STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	IL6003024	A. BUILDING: _____ B. WING _____	C 02/26/2025

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FAIRHAVEN CHRISTIAN RET CENTER	3470 NORTH ALPINE ROAD ROCKFORD, IL 61114

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S 000	Initial Comments Investigation of Facility Reported Incident of 2/20/25/IL186996	S 000		
S9999	Final Observations Statement of Licensure Violations 300.610a) 300.1210b) 300.1210c) 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 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	S9999		

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resident to meet the total nursing and personal 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:

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 requirements were not met as evidenced by:

Based on interview and record review, the facility failed to ensure a resident was transferred and ambulated in a safe manner for 1 of 4 residents (R1) reviewed for safety and supervision in the sample of 4 residents. This failure resulted in R1 falling and sustaining a right clavicle fracture.

Findings include:

R1's current Face Sheet provided by the facility on 2/26/25 shows R1's diagnoses include but are not limited to dementia, fracture of right clavicle, right shoulder pain, syncope and collapse, fatigue, pain in right knee, depression, and kyphosis. R1's current care plan last reviewed 2/8/25 shows R1 is at risk for falling due to her age, muscle weakness and overall physical decline. R1 requires contact guard assistance

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with bed/chair/toilet transfers and is ambulatory with a walker and staff assistance. Staff are to monitor R1 for unsteady gait and unsteady balance. R1's Minimum Data Set (MDS) dated 2/3/25 shows R1 requires supervision or touching assistance (helper provides verbal cues and/or touching/steadying and/or contact guard assistance as resident completes activity) to sit, to stand, chair/bed to chair transfer, walking 10 feet, and walking 50 feet with two turns.

On 2/26/25 at 1:22 PM, V6, Certified Nursing Assistant (CNA), said she was caring for R1 when she fell at around 8:00 PM on 2/20/25. V6 said she was trying to transfer R1 from the recliner to the wheelchair to take her to the bathroom. V6 said she was using R1's walker to help her stand. V6 said she got R1 to a standing position from the recliner, R1 was holding onto her walker, took a couple steps, then she just dropped and fell to the floor. V6 said she tried to grab R1 underneath her elbows, but R1 caught her off guard and she did not expect it. V6 said R1 usually walks well and is a one staff assist with the walker or wheelchair and a gait belt. V6 said R1 was in her room on isolation for cold symptoms (cough and fever), that evening and no one told her R1 was not walking well. V6 said she should have had a second person help her; she should have asked for help. V6 said the only reason she grabbed R1's arms was to prevent her from hitting the ground really hard. V6 said she got scared and grabbed R1's arms and it probably wasn't the best method, but she was caught off guard, she wasn't expecting R1 to fall. V6 said once the nurse, V7, Licensed Practical Nurse (LPN), came to assess R1, they realized that R1 was very weak and could not stand and V7 put a gait belt on R1.

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S9999	Continued From page 3 On 2/26/25 at 10:46 AM, V7 said she was called to R1's room after R1 fell around 8:00 PM on 2/20/25. V7 said she went to R1 room, R1 was on the floor with her feet stretched out and her walker in front of her. V7 said R1 did not have a gait belt on when she found her on the floor with the V6. V7 said V6 told her she was trying to transfer R1 from standing with the walker to the wheelchair. V6 reported that R1 was weak and started to fall and V6 assisted R1 to the floor. V7 said she checked R1's vital signs and her temperature was 102.7 degrees Fahrenheit, she had cold symptoms, and was weak. On 2/26/25 at 11:30 AM, V9, CNA, said if a resident needs supervision, she uses a gait belt with their transfers/ambulation. V9 said even if a resident is usually independent, they may need to modify their needs if they are not feeling well. For example, an independent resident may need to use a walker or a wheelchair if they are weak or not feeling well. On 2/26/25 at 11:40 AM, V3, Director of Rehab said Contact Guard Assistance means that the resident requires a gait belt for ambulation and transfers, and the staff is guarding the resident with their hand nearby. If needed, assistance is offered. V3 said if a resident is ill and feels weaker than usual, staff can use more assistance than the resident usually requires. On 2/26/25 at 11:56 AM, V4, MDS Coordinator, said she is helping with the restorative program for the last couple of months since the previous restorative nurse resigned. V4 said Contact Guard Assistance means that the resident uses/wears a gait belt and staff guide then with the gait belt for ambulation and transfers. V4 said if a resident is ill or having an acute situation and	S9999		

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cannot safely transfer/ambulate at their current level, staff can go to the next level to ensure the safest mode of transfer/ambulation. V4 said R1 needs a gait belt and uses a walker for ambulation and transfers.

On 2/26/25 at 2:09 PM, V2, Director of Nursing, said R1 fell and later started to complain of pain in her shoulder. V2 said they got and X-ray and found that R1's clavicle was fractured. V2 said with an acute illness, people are more weak, and may require more assistance. V2 said a gait belt should be used for transfers and ambulation; it's not safe to grab a resident by their arms.

On 2/26/25 at 2:16 PM, V5, Physician, said R1's fall likely caused her clavicle fracture.

R1's Resident Accident/Incident Report dated 2/20/25 shows under the heading Cause/Probable cause of Event: Resident has unsteady gait due to weakness from illness.

R1's Radiology Report of her right shoulder dated 2/23/25 shows a fracture of the clavicle with modest displacement.

A written statement of an interview with V6 dated 2/24/25 regarding R1's fall on 2/20/25 shows V6 stated, "The resident is contact guard assistance with the use of a walker at baseline." She (V6) was aware that the resident had not been feeling well earlier in the day.

The facility's Safe Ambulation/Gait Belt Policy dated April 2024 shows during a transfer, when assisting with resident ambulation, or during other applicable care procedure, a gait belt must be used for the safety of each resident. During a transfer of ambulation, the gait belt is used to

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S9999	Continued From page 5 assist the resident without using their clothing or arms to give assistance in balance or movement. (B)	S9999		