

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: IL6004493	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 05/09/2019
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NAME OF PROVIDER OR SUPPLIER GREENVILLE NURSING & REHAB	STREET ADDRESS, CITY, STATE, ZIP CODE 400 EAST HILLVIEW AVENUE GREENVILLE, IL 62246
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S 000	Initial Comments Annual Licensure and Certification Survey	S 000		
S9999	Final Observations Statement of Licensure Violations Licensure Finding 1 of 2 300.610a) 300.1210a) 300.1210b)2) 300.1210d)3)4)A) 300.3240a) 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 Section 300.1210 General Requirements for Nursing and Personal Care 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	S9999		

Attachment A
Statement of Licensure Violations

Illinois Department of Public Health LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE Electronically Signed	TITLE	(X6) DATE 05/25/19
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S9999	<p>Continued From page 1</p> <p>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</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> <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>3) Objective observations of changes in a resident's condition, including mental and emotional changes, as a means for analyzing and determining care required and the need for further medical evaluation and treatment shall be</p>	S9999		
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S9999	<p>Continued From page 2</p> <p>made by nursing staff and recorded in the resident's medical record.</p> <p>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:</p> <p>A) Each resident shall have proper daily personal attention, including skin, nails, hair, and oral hygiene, in addition to treatment ordered by the physician.</p> <p>Section 300.3240 Abuse and Neglect</p> <p>a) An owner, licensee, administrator, employee or agent of a facility shall not abuse or neglect a resident.</p> <p>These Regulations were not met as evidenced by:</p> <p>Based on observation, interview and record review, the Facility failed to treat/provide service to prevent new contractures and failed to identify/assess limitations for one of 9 residents (R30) reviewed for Range of Motion (ROM) in the sample of 30. This resulted in R30 developing a new left hand contracture which was closed into a fist causing limitation in use.</p> <p>Finding includes:</p> <p>On 05/05/19 at 9:49 AM R30's left hand was contracted into a fist. V19, Registered Nurse (RN), had to open R30's left hand to conduct a skin check of the inside of the hand. R30's left thumb was held between his left first and second fingers, and his fingernails on his left second, third, and fourth fingers were digging into the skin on the inside of his left hand. There was nothing</p>	S9999		
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S9999	<p>Continued From page 3</p> <p>in R30's left hand to prevent his fingernails from digging into his inner hand.</p> <p>On 5/7/19 at 8:02 AM R30's left hand was contracted into a closed fist with a rolled wash cloth inside of his grip. He left his left hand in his lap while picking up a glass of juice with his right hand with unsteady grip to take a drink at breakfast. Staff were providing extensive assist with eating.</p> <p>On 5/7/19 at 8:20 AM V13, Registered Nurse stated R30 was able to perform active range of motion exercises about 2 or 3 weeks ago, but since R30 has had a wound on his elbow, his left hand has gotten worse and is more contracted. V13 stated R30 does not receive passive range of motion to his left hand because it is not part of his restorative programs.</p> <p>R30's Minimum Data Set (MDS) dated 3/8/19 documents that he is severely impaired cognitively, and requires extensive assist for his bed mobility, eating, bathing, personal hygiene and locomotion, and is dependent on staff for transfers. The MDS documents R30 has no functional limitation in his range of motion to his upper extremities.</p> <p>R30's Care Plan does not identify the actual contracture of his left hand or risk for further contractures, and does not include interventions to prevent further decline in his range of motion.</p> <p>R30's Assessment of Contracture Risk dated 3/21/19 documents a score of 11, indicating R30 should be considered at risk and Facility Contracture Protocol should be implemented. This assessment documents R30 does not have any functional limitations of his upper extremities.</p>	S9999		

