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| APERION CARE WESLEY | 1415 WEST FOSTER AVENUE CHICAGO, IL 60640 |

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| S 000 | Initial Comments<br><br>Annual Licensure Survey | S 000 | | |
| S9999 | Final Observations<br><br>Statement of Licensure Violations:<br><br>1 of 2<br><br>300.610a)<br>300.1210b)4)<br>300.1210c)<br>300.1210d)4)A)<br><br>Section 300.610 Resident Care Policies<br><br>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.<br><br>Section 300.1210 General Requirements for Nursing and Personal Care<br><br>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 | S9999 | | |

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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.

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.

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:

4) Personal care shall be provided on a 24-hour, seven-day-a-week basis. This shall include, but not be limited to, the following:

A) Each resident shall have proper daily personal attention, including skin, nails, hair, and oral hygiene, in addition to treatment ordered by the physician.

These requirements were NOT MET as evidenced by:

Based on observations, interviews, and record

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reviews, the facility failed to ensure foot care was provided for 1 resident (R1) and failed to assist the resident in making appointments with a qualified person to receive appropriate foot care, demonstrating inadequate care. This failure resulted in R1 suffering physical harm stating symptoms of "unbearable" foot pain and also suffering psychosocial harm stating feelings of depression, irritability and difficulty sleeping.

Findings include:

On 1/13/25 at 10:27am, surveyor observed R1 displaying facial grimacing and when surveyor inquired about the facial grimacing, R1 replied, "It's my feet. Look at my feet. The pain is unbearable sometimes. I am so depressed and mad. The pain makes it impossible to sleep." Surveyor observed R1's feet, which were red, very dry, and scaly. R1's toenails were long, and discolored. A maroon colored substance was observed between the 1st and 2nd toe and the 4th and 5th toe on R1's right foot. A brown substance was observed between the 1st and 2nd toe on R1's left foot. Surveyor asked when the last time R1 received nail care and R1 replied, "I went to the podiatrist once. The staff will not touch my nails because they said I have to see podiatry. It was years ago since I seen the podiatrist. My fingernails and hair aren't any better. My hair is all matted."

R1's Face Sheet, documents medical diagnosis that include but are not limited to type 2 diabetes mellitus; other abnormalities of gait and mobility; cerebral infarction; dislocation of internal left hip prosthesis; hemiplegia and hemiparesis following cerebral infarction affecting left non-dominant side; need for assistance with personal care; dysphagia, oropharyngeal phase;

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gastro-esophageal reflux disease without esophagitis; gastrostomy status; and dysphagia following cerebral infarction. R1's BIMS (Brief Interview for Mental Status) Summary Score: 10," dated 10/11/24, suggests moderate cognitive impairment.

R1's Care Plan, revised date 4/24/24, documents, in part, "(R1) has Diabetes Mellitus," with interventions, "Check all of body for breaks in skin and treat promptly as ordered by doctor."

R1's Care plan, revised date 5/22/24, documents, in part, "(R1) has an ADL (activities of daily living) self-care/mobility performance (functional abilities) deficit that may fluctuate with activity throughout the day r/t (related to) Activity Intolerance, Fatigue, Limited Mobility, abnormal gait, Dysphagia, weakness, CVA (cerebral vascular accident) with residual hemiplegia," with interventions that document, in part, "Toilet hygiene-My usual performance is Dependent; Shower/Bathe self: (R1) take a shower/bath/bath at sink/bed bath my usual performance is dependent."

R1's "Order Summary Report," dated 1/14/25, documents, in part, "Order date 9/16/25 Podiatry consult for toenail trimming."

On 1/13/25 at 11:02am, while surveyor and V3 (Registered Nurse/RN) were in R1's room, V3 said, "I'm not sure when (R1) went to the podiatrist last. Yes, they (toenails) are overgrown. Let me check when her next appointment is."

On 1/15/25 at 11:06am, V17 (Social Services Director) said, "I schedule the residents for the podiatry clinic. I don't know when (R1) was last seen by podiatry. I contacted the podiatry office

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and they said that she (R1) was last seen in 2017. She is now set up to go January 30th (1/30/25). I cannot find any other records."

Facility presented document from the podiatry office, undated, that documents, in part, "(R1) (11/15/1951) was seen in March 2017 ... Our office has received a request to reinstate (R1) for podiatry services. She has been added to the visit list and scheduled to be seen ... 1/30/25 when (Podiatrist) is next on the building."

On 1/15/25 at 1:18pm, V23 (Medical Director) said, "I know of her (R1), but I am not her attending. My colleague is her attending and would know more but and I can try to answer your questions." When asked about R1's feet care and podiatry V23 replied, "I am not aware of any issues with her (R1)." V23 stated that Diabetes can cause poor circulation in the feet and pain. V23 said that she will try to reach R1's attending physician and have R1's attending physician call this surveyor. R1's attending physician never called this surveyor.

Evidence shows that R1 has Type 2 Diabetes Mellitus which poses a risk to foot health. R1 has an active order for a Podiatry consult that was ordered on 9/16/25 and the facility was not able to provide evidence that R1 has seen the podiatrist recently. The facility was only able to provide documentation that R1 saw the podiatrist in March of 2017 (almost 8 years ago).

Facility policy titled, "Activities of Daily Living (ADLS)," undated, documents, in part, "Bathing: Washing and drying the body (excluding back and shampooing hair), including full body sponge bath, planning the task, and gathering supplies, and transfer into and out of tub/shower.

