PRINTED: 12/18/2019 FORM APPROVED Illinois Department of Public Health (X1) PROVIDER/SUPPLIER/CLIA STATEMENT OF DEFICIENCIES (X2) MULTIPLE CONSTRUCTION (X3) DATE SURVEY AND PLAN OF CORRECTION **IDENTIFICATION NUMBER:** COMPLETED A. BUILDING: _ B. WING IL6007595 10/10/2019 NAME OF PROVIDER OR SUPPLIER STREET ADDRESS, CITY, STATE, ZIP CODE P O BOX 4, 403 NORTH FOURTH STREET PRAIRIEVIEW LUTHERAN HOME DANFORTH, IL 60930 SUMMARY STATEMENT OF DEFICIENCIES PROVIDER'S PLAN OF CORRECTION (X4) ID (EACH DEFICIENCY MUST BE PRECEDED BY FULL PREFIX (EACH CORRECTIVE ACTION SHOULD BE COMPLETE PREFIX DATE REGULATORY OR LSC IDENTIFYING INFORMATION) CROSS-REFERENCED TO THE APPROPRIATE TAG TAG DEFICIENCY) S9999 Continued From page 1 S9999 The Physician Order Sheet dated 10/8/19 documents R201 has diagnoses of Dementia, Anxiety Disorder, Major Depressive Disorder and Muscle Weakness. The Minimum Data Set dated 3/19/19 documents R201 is severely cognitively impaired and requires limited assistance with bed mobility and ambulation. The Care Plan dated 3/9/18 documents R201 has behaviors of being resistive to care and wandering and that R201 is rarely or never understood. The Progress Note dated 5/14/19 documents "Resident (unknown) notified staff that (R201) was on the floor in (unknown) resident's room, (unknown) resident stated that (R201) entered room and (unknown resident) tried to help (R201) out, (R201) was on the floor on (R201's) back." "Monitoring and neuros (neurological assessments) were initiated." On 10/8/19 at 12:54 PM R201 was wandering in the dining room trying to take food from other resident's plates. The Allegation of Abuse Log dated 2019 documents R201 and R41 had altercations on 5/26/19 and 7/13/19. The Final Report dated 5/31/19 documents on 5/26/19 at 6:00 PM "(R201) approached the desk where (R41) was sitting and laid a clothing protector down to fold it. (R41) attempted to take

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the clothing protector and (R201) pulled back. (R41) then grabbed (R201) by the collar of (R201's) shirt and right wrist and began to pull (R201) to (R41's) face. Staff were present at this

time and separated the residents."

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STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE A. BUILDING:		(X3) DATE SURVEY COMPLETED	
		IL6007595	B. WING		10/	10/2019
NAME OF	PROVIDER OR SUPPLIER		DRESS, CITY, S			
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(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 COR (EACH CORRECTIVE ACTION CROSS-REFERENCED TO THE A DEFICIENCY)	SHOULD BE COMPLETE	
\$9999	statement dated 5/2 (R41's) food at the a clothing protector the desk. (R41) trie (R201) got mad and jumped up angry ar of (R201's) shirt and (R201) up to (R41's that (R41) was goin and another CNA (V8 CNA's written st documents "(R41) sby the shirt near the wrist and tried pullir V10 Licensed Practicated 5/26/19 documed (medications) and screaming-(R4 and (R201) was be was extremely agits of hurting (R201) so lesson." The Communication documents "(R201) another resident (Rinitiated." On 10/09/19 at 10: like anyone to mess V8 stated R201 approtector and R41 thand R201 pulled bat grabbed R201's colto the ground. V8 s R201, R41 was and	ge 2 g Assistant's (CNA) written 26/19 states "(R41) was eating desk. (R201) Walked up with and started messing with it by ed to take it from (R201) and d pulled it back. (R41) then nd grabbed (R201) by the neck d (R201's) arm. (R41) pulled s) face screaming at (R201) ng to hurt (R201). It took me //8) to get (R41) off of (R201)." attement dated 5/26/19 stood up and grabbed (R201) e collar bone and the right ng (R201) to the ground." tical Nurse's written statement ments "I was administering to a patient and I heard yelling 1) was being handled by V7 ing taken away by V8. (R41) ated towards (R201). Mention o (R201) would learn a In Note dated 5/26/19 involved in altercation with A1)." and "Monitoring 13 AM V8 stated R41 does not s with R41 while R41 is eating. For oached R41 with a clothing fried to pull it away from R201 lar bone and tried to pull R201 lar bone and tried to pull R201 stated when R41 grabbed gry and trying to get R201 stated R41 thinks R201 is a	\$9999			

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Illinois Department of Public Health STATEMENT OF DEFICIENCIES (X1) PROVIDER/SUPPLIER/CLIA (X2) MULTIPLE CONSTRUCTION (X3) DATE SURVEY AND PLAN OF CORRECTION IDENTIFICATION NUMBER: COMPLETED A. BUILDING: _ B. WING IL6007595 10/10/2019 NAME OF PROVIDER OR SUPPLIER STREET ADDRESS, CITY, STATE, ZIP CODE P O BOX 4, 403 NORTH FOURTH STREET **PRAIRIEVIEW LUTHERAN HOME** DANFORTH, IL 60930 SUMMARY STATEMENT OF DEFICIENCIES PROVIDER'S PLAN OF CORRECTION (X5) (X4) ID (EACH DEFICIENCY MUST BE PRECEDED BY FULL (EACH CORRECTIVE ACTION SHOULD BE COMPLETE **PREFIX** PREFIX REGULATORY OR LSC IDENTIFYING INFORMATION) CROSS-REFERENCED TO THE APPROPRIATE DATE TAG TAG DEFICIENCY) S9999 S9999 Continued From page 3 threat. V8 stated R41 gets upset when R201 starts getting combative with the CNA staff. V8 stated R41 was yelling at R201 and usually calls R201 names like "dummy." V8 stated R201 and R41 are on 15 minute checks and staff try to keep them separated. The Progress Note dated 7/5/19 documents on 6/24/19 "(R201) entered another res (unknown resident) room, both residents ended up on the floor" and "New intervention for monitoring to be continuous at this time." The Final Report dated 7/18/19 documents on 7/13/19 at 8:30 am "(R41) walked by the couch in common area where (R201) was sitting. (R41) pointed a finger at (R201) and said, "Go ahead, keep doing it, and just see what happens." (R201) stood and muttered to (R41) and either had (R201's) hand near (R41's) face or was poking at (R41's) chest. (R41) states "Stop hitting my face." (R41) and (R201) then grabbed onto each other's arms and (R41) pushed (R201) to the floor. (R41) kicked (R201) in the right leg while (R201) was lying on the floor as staff arrived to intervene." V11 Registered Nurse's written statement dated 7/13/19 documents "(R41) grabbed (R201) with both arms and pushed (R201) down to the ground." V13 CNA's written statement dated 7/13/19 states "(R201) was poking (R41) in the chest aggressively. (R41) grabbed (R201) by (R201's) arms and threw (R201) on the ground. (R41) then kicked (R201) while (R201) was still on the ground."

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The Progress Note dated 7/13/19 documents

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STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION A. BUILDING: B. WING		(X3) DATE SURVEY COMPLETED				
IL6007595		IL6007595							
NAME OF	PROVIDER OR SUPPLIER	STREET ADI	DRESS, CITY, S	TATE, ZIP CODE					
PRAIRIEVIEW LUTHERAN HOME P O BOX 4, 403 NORTH FOURTH STREET DANFORTH, IL 60930									
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