

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: IL6007488	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 10/31/2024
NAME OF PROVIDER OR SUPPLIER PLEASANT MEADOWS SENIOR LIVING		STREET ADDRESS, CITY, STATE, ZIP CODE 400 WEST WASHINGTON CHRISMAN, IL 61924		
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S 000	Initial Comments Annual Health	S 000		
S9999	Final Observations Statement of Licensure Violations: ONE OF FOUR 300.615e) 300.615f) Section 300.615 Determination of Need Screening and Request for Resident Criminal History Record Information 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) f) The facility shall check for the individual's name on the Illinois Sex Offender Registration website at www.isp.state.il.us and the Illinois Department of Corrections sex registrant search page at www.idoc.state.il.us to determine if the individual is listed as a registered sex offender. These requirements are NOT MET as evidenced by:	S9999		

Illinois Department of Public Health

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

Electronically Signed

11/14/24

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S9999	<p>Continued From page 1</p> <p>Based on interview and record review the facility failed to complete resident background checks timely for two (R50, R280) of five residents reviewed for background checks in the sample list of 46.</p> <p>Findings include:</p> <p>1.) R50's ongoing census documents R50 admitted to the facility on 2/8/23. R50's Criminal History Report dated 8/4/23 documents R50 had criminal history convictions of domestic battery/bodily harm in 2001. R50's Criminal History Analysis Report dated 9/11/23 documents R50 has never served prison time, has physical limitations and is wheelchair bound, has had no physical aggression just verbal since facility admission, and is noncompliant with treatment, therefor R50 was determined to be a moderate risk identified offender. There is no documentation that a Criminal History Report was completed within 24 hours after R50's admission.</p> <p>2.) R280's ongoing census documents R280 admitted to the facility on 10/19/24. R280's Illinois Sex Offender Registry Search documents completed on 10/28/24, while the other required background checks are documented as completed on 10/18/24. There is no documentation that the Illinois Sex Offender Registration website search was completed for R280 prior to 10/28/24.</p> <p>On 10/30/24 at 12:05 PM V1 Administrator reviewed R50's and R280's background checks provided by the facility. V1 confirmed R280's Illinois Sex Offender search is documented as being completed 10/28/24. V1 confirmed R50's Criminal History Report is dated 8/4/23. At 12:20 PM V1 stated V1 was unable to locate any other</p>	S9999		

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S9999	<p>Continued From page 2</p> <p>Criminal History Reports for R50, besides the one that was completed on 8/4/23. V1 stated R50 is an identified offender, and V1 provided documentation of R50's Criminal History Analysis Report dated 9/11/23. At 2:17 PM V1 confirmed there was no documentation that the Illinois Sex Offender Registration search was completed for R280 prior to 10/28/24.</p> <p>(C)</p> <p>TWO OF FOUR 300.610a) 300.3210e) 300.3210f) 300.3210g) 300.3210t)</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 300.3210 General</p> <p>e) The facility shall provide a means of safeguarding small items of value for its residents in their rooms or in any other part of the facility so long as the residents have daily access to their</p>	S9999		

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S9999	<p>Continued From page 3</p> <p>valuables. (Section 2-103 of the Act)</p> <p>f) The facility shall make reasonable efforts to prevent loss and theft of residents' property. Those efforts shall be appropriate to the particular facility and may include, but are not limited to, staff training and monitoring, labeling property, and frequent property inventories. (Section 2-103 of the Act)</p> <p>g) The facility shall develop procedures for investigating complaints concerning theft of residents' property and shall promptly investigate all complaints. (Section 2-103 of the Act)</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 observation, interview and record review the facility failed to protect the resident's right to be free of misappropriation of money and personal property for four of five residents (R13, R130, R25 and R46) reviewed for misappropriation in a sample list of 40 residents. Failing to prevent the misappropriation of R13's commemorative coin set, which is not replaceable, resulted in R13 being tearful and experiencing feelings of sadness and loss due to the sentimental value of the coins.</p> <p>Findings Include:</p> <p>The facility Abuse Prevention Program dated October 2022 documents this facility affirms the</p>	S9999		

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NAME OF PROVIDER OR SUPPLIER

STREET ADDRESS, CITY, STATE, ZIP CODE

PLEASANT MEADOWS SENIOR LIVING

**400 WEST WASHINGTON
CHRISMAN, IL 61924**

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S9999	<p>Continued From page 4</p> <p>right of our residents to be free from abuse, neglect, exploitation, misappropriation of property, deprivation of goods and services by staff or mistreatment. Misappropriation of Resident Property means the deliberate misplacement, exploitation, or wrongful temporary, or permanent use of a resident's belongings or money without the resident's consent.</p> <p>1. R13's Care Plan updated 10/27/24 documents: "(R13) has an alteration in neurological status related to: Major Depressive Disorder Recurrent, Agoraphobia, Anxiety, and PTSD (Posttraumatic Shock Disorder)."</p> <p>R13's Minimum Data Set (MDS) dated 8/21/24 documents R13 is cognitively intact.</p> <p>On 10/29/24 at 9:00AM R13 was seated in a wheelchair in R13's room with a family member visiting. R57 (R13's) roommate was in bed in the room. R13 stated "I can talk to you in front of my roommate and my (family member) I trust them. I had \$100.00 and eight double struck commemorative coins taken from my lock box. It had to be staff because they might have known I was keeping my key beside my bed in my pencil box. It is bad enough I lost the money, but I used to carve the casts and strike the coins. Those I had here were in silver and bronze. I am losing my sight and my fingers don't work well because I have neuropathy. Those coins meant a lot to me. I kept them here because I like to look at them and remember what I used to do. I can't remember the exact date, but my (family member) can tell you. I reported it to (V1) Administrator and (V29), Social Services. They did not offer to call the police, but I wish they had." R13 looked upset and bit his bottom lip as</p>	S9999		