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Grooming: Maintaining personal hygiene, including planning the task and gathering supplies, combing and/or styling hair, face, and hands, brushing teeth, shaving, or applying makeup, oral hygiene, self-manicure (safety awareness with nail care), and/or application of deodorant or powder."

Facility policy titled, "Nail Care," revised date 1/25/18, "1. Observe condition of resident nails during each time of bathing. Note cleanliness, length uneven edges, hypertrophied nails. 4. After bathing, use orange stick, and clean debris from around and under finger and toenails. 5. Trim toenails carefully in a straight fashion and fingernails in an oval fashion avoiding tissue after bathing or when needed. Be sure nails are soft before trimming. Additional soaking in warm soapy water may be necessary to soften nails. 10. Document provision of care and pertinent observations."

Facility policy titled, "Resident Rights," reviewed date 1/04/19, documents, in part, "Purpose: To promote the exercise of rights for each resident, including any who face barriers (such as communication problems, hearing problems and cognition limits) in the exercise of these rights. A resident, even though determined to be incompetent, should be able to assert these rights based on his or her degree of capability."

(B)

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300.1060c)d)e)

Section 300.1060 Vaccinations

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| S9999 | Continued From page 6<br><br>c) A facility shall administer or arrange for administration of a pneumococcal vaccination to each resident in accordance with the recommendations of the Advisory Committee on Immunization Practices of the Centers for Disease Control and Prevention, who has not received this immunization prior to or upon admission to the facility unless the resident refuses the offer for vaccination or the vaccination is medically contraindicated. (Section 2-213(b) of the Act)<br><br>d) A facility shall document in each resident's medical record that a vaccination against pneumococcal pneumonia was offered and administered, refused, or medically contraindicated. (Section 2-213(b) of the Act)<br><br>e) A facility shall distribute educational information provided by the Department on all vaccines recommended by the Centers for Disease Control and Prevention's Advisory Committee on Immunization Practices (available at: https://www.cdc.gov/vaccines/schedules/downloads/adult/adult-combined-schedule.pdf), including, but not limited to the risks associated with shingles and how to protect oneself against the varicella-zoster virus. The facility shall provide the information to each resident who requests the information and each newly admitted resident. The facility may distribute the information to residents electronically. (Section 2-213(e) of the Act)<br><br>These requirements were NOT MET as evidenced by:<br><br>Based on interview and record review, the facility | S9999 | | |

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failed to follow policies and procedures for immunization of residents against pneumococcal disease in accordance with national standards of practice. The facility failed to vaccinate eligible residents with the pneumococcal vaccine. The facility failed to document the refusal and/or the benefits and side effects in the resident's electronic medical records. This deficient practice affected 3 residents (R1, R17 and R74) reviewed for pneumococcal immunizations in a total sample size of 49 residents.

Findings include:

Review of records for R1, R17 and R74 from admission date to 1/14/25 and there were no findings of documentation of pneumococcal vaccine offering or education of the vaccine. Review of physician orders for R1, R17 and R74 from admission to 1/14/25 show no orders of pneumococcal vaccination. Immunization records for R1, R17 and R74 have no current pneumococcal vaccination listed.

On 1/15/25 at 1:27pm, V21 (Regional Nurse Consultant) said that the facility hasn't had a pneumococcal vaccine clinic. Only Influenza vaccines have been administered.

On 1/15/25 at 1:49pm, V2 (Infection Preventionist/Director of Nursing/DON) was unable to produce a list of residents that the facility had given the pneumococcal and COVID-19 vaccines to. V2 said, "I do not have any documentation that (R1, R17 and R74) received or declined the pneumococcal or COVID-19 vaccine. (facility) haven't had pneumonia or COVID-19 clinics since I've been here. They've (pneumonia and COVID-19 clinics) been booked. I've been here since April (April

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2024). Pneumonia and COVID-19 vaccines are important to prevent infection and a facility breakout. V2 stated that the COVID-19 and pneumococcal vaccines should be offered on admission, if eligible, and the resident has the right to decline. V2 stated that if the resident declines the vaccine, the refusal should be documented in the EMR (electronic medical record) as well. When asked if vaccination education should be provided to the resident prior to offering the COVID-19 and pneumococcal vaccines, V2 replied, "Yes."

Facility's policy titled, "Influenza and Pneumococcal Immunizations," revised date 4/21/2022, documents, in part, "To minimize the risk of resident's acquiring, transmitting, or experiencing complications from influenza and pneumococcal pneumonia. The facility shall provide pertinent information about the significant risks and benefits of vaccines to residents (or resident's legal representative) ... Before offering the pneumococcal immunization, each resident or the resident's representative will be provided education regarding the benefits and potential side effects of the immunization. The resident's medical record includes documentation that indicates, at a minimum, the following: The resident either received or did not receive the pneumococcal immunization due to medical contraindications or refusal."

Facility policy titled, "Resident Rights," reviewed date 1/04/19, documents, in part, "Purpose: To promote the exercise of rights for each resident, including any who face barriers (such as communication problems, hearing problems and cognition limits) in the exercise of these rights. A resident, even though determined to be incompetent, should be able to assert these rights

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| S9999 | Continued From page 9<br>based on his or her degree of capability."<br><br>(C) | S9999 | | |