

Illinois State Department of Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTIONS		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 0051359		(X2) MULTIPLE CONSTRUCTION A. BUILDING B. WING	(X3) DATE SURVEY COMPLETED 05/09/2025
NAME OF PROVIDER OR SUPPLIER GENERATIONS AT APPLEWOOD		STREET ADDRESS, CITY, STATE, ZIP CODE 21020 KOSTNER AVENUE, MATTESON, Illinois, 60443			
(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) COMPLETION DATE
S0000	Initial Comments Annual Licensure and Certification Survey	S0000			
S9999	Final Observations Statement of Licensure Violations 1 of 2 300.610a) 300.1010h) 300.1210a) 300.1210b) 300.1210c) 300.1210d)2)5) 300.1220b)3) 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.	S9999			

Office of Primary Care and Health Systems Management

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
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S9999	<p>Continued from page 1 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 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</p>	S9999			

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S9999	<p>Continued from page 2 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 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>Section 300.1220 Supervision of Nursing Services</p> <p>b) The DON shall supervise and oversee the nursing services of the facility, including:</p> <p>3) Developing an up-to-date resident care plan for each resident based on the resident's comprehensive assessment, individual needs and goals to be accomplished, physician's orders, and personal care and nursing needs. Personnel, representing other services such as nursing, activities, dietary, and such other modalities as are ordered by the physician, shall be involved in the preparation of the resident care plan. The plan shall be in writing and shall be reviewed and modified in keeping with the care needed as indicated by the resident's condition. The plan shall be reviewed at least every three months.</p> <p>These Regulations are not met as evidenced by:</p> <p>Based on interview, observation and record review, the facility failed to develop and implement pressure ulcer prevention interventions for three of 12 residents (R49, R24, R120) reviewed for pressure ulcers.</p> <p>Findings include:</p> <p>1. On 05/07/25 at 9:53 AM V4, LPN, said R49 has pressure wounds on her sacrum and legs. R49 said I</p>	S9999			

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S9999	<p>Continued from page 3 can't move my legs, they stay like this. R49's legs contracted and knees touching with dressing on left and right knee. Pillow between legs, but knees still touching.</p> <p>On 5/8/25 at 1:41PM V2, Director of Nursing (DON) and V9, Wound Nurse, were interviewed together. R49 has a stage 4 pressure ulcer to her left knee that developed in house on 4/3/25. V9 stated all of R49's skin impairment locations. V2 said R49 is at high risk for skin breakdown they put a pillow between her knees and use wedges for positioning. Repositioning is done every 2 hours, we do that for everyone. V9 said R49 is not able to reposition herself. The surveyor asked for documentation of the skin prevention interventions used to prevent pressure on R49's knees. V2 said I will check the Treatment Administration Record (TAR) for documentation. The surveyor asked if the facility has avoidable/unavoidable risk assessment for pressure ulcers. V2 said I am not aware that we have those. V2 said the purpose of the avoidable/unavoidable risk assessment would be to ensure the facility has implemented all interventions possible to prevent further breakdown.</p> <p>On 5/8/25 when the TAR for R49 was presented the surveyor notified V2 that there is no treatment for the left knee until 4/11/25.</p> <p>On 5/9/25 at 9:30am V2 said the purpose of MAR/TAR is to make sure meds are passed and doing treatments. V2 said if not signed off then it was not done.</p> <p>On 5/9/25 at 11:16 AM V7, Nurse Practitioner, said R49 is generally declining, she had blood work, we have a consult going on for her workup to rule out cancer. V7 said they have measures such as using pillows and repositioning every 2 hours. V7 said 2 hours is the standard for repositioning for the facility.</p> <p>R49's diagnosis include but are not limited to Alzheimer's Disease, Chronic Kidney Disease, Venous Insufficiency, Convulsions, Diabetes, and Peripheral Vascular Disease.</p> <p>On 3/4/25 a wound evaluation completed states Blister front left knee, lateral, in house acquired. 6.28 x 2.96 Centimeters (cm). treatment identifies heel</p>	S9999			

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S9999	<p>Continued from page 4 suspension/protective devices and mattress with pump. (Nothing written to treat the knee.)</p> <p>On 4/29/25 Focused Wound Exam for R49 states stage 4 pressure wound of the left knee full thickness, 5.2 x 3.6 cm.</p> <p>Treatment Administration Record for April 2025 does not have a treatment for the left knee impairment until 4/11/25. (Per interview and documentation, the impairment was found on 3/4/25.)</p> <p>Care plan does not address left knee pressure ulcer. There are no interventions included to address her knees.</p> <p>The physician pressure ulcer treatment policy dated 5/17 states residents with pressure ulcers will have a physician's order for treatment. The nurse will documents the treatment as given on the TAR.</p> <p>2. R24 had the diagnosis of pressure ulcer of sacral region stage three (3), pressure ulcer of right elbow stage four (4) and functional quadriplegia. Physician order sheet dated 1/24/25 documents: low air loss mattress. Vital report dated 5/8/25 documents: weight 125.8 pounds.</p> <p>On 5/8/25 at 11:59am, R24 was observed in bed, on an air loss mattress with the setting on four hundred (400) pounds. V4 (nurse) said, R24's air mattress was set on four hundred pounds. V4 said, R24 is not four hundred pounds. A white plastic medical bracelet was observed wrapped around the air loss mattress control panel.</p> <p>On 5/8/25 at 1:16pm, V16 Assistant Director of Nursing (ADON) said, the air loss mattress should be set based on the resident's weight to prevent and treat pressure ulcers from getting worst. If the air mattress is set to high above or too low below the resident actual weight it will not help prevent pressure ulcers/wound from getting worst.</p> <p>On 5/8/25 at 1:37pm, V9 (treatment nurse) said, a medical band with the resident weight is place on the</p>	S9999			

