

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>IL6016489</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>C</b> <b>12/17/2024</b>
NAME OF PROVIDER OR SUPPLIER  <b>ASBURY COURT NURSING &amp; REHAB</b>		STREET ADDRESS, CITY, STATE, ZIP CODE <b>1750 ELMHURST ROAD</b> <b>DES PLAINES, IL 60018</b>		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
S 000	Initial Comments  Investigation of Facility Reported Incident of November 27, 2024/IL182543 Investigation of Facility Reported Incident of December 2, 2024/IL182544	S 000		
S9999	Final Observations  Statement of Licensure Violations: 300.610a) 300.1210a) 300.1210b)4)5) 300.1210d)6)  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		

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

TITLE

(X6) DATE

Electronically Signed

12/31/24

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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>4) All nursing personnel shall assist and encourage residents so that a resident's abilities in activities of daily living do not diminish unless circumstances of the individual's clinical condition demonstrate that diminution was unavoidable. This includes the resident's abilities to bathe, dress, and groom; transfer and ambulate; toilet; eat; and use speech, language, or other functional communication systems. A resident who is unable to carry out activities of daily living shall receive the services necessary to maintain good nutrition, grooming, and personal hygiene.</p> <p>5) All nursing personnel shall assist and encourage residents with ambulation and safe transfer activities as often as necessary in an effort to help them retain or maintain their highest practicable level of functioning.</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,</p>	S9999		

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S9999	<p>Continued From page 2</p> <p>seven-day-a-week basis:</p> <p>6) All necessary precautions shall be taken to assure that the residents' environment remains as free of accident hazards as possible. All nursing personnel shall evaluate residents to see that each resident receives adequate supervision and assistance to prevent accidents.</p> <p>This REQUIREMENT is not met as evidenced by:</p> <p>Based on interview and record review, the facility failed to ensure one resident (R1) was kept safe from falls and failed to implement effective fall prevention interventions. This failure resulted in R1 falling seven times in one month (11/13/24, 11/15/24, 11/20/24, 11/27/24, 12/1/24, 12/2/24, and 12/6/24) which resulted in R1 sustaining a subdural hematoma and a head laceration that required sutures.</p> <p>Findings include:</p> <p>R1 is a 96-year-old female who originally admitted to the facility on 1/18/2023 and continues to remain in the facility. R1 has multiple diagnoses including but not limited to the following: dementia, type II DM, head injury, repeated falls, psychosis, and traumatic subdural hemorrhage.</p> <p>Per facility fall incident log show R1 experienced a fall on 11/13/24, 11/15/24, 11/20/24, 11/27/24, 12/1/24, 12/2/24, and 12/6/24.</p> <p>Facility reported incident dated 11/27/24 shows R1 was observed on floormat next to R1's bed. R1 sent to hospital. Hospital records indicate R1 sustained a traumatic subdural hematoma after</p>	S9999		

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S9999	<p>Continued From page 3</p> <p>an unwitnessed fall and received sutures to a head laceration.</p> <p>Facility reported incident dated 12/2/24 shows R1 was observed on the floor in front of the toilet in the bathroom. R1 was sent to the hospital due to R1 stating she hit her head. Hospital records indicate a diagnosis of a subdural hematoma. Following investigation, R1 had been assisted to the toilet by V5 (Certified Nursing Assistant/CNA) who then stepped out of the bathroom to obtain assistance for R1. Upon returning, R1 had fallen.</p> <p>On 12/16/24 at 11:20AM, V4 (CNA) was interviewed regarding R1 and fall on 12/2/24. V4 said I was R1's assigned CNA that day. It was during lunch service, and I was in the dining room passing trays. V5 came up to me in the dining room and told me she had assisted R1 to the toilet and wanted me to assist her when R1 had finished. V4 said I immediately ran to the bathroom in her room. When I walked in, I saw R1 on the floor in front of the toilet and she was saying "my head, my head". V4 said R1 is a high fall risk, and she should never be left alone in the bathroom. V5 should have known this. R1 has had many falls and sometimes she needs more than one person assistance depending on her behaviors.</p> <p>On 12/16/24 at 11:56AM, V3 (Co-Director of Nursing) was interviewed regarding R1 and falls. V3 said R1 is a resident that is very at risk for falls. R1 has had many falls, and we are constantly putting interventions to prevent her from falling. V3 said V5 assisted R1 to the bathroom during lunch. V5 left R1 in the bathroom and grabbed V4 for assistance. When they returned, R1 had fallen. The staff should be aware of the importance to not leave R1 in the</p>	S9999			

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S9999	<p>Continued From page 4</p> <p>bathroom unattended. V3 said on 11/27/24, R1 sustained a subdural hematoma from the fall. The hospital records from 12/2/24 indicated that the hematoma had grown and there was new blood present.</p> <p>R1's Minimum Data Set (MDS) dated 12/2/24 shows R1 requires maximum assistance when using the toilet. On 12/16/24 at 1:05PM, V8 (CNA) and V9 (CNA) told this surveyor that if a resident is a high fall risk and requires maximum assistance with toileting that they should never be left unattended in the bathroom.</p> <p>Facility Fall Prevention Policy with last revision date of 2/2023 states in part but not limited to the following: Each resident will be assessed for fall risk and will receive care and services in accordance with their individualized level of risk to minimize the likelihood of falls. Provide interventions that address unique risk factors. Each resident's risk factors, and environmental hazards will be evaluated when developing the resident's comprehensive plan of care. Interventions will be monitored for effectiveness.</p> <p>"A"</p>	S9999			