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S9999	<p>Continued From page 5</p> <p>he talked. Tears started to well up in R13's eyes.</p> <p>V33, R13's family member stated "(R13) had the coins and his \$100.00 on the evening of 10/16/24. I saw them. I came back on 10/17/24 and he did not have them."</p> <p>R57 stated "I did not see (R13's) coins that day before, but I have seen that (R13) had the coins he made."</p> <p>On 10/29/24 at 11:00AM V1, Administrator stated "there is really no documented investigation. I do not believe the money has been returned to (R13)."</p> <p>2.) The facility's Grievance Log for the three months prior to the survey documents R130 "withdrew money from the bank on 9/1/24 and stored it in her purse. On 9/2/24 (R130) noticed money was missing around noon." (R130) was interviewed and family confirms money was withdrawn from the bank. Facility will replace the money.</p> <p>R130's MDS dated 9/2/24 documents R130 is cognitively intact. R130's Progress Note documents R130 was discharged home with home care services 10/28/24.</p> <p>On 9/30/24 R130 stated "I took \$140.00 out of the bank and put it in my purse. I went to therapy and when I came back I was going to address cards to my family and put in the money but the money was gone. I never got the money back. I told (V34) Care Plan Nurse the money was missing. I never heard anything so I just thought I would still be getting it. I have been sick and that was quite a bit of money to me. Now that I am home, I will be a little short at the end of the</p>	S9999		

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S9999	<p>Continued From page 6</p> <p>month and it was for my family. I save that up. You know I think whoever took it must really need it, but I would have just given it to them if they asked."</p> <p>On 10/30/24 at 12:00PM V34 verified R130's account of the allegation. V34 stated "I really thought (R130) had the money replaced."</p> <p>on 10/30/24 at 12:15PM V29, Social Service also verified R130's account of the allegation. V29 also stated she was "under the impression R130 was reimbursed for this loss."</p> <p>3.) The facility's grievance log dated 10/25/2024 documents: R25 "reported to manager (V10 Restorative Registered Nurse) that (R25) had money missing." V29 SSD (Social Service Director) followed up and R25 explained that "last week (R25) had \$100 missing and then on October 22nd (R25) had another \$20 missing." He stated the money was in his wallet in his top drawer." V29 reported R25's missing money to V1 Administrator to follow up.</p> <p>R25's MDS (Minimum Data Set) dated 8/19/24 documents R25 is alert and oriented.</p> <p>On 10/27/24 at 9:58 AM, R25 stated "I have had money missing twice." R25 explained, two weeks ago R25 had \$170 in cash in R25's wallet, which was in the top drawer of R25's nightstand. R25 left his room to attend therapy, leaving the wallet in the nightstand drawer, and upon returning to R25's room, R25 found that the \$100 bill was gone leaving \$70 in the wallet. R25 stated he reported the theft to the unidentified Certified Nurses Assistant (CNA) and Registered Nurse (RN), but doesn't remember who it was. R25 stated again on 10/23/24, R25 had money stolen.</p>	S9999		

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S9999	<p>Continued From page 7</p> <p>R25 explained that R25 left the facility for a physicians appointment and while en route, realized he had forgotten his wallet. Upon returning to the facility, R25 noticed that the top drawer of the nightstand was open a couple inches and another \$20 was missing, leaving \$50 in the wallet. R25 reported this theft to the unidentified RN on duty. R25 stated that V29 SSD informed R25 that four to five people have been "hit" in the last couple of weeks and that the facility is looking into the thefts.</p> <p>On 10/28/24 at 10:39 AM, V29 SSD confirmed that R25 had reported having money stolen but that V29 was not made aware of the allegation until 10/25/24</p> <p>On 10/28/24 at 10:45 AM, V1 Administrator confirmed V1 was aware of R25's missing/stolen money.</p> <p>On 10/28/24 at 11:29AM, V10 Restorative Registered Nurse stated R25's missing money was reported to her by V6 Certified Nurses Assistant (CNA) on 10/23/24. V10 explained that V10 reported the missing/stolen money to V1 Administrator and V2 Director of Nursing (DON) on 10/24/24.</p> <p>On 10/28/24 at 11:40 AM, V6 CNA stated R25 came to the nurses' station and stated loudly "this is the second time someone stole from me!"</p> <p>On 10/30/24 at 10:00 AM, V25 LPN (Licensed Practical Nurse) stated V25 is familiar with R25 and has seen cash in a money clip on R25's wallet.</p> <p>On 10/30/24 at 10:10 AM, R25 stated R25 had been given the money by his family explaining his</p>	S9999		

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S9999	<p>Continued From page 8</p> <p>son or daughter will bring him cash whenever he needs it.</p> <p>4.) The facility's grievance log dated 10/25/24 documents R46 had money stolen on 10/1/24.</p> <p>On 10/27/24 at 9:50 AM, R46 stated R46 had cash stolen from R46 during a room move. R46 explained R46 had \$100 in cash in R46's dresser drawer and after moving rooms, the \$100 was missing. R46 stated an unidentified housekeeper saw the cash in R46's drawer while assisting R46 with the room move.</p> <p>R46's MDS (Minimum Data Set) dated 9/11/24 documents R46 is alert and oriented.</p> <p>R46's ongoing Census Sheet documents R46 changed rooms on 10/01/24.</p> <p>On 10/28/24 at 10:39 AM, V29 SSD confirmed R46 reported having money stolen and reported it to V29 on 10/25/24. V29 reported that V29 completed a Grievance Form and that V1 Administrator was handling the investigation.</p> <p>On 10/28/24 at 10:45 AM, V1 Administrator confirmed V1 was made aware of R46 having money stolen and that the facility was handling it internally.</p> <p>On 10/28/24 at 11:40 AM, V6 CNA (Certified Nursing Assistant) stated on 10/23/24, R46 reported to V6 that R46 had money stolen.</p> <p>On 10/29/24 at 11:40 AM, V16 LPN (Licensed Practical Nurse) stated R46 reported to V16 that R46 had money stolen from him.</p> <p>On 10/30/24 at 10:15 AM, R46 stated that R46</p>	S9999		

