

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: IL6003081	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 09/25/2024
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NAME OF PROVIDER OR SUPPLIER DECATUR REHAB & HEALTH CARE CT	STREET ADDRESS, CITY, STATE, ZIP CODE 136 SOUTH DIPPER LANE DECATUR, IL 62522
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S 000	Initial Comments Annual Licensure Survey	S 000		
S9999	Final Observations Statement of Licensure Violations (1 of 2) 300.610a) 300.1210a) 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 300.1210 General Requirements for Nursing and Personal Care 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	S9999		

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

TITLE

(X6) DATE
10/18/24

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S9999	<p>Continued From page 1</p> <p>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>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 assess, monitor, implement pressure relieving interventions, complete treatments, and obtain weekly documentation for a pressure sore for one of one (R31) residents reviewed for pressure sores in a sample list of 34 residents. These failures resulted in R31's right heel pressure sore deteriorating requiring mechanical debridement and delaying prosthetic device placement for R31's Left Below the Knee Amputation.</p> <p>R31's Medical Record documents R31's medical diagnoses of Cardiomyopathy, Diabetes Mellitus Type II, Grade One Diastolic dysfunction, Severe Protein Calorie, Malnutrition, recent Left Below the Knee Amputation and Right Heel Stage 3 Pressure Ulcer.</p> <p>R31's undated Face Sheet documents R31 admitted to facility on 1/15/2024.</p> <p>R31's Nursing Admission Assessment dated 1/15/24 does not document any skin impairment to R31's Right Heel.</p> <p>R31's Nursing Summary dated 2/2/24 documents R31's skin as intact with no skin impairment.</p> <p>R31's Careplan intervention dated 3/5/24 instructs staff to complete a Skin Risk Assessment weekly for four weeks on admission and readmission then quarterly thereafter. This same careplan does not include R31's Right Heel Stage 3 Pressure Ulcer.</p> <p>R31's Minimum Data Set (MDS) dated 7/18/2024 documents R31 as cognitively intact. This same MDS documents R31 requires moderate assistance from staff for toileting, bathing,</p>	S9999		

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S9999	<p>Continued From page 3</p> <p>dressing, personal hygiene, and transfers.</p> <p>R31's Treatment Administration Record (TAR) dated June 2024 documents a treatment order (right heel) starting 6/24/24 to cleanse wound with Normal Saline or wound cleanser. Cover wound bed with honey (medical grade) (not intact skin) and cover with dry dressing daily. This treatment was signed as refused on 6/24/24, 6/25/24 and discontinued on 6/26/24.</p> <p>R31's Nurse Progress Note dated 6/26/24 at 2:00 AM documents "Current (Right) Heel treatment discontinued due to (R31's) declination and continues to take dressing off each time applied treatment. Changed back to Skin Prep twice daily. Continue no shoe to Right Foot. Heel protector when up in wheelchair. Float Right Heel when in bed every shift."</p> <p>R31's Nurse Progress Note dated 7/1/24 at 1:00 PM documents "Received order for (R31's) Right Heel. Cleanse with wound cleanser or Normal Saline. Cover with honey (medical grade) and dry dressing. Wrap with roll gauze."</p> <p>R31's Nurse Progress Note dated 7/6/24 at 5:00 PM documents "Received new order for Doxycycline 100 milligrams (mg) twice daily for ten days for (R31's Right Heel) wound healing."</p> <p>R31's Treatment Administration Record (TAR) dated July 2024 documents a treatment order (right heel) starting 7/15/24 to cleanse wound with Normal Saline or wound cleanser, apply Betadine to cover Eschar/black area, cover with absorbent pad and wrap with gauze twice daily. This same TAR does not document R31's treatment was completed for the evening shift on 7/18 and 7/19, day shift on 7/20 and 7/21 and neither day nor</p>	S9999		

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S9999	<p>Continued From page 4</p> <p>evening shift from 7/22/24-7/31/24. This same TAR does not document weekly skin assessments as being completed on 7/2, 7/9, 7/23 and 7/30/24.</p> <p>R31's Initial Wound Clinic Progress Note dated 7/30/24 documents R31's Right Calcaneus Pressure Ulcer as a Stage 3 wound.</p> <p>R31's Physician Order Sheet (POS) dated September 2024 documents a physician order to Cleanse (R31's) Right Heel wound with wound cleanser, apply Calcium Alginate, and cover with roll gauze or cushion twice daily. The order also instructs staff to apply heel protectors when R31 is up in the wheelchair, float Right Heel when in bed/chair every shift and no shoe for R31's Right Foot.</p> <p>R31's Wound Clinic Progress Note dated 9/10/24, 9/17/24 and 9/24/24 documents R31's Right Calcaneus Pressure Ulcer as a deteriorating Stage 3. These same reports document "Heel suspension boot to: (R31) NEEDS HEEL SUSPENSION BOOT. FACILITY TO ORDER " This same assessment documents "float heels off of bed/chair. (R31) (Right) Heel needs floated 24/7. (R31's) wound has deteriorated and appears to have had more pressure applied to the area. No skin prep or lotion in (R31's) wound. Please lotion (R31's) foot with dressing changes."</p> <p>R31's Medical Record does not document any Skin Risk Assessment since R31's admission on 1/15/24. This same medical record does not document any measurements, or weekly assessment details of R31's Right Heel Stage 3 Pressure Ulcer.</p> <p>On 9/22/24 at 10:15 AM R31 was using her Right</p>	S9999		

