

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: IL6012678	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED C 01/15/2025
NAME OF PROVIDER OR SUPPLIER ASCENSION VILLA FRANCISCAN		STREET ADDRESS, CITY, STATE, ZIP CODE 210 NORTH SPRINGFIELD AVENUE JOLIET, IL 60435		
(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 Complaint Investigation: 2570157/IL183749	S 000		
S9999	Final Observations Statement of Licensure Violations: 300.610a) 300.1010h) 300.1210b) 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 300.1010 Medical Care Policies 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	S9999		

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

TITLE

(X6) DATE

Electronically Signed

02/03/25

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S9999	Continued From page 1 accident, injury or change in condition at the time of notification. 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. 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: 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. These Regulations are not met as evidenced by: Based on interview and record review, the facility failed to ensure a resident's Physician/Nurse Practitioner was immediately notified of a fall where the resident had hit his head. This failure resulted in an over six-hour delay in hospitalization and treatment. This applies to 1 of 3 residents (R3) reviewed for notification of changes.	S9999			

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S9999	Continued From page 2 Findings include: The facility's 1/6/25 reportable Serious Injury Incident form for R3 showed "Resident noted on his right side next to his bed. Resident was transferred to hospital. Admitted with 4 [millimeter] hyper density left frontoparietal lobe suspicious for a small focus of intraparenchymal hemorrhage ..." R3's 1/4/25 progress note showed "9:30 PM, resident observed, laying on the floor on his right side, next to his bed, bruise noted, on right side of face with swelling ...call out to [Nurse Practitioner (V16)] ...neuro-check in progress ..." This progress note was timed at 11:48 PM, two hours after R3's fall. R3's 1/5/25 progress note showed "[Nurse on Duty] called Dr. on call, NP [V16], to get orders. Waiting on call back. Resident will continue to be monitored for safety ..." This progress note was timed at 4:10 AM, over six hours after R3's fall. R3's 1/5/25 progress note from 4:22 AM showed "Received a call back from [V16] at 4:13 AM, orders to send resident to ER (Emergency Room) for further assessment." R3's nursing progress note does not show the time R3 went to the hospital or how he was transported. On 1/9/25 at 2:00 PM, V1 (Administrator) stated when the night nurse had come on duty, she called the Nurse Practitioner on call to get orders. V1 stated R3's fall was unwitnessed. On 1/10/25 at 3:10 PM, V16 (Nurse Practitioner) stated he does not recall every detail and he was not alarmed by the initial call he received- there was no obvious injury. V16 stated when they	S9999		

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S9999	Continued From page 3 called him again though he thought there was something wrong. V16 stated he has to make decisions based on the information that is given to him. V16 stated if the resident hits their head and the resident is on Coumadin (anti-coagulant medication), you send them to the hospital. R3's Face Sheet showed diagnoses that include long term use of anticoagulant and personal history of venous thrombosis and embolism. R3's January 2025 Physician Order Sheet showed a 1/2/25 order for 3mg of Coumadin daily, and a standing order for "Resident on Anticoagulantmonitor for signs of bleeding.,," The facility's Change in a Resident's Condition or Status policy (revised 2/2022) showed "A. The nurse will notify the resident's Health care provider or physician on call when there has been a (an) 1. Accident or incident involving the resident 5. Need to alter the resident's medical treatment significantly; 6. Need to transfer the resident to a hospital/treatment center ..." (A)	S9999			