

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>IL6007330</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING: _____	(X3) DATE SURVEY COMPLETED  <b>08/16/2018</b>
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NAME OF PROVIDER OR SUPPLIER  <b>TIMBERCREEK REHAB &amp; HEALTHCARE CENT</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>2220 STATE STREET PEKIN, IL 61554</b>
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S 000	<p>Initial Comments</p> <p>Annual Licensure and Certification</p> <p>S9999 Final Observations</p> <p>Statement of Licensure Violations</p> <p>1 of 2</p> <p>300.1210b)2) 300.1220)b)3)</p> <p>Section 300.1210 General Requirements for Nursing and Personal Care</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. Restorative measures shall include, at a minimum, the following procedures:</p> <p>2) All nursing personnel shall assist and encourage residents so that a resident who enters the facility without a limited range of motion does not experience reduction in range of motion unless the resident's clinical condition demonstrates that a reduction in range of motion is unavoidable. All nursing personnel shall assist and encourage residents so that a resident with a limited range of motion receives appropriate treatment and services to increase range of motion and/or to prevent further decrease in range of motion.</p>	S 000	<p style="text-align: center;"><b>Attachment A</b> <b>Statement of Licensure Violations</b></p>	

Illinois Department of Public Health LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE <b>09/12/18</b>
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S9999	<p>Continued From page 1</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 requirements were not met as evidenced by:</p> <p>Based on observation, interview, and record review, the facility failed to provide range of motion exercises to residents with functional limitations for two of three residents (R38 and R52) reviewed for range of motion in the sample of 20. As a result, R38 had a decline in mobility of multiple joints over a three month period, including a significant decline of little to no use of his right wrist, right fingers, and right thumb.</p> <p>Findings include:</p> <p>The facility's Range of Motion Protocol (revised 09/2008) documents the following: "It is the policy of (facility) to provide Range of Motion exercises for residents who through assessment demonstrate the need for exercise to prevent</p>	S9999		
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S9999	<p>Continued From page 2</p> <p>functional decline in range of motion." This policy documents, "The interdisciplinary team will identify those residents in need and consider the resident's age, diagnosis, prognosis, current joint condition, functional ability and any mobility restrictions." This policy also documents, "Range of motion exercises will be conducted as scheduled by nursing staff based on need determined by assessment of risks."</p> <p>The facility's Contracture Prevention policy (Revised 09/2008) documents: "All residents will be encouraged to maintain the highest level of physical functioning. Within 14 days of admission, all residents will be assessed to determine the mobility of each joint. Any limitations will be noted on the Range of Motion Assessment."</p> <p>1. R38's Range of Motion Assessments dated 01/05/18, 01/22/18, 04/10/18 and 05/14/18 document a High Risk Score (indicating a recommendation by Physical Therapy or Occupational Therapy with physician approval, that may include splinting). These assessments also document the following: R38's right wrist, right fingers, and right thumb were assessed to have moderate impairment (50-80% functional range of motion of joint). These same assessments also document R38's right and left hip, left ankle, and left toes were assessed to have full range of motion (&gt;80% functional range of motion to joint).</p> <p>R38's Range of Motion Assessment dated 08/14/18 documents a High Risk Score (indicating a recommendation by Physical Therapy or Occupational Therapy with physician approval, that may include splinting). This assessment also documents the following: R38's</p>	S9999		