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S9999	<p>Continued From page 9</p> <p>gets cash out of the ATM (Automated Teller Machine) using a debit card from his Social Security Card, therefore he does not have any bank statements.</p> <p>(B)</p> <p>THREE OF FOUR 300.610a) 300.1210a) 300.1210b) 300.1210c) 300.1210d)2)5)</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 300.1210 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</p>	S9999		

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S9999	<p>Continued From page 10</p> <p>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>c) Each direct care-giving staff shall review and be knowledgeable about his or her residents' respective resident care plan.</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>2) All treatments and procedures shall be administered as ordered by the physician.</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</p>	S9999		

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S9999	<p>Continued From page 11</p> <p>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> <p>Based on observation, interview, and record review the facility failed to complete weekly pressure ulcer assessments, implement treatment orders timely, administer treatments as ordered, maintain wound dressings, accurately complete skin and wound assessments, and implement interventions to prevent the development and worsening of pressure ulcers for four (R8, R32, R52, R44) of four residents reviewed for pressure ulcers in the sample list of 46. These failures resulted in R8 developing stage three pressure ulcer and R32 developing an unstageable pressure ulcer.</p> <p>Findings include:</p> <p>The facility's Measurement of Alterations in Skin Integrity policy dated January 2017 documents wound type, stage, measurements and characteristics should be assessed and documented upon identification and weekly thereafter, record refusal of treatment or pressure relieving interventions and the resident's care plan should also reflect this.</p> <p>The facility's Braden- Pressure Risk Assessment Tool policy dated January 2017 documents the Braden scale determines pressure ulcer risk and this assessment should be completed upon admission, then weekly for the first month, and then at least quarterly and with changes in</p>	S9999		

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S9999	<p>Continued From page 12</p> <p>condition. This policy documents appropriate individualized interventions should be implemented and documented on the resident's care plan.</p> <p>The facility's Pressure/Skin Breakdown- Clinical Protocol dated January 2017 documents to determine a resident's significant risk factors for developing pressure ulcers, such as immobility, recent weight loss, and a history of pressure ulcers; assess skin condition, pain, mobility, treatments, support surfaces, and diagnoses; and the physician will give orders for wound care including pressure redistribution surfaces.</p> <p>The facility's Prevention of Pressure Wounds policy dated January 2017 documents pressure injuries are usually due to sitting in the same position for an extended period of time causing increased pressure, decreased circulation, and subsequent tissue destruction; and can also be related to irritating substances on the skin such as urine and feces. This policy documents there should be a system or procedure in place to assure assessments are completed timely, changes in condition are identified, evaluated, reported to the physician, and addressed. This policy documents preventative measures include repositioning at least every two hours, determining if a special mattress is needed, use of pressure relieving cushions for chairs, avoiding donut shaped or waffle cushions, routinely assessing skin condition, using moisture barrier creams, using pillows to float heels when in bed, immediately reporting any signs of pressure injuries, administering vitamins and supplements per physician's orders, and having the dietitian assess nutrition and make recommendations.</p> <p>1.) R8's Minimum Data Set (MDS) dated 8/23/24</p>	S9999		

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S9999	<p>Continued From page 13</p> <p>documents R8 is cognitively intact, requires partial/moderate staff assistance for rolling in bed, requires substantial/maximal staff assistance for transfers, and is occasionally incontinent of urine. R8's Braden Assessment dated 10/9/24 (after R8's pressure ulcers developed) document R8 is low risk. The last Braden Assessment recorded for R8 was on 10/13/23.</p> <p>R8's Care Plan dated 5/26/23 documents R8 is at risk for impaired skin integrity, and includes interventions to apply barrier cream three times daily as needed, Braden Assessments weekly for four weeks then quarterly, and to encourage good nutrition and hydration to promote healthier skin. There is no documentation that R8 refuses turning/repositioning. This care plan has not been updated to include R8's pressure ulcers or any new pressure relieving interventions after 5/26/23.</p> <p>R8's Physician Order dated 6/19/23 "May use Pressure relieving mattress and/or cushion on w/c (wheelchair) if Needed." There is no documentation that R8 requires a pressure relieving cushion in R8's wheelchair.</p> <p>R8's ongoing weight log documents R8 had a significant weight loss between August 2024 and September 2024, and continued weight loss as of 10/30/24.</p> <p>R8's October 2024 Treatment Administration Record (TAR) documents an order dated 10/6/24 to cleanse right buttock wound with wound cleanser, apply collagen and bordered foam every shift for Stage Two pressure ulcer, and an order dated 10/10/24-10/28/24 to clean right buttock wound, apply Santyl, apply Calcium</p>	S9999		

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S9999	<p>Continued From page 14</p> <p>Alginate, and cover with a bordered foam dressing daily. This TAR documents to complete skin assessments on Mondays and Thursdays, and inaccurately documents R8's skin as intact and without wounds 10/7-10/14/24. This TAR documents to apply barrier cream to the left buttock three times daily as of 10/7/24, and there is no documentation that barrier cream was applied prior to 10/7/24.</p> <p>R8's Nursing Note dated 10/6/24 at 12:12 AM documents R8 had a new Stage Two Pressure Ulcer to the right buttock, the Wound Nurse (V12) was notified, the area was cleansed, Collagen was applied, and the wound was covered with a bordered foam dressing. There is no documentation of wound characteristics and measurements prior to evaluation by V7 Wound Physician on 10/7/24.</p> <p>R8's Wound Care Telemedicine Follow Up Evaluation dated 10/7/24, recorded by V7, documents R8 has a Group 1 mattress and a foam cushion in R8's chair. This note documents R8 has a right buttock Stage Three Pressure Wound of greater than three days duration that measured 1.5 centimeters (cm) long by 1.7 cm wide by 0.2 cm deep and had 90% slough (dead cells). This note includes recommendations to off-load wound, reposition per facility protocol, Group 2 Mattress (air mattress), Multivitamin once daily, Vitamin C 500 milligrams (mg) twice daily, Zinc Sulphate 220 mg once daily for 14 days. There is no documentation in R8's medical record that the recommended vitamins were implemented.</p> <p>R8's Wound Care Telemedicine Follow Up Evaluation dated 10/18/24 documents R8's right buttock wound resolved and R8 had a left hip</p>	S9999		

