) The facility shall notify the resident's physician of any accident, injury, or significant change in a resident's condition that threatens the health, safety or welfare of a resident, including, but not limited to, the presence of incipient or manifest decubitus ulcers or a weight loss or gain of five percent or more within a period of 30 days.	S9999		

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

TITLE

(X6) DATE
11/05/24

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S9999	<p>Continued From page 1</p> <p>The facility shall obtain and record the physician's plan of care for the care or treatment of such accident, injury or change in condition at the time of notification.</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 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:</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>These requirements were not met as evidenced by:</p>	S9999		

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S9999	<p>Continued From page 2</p> <p>Based on observation, interview, and record review, the facility failed to identify a pressure injury prior to becoming unstageable, failed to implement offloading, and failed to develop and implement a care plan after the development of pressure ulcers for 1 of 5 residents (R14) reviewed for pressure in the sample of 16.</p> <p>This failure resulted in R14 developing two unstageable pressure injuries, one to each heel.</p> <p>The findings include:</p> <p>R14's face sheet showed a 92 year old female admitted to the facility on 6/5/24 from a local hospital.</p> <p>R14's 6/7/24 history and physical showed she was admitted post fall to a local hospital with a right distal femur fracture and surgical repair. R14 had significant weakness and deconditioning. This note showed no skin lesions and incision sites to the right hip and knee.</p> <p>On 10/08/24 at 10:19 AM, R14 was in her room in a wheelchair barefoot. There were blue protective boots on a chair in the room. R14's feet rested on the bottom metal bar of the bedside table in front of her. R14's feet were dependent and purple in color.</p> <p>At 1:06 PM, R14 was eating in her room. Her feet remained uncovered and on the table legs.</p> <p>On 10/09/24 at 10:21 AM, R14 was in a wheelchair attending the resident council meeting. R14's feet were bare, in a dependent position and purple in color.</p> <p>On 10/09/24 at 12:22 PM, V6 wound doctor said</p>	S9999		

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S9999	<p>Continued From page 3</p> <p>R14's heel wounds were pressure injuries and the other wounds were vascular. V6 said "of course" he'd expect offloading to be part of her interventions.</p> <p>R14's medical record active orders dated 10/9/24 documents, "Heel protectors on bilateral lower extremities every shift, start date: 8/20/2024."</p> <p>On 10/10/24 at 10:10 AM, V4 Registered Nurse (RN) said on 6/24/24 she changed R14's right heel dressing as it was dirty. V4 was unable to explain why there was a dressing there, what soiled it, and the rationale for it's replacement. V4 said "somebody put a dressing there (to the right heel) and it was dirty so I changed it". V4 then said the skin was intact. It was there for protection. V4 was unable to locate wound assessments for R14's right and left heel wounds prior to the physician assessment on 6/26/24. V4 said somebody must have seen something for the wound doctor to look at her heels. If there's a new area you are supposed to do a risk management note-do wound assessments, measurements. I put them on the wound list . I think the night nurse, V17, told me they found something new and asked me to put R14 on the wound list. At some point someone told me about both wounds and I put her on the wound list. V17 should have done some kind of note/assessment and get a treatment order from the doctor. We can put interventions in place. It's important to put interventions in place and get treatment orders to prevent further deterioration of wound. An initial assessment is important to have a baseline for comparison. V6 wound doctor did R14's first wound assessments on 6/26/24.</p> <p>On 10/10/24 at 11:26 AM, V2 Director of Nursing (DON) said an initial wound assessment should</p>	S9999		

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S9999	<p>Continued From page 4</p> <p>be done by the primary nurse who identified a wound for best practice. The assessment should include the type of wound, measurements, maybe a photograph to make sure it's documented. The doctor should be notified. Interventions should be implemented and wound treatment orders should be obtained. Complications that may occur if this is not done include worsening of the wound, infection, advancement to sepsis and it can become a sentinel event. It's a liability issue. Residents here have multiple comorbidities to consider. It's a liability issue if they come in without a wound and develop one here.</p> <p>R14's 6/5/24 admission skin assessment showed no pressure injuries to her heels.</p> <p>R14's 6/5/24 pressure injury risk assessment showed she was at risk for developing a pressure injury.</p> <p>R14's 6/24/24 health status note authored by V4 RN showed a dressing was applied to the right heel as it was soiled. This note showed R14 was at the facility for skilled rehab post hospitalization after a fall with right femur fracture.</p> <p>R14's 6/25/24 6:00 AM health status note authored by R17 nurse showed surgical sites to the right hip and knee were healed and a wound treatment was done to both heels.</p> <p>As of 6/25/24 at 6:00 AM, R14's medical record had no documented assessment of either heel wound.</p> <p>R14's 6/26/24 wound physician initial wound evaluation showed an unstageable (due to necrosis) pressure injury to the right and left heels. The right heel wound measured 3.2</p>	S9999		

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S9999	<p>Continued From page 5</p> <p>centimeters (cm) X 2.5 cm X depth not measureable due to the presence of nonviable tissue and necrosis. The left heel wound measured 1.8 cm X 1.4 cm X depth not measureable due to presence of nonviable tissue and necrosis. Debridement of the right heel was initiated but was stopped due to pain. The left heel was debrided. This note showed an additional right dorsal foot wound due to infection and a left leg wound due to infection. The physician note recommended to off-load the wounds and float heels while in bed.</p> <p>R14's June 2024 treatment administration record (TAR) showed wound treatment orders were initiated for the the right heel wound on 6/24/24.</p> <p>R14's June 2024 medication administration record (MAR) showed wound treatment orders for the left heel were not started until 6/27/24.</p> <p>R14's wound care plan (as of 10/10/24) had no mention of any pressure injuries and no interventions to offload pressure.</p> <p>The facility's 1/4/24 Pressure Ulcer Prevention & Treat Policy showed residents with actual alterations in skin integrity will have a plan of care developed to address measures to promote rapid healing of the wound. Residents who have actual alteration in skin integrity will be assessed for need for further measures to aid in rapid healing of wounds. Assessment and characteristic of wound must be documented every other day during wound dressing changes. Documentation guidelines B. A problem (real or potential will be entered on the resident care plan and will include prevention/treatment measures. Any change in the skin integrity status of the resident will be documented in the progress notes, the physician</p>	S9999		