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S9999	<p>Continued From page 4</p> <p>R30's Occupational Therapy Plan of Care dated 5/8/19 documents, in part, "Reason for Referral: This 82 y/o (year old) male is referred to skilled OT (Occupational Therapist) d/t (due to) LUE (left upper extremities) contractures. The pt (patient) reports pain, presents with edema, and is at risk for skin breakdown which impacts participation/staff performance of self cares. Previous Therapy: Pt has not received skilled OT for contracture management in the past year. The reports pain and demo (demonstrates) mild facial grimacing with ROM of LUE."</p> <p>On 5/8/19 at 1:15 PM, V2, Director of Nursing (DON), stated R30's contracture of his left hand started just recently, and stated that a week ago he was holding a cup with that hand. V2 stated R30's MD (Medical Doctor) had been notified and an Occupational Therapy Evaluation was ordered.</p> <p>On 5/8/19 at 2:00 PM, V20, R30's Physician, stated he was not aware of the contracture of R30's left hand, but R30 usually has his hands under his blankets when V20 visited. V20 stated a contracture occurs over a period of time, not as immediately as in a week's time. He stated R30 will need treatment to keep the contracture from getting worse and stated he will assess R30 on his next visit in a couple of weeks.</p> <p>On 5/8/19 at 3:55 PM, V9, Restorative Aide, stated he thinks R30's hand has been contracted since he had an incident, resulting in a skin tear, a couple months ago, but was not sure of the date. V9 stated R30 has not been able to perform Active ROM exercises with his left arm and hand for the last couple of weeks.</p>	S9999		

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S9999	<p>Continued From page 5</p> <p>On 5/9/19 at 10:15 AM V21, Occupational Therapist (OT), stated she performed an evaluation of R30's left hand on 5/8/19. V21 confirmed R30's left hand is contracted, stating she felt resistance when attempting to open his left hand during her assessment yesterday. V21 stated without treatment and interventions, R30's contracture will worsen.</p> <p>The Facility's policy, Resident Mobility and Range of Motion, dated July 2017, documents,"1. Residents will not experience an avoidable reduction in range of motion (ROM). 2. Residents with limited range of motion will receive treatment and services to increase and/or prevent a further decrease in ROM." The Policy documents "4.The care plan will be developed by the interdisciplinary team based on the comprehensive assessment, and will be revised as needed. 5. The care plan will include specific interventions, exercises and therapies to maintain, prevent avoidable decline in, and /or improve mobility and range of motion. 6. Interventions may include therapies, the provision of necessary equipment, and/or exercises and will be based on professional standards of practice and be consistent with state laws and practice acts."</p> <p style="text-align: center;">(C)</p> <p>Licensure Finding 2 of 2</p> <p>300.610a) 300.1210b) 300.1210c) 300.1210d)3)5)6) 300.1620a) 300.3240a)</p>	S9999		
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S9999	<p>Continued From page 6</p> <p>Section 300.610 Resident Care Policies</p> <p>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.</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.</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 practiced on a 24-hour, seven-day-a-week basis:</p> <p>3) Objective observations of changes in a resident's condition, including mental and emotional changes, as a means for analyzing and</p>	S9999		