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S9999	<p>Continued From page 15</p> <p>Stage Three Pressure Wound of greater than two days duration that measured 1.3 cm by 1 cm by 0.2 cm and had 50% slough. This note documents R8 now has a Group 2 mattress as of today (11 days after V7's order) and recommends to off-load wound and repositioning. R8's Wound Care Telemedicine Follow Up Evaluation dated 10/25/24 documents R8's left hip Stage Three Pressure Wound measured 1.2 x 1 x 0.2 cm, and R8's right buttock Stage Three Pressure Wound reopened over three days ago and measured 2.0 x 2.0 x 0.3 cm.</p> <p>There is no documentation in R8's medical record that R8 has been evaluated by a dietitian since March 2024, prior to R8's weight loss and wounds.</p> <p>On 10/27/24 at 8:30 AM and 11:58 AM R8 was sitting in a wheelchair near the nurses' station with a soft lap cushion looped through the armrests of R8's chair. at 10:18 AM R8 was sitting in a wheelchair in the dining room. At 11:58 AM R8 was sitting in her wheelchair. R8 stated R8 has wounds on R8's bottom, but was unsure how long the wounds had been there or how often treatments are administered. On 10/28/24 at 9:21 AM R8 was sitting in a wheelchair by the nurses' station. At 10:38 AM R8 was sitting in a wheelchair in the dining room. At 11:13 AM staff transported R8 in a wheelchair from the dining room to the 100 hall nurses' station. Continuous observations were made from 11:13 AM until 11:39 AM of R8 sitting in a wheelchair near the nurses' station. The lap cushion remained in place during all of these observations.</p> <p>On 10/28/24 12:02 PM V4 and V6 Certified Nursing Assistants (CNAs) transferred R8 from her wheelchair into bed. There was a foam</p>	S9999		

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S9999	<p>Continued From page 16</p> <p>horseshoe shaped cushion, that was approximately one inch thick, in R8's wheelchair. R8 was incontinent of urine and V6 provided incontinence cares. R8 had open pink wounds to the right buttock and left hip that were not covered with dressings. V6 stated V6 had not provided any cares for R8 yet today and was unsure how long the wounds were without dressings. V6 stated V6 will notify the nurse so the wounds can be covered.</p> <p>On 10/28/24 at 12:16 PM V3 Licensed Practical Nurse stated R8's wounds started with the right buttock that was a thin layer of skin that had sheered off, and then a few days later the left hip wound developed. V3 entered R8's room, administered R8's pressure ulcer treatment, and used pillows to position R8 on her right side before leaving the room. V3 stated no staff had reported that R8's dressings came off, prior to V6.</p> <p>On 10/28/24 at 2:34 PM V11 CNA stated V11 R8 was transferred out of bed around 7:30 AM and V11 provided no other transfer or toileting cares for R8 prior to leaving at 10:00 AM. V11 stated V4 was the only other CNA working on R8's hall at that time. On 10/28/24 at 3:04 PM V4 CNA stated V4 did not provide any cares for R8 besides the transfer observed at 12:02 PM.</p> <p>On 10/28/24 at 3:23 PM V12 Wound Nurse stated V12 has been the facility's wound nurse for approximately three weeks. V12 stated V12 has not yet updated resident care plans to include wounds, but they should be updated to reflect wounds and new interventions. V12 stated V12 and V7 Wound Physician complete weekly wound assessments which are documented in the assessment section of the resident's electronic medical record (EMR) or in V7's notes. V12</p>	S9999		

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S9999	Continued From page 17 stated there can't be a delay in starting treatment, and the nurses should notify the physician and document an assessment of the wound when found. V12 confirmed Braden assessments are documented in the assessments section of the EMR, and should be done on admission, then weekly for four weeks, and then quarterly. V12 stated residents at high risk for pressure ulcers should have weight monitored weekly, placed on a turning and repositioning schedule, and skin checks more than weekly. V12 stated turning/repositioning should be documented on the care plan and in tasks in the EMR. V12 stated residents with wounds should be referred to the dietitian. At 4:00 PM V12 Wound Nurse stated V12 rounds with V7 Wound Physician, and V12 is responsible for entering V7's orders/recommendations. V12 stated R8 used to walk and then recently declined requiring total assistance for cares. V12 stated staff should reposition R8 at least every two hours and offload pressure from R8's wounds. V12 stated "That is way too long for (R8) to be in her wheelchair", when told R8 had not been repositioned from 7:30 AM until 12:00 PM. V12 stated R8's air mattress was installed on 10/18/24. V12 stated V12 was unsure when R8's wheelchair cushion was implemented. V12 was unaware of V7's recommendations for Vitamin C, Zinc and Multivitamin, and confirmed these recommendations were never implemented. On 10/29/24 at 12:18 V12 confirmed V12 had not notified the dietitian of residents with wounds, and confirmed all of V7's wound notes were uploaded into R32's electronic medical record. On 10/30/24 at 11:05 AM V12 stated V12 was unable to determine the type and brand of R8's cushion, so the cushion was replaced today. On 10/29/24 at 11:57 AM V2 Director of Nursing	S9999		

