

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: IL6010078	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED C 06/05/2024
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NAME OF PROVIDER OR SUPPLIER PRAIRIE OASIS	STREET ADDRESS, CITY, STATE, ZIP CODE 16000 SOUTH WABASH SOUTH HOLLAND, IL 60473
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S 000	Initial Comments Facility Reported Incident of 5/20/24/IL173715 Complaint Invetigation 2493920/IL173343	S 000		
S9999	Final Observations Statement of Licensure Violations (1 of 2): 300.610a) 300.1210b) 300.3210t) 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. 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.	S9999		

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

Electronically Signed

TITLE

(X6) DATE

06/25/24

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S9999	<p>Continued From page 1</p> <p>Section 300.3210 General</p> <p>t) The facility shall ensure that residents are not subjected to physical, verbal, sexual or psychological abuse, neglect, exploitation, or misappropriation of property.</p> <p>These requirements were not met as evidenced by:</p> <p>Based on interviews and records reviewed the facility failed to ensure one resident (R6) remained free from resident to resident sexual assault. This affected two of three residents (R6, R8) reviewed sexual abuse. This failure resulted in R6 being kissed in the mouth unwantedly by R8. R6 said she feels scared and on-guard when walking past R8.</p> <p>Findings include:</p> <p>Final Facility Incident Report shows R6 reported to facility that R8 kissed R6 on the lips. The following conclusion was determined about the allegation: abuse is founded.</p> <p>R8 has diagnosis including but not limited to Alzheimer's Disease, Dementia, Psychosis, Weakness, Cognitive Communication Deficit, Violent behaviors, and Homicidal Ideations. R8's cognitive assessment dated 3/18/24 indicates a score of 9, impaired.</p> <p>R6 diagnosis include but are not limited to Hemiplegia following Cerebral Vascular Infarction, Hypertensive Heart Disease, Dysphagia, Hyperlipidemia, Alcohol Abuse, and Cocaine Abuse. R6's cognitive assessment dated 5/3/24</p>	S9999		

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S9999	<p>Continued From page 2</p> <p>indicates a score of 13, intact.</p> <p>On 5/30/24 at 9:40AM R8 was observed in his room, in bed, resting. The surveyor asked R8 where he is, and R8 responded 'in a hospital'. R8 said he does not know anyone here and has not made friends. R8 said he does not have a girlfriend or wife in the facility. R8 said he has never kissed any women in the facility.</p> <p>On 5/30/24 at 9:45AM R6 said, "I was passing his (R8) room in the hallway, he was standing by his door, and he tapped me on the shoulder when I turned, he kissed me on the lips. I couldn't believe it. No, I didn't want him to kiss me". R6 said, "When I see (R8), I feel scared he will try again. I'm 'on guard' now when he comes around me. There were two CNAs in the dining room, and they saw it and they said he has done it before".</p> <p>On 5/31/24 at 1:48PM V43, Nurse, said R6 reported R8 had tried to kiss R6 or R8 did kiss her. R6 said R8 was in the dining room.</p> <p>R6's Screening for Indicators of Aggressive and or Harmful Behaviors dated 5/1/24 documents, R6 has factors that increase vulnerability: yes.</p> <p>Review of R8's Progress notes dated 5/19/24 R8 observed being sexually aggressive towards 2 female residents, grabbing their faces and trying to kiss them. Both females were visibly upset.</p> <p>Review of R8's Progress notes dated 3/16/24 documents as follows: Resident received in bed, alert with confusion and aggressive behavior. R8 stated to CNA, "I just want to beat her a-- !!". Resident has been noted to be aggressive when staff come in room, staff (nurse) are noticing</p>	S9999		

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S9999	<p>Continued From page 3</p> <p>aggressive behavior to increase, with attempt with aggressive physical contact with staff.</p> <p>Review of R8's care plan does not include interventions for aggressive behaviors.</p> <p>Review of police narrative states, on 5/19/24 R6 stated a male approached her, placed both hands on her face and kissed her upon the lips. The male was later identified as R8. R6 said she did not welcome or consent to R8 having kissed her.</p> <p>The facility undated Abuse Prevention Program Facility Policy states, in part, the facility affirms the right of our residents to be free from abuse. (B)</p> <p>Statement of Licensure Violations (2 of 2): 300.686a)8) Section 300.686 Unnecessary, Psychotropic, and Antipsychotic Medications a) For the purposes of this Section, the following definitions shall apply: 8) "Informed consent" - documented, written permission for specific medications, given freely, without coercion or deceit, by a capable resident, or by a resident's surrogate decision maker, after the resident, or the resident's surrogate decision maker, has been fully informed of, and had an opportunity to consider, the nature of the medications, the likely benefits and most common risks to the resident of receiving the medications, any other likely and most common</p>	S9999		