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S9999	<p>Continued From page 7</p> <p>determining care required and the need for further medical evaluation and treatment shall be made by nursing staff and recorded in the resident's medical record.</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>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 300.1620 Compliance with Licensed Prescriber's Orders</p> <p>a) All medications shall be given only upon the written, facsimile or electronic order of a licensed prescriber. The facsimile or electronic order of a licensed prescriber shall be authenticated by the licensed prescriber within 10 calendar days, in accordance with Section 300.1810. All such orders shall have the handwritten signature (or unique identifier) of the licensed prescriber. (Rubber stamp signatures are not acceptable.) These medications shall be administered as ordered-by the licensed prescriber and at the designated time.</p> <p>Section 300.3240 Abuse and Neglect</p>	S9999		
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S9999	<p>Continued From page 8</p> <p>a) An owner, licensee, administrator, employee or agent of a facility shall not abuse or neglect a resident.</p> <p>These Regulations were not met as evidenced by:</p> <p>Based on observation, interview and record review the Facility failed to assess, monitor and treat pain for one resident (R39) reviewed for pain in the sample of 30. This failure resulted in R39 yelling and repeatedly expressing to multiple staff she was in pain without relief. In addition, this pain resulted in changes in R39's daily activity routine. the</p> <p>Findings include:</p> <p>On 05/05/19 at 2:45 PM R39 was yelling out, stating she wanted to get up out of bed. V12 and V8, Certified Nurse's Aides (CNAs) transferred R39 from the bed to her wheel chair (w/c), then from w/c to the toilet, and then back into her w/c. At that time, V13, Registered Nurse (RN), was observing the transfer. During the transfer from the bed to the w/c, R39 yelled out "Oh my butt hurts from when I fell yesterday." R39 yelled out again when V8 and V12 were transferring her onto the toilet, again stating her butt hurts. Staff did not stop and notify R39's nurse when R39 complained of pain during transfers and care. V13 did not step forward and assess R39's pain. During care, V5, CNA came into the room to assist R39 to stand, and asked R39, "Are you still hurting? I remember yesterday, you told me you were sore from falling." V5 and V8 assisted R39 back into w/c, and R39 repeated, " My butt hurts." When R39 was back in her w/c, V8 pushed her up to the dining room for lunch. R39 was not assessed further for complaint of pain, and no</p>	S9999		
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S9999	<p>Continued From page 9</p> <p>pain medication was given.</p> <p>On 05/06/19 at 12:41 PM, V14, CNA, and V2, Director of Nursing (DON), assisted R39 to transfer from her bed to her w/c to go to lunch. V14 assisted R39 to turn and put her feet on the floor, then pivot to sit in her w/c. R39 yelled out several times during the transfer, "Oh that hurts!" and V2 asked R39, "Are you hurting?" and R39 stated, "Yes, my butt hurts." V2 then stated, "Are you ready to go to lunch?" R39 was not assessed further for pain, and no pain medication was given to her at that time.</p> <p>On 5/7/19 at 10:25 AM R39 was yelling from her bed in her room, "Please help me! I'm a mess and I'm hurting. Please help me up...Oh my God! It hurts." V15, CNA, came in and checked R39 and found her to be incontinent of stool. While V15 and V16 performed incontinence care and then transferred R39 to her w/c, R39 complained of her butt and legs hurting. V17, Licensed Practical Nurse (LPN) administered a pain pill to R39 after care was completed.</p> <p>On 5/7/19 at 1:15 PM, R39 stated the pain pill did help some with her pain.</p> <p>On 5/7/19 at 11:05 AM, V15 CNA, stated R39 had never yelled in pain like that before her fall. V15 stated R39 did not want to get up. V15 stated, R39 was usually wanting to get up and out to the dining room to get her nails done or some other activity. V15 stated R39 was staying in bed more during this time due to her pain.</p> <p>On 5/7/19 at 3:00 PM a review of R39's electronic Medication Administration Report, eMAR, documents R39 received Acetaminophen 500 mg for pain on 5/5/19 at 1:46 AM, and then did not</p>	S9999		

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S9999	<p>Continued From page 10</p> <p>receive pain medication again until 5/7/19 at 11:20 AM, even though both V2 and V13 were aware of R39's verbalizations of pain during care on 5/5/19 and 5/6/19.</p> <p>R39's Progress Notes did not include any documentation of R39 expressing pain when care was being given on 5/5/19, 5/6/19 or on 5/7/19 up to 3:00 PM. The progress notes did not include any documentation of notifying R39's physician of her continued complaints of pain.</p> <p>R39's Minimum Data Set (MDS) dated 4/5/19 documents a Brief Interview for Mental Status (BIMS) score of 8, indicating she is moderately cognitively impaired. The same MDS also documents that R39 had not experienced any recent pain at the time of that assessment.</p> <p>The Facility's policy "Pain Assessment and Management" dated March 2015, documents, in part, "The purposes of this procedure are to help the staff identify pain in the resident, and to develop interventions that are consistent with the resident's goals and needs and that address the underlying causes of pain." Under the general guidelines of this policy: 1. The pain management program is based on a facility-wide commitment to resident comfort. 2. "Pain Management" is defined as the process of alleviating the resident's pain to a level that is acceptable to the resident and is based on his or her clinical condition and established treatment goals. 3. Pain management is a multidisciplinary care process that includes the following: b. Effectively recognizing the presence of pain; d. Addressing the underlying causes of the pain; e. Developing and implementing approaches to pain management; g. Monitoring for the effectiveness of interventions; and h. Modifying approaches as</p>	S9999		

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