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S9999	<p>Continued From page 18</p> <p>stated V2 used to oversee wounds until June 2024. V2 stated the wound nurse is responsible for sending a wound list to the dietitian.</p> <p>On 10/29/24 at 12:34 PM V19 Registered Dietitian stated R8's last nutritional assessment was completed in March 2024. V19 stated the facility does not notify or request for V19 to evaluate residents with wounds. V19 stated V19 runs reports to determine which residents need to be evaluated, but there is no report that identifies wounds. V19 stated V19 has to ask staff to determine if residents have wounds. V19 stated no one had requested to evaluate R8's nutritional status and V19 was unaware that R8 had developed pressure ulcers. V19 stated if V19 had evaluated R8, V19 would have recommended Zinc, Vitamin C, a multivitamin, and liquid protein; and possibly would have recommended a nutritional supplement if R8 had lost weight, but R8 does not have a documented weight for October.</p> <p>On 10/29/24 from 1:00 PM-1:15 PM V7 stated V7 has been the facility's wound physician for the last few months and V7 conducts her visits virtually, not in person. V7 stated Prealbumin is ordered to evaluate nutrition and protein levels and should be implemented by the next month's laboratory draw. V7 stated vitamins aid with wound healing and should be implemented by the next day. V7 stated Group 1 mattresses are foam mattresses that are good for up to Stage Two Pressure Ulcers and a Group 2 mattress is a low air loss mattress used for Stage Three Pressure Ulcers and higher, or if the resident has a low Body Mass Index. V7 stated residents at high risk for pressure ulcers should have preventative interventions implemented based on the facility's protocol, which generally includes frequent</p>	S9999		

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S9999	<p>Continued From page 19</p> <p>repositioning and offloading and use of pressure relieving surfaces. V7 stated V7 avoids using horseshoe or donut cushions since they cause skin to spread and can cause wounds to worsen. V7 stated generally foam cushions with approximately three inch thickness are used. V7 stated there was a period of time where the facility didn't have a wound nurse due to staffing issues; V7 worked closely with V2 when V2 was the Assistant Director of Nursing, but then V2 changed positions and there were several weeks where no one was assessing wounds. V7 confirmed not implementing pressure relieving interventions, physician recommendations, nutritional evaluations, wound and skin assessments/monitoring, and treatments timely and as ordered, can contribute to the development and worsening of pressure ulcers.</p> <p>2.) R32's MDS dated 7/10/24 is inaccurate and documents R32 did not have pressure ulcers. R32's MDS dated 10/10/24 documents the following: R32 has sever cognitive impairment, R32 requires supervision/touch assistance from staff for bed mobility, and partial/moderate staff assistance with transfers. R32 is occasionally incontinent of urine and requires dependence on staff for toileting hygiene. R32 had an unplanned significant weight loss within the last six months. R32 has two facility acquired pressure ulcers, one stage three and one unstageable.</p> <p>R32's Braden Assessment dated 7/3/24 documents R32 scored low risk for developing pressure ulcers. There are no other documented Braden Assessments in R32's medical record until 10/8/24, after R32 developed unstageable and stage three pressure ulcers.</p> <p>R32's Care Plan dated 7/9/24 documents R32</p>	S9999		

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S9999	<p>Continued From page 20</p> <p>has potential for impaired skin integrity and includes interventions to apply barrier cream three times daily as needed, Braden scale weekly for four weeks then quarterly, encourage good nutrition and hydration, follow physician's orders for treatment. This care plan has not been updated to include R32's pressure ulcers or any new pressure relieving interventions after 7/9/24. There is no documentation that R32 refuses pressure relieving interventions.</p> <p>R32's Physician's Order dated 7/11/24 documents to give Pro Stat (protein supplement) 30 milliliters once daily. R32's Physician Order dated 7/9/24 documents to apply pressure relieving boots or offload heels when in bed. R32's Physician Order dated 7/31/24 documents air mattress to bed. R32's Physician Order dated 7/12/24 documents "May use pressure relieving mattress and/or cushion on w/c if Needed." There is no documentation that barrier cream, air mattress, or wheelchair cushion was applied prior to these orders.</p> <p>R32's Admission Evaluation dated 7/3/24 documents R32 admitted with a Stage Two Pressure Ulcer of sacrum/coccyx. There is no documentation that a treatment order was initiated for this wound until 7/9/24 and there are no documented assessments of this wound until 7/31/24 when the wound had deteriorated to a Stage Three. There is no documentation that R32 admitted with any foot wounds. R32's Shower Sheet dated 7/7/24 documents R32 had a blister to the left heel and left big toe. There are no documented measurements or wound descriptions, and no documentation that the physician was notified and a treatment was initiated prior to 7/9/24.</p>	S9999		

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S9999	<p>Continued From page 21</p> <p>R32's Nursing Note dated 7/9/2024 at 12:34 PM documents R32 had a blister to the left heel that measured 3.5 cm by 7 cm, a skin protectant and dry dressing was applied, R32's buttocks was red/excoriated with no open areas. An antifungal cream and zinc oxide cream was applied. R32's Nursing Note dated 8/4/2024 at 5:29 PM documents R32's coccyx had a 6 cm by 3 cm maroon spot with a small open area. Triple antibiotic ointment and a bordered foam dressing was applied and education was provided on timely depend changes and cream application.</p> <p>R32's Registered Dietitian Note dated 8/29/24 at 8:07 AM documents R32's weight has decreased over the past month and there were no new interventions. This note does not document that the dietitian was aware of R32's stage three pressure ulcers and there is no documentation that R32 was evaluated by a dietitian in September.</p> <p>There are no weekly wound assessments in R32's EMR prior to October 2024, besides V7's assessments on 7/31/24, 8/9/24, 8/15/24, 9/5/24, and 9/12/24. R32's Wound Care Telemedicine Initial Evaluation dated 7/31/24, recorded by V7, documents R32's unstageable Deep Tissue Injury of the Left Heel measured 6.9 cm by 4.4 cm and no measurable depth. and R32's Stage Three Pressure Ulcer of the coccyx measured 1.9 cm by 1 cm by 1.2 cm. V7 recommended to off-load wound, reposition per facility protocol, float heels in bed, pressure relieving boot, dietitian consult, and Prealbumin level. There is no documentation that R32's Prealbumin level was obtained as recommended and V7 documents Prealbumin results "pending" on V7's Evaluations from July-October 2024.</p>	S9999		

