Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	IL6016786	A. BUILDING: ______ B. WING ______	C 03/12/2020

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
SPRING CREEK	777 DRAPER AVENUE JOLIET, IL 60432

(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) COMPLETE DATE
S 000	Initial Comments Complaint 2071970 / IL121018	S 000		
S9999	Final Observations Statement of Licensure Violations: 300.610a) 300.1210b) 300.1210d)6) 300.3240a) Section 300.610 Resident Care Policies a) The facility shall have written policies and procedures, governing all services provided by the facility which 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. These policies shall be in compliance with the Act and all rules promulgated thereunder. These written policies shall be followed in operating the facility and shall be reviewed at least annually by this committee, as evidenced by written, signed and dated minutes of such a 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	S9999	Attachment A Statement of Licensure Violations	

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S9999	Continued From page 1	S9999		

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:

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.

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)

These Regulations were not met as evidenced by:

Based on observation, interview, and record review, the facility failed to ensure fall interventions were in place for a resident at high risk for falls. This failure resulted in a resident falling from bed and sustaining a left hip dislocation.

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S9999	Continued From page 2	S9999		

This applies to 1 resident (R1) reviewed for falls.

The findings include:

R1's Face Sheet showed he has diagnoses of dementia with behavioral disturbances and Parkinson's disease. R1's January 4, 2020 Minimum Data Set showed R1 is severely cognitively impaired, requires extensive assistance of two people for transfers, and has a history of falls. R1's January 25, 2020 Fall Risk Review categorized R1 as a "high fall risk" and showed R1 had previous falls.

The facility's March 11, 2020 Facility Incident Investigation Report showed "On 3/9/2020 at approximately [10:30 PM], resident was observed out of his bed on the floor positioned on his left side facing the door ..."

On March 11, 2020 at 12:40 PM, R1 was on his back in bed. R1's left leg was rotated internally and it was shorter than his right leg. R1's March 11, 2020 X-ray result from 9:43 PM showed "Dislocated total left hip replacement prosthesis."

On March 12, 2020 at 9:45 AM, V12 CNA (Certified Nursing Assistant) stated she is always assigned to R1. V12 stated prior to his March 9 fall, R1 was "always climbing out of bed ...I don't know why ... he's antsy. He has dementia." V12 stated if R1 is up in his chair and it is not reclined, R1 also attempts to get up. V12 stated R1 "has always had fall mats, and always had alarms." V12 was asked how she knew which residents were fall risks, and she stated she refers to the Care Cards in the residents' closets. The undated Care Sheet in R1's closet showed he is at risk for falls, and uses a bed alarm, chair

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S9999	Continued From page 3	S9999		

Continued From page 3

alarm, fall mat, and bed bolsters as fall interventions.

On March 12, 2020 at 10:30 AM, V3 RN (Registered Nurse) stated fall mats are used in case a resident falls. V3 stated you do not want a resident to fall on the cement floor so mats can minimize risks of injury. V3 stated alarms are used for those residents who try to get up unassisted and the alarm reminds the resident and alerts the staff. V3 stated "it is everyone's job to make sure that mats and alarms are in place." V3 added "whenever a resident is in bed and they have mats, if you see they aren't there, they should be put down."

On March 11, 2020 at 4:05 PM, V10 (RN) stated she was working with R1 on March 9, 2020 when he fell. V10 stated the CNA found R1 on the floor when she was doing her rounds. V10 stated when she saw him, R1 was lying on his left side on the door side of his bed. V10 stated R1's alarm was not sounding and it was not on him. V10 stated R1's fall mats were not in place and instead were leaning against the wall.

On March 12, 2020 at 10:00 AM, V11 (RN) stated staff members have to follow protocol for fall interventions and have to ensure that the interventions are actually in place to prevent a fall. V11 stated "if you know they've fallen you make sure they're in place." V11 stated alarms let us know someone is trying to get up and maybe we can get to them. V11 stated the purpose of the mats is to lessen injury.

On March 12, 2020 at 12:35 PM, V6 (R1's Nurse Practitioner) stated R1's left hip dislocation was a result of his fall from bed on March 9, 2020. V6 stated she expects resident's fall interventions to

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S9999	Continued From page 4	S9999		

be implemented.

R1's Fall care plan focus (revised January 15, 2020) showed the intervention of "bed alarm applied" was initiated October 21, 2019. The facility's November 27, 2019 Fall Prevention Program policy showed "The program will include measures which determine the individual needs of each resident by assessing the risk of falls and implementation of appropriate interventions..." The policy further showed "4. ...All assigned nursing personnel are responsible for ensuring ongoing precautions are put in place and consistently maintained..."

(B)