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S9999	<p>Continued From page 3</p> <p>right wrist, right fingers, and right thumb were assessed as, "Cont," (indicating a contracture with less than 25% functional range of motion of joint). This same assessment documents R38 was assessed to have moderate impairment (50-80% functional range of motion of joint) to R38's right and left hip, left ankle, and left toes.</p> <p>On 08/13/18 at 03:18 PM, R38 was lying in bed holding a rolled washcloth in his right hand.</p> <p>On 08/14/18 at 01:30 PM, R38 was lying in bed holding a padded carrot in his right hand. R38 was unable to release the carrot and could not move his right fingers or right thumb when asked.</p> <p>On 08/14/18 at 01:43 PM, V3 (Minimum Data Set Assessment Coordinator) stated that R38 has a right hand contracture and little to no use of his right hand. V3 stated that R38 is currently not on any range of motion program and stated that anyone with a contracture should be. V3 verified that R38's Range of Motion Assessments document a decline from May 2018 to August 2018 in R38's right wrist, right fingers, right thumb, right hip, left hip, left ankle, and left toes. V3 also verified that R38 has not been evaluated by physical therapy or occupational therapy after R38 was initially assessed as a High risk in January 2018.</p> <p>On 08/15/18 at 08:25 AM, V8 (R38's Physician) verified that R38 currently has a right hand contracture and has little to no use of his right hand. V8 stated that R38 should have been receiving range of motion exercises, especially since R38 was identified as a high risk for contracture development.</p> <p>2. R52's Range of Motion Assessments dated</p>	S9999		
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S9999	<p>Continued From page 4</p> <p>12/18/17 and 3/19/18 document a High Risk Score (indicating a recommendation by Physical Therapy or Occupational Therapy with physician approval, that may include splinting). These assessments also document the following: R52's bilateral shoulders, elbows, wrists, fingers and thumbs show a 25-50% functional range of motion to the joints.</p> <p>R52's Minimum Data Set Assessment, dated 7/16/18 includes the following documentation; Section G110 (Activities of Daily Living) dependent on staff for all ADLs, Section G400 (Range of Motion) impairment on both sides, and Section O500 (Range of Motion Programs) no program.</p> <p>On 8/13/18 at 10:31 A.M., R52 was sleeping in a high back reclining wheel chair in (R52's) room. R52's fingers of both hands were in a contractured position. No splint was present to R52's hands.</p> <p>R52's current Care Plan does not address R52's contractures or a range of motion program to prevent further decline.</p> <p>On 08/15/18 at 9:20 AM, V11/Certified Nursing Assistant (CNA) stated, "I didn't do range of motion exercises on (R52) today. (R52) doesn't have a program."</p> <p>On 08/15/18 at 9:45 AM, V3/Restorative Nurse stated, "(R52) has contractures in (R52's) hands. (R52) doesn't have a range of motion program."</p>	S9999		
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S9999	<p>Continued From page 5</p> <p>2 of 2</p> <p>300.1210b) 300.1210d)6) 300.1220)b)3) 300.3240a)</p> <p>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. Restorative measures shall include, at a minimum, the following procedures:</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, 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>Section 300.1220 Supervision of Nursing Services 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</p>	S9999		

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S9999	<p>Continued From page 6</p> <p>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>Section 300.3240 Abuse and Neglect a) An owner, licensee, administrator, employee or agent of a facility shall not abuse or neglect a resident. (Section 2-107 of the Act)</p> <p>These requirements were not met as evidenced by:</p> <p>Based on interview and record review, the facility failed to provide supervision to prevent a fall with injury for one of five residents (R3) reviewed for falls, failed to provide transfer assistance to a resident who is non-weight bearing on one leg and develop a comprehensive plan of care related to assistance with Activities of Daily Living (ADLs) for one of one resident (R106), and failed to provide supervision during toileting and ensure a fall prevention alarm was functioning properly for one of five residents (R15) reviewed for accidents in the sample of 20. These failures resulted in one resident (R3) being sent to the emergency department with a laceration to the forehead.</p> <p>Findings include:</p>	S9999		
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1. R3's current Physician Order Sheet, dated August 2018 includes the following diagnoses: Hard of Hearing, Gait Disturbance, History of Falls, Memory Impairment, Polyneuropathy, Vertigo, Urinary Incontinence, Urinary Frequency, Fatigue, Bilateral Knee Replacement and Pain.

R3's Fall Risk Assessment, dated 3/21/18 documents that R3 is "High Risk" for falls.

R3's current Care Plan includes the following identified problems: "Falls, history of frequent past falls, inability to self transfer, not aware of limitations, attempts self transfers, knees are weak." Also include are the following interventions: Assist and gait belt for all transfers, Check routinely when in room for safety, Keep call light in reach and answer promptly.

R3's Nursing Progress Notes, dated 7/29/18 at 11:42 A.M. document, "(R3) had a fall this morning and hit (R3's) head on floor. Laceration to (R3's) forehead. Sent to ER (Emergency Room) for evaluation. Steri strips applied to forehead while in ER. V9/daughter took (R3's) glasses that broke due to fall."

On 8/16/18 at 11:14 A.M., V2/Certified Nursing Assistant (CNA) stated, "It was sometime before six in the morning. We had gotten (R3) out of bed into (R3's) wheel chair. We left (R3) in (R3's) room in (R3's) wheel chair. I'm not sure how long (R3) was in the room. We were busy getting other people up."