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S9999	<p>Continued From page 22</p> <p>R32's Wound Care Telemedicine Evaluation dated 10/25/24 documents R32's unstageable heel ulcer measured 1.0 x 0.7 x 0.2 cm, the wound was macerated (moisture related damage), and the treatment was changed to Calcium Alginate with bordered foam dressing applied three times weekly. R32's Stage Three Pressure Ulcer of the coccyx measured 1.0 x 0.5 x 0.5 cm.</p> <p>R32's August and September 2024 TAR documents R32's left heel treatment scheduled three times per week was not administered three times in August and five times in September. R32's daily coccyx treatment was not administered eight times in August and eight times in September.</p> <p>On 10/27/24 at 11:44 AM R32 stated R32 has sores on her feet/heel and her bottom that R32 did not admit with. R32 was lying in bed on her back and was not wearing heel protectors. R32's heels were in direct contact with R32's air mattress. R32's wheelchair pressure relieving cushion decompressed with applied hand pressure and the wheelchair seat could be felt through the cushion, indicating the cushion was not fully inflated with air.</p> <p>On 10/27/24 at V8 CNA stated V8 was unsure if R32 has any foot wounds, but R32 has a wound on R32's bottom. V8 stated R32 wears pressure relieving boots at night. V8 tested R32's wheelchair cushion with hand pressure and confirmed the cushion decompressed. V8 stated "I believe that is how it (cushion) is suppose to be."</p> <p>On 10/28/24 at 9:03 AM R32 was sitting in her wheelchair in her room. At 11:20 AM staff brought</p>	S9999		

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S9999	<p>Continued From page 23</p> <p>R32 to her room and R32 was still in her wheelchair. R32 remained sitting in her wheelchair in her room until 11:45 AM when V4 CNA transferred R32 onto the toilet. At 11:54 AM V5 CNA responded to R32's bathroom call light. V5 confirmed R32's wheelchair cushion was not fully inflated by testing it with applied hand pressure. V5 stated that is how much it has been inflated since R32 started using it. V5 transferred R32 off of the toilet and into R32's wheelchair containing the cushion.</p> <p>On 10/28/24 at 11:59 AM V4 stated V4 transferred R32 out of bed and into her wheelchair between 8:00 AM and 9:00 AM. At 12:01 PM V4 and V5 transferred R32 into the stationary chair in R32's room and the chair did not contain a pressure relieving cushion. At 12:31 PM and 1:20 PM R32 was still sitting in the stationary chair.</p> <p>On 10/28/24 at 12:31 PM V3 Licensed Practical Nurse stated V3 already completed R32's heel treatment earlier this morning and V3 had applied a medicated honey treatment. V3 stated V3 wasn't aware that R3's heel treatment had changed to calcium alginate, so V3 will need to do R32's heel treatment again. At 1:36 PM V3 stated skin assessments are documented on the Medication Administration Records, the nurse documents if skin is intact, or if there is a wound or new wound. V3 stated there should be wound descriptions in the progress notes. V3 confirmed CNAs should use the care plan to determine pressure relieving interventions. V3 entered R32's room, transferred R32 from the stationary chair into bed, and administered R32's left heel and coccyx wound treatments. R32's stationary chair did not contain a pressure relieving cushion. R32's left outer heel had a small superficial</p>	S9999		

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NAME OF PROVIDER OR SUPPLIER PLEASANT MEADOWS SENIOR LIVING		STREET ADDRESS, CITY, STATE, ZIP CODE 400 WEST WASHINGTON CHRISMAN, IL 61924		
(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
S9999	<p>Continued From page 24</p> <p>wound and there was a deep marble sized wound to R32's coccyx. V3 raised the head of R32's bed, applied R32's covers, and left R32 lying on her back with the head of the bed elevated approximately 45 degrees (causing pressure to R32's coccyx). V3 did not offer or encourage R32 to off-load pressure from her coccyx and lay on her side prior to leaving R32's room.</p> <p>On 10/28/24 at 1:57 PM V3 confirmed V3 did not offer or encourage R32 to lay on her side prior to leaving the room. V3 stated V3 just didn't think of it (off-loading), and confirmed off-loading pressure from the coccyx would aide in wound healing.</p> <p>On 10/28/24 at 3:23 PM V12 Wound Nurse stated R32's wounds are pressure related and interventions include repositioning, off-loading, and pressure relieving boots. V12 confirmed R32 requires staff assistance to reposition or off-load, R32 should be repositioned at least every two hours and pillows should be used to off-load coccyx and heel pressure, unless pressure relieving boots are in place. V12 stated R32 should use a pressure relieving cushion in the wheelchair and stationary chair in her room. V12 confirmed R32's wheelchair cushion should be inflated and you should not be able to feel the seat of the wheelchair when pressure is applied V12 stated the CNAs should be checking that. V12 confirmed nurses should look at the TAR for treatment orders prior to administration and treatment administrations are documented on the TAR. V12 confirmed a blister is a stage two pressure ulcer and not implementing pressure ulcer interventions could contribute to a decline in wounds. V12 confirmed R32 admitted with a stage two pressure ulcer of the sacrum, there is no documentation of left heel wound on</p>	S9999		

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S9999	<p>Continued From page 25</p> <p>admission, and there are no assessments or measurements of this wound prior to being seen by V7. V12 confirmed there are no documented Braden Assessments in R32's EMR after 7/3/24 until 10/8/24. V12 stated a Braden score of 15 is considered high risk and that was R32's score on admission. V12 confirmed Prealbumin was never ordered for R32 and V12 stated she will follow up on this.</p> <p>On 10/29/24 at 9:38 AM V34 MDS Coordinator reviewed R32's admission and nursing notes and MDS, and confirmed R32's July MDS does not accurately reflect R32's skin status at that time. V34 stated V34 was told by staff at that time that R32 did not have any wounds, the wound nurse is suppose to enter wounds into the wound rounds tracking system, but there was no information entered for R32 at that time. V34 stated V34 consulted with corporate and will need to submit a modification for this MDS. V34 stated the wound nurse is responsible for adding wounds and new interventions on the care plan, and pressure relieving boots are documented in physician orders and on the care plan.</p> <p>On 10/29/24 at 12:34 PM V19 Registered Dietitian stated R32 was evaluated in July and August with no new recommendations, but V19 was not aware that R32's wounds had declined when R32 was evaluated in August. V19 stated if V32 was aware, V19 may have increased liquid protein to be given twice daily. V19 stated R32 should have been evaluated again in September, but V19 does not see where that was done.</p> <p>The manufacturer's instructions for R32's pressure relieving cushion dated 5/3/24 documents to inflate air until all of the air cells feel firm, remove the hand pump, allow air to escape</p>	S9999		

