

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: IL6005250	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 08/15/2024
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NAME OF PROVIDER OR SUPPLIER LA SALLE COUNTY NURSING HOME	STREET ADDRESS, CITY, STATE, ZIP CODE 1380 NORTH 27TH ROAD OTTAWA, IL 61350
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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 Annual Licensure Survey	S 000		
S9999	Final Observations Statement of Licensure Violations: 300.610a) 300.1010h) 300.1210a) 300.1210b)4) 300.1210d)3) 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. 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.	S9999		

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

TITLE

(X6) DATE
09/09/24

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S9999	<p>Continued From page 1</p> <p>Section 300.1210 General Requirements for Nursing and Personal Care</p> <p>a) Comprehensive Resident Care Plan. A facility, with the participation of the resident and the resident's guardian or representative, as applicable, must develop and implement a comprehensive care plan for each resident that includes measurable objectives and timetables to meet the resident's medical, nursing, and mental and psychosocial needs that are identified in the resident's comprehensive assessment, which allow the resident to attain or maintain the highest practicable level of independent functioning, and provide for discharge planning to the least restrictive setting based on the resident's care needs. The assessment shall be developed with the active participation of the resident and the resident's guardian or representative, as applicable. (Section 3-202.2a of the Act)</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>4) All nursing personnel shall assist and encourage residents so that a resident's abilities in activities of daily living do not diminish unless circumstances of the individual's clinical condition demonstrate that diminution was unavoidable. This includes the resident's abilities to bathe, dress, and groom; transfer and ambulate; toilet; eat; and use speech, language, or other functional communication systems. A resident who is unable to carry out activities of daily living</p>	S9999		

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S9999	<p>Continued From page 2</p> <p>shall receive the services necessary to maintain good nutrition, grooming, and personal hygiene.</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>This REQUIREMENT is not met as evidenced by:</p> <p>Based on observation, interview, and record review the facility failed to identify a severe weight loss and put interventions in place for one (R33) of one resident reviewed for nutrition in the sample of 27. This failure resulted in R33 having a continued severe weight loss of 10.2% in one month and 12.9% loss in six months.</p> <p>Findings include:</p> <p>The facility's Resident Weight policy, dated 7/1/18, documents "Any significant weight discrepancy from the previous weight is to be investigated at that time to rule out errors in weighing the resident (scale errors, incorrect procedure.)" "The nurse will report significant weight gains or losses to the physician and to the dietary department. (Significant weight gains or losses are defined as 5% in one month, 7.5% in 3</p>	S9999		

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S9999	<p>Continued From page 3</p> <p>months, or 10% in 6 months."</p> <p>The Monthly Weight Summary for R33, documents the following weights: 8/15/24 at 128.0 pounds; 8/6/24 at 132.0 pounds; 7/3/24 at 147.0 pounds; 6/4/24 at 144.4 pounds; 5/2/24 at 148.0 pounds; 4/8/24 at 146.0 pounds; 3/12/24 at 145.0 pounds; and 2/12/24 at 147.0 pounds. This weight record documents a significant weight loss of 10.2% in one month (7/3/24 to 8/6/24) and 12.9% loss in six months.</p> <p>The Electronic Health Record for R33, does not document that V4 (Dietary Manager) or V17 (R33's Physician) was notified of R33's significant weight loss.</p> <p>The current Physician Order Sheet for R33, documents R33 is on a regular diet with no other dietary orders and to ensure R33 was offered snack three times a day.</p> <p>On 8/12/24 through 8/14/25, between 8:30 am through 3:00 pm, R33 paced the facility, circling one hallway to the next, and refused to rest frequently. On 8/13/24, 8/14/24, and 8/15/24, R33 was not seen in the dining room during mealtimes and was walking the hallways during those times. Meal trays were delivered to R33's room and R33 did not eat the meal provided.</p> <p>On 8/14/24 at 9:11 am, V2 (Director of Nursing) stated, "We all encourage (R33) to rest and take breaks and she will at times. Sometimes (R33) with say no and keep on walking. We have to encourage her frequently."</p> <p>On 8/14/23 at 10:00 am, V10 (Certified Nursing Assistant/CNA), V11 (CNA), and V12 (CNA) stated R33 walks around the facility all day long.</p>	S9999		

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S9999	<p>Continued From page 4</p> <p>R33 used to be given finger foods and she would eat while walking but R33 won't eat now. R33 won't eat in the dining room most of the time and will say she is not hungry.</p> <p>On 8/15/24 at 9:45 am, V15 (Restorative CNA) stated she does all the monthly weights for the facility. V15 stated the last weight she got for R33 was 120 something (pounds), so she reweighed R33 and that is when she got the weight of 132 (pounds) and put the weight in R33's medical record. "I did notice (R33) had a weight loss." V15 stated R33 walks even more now, it is harder to get her to stay focused, and her attention span is shorter than it used to be.</p> <p>On 8/15/24 at 12:58 pm, V2 stated she does all the monthly weight meetings and is unaware of R33 having any recent weight loss. V2 stated, "No one has reported anything to me."</p> <p>"B"</p>	S9999		