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S9999	<p>Continued From page 4</p> <p>consequences of receiving or not receiving the medications, and possible alternatives to the proposed medications.</p> <p>These requirements were not met as evidenced by:</p> <p>Based on interviews and records reviewed the facility failed to obtain consent from the responsible party before administering psychotropic medication to a resident (R2) with a diagnosis of Dementia. This failure affected 1 of 3 residents reviewed for psychotropic medication consent.</p> <p>The findings include:</p> <p>On 5/29/24 at 1:18PM V6, RN, said R2 can ambulate independently with a walker. V6 said R2 is confused, and we need to redirect her. V6 said R2 does not have violent behaviors, she needs redirection, has confusion and is forgetful. V6 said to give psychotropic medications we must have verbal and written consent in place. V6 said the Assistant Director of Nursing or Director of Nursing is responsible to give consent unless the doctor comes after hours and orders the medications. V6 said, "I assume the consent is obtained, if the medication is in the cart. If the order is in the electronic Medication Administration Record, then I assume the consent is there. I have not checked for consents. When I spoke with (R2's) family said 'no' to giving psychotropic medications. I don't know if the medication was given. You got to make sure of that before you give the medication that the consent and everything in place. The reason we need consent for psychotropic medications is because some of the medication can sedate or have altering mental status effects. The family</p>	S9999		

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S9999	<p>Continued From page 5</p> <p>can be made aware. (R2) has a diagnosis of bipolar, but it's hard to tell if the symptoms are bipolar or dementia. (R2) is not violent, she needs redirection, she wanders and forgets where her room is. They said she wanders into people rooms".</p> <p>On 5/29/24 at 2:00PM V7, Assistant Director of Nursing, said, "The Director of Nursing called me and said the psyche doctor put the order in for (R2) herself for Depakote and Seroquel. The nurses must have reported (R2) was more aggressive. The doctor saw aggressive behaviors while she was here. The medication is ordered, the next thing should have been to call and get the consent to give. From the medication card (R2) had 2 pills missing. We discontinued the medications. I think the daughter said (R2) was more groggy. We need to have consent before giving psychotropic medications. We always get consent in case of adverse effects of with the medication".</p> <p>On 5/30/24 V10, Director of Nursing (DON), said, "I was notified on 5/19/24, spoke with the niece about the concern for (R2's) medications. (R2) was hospitalized because the family said she was not looking well. (R2's) hospitalization had nothing to do with her medications. The niece said they put (R2) on medications, I looked in the records, I checked who wrote the medication order in. We needed consent before the medication was given. (R2's) niece said, 'I did not give consent'. (R2) did receive the medication. The family did not want her on Depakote and Seroquel. The medication was stopped on 5/19/24". The surveyor asked V10, can Seroquel be a chemical restraint and V10 said 'yes'. V10 said, "I started a concern form and was still working on it", V10 showed the surveyor the form. The surveyor asked for a copy</p>	S9999		

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S9999	<p>Continued From page 6</p> <p>of the documents but was not given a copy.</p> <p>On 5/31/24 at 8:57AM V39, R2's family, said, "My aunt was visiting (R2) and she video called me and said I can't wake her up, she is not eating, she is not sitting up. They said she won't shower. I told my aunt to ask what is new, and they said the Depakote and Seroquel. We asked who gave permission, the nurse said there is no consent. They still did not offer to take her off it. I called the DON and told her to please stop the medications and send her to the hospital for evaluation. (R2) was admitted with altered mental status and they treated her for her chronic diarrhea, she has Chron's disease, so this is a chronic issue. They told me they put (R2) on the medication because she was trying to leave and (R2) told them I want to go home, so they started the medication. No one had reported any new or uncontrolled behaviors to me or my aunt prior to starting the medications. I was not even aware the psych was still seeing her". V39 is listed in R2's record as a guardian.</p> <p>On 5/30/24 at 11:50AM observed R2 sitting on the seat of her rollator walker, in the dining room, smiling, clapping her hands to the music and singing along.</p> <p>Progress note dated 5/19/24 per director of nursing, resident's (R2's) guardian would like resident to go to hospital for observation. Guardian expressed to writer when she came to visit resident, she had concerns about altered mental status and requested an evaluation.</p> <p>Progress note dated 5/20/24 per hospital emergency department resident was admitted with altered mental status and fever.</p> <p>R2's Medication Administration Record</p>	S9999		

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S9999	<p>Continued From page 7</p> <p>documents Seroquel 25mg tableted was administered on 5/16/24 until 5/19/24.</p> <p>R2's care plan initiated on 2/17/24 states R2 requires psychotropic medication to help manage and alleviate behavioral symptoms. There is no identification of R2 wandering or being aggressive.</p> <p>The facility Physician Orders policy dated 6/17 states nurse responsibilities include contact family/responsible party as appropriate or necessary.</p> <p>The undated facility Psychotropic Drug Therapy policy states It is the policy of this facility to support a restraint (chemical) free environment. Psychotropic drug therapy will be used only when necessary to treat a specific condition. Procedure: Obtain informed consent. Psychotropic medication shall not be prescribed or administered without the informed consent of the resident, the resident's guardian, or authorized representative. Residents shall not be given psychotropic drugs unless psychotropic drug therapy is necessary to treat a specific or suspected condition or the possibility of one of the conditions. Psychotropics should not be used if one or more of the following is the only indication wandering agitated behaviors which do not present danger to the resident or others.</p> <p>(C)</p>	S9999		