STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	IL6001283	A. BUILDING: _____ B. WING _____	07/13/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
BRIA OF RIVER OAKS	14500 SOUTH MANISTEE BURNHAM, IL 60633

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S 000	Initial Comments Annual Health Survey	S 000		
S9999	Final Observations Statement of Licensure Violations: 300.610 a) 300.1210 b) 300.1210 c) 300.1210 d)3) 300.1210 d)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 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	S9999		

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care needs of the resident.
c) Each direct care-giving staff shall review and be knowledgeable about his or her residents' respective resident care plan.
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:
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.
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.

These requirements are not met as evidenced by:

Based on observation, interview, and record review, the facility failed to prevent the development of an avoidable pressure ulcer; failed to timely identify, assess, and treat skin breakdown; failed to provide a plan of care to prevent skin breakdown; failed to provide preventative low air loss mattress; and failed to educate staff on pressure ulcer prevention and treatment. This deficiency applies to 1 resident R77 out of 28 reviewed for pressures in the

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sample of 28. This failure resulted in R77 sustaining 1 facility-acquired stage 3 sacrum pressure ulcer.

Findings include:

R77 is 69-year-old female admitted to the facility 3/23/23, with diagnoses including but not limited to End Stage Renal Disease, anxiety, and schizoaffective disorder.

MDS (Minimum Data Set), dated 3/26/24, showed R77 with no pressure ulcers and at risk for pressure ulcer development, with only a pressure reducing device for chair, but no other pressure ulcer preventative treatments were provided.

Care plan, dated 3/24/23, reads, "(R77) is at risk for skin complications related to diagnosis of central line associated blood stream infection. Goal: (R77) will maintain adequate skin integrity throughout next review. Interventions: Educate resident on MD (Medical Doctor) orders for wound care. Notify MD of abnormal findings. Registered Dietician to assess and recommend diet. Skin assessment weekly." There were no other care plans developed to prevent R77 from acquiring pressure ulcers.

On July 8 at 10:40 AM, R77 stated, "I have pain from the wound on my back. I acquired a wound here (pointing to her backside) and turning on my sides helps with the pain". On July 8, 2024, at 10:45 AM observed resident lying on a regular mattress during the interview. R77 indicated the regular mattress has been the only type of mattress she's been on while at the facility.

On July 8, at 11:00 AM, surveyor requested wound reports from V5, Wound Nurse. V5,

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Wound Nurse, indicated all wounds were all on the electronic records. Upon review of the record, R77 showed no wounds that were currently being treated for the resident. On July 8th, surveyor clarified again with V5 if there were any wounds or wound assessments for R77, but did not receive any.

On July 09,2024 at 1:30PM, V5, Wound Nurse, provided 3 hand-written skin and wound assessments. Surveyor asked when the assessments were completed. V5 indicated she had completed them on July 8, 2024. On record review, no assessment initialed under wound and skin assessments, no treatment noted by the TAR (Treatment Administration Record), for the month of June and July 2024.

On July 9, 2024, at 1:40 PM, V18 (Licensed Practical Nurse) said, "The treatment orders are under the TAR (Treatment Administration Record). I don't have a binder with the wound treatment in my cart."

On July 9, 2024, at 1:55PM, V12 (Licensed Practical Nurse) said, "Wound treatments are found under the TAR (Treatment Administration Record), and I don't have a binder in my medication cart with wound treatment. The Wound Nurse has the wound binder."

On July 9, 2024, at 1:58PM, V17 (Registered Nurse) said, "Wound treatment orders are under the TAR. The Wound Nurse is responsible for the treatment. If dressing gets soiled, I call the wound nurse and she changes the dressing. I don't have a wound treatment binder in my cart."

On July 9, 2024, at 2:00PM, V2 (Director of Nursing) said, "Wound treatment is under the

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TAR (Treatment Administration Record)."

On July 9, 2024, at 2:24 PM, V18 removed a foam dressing for the median back. The wound had no outer layer of skin, with the wound bed skin exposed and with moderate amount of serous drainage, and sacrum wound pressure ulcer observed with loss of skin and damaged tissue with moderate serous drainage. V18 described median back wound as a skin tear with moderate amount of drainage. V18 described the sacrum wound as a stage 2, and was not aware of that wound and treatment for both wounds. V35, Wound Physician assessment reads, sacrum is a stage 3 measuring 2.3x1.3x0.1cm, and median back skin tear measuring 3.7x1.3x0.1cm.

On July 11, 2024, at 10:30AM, V2 (Director of Nursing) said, "I expect nurses to call physicians for orders when a wound is identified, and notify Power of Attorney. I expect the Wound Nurse to take pictures of the wound and notify the Wound Physician. The Wound Physician will stage the wound and provide orders. The wound rounds are done on Mondays, and pictures are taken and treatment adjusted per resident's needs. The assessments provided by (V5) on July 9, 2024 at 1:30PM was completed by (V5) July 8, 2024, after talking to surveyor and a Tele visit was completed with (V35, Wound Physician) and orders obtained. The wound nurse did not take pictures of the sacrum wound or the back skin tear prior to 7/8/24."

On July 11, 2024, at 12:00PM, V35 (Wound Physician) said, "I had a tele visit at 6:36PM on July 8, 2024, to see (R77). It was the first time I have seen the sacrum wound, site 1, acquired on 6/4/24, and the back skin tear, site 2, acquired on

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S9999	Continued From page 5 7/8/24. I usually classify the wound with the nurse, and I come to the facility every Monday to round and see residents. The facility called me to see (R77) and the Wound Nurse was not aware that (R77) had wound until 7/8/24. I will see (R77) on Monday to make additional recommendations." On July 09, 2024, at 7:36PM, V1, Administrator, presented, Facility Policy Title Skin Management: Pressure Injury Treatment reviewed 04/2024. Which reads: "Guidelines: Implement prevention protocol according to resident needs. Sensory Perception factor: watch for nonverbal cues, assess areas of the body that do not feel pain for an opening redness. Mobility: turn every two hours, reposition in chair every two hours." (B)	S9999		