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S9999	<p>Continued From page 26</p> <p>from the valve until the air deflation is no longer felt or heard, and then close the inflation valve. Perform a hand check to evaluate sufficient air between the person and the base of the cushion, and adjust as needed.</p> <p>3.) R44's Minimum Data Set (MDS) dated 8/29/24 documents R44 is at risk for pressure ulcers and was admitted with no pressure ulcers.</p> <p>R44's Wound Care Telemedicine initial evaluation dated 10/18/24 by V7, Wound Physician documents R44 developed a facility acquired Stage III Pressure Ulcer of "greater than 10 days duration" on the coccyx measuring 1.6 cm (centimeters) by 1.0 cm by 0.3 cm deep. At that time V7 ordered the following wound dressing: Calcium Alginate with silver covered with gauze island dressing with border. R44's Treatment Administration Record documents this treatment was initiated.</p> <p>R44's Wound Care Telemedicine Follow-up evaluation dated 10/25/24 by V7, Wound Physician documents the wound has increased in size to 3.0 cm (centimeters) by 1.5 cm by 0.5 cm deep. At that time V7 ordered the following wound dressing: medicated honey Calcium Alginate with silver covered with gauze island dressing with border. R44's Treatment Administration Record documents this treatment was not initiated. The treatment ordered 10/18/24 was continued.</p> <p>On 10/29/24 at 1:00PM V12 Licensed Practical Nurse (wound Nurse) applied R44's treatment. V12 removed the old dressing, removed gloves, performed hand hygiene, cleansed R44's wound with normal saline, removed gloves, performed hand hygiene, applied calcium alginate with silver</p>	S9999		

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S9999	<p>Continued From page 27</p> <p>to clean wound bed and covered with a bordered foam dressing. V12 did not apply medicated honey to wound as ordered. When asked why she did not apply the medicated honey V12 stated "I don't think that is ordered on the TAR." At this time it was observed R44 had a new Stage III pressure ulcer on her left ischium approximately the size of a quarter.</p> <p>There is no documentation R44 has been evaluated by a dietitian for the facility acquired pressure ulcers.</p> <p>On 10/29/24 at 12:34PM V19 Registered Dietitian stated, "When a resident develops a facility acquired pressure ulcer, the facility should reach out to me and I should evaluate and make recommendations to enhance healing. This facility does not do so. I usually pick up on issues like this when I do the periodic visits. I have not evaluated (R44)."</p> <p>4.) R52's Minimum Data Set (MDS) dated 8/27/24 documents R52 is at risk for pressure ulcers and was admitted with no pressure ulcers. R52's Treatment Administration Record (TAR) for October 2024 documents a new treatment dated 10/26/24 for Clean area to left buttock with normal saline. Apply calcium alginate to wound bed & cover with gauze foam daily every day shift for wound care.</p> <p>On 10/29/24 at 10:00 AM V12 Licensed Practical Nurse (wound Nurse) stated "(R52) developed a new facility acquired Stage II pressure ulcer 10/25/24. We are treating it."</p> <p>On 10/29/24 at 1:15PM V12 Licensed Practical Nurse (wound Nurse) applied R52's treatment. V12 removed the old dressing, removed gloves,</p>	S9999		

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S9999	<p>Continued From page 28</p> <p>performed hand hygiene, cleansed R52's wound with normal saline, removed gloves, performed hand hygiene, applied calcium alginate with silver to clean wound bed and covered with a bordered foam dressing. At this time V12 verified R52's wound is now a Stage III because it has visible slough of tissue. V12 also verified R52 has developed an additional dime sized stage III pressure ulcer to her right buttock. R52 was sitting in the bed with the head elevated to sitting position. R52's bed did not have a pressure relieving mattress in place.</p> <p>There is no documentation R52 has been evaluated by a dietitian for the facility acquired pressure ulcers.</p> <p>On 10/29/24 at 12:34PM V19 Registered Dietitian stated, "When a resident develops a facility acquired pressure ulcer, the facility should reach out to me and I should evaluate and make recommendations to enhance healing. This facility does not do so. I usually pick up on issues like this when I do the periodic visits. I have not evaluated (R52)."</p> <p>There is no documentation to support R52 has been evaluated by the wound care Physician. On 10/29/24 at 1:15PM V12 verified this.</p> <p>(B)</p> <p>FOUR OF FOUR 300.610a) 300.1010h) 300.1210a) 300.1210b) 300.1210c) 300.1210d)3)</p>	S9999		

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S9999	<p>Continued From page 29</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> <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>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</p>	S9999		

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S9999	<p>Continued From page 30</p> <p>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>c) Each direct care-giving staff shall review and be knowledgeable about his or her residents' respective resident care plan.</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>These requirements were not met as evidenced by:</p>	S9999		

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S9999	<p>Continued From page 31</p> <p>Based on observation, interview, and record review the facility failed to monitor weights and implement nutritional interventions for significant weight loss for four (R8, R52, R25, R44) of five residents reviewed for nutrition in the sample list of 46. These failures resulted in ongoing weight loss following a significant weight loss for R8, R52, R25, and R44.</p> <p>Findings include:</p> <p>The facility's Nutrition (Impaired)/Unplanned Weight Loss - Clinical Protocol dated August 2008 documents to assess for recent weight loss and the physician will review for possible causes of weight loss with the nursing staff and/or dietitian before ordering interventions. This policy documents the physician and/or designee will authorize appropriate interventions as indicated, reconsider dietary restrictions and altered diet consistency, and consider diagnostic testing.</p> <p>The facility's Routine Nutritional Documentation and Assessment dated 2020 documents residents are assessed and monitored for nutrition in accordance with the Minimum Data Set (MDS) schedule, and residents who are considered with nutritional risk or concerns are referred to the Registered Dietitian for a comprehensive nutritional assessment. This policy documents the Dining Services Manager and Registered Dietitian will document quarterly progress notes for observations, progress of nutritional goals, and nutritional care information.</p> <p>1.) R8's MDS dated 8/23/24 documents R8 is cognitively intact, R8's weight was 156 pounds (lb), and R8 had no significant weight loss within the last six months. The last documented</p>	S9999		