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S9999	<p>Continued from page 5 air mattress control panel.</p> <p>The facility's in-service dated 5/5/25 documents: Air bed settings are based on the resident's weight which can be found in the system. There are also wristbands located on the base of the board with weights.</p> <p>3. On 5/7/25 at 1:15pm, R120 was observed on a regular pressure reducing mattress. V8 (nurse) said, R120 is on a regular mattress. R120 was not on an air mattress.</p> <p>On 5/8/25 at 2:36pm, V2, Director of Nursing (DON) said, if the wound doctor's make a recommendation for a low air loss mattress, it must be followed.</p> <p>On 5/9/25 at 12:39pm, V2 said, an air loss mattress is a pressure relieving mattress.</p> <p>Progress note dated 4/5/25 documents: spoke to R120's family who requested that patient have a consultation to be placed on an air mattress for bed sore prevention. She stated that R120 was on an air mattress in the previous facility she stayed in as well as in the hospital.</p> <p>Wound doctor note dated 4/8/2025 documents: Recommendation: Low Air Loss Mattress</p> <p>Pressure Ulcer Prevention Protocol dated 5/18/25 documents: All bed in the facility will have pressure reducing mattresses unless pressure relieving mattresses are required according to the resident's needs.</p> <p>"B"</p> <p>Statement of Licensure Violations 2 of 2</p> <p>300.615e)</p> <p>300.615f)</p>	S9999			

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S9999	<p>Continued from page 6</p> <p>Section 300.615 Determination of Need Screening and Request for Resident Criminal History Record Information</p> <p>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)</p> <p>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.</p> <p>This requirement was not met as evidenced by:</p> <p>Based on interview and record review the facility failed to follow their abuse policy by not completing their pre-admission screening by checking the Illinois sex offender for 10 of 10 (R33, R48, R71,R95, R130-R135) residents reviewed for background checks.</p> <p>Findings Include:</p> <p>R33 was admitted to the facility on 1/21/25.</p> <p>R33 background check on the Illinois sex registry was conducted on 5/8/25.</p> <p>R48 was admitted to the facility on 3/22/24.</p> <p>R48 background check on the Illinois sex registry was conducted on 5/8/25. R71 was admitted to the facility on 2/4/20.</p>	S9999			

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S9999	<p>Continued from page 7</p> <p>R71 background check on the Illinois sex registry was conducted on 5/8/25.</p> <p>R95 was admitted to the facility on 2/5/25.</p> <p>R95 background check on the Illinois sex registry was conducted on 5/8/25.</p> <p>R130 was admitted to the facility on 4/17/25.</p> <p>R130 background check on the Illinois sex registry was conducted on 5/8/25.</p> <p>R131 was admitted to the facility on 5/5/25.</p> <p>R131 background check on the Illinois sex registry was conducted on 5/9/25.</p> <p>R132 was admitted to the facility on 5/7/25.</p> <p>R132 background check on the Illinois sex registry was conducted on 5/9/25.</p> <p>R133 was admitted to the facility on 5/8/25.</p> <p>R133 background check on the Illinois sex registry was conducted on 5/9/25.</p> <p>R134 was admitted to the facility on 5/2/25.</p> <p>R134 background check on the Illinois sex registry was conducted on 5/9/25.</p> <p>R135 was admitted to the facility on 5/2/25.</p> <p>R135 background check on the Illinois sex registry was conducted on 5/9/25.</p> <p>On 5/9/25 at 4:51PM, V18(admissions) said she will run residents background checks prior to admission. V18</p>	S9999			

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S9999	<p>Continued from page 8 said she was checking national sex offender site until today when she was told to check Illinois sex offender site going forward.</p> <p>Facility abuse policy revised October 2022 documents under pre admission of potential residents: the facility will check the criminal background on any resident seeking admission to the facility in order to identify previous criminal convictions. The facility will request criminal history background check within 24 hours of admission of a new resident. check the resident name on the Illinois sex offender registration website. Check the residents name on the Illinois department of corrections sex registrant search page.</p> <p>"C"</p>	S9999			