On 8/16/18 at 11:21 A.M., V13/Certified Nursing Assistant (CNA) stated, "It was about 5:30 in the morning. We had gotten (R3) up in (R3's) wheel chair. We left (R3) in (R3's) room. I was across



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S9999	Continued From page 8  the hall and saw (R3) try to stand up by (R3's) self. (R3) fell and hit (R3's) head, hard. (R3) was bleeding. I guess we shouldn't have left (R3) in (R3's ) room."  On 8/16/18 at 11:30 A.M, V2/Director of Nurses (DON) stated," I can't find the investigation for R3's fall. I don't know what happened to it. I don't know what the root cause of R3's fall is." At this same time, V2/DON verified that R3's care plan had not been reviewed and updated with new interventions to prevent further falls.  2. The facility policy, titled "Comprehensive Care Planning (11/01/17)" documents, "It is the policy of (the facility) to comprehensively assess and periodically reassess each resident admitted to this facility. The results of this resident assessment shall serve as the basis for determining each resident's strengths, needs, goals, life history and preferences to develop a person centered comprehensive plan of care for each resident that will describe the services that are to be furnished to attain or maintaining the resident's highest practicable physical, mental and psychosocial well-being."  A Physician's Order Sheet, dated 7/20/18, documents R106 was admitted with the diagnoses of a Non-displaced Supracondylar Fracture of the Distal End of the Left Femur with Intracondylar Extension and advises staff R106 is to be non-weight bearing on the left leg. R106's medical record contains a Baseline Care Plan, dated 7/20/18, that documents R106 is dependent on staff for bed mobility, toileting, transferring, dressing and hygiene, due to the inability to bear weight on the left leg, weakness and balance issues. R106's medical record does not contain a comprehensive Plan of Care to	S9999		

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S9999	<p>Continued From page 9</p> <p>address specific needs related to Activities of Daily Living.</p> <p>On 8/13/18 at 10:44 AM, R106 stated last Tuesday (8/07/18) afternoon, she was transferred to the toilet by V5 (Certified Nursing Assistant) and a Physical Therapist and left alone on toilet for 30 minutes. R106 stated she started crying because she was left on the toilet so long and was uncomfortable. R106 stated she waited for staff assistance as long as she could and ended up putting weight on her non-weight bearing left foot to transfer herself to the wheelchair. R106 stated she reported this to the administrator and he spoke with her about it.</p> <p>On 8/15/18 at 12:37 PM, V5 stated she did assist in transferring R106 to the toilet in the afternoon on 8/07/18. V5 stated since R106 is alert and oriented, she was left alone and given the call light. V5 stated she then went to assist another resident in a different room. V5 was uncertain as to how long she was in the other resident room, but when she was finished she noted R106's call light was on. V5 stated when she entered R106's room, R106 had already transferred herself to her wheelchair.</p> <p>On 8/15/18 at 9:45 AM, V1 (Administrator) stated R106 did report to him last week (8/07/18) that staff transferred her to the toilet, leaving her alone for 30 minutes, resulting in R106 transferring herself and putting weight on her left leg.</p> <p>On 08/16/18 at 11:11 AM, V2 (Director of Nursing) stated since R106 is alert and oriented, she wouldn't expect staff to stay directly with R106 while toileting, but to closely watch R106's call light to be alert as to when she was finished.</p>	S9999		

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S9999	<p>Continued From page 10</p> <p>On 8/16/18 at 10:33 AM, V6 (Physical Therapist Assistant) stated R106 was on a non-weight bearing status of the left leg until 8/15/18. V6 stated that if weight is put on a broken leg that has been declared non-weight bearing, the potential for a decline in healing/progress is present.</p> <p>3. R15's current fall prevention care plan documents the following fall prevention interventions: "Alarming seatbelt to wheelchair while up in wheelchair to remind (R15) to request help in transfer; and ensure (seatbelt) alarm is functioning."</p> <p>On 08/14/18 at 03:45 PM, R15 was sitting in the front lobby during a music activity. R15 had an unfastened seatbelt in R15's wheelchair, which was not alarming. V3 (Minimum Data Set Assessment Coordinator) verified that R15's seatbelt was unfastened, fastened the belt around R15's waist, and instructed R15 to unfasten the seatbelt. R15 then unfastened the seatbelt, which did not alarm. V3 verified that R15's alarming seatbelt was not functioning properly, and stated "It's supposed to be fastened when she is in her wheelchair to remind her to ask for help before getting up. It's not working properly; it should alarm when it's unfastened."</p> <p>(B)</p>	S9999		
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