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S9999	<p>Continued From page 32</p> <p>nutritional assessment in R8's medical record is dated as 3/2/24 and there is no documentation that R8's significant weight loss in September was evaluated by a dietitian.</p> <p>R8's ongoing weight log documents R8's weight as follows: 4/4/24 150.4 lbs, 7/1/24 156.4 lbs, 8/2/24 156 lbs, 9/2/24 146 lbs (6.41% loss in one month), and 10/30/24 143 lbs (8.3% loss in three months). There were no documented weights in R8's medical record after 9/2/24 until 10/30/24.</p> <p>R8's Care Plan dated 5/26/23 documents R8 has a nutritional problem related to abnormal weight loss and interventions include to provide supplements as ordered, dietitian to evaluate and make dietary changes as needed. This care plan does not document any nutritional interventions were developed/implemented after 5/26/23 to address R8's significant weight loss.</p> <p>R8's active October 2024 physician's orders documents R8's diet as Regular/Mechanical Soft. There are no documented orders for nutritional supplements.</p> <p>R8's Wound Care Telemedicine Follow Up Evaluation dated 10/25/24 documents R8 has stage three pressure ulcers to the right buttock and left hip.</p> <p>On 10/27/24 at 10:23 AM R8 was in the dining room eating. R8's meal consisted of waffles, banana, and sausage, and did not include any nutritional supplements.</p> <p>On 10/29/24 at 12:34 PM V19 Registered Dietitian stated R8 was due for an annual nutritional evaluation in June 2024, but one was not done because the electronic software</p>	S9999		

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S9999	<p>Continued From page 33</p> <p>program did not trigger for one to be done with R8's annual MDS. V19 stated R8's last nutritional assessment was completed in March 2024. V19 stated no one had requested to evaluate R8's nutritional status and V19 was unaware that R8 had developed pressure ulcers. V19 stated residents with wounds should be evaluated by the dietitian monthly. If V19 had evaluated R8, V19 would have recommended Zinc, Vitamin C, a multivitamin, liquid protein. V19 stated V19 possibly would have recommended a nutritional supplement if R8 had lost weight, but R8 does not have a documented weight for October.</p> <p>On 10/29/24 at 2:00 PM V2 Director of Nursing stated weights are recorded under the weight section of the resident's electronic medical record. R8's weight was requested to be obtained at this time.</p> <p>On 10/30/24 at 11:02 AM V10 Restorative Nurse/Registered Nurse stated R8's weight today was 143 lbs.</p> <p>2.) R44's weight flow sheet documents on 05/12/2024, (R44) weighed 125.8 lbs. On 10/04/2024, R44 weighed 101.2 pounds which is a 19.55 % Loss.</p> <p>R44's Wound Care Telemedicine initial evaluation dated 10/18/24 by V7, Wound Physician documents R44 developed a facility acquired Stage III Pressure Ulcer of "greater than 10 days duration" on the coccyx.</p> <p>10/29/24 12:39 PM V19 Registered Dietitian stated "The facility does not reach out to me when a resident has a wound or a significant weight loss. Yes I should be notified of a significant weight loss and/or a wound and I</p>	S9999		

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S9999	<p>Continued From page 34</p> <p>should evaluate these residents." V19 verified V19 has not evaluated R44.</p> <p>3.) R52's weight flow sheet documents on 09/03/2024, R52 weighed 131.2 lbs. on 10/15/2024, R52 weighed 123.6 pounds which is a 5.79 % loss.</p> <p>R52's Treatment Administration Record (TAR) for October 2024 documents a new treatment dated 10/26/24 for Clean area to left buttock with normal saline. Apply calcium alginate to wound bed & cover with gauze foam daily every day shift for wound care.</p> <p>On 10/29/24 at 10:00 AM V12 Licensed Practical Nurse (wound Nurse) stated "(R52) developed a new facility acquired Stage II pressure ulcer on 10/25/24. We are treating it."</p> <p>10/29/24 12:39 PM V19 Registered Dietitian stated "The facility does not reach out to me when a resident has a wound or a significant weight loss. Yes I should be notified of a significant weight loss and/or a wound and I should evaluate these residents." V19 verified V19 has not evaluated R52.</p> <p>4.) R25's ongoing weight logs document R25's weight as 229.6 pounds on 08/01/24 and 216 pounds on 09/02/24, demonstrating a 5.92% weight loss in one month. This log documents R25's October 2024 weight as 215.4 pounds.</p> <p>R25's Nursing Progress Notes dated 9/1/24 - 9/30/24 does not document that V35 R25's Nurse Practitioner or V19 RD (Registered Dietician) were notified of R25's significant weight loss.</p>	S9999		

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S9999	<p>Continued From page 35</p> <p>R25's September and October 2024 Physician Order Sheets do not document any new orders for nutritional supplements following R25's significant weight loss.</p> <p>On 10/29/24 at 11:10 AM, V2 DON (Director of Nursing) stated V2 was unaware of R25's weight loss. V2 stated the expectation is that V19 RD (Registered Dietitian) would report the weight loss to nursing services with their recommendations.</p> <p>On 10/29/24 at 12:31 PM, V19 RD stated that the weight loss from 08/01/24 through 09/02/24 would be considered a significant weight loss. V19 explained the facility should have reached out to V19 so that V19 could have evaluated R25's weight loss and ordered nutritional supplements due to R25's weight loss but "the facility does not do that".</p> <p>(B)</p>	S9999		