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S9999	<p>Continued From page 6</p> <p>will be notified, and the patient care plan will be updated. When there is a decubitus ulcer being treated, the skin integrity report sheet will be initiated and descriptive information will be completed weekly by the nurse. This information will include: the specific location of the decubitus, the stage and measurement of the decubitus, the presence/absence of odor, the presence/absence of drainage, color, amount, consistency, or any change in drainage since previous measurement, and the presence of granulation.</p> <p>(B)</p> <p>TWO OF TWO</p> <p>300.610a) 300.1010h) 300.1210b) 300.1210d)3) 300.1220b)2)</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 300.1010 Medical Care Policies</p>	S9999		

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S9999	<p>Continued From page 7</p> <p>h) The facility shall notify the resident's physician of any accident, injury, or significant change in a resident's condition that threatens the health, safety or welfare of a resident, including, but not limited to, the presence of incipient or manifest decubitus ulcers or a weight loss or gain of five percent or more within a period of 30 days. The facility shall obtain and record the physician's plan of care for the care or treatment of such accident, injury or change in condition at the time of notification.</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 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:</p> <p>3) Objective observations of changes in a resident's condition, including mental and 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>Section 300.1220 Supervision of Nursing Services</p>	S9999		

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S9999	<p>Continued From page 8</p> <p>b) The DON shall supervise and oversee the nursing services of the facility, including:</p> <p>2) Overseeing the comprehensive assessment of the residents' needs, which include medically defined conditions and medical functional status, sensory and physical impairments, nutritional status and requirements, psychosocial status, discharge potential, dental condition, activities potential, rehabilitation potential, cognitive status, and drug therapy.</p> <p>These requirements were not met as evidenced by:</p> <p>Based on interview and record review, the facility failed to identify a significant weight loss, failed to notify a resident's physician and/or dietician for a significant weight loss, failed to develop care plan interventions to address a resident's significant weight loss. These failures apply to 1 of 2 residents (R27) reviewed for nutrition in the sample of 16.</p> <p>This resulted in R27 sustaining a 5.87% weight loss in 1 week.</p> <p>The findings include:</p> <p>R27's electronic face sheet printed on 10/10/24 showed R27 has diagnoses including but not limited to hydrocephalus, hypertension, mood disorder, dementia with behaviors, and major depressive disorder.</p> <p>R27's facility assessment dated 10/2/24 showed R27 has severe cognitive impairment and has experienced no weight loss.</p>	S9999		

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S9999	<p>Continued From page 9</p> <p>R27's weight log showed, "7/23/24 167lbs 8/1/24 157.2lbs. (5.87% weight loss in 1 week).</p> <p>R27's nursing progress notes and dietician notes showed no notification to either R27's physician or dietician regarding his significant weight loss of 5.87% in one week.</p> <p>R27's dietician note dated 8/15/24 showed, "Add (supplement) twice daily and obtain weekly weights for 4 weeks.</p> <p>R27's care plan dated 9/29/24 showed, "(R27) receives regular diet, regular texture, thin liquids. Diagnosis includes dementia, hypertension. Unplanned significant weight loss. R27's care plan showed no interventions related to R27's significant weight loss on 8/1/24.</p> <p>R27's medication administration record for August 2024 showed R27 was ordered a supplement twice daily on 8/15/24 and accepted the supplement for the remainder of the month.</p> <p>On 10/10/24 at 10:25AM, V2 (Director of Nursing) stated, "I haven't been here much more than a month so I'm not sure how things were handled previously. I currently monitor all the weights and meet with the dietician on a weekly basis to discuss any significant weight changes. (R27's) weight loss was a significant weight loss that should have been addressed immediately. The earlier you identify the weight loss, the better chance you have at getting the resident to gain the weight back. Now we are playing catch up with his weight loss because he was refusing so much of his meals. There's no reason why interventions should not have been put in place."</p> <p>On 10/10/24 at 12:15PM, V16 (dietician) stated,</p>	S9999		

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S9999	<p>Continued From page 10</p> <p>"(R27) initially had a pretty significant weight loss but his weight has started to improve now that we started (appetite stimulant). He has started feeding himself and accepting help with meals. When his initial weight loss was identified, I ordered supplements for him, but he was refusing them. I wasn't notified right away about his weight loss; I think it was about 10 days to 2 weeks later that I found out about it and started the supplements right away. I also asked for the facility to reweigh him so that we could determine if it was a true weight loss or not. If they would have called me, I would have given them the order for the supplements."</p> <p>The facility's policy titled, "Procedure and Timeline for Monthly Resident Weights" dated 1/30/24 showed, "III....the dietician may continue tracking weekly weights for residents with a weight loss trend, or who are identified to be at increased nutritional risk. The nurse and dietician will communicate recommendations for changes to weight orders as appropriate...V. The names of residents who exceed the above guidelines after re-weighing will be shared with the IDT and charted on by the dietician identifying risks, barriers to weight maintenance and an appropriate nutrition intervention if applicable..."</p> <p>(B)</p>	S9999		