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S9999	<p>Continued From page 5</p> <p>Foot to propel herself along in her wheelchair in the main dining room. R31 was not wearing a heel protector nor had her Right Foot floated. Multiple staff present in the main dining room did not encourage/instruct R31 to offload pressure from her Right Heel Stage 3 Pressure Ulcer.</p> <p>On 9/25/24 at 11:35 AM V16 Wound Clinic Nurse Practitioner (NP) stated R31 has been seen at the offsite wound clinic for two months for the treatment of her Right Heel Stage 3 Pressure Ulcer. V16 stated R31 is alert and oriented and needs encouragement and verbal reminders to keep her Right Foot offloaded from any pressure. V16 NP stated R31 will keep her own foot up if you remind her. V16 stated R31 is motivated to get her Right Heel healed up." V16 stated the facility is responsible for reminding R31 to keep R31's Right Foot off of the floor and to not place any pressure on it. V16 NP stated "The last few times (R31) has come into the clinic, she is not wearing any heel protector. As soon as (R31's) Right Heel heals up, then we can work on getting her a prosthetic for her Left stump. (R31) is looking forward to that so she can go home. The facility has not helped (R31) facilitate the healing of her Right Heel Pressure Ulcer. (R31's) Right Heel Pressure Ulcer should be healing faster. (R31) has the internal mechanisms and power to get that healed with the help of the facility but unfortunately they (facility) are delaying the healing of her Right Heel Pressure Ulcer due to not making sure that her pressure relief interventions are in place."</p> <p>On 9/25/24 at 2:00 PM V1 Administrator stated R31's Right Heel Stage 3 Pressure Ulcer is facility acquired and has worsened during R31's stay at this facility. V1 Administrator stated "(R31) did not have any pressure wound when</p>	S9999		

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S9999	<p>Continued From page 6</p> <p>she was admitted. (R31) was admitted because she had just had her Left Below the Knee Amputation done at the hospital." V1 stated R1 has had two separate pressure ulcers on her Right Heel. V1 Administrator stated R31 previously had a facility acquired Suspected Deep Tissue Injury (SDTI) on the same area on her Right Heel which had healed. V1 stated "We (facility) should never have discontinued (R31's) treatment to her Right Heel on 6/26/24. I don't think (R31's) wound was completely healed. Within a week (R31's) Right Heel opened up and now (R31) currently has a facility acquired Right Heel Stage 3 Pressure Ulcer with orders in place. (R31's) Stage 3 Pressure Ulcer should have been listed on her careplan and it wasn't. There are no interventions on her careplan that show that (R31) had an open pressure ulcer. (R31) is alert and oriented but the staff should be providing a heel protector or whatever else she needs and also making sure to remind her to offload pressure to that Right Heel."</p> <p>The facility policy titled Decubitus Care/Pressure Areas revised January 2018 documents it is the policy of this facility to ensure a proper treatment program has been instituted and is being closely monitored to promote the healing of any pressure ulcer. The pressure area will be assessed and documented on the Treatment Administration Record (TAR) or the Wound Documentation Record. Document size, stage, site, depth, drainage, color, odor and treatment. When a pressure ulcer is identified additional interventions must be established and noted on the careplan in an effort to prevent worsening or re-occurring pressure ulcers.</p> <p>(B) Statement of Licensure Violations (2 of 2)</p>	S9999		

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S9999	<p>Continued From page 7</p> <p>300.615e)</p> <p>Section 300.615 e) Determination of Need Screening and Request for Resident Criminal History Record Information</p> <p>e) In addition to the screening required by Section 2-201.5(a) of the Act and this Section, a facility shall, within 24 hours after admission of a resident, request a criminal history background check pursuant to the Uniform Conviction Information Act for all persons 18 or older seeking admission to the facility, unless a background check was initiated by a hospital pursuant to the Hospital Licensing Act. Background checks shall be based on the resident's name, date of birth, and other identifiers as required by the Department of State Police. (Section 2-201.5(b) of the Act)</p> <p>These requirements were Not Met as evidenced by:</p> <p>Based on interview and record review the facility failed to timely complete background checks on two (R33, R10) residents out of five residents reviewed for identified offenders in the sample list of 34.</p> <p>Findings include:</p> <p>R10's Admission record documents R10 was admitted to facility on 8/6/2021. The background check documents that a background check was ran on 6/15/2012. On 9/25/24 at 11:30 am V1 (Administrator) stated that this resident has resided in facility for a long time, but V1 could not find any other paperwork verifying original admission date. V1 stated this is the only background check facility has for R10.</p>	S9999		

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S9999	Continued From page 8 R33's Admission record documents R33 was admitted to facility on 6/15/2023. R33's background check was dated 7/7/2023. On 9/25/24 at 11:30 am V1 stated the facility had lost power around this time and V1 believes that could of caused the delay in running the background check. (C)	S9999		