

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>IL6009369</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>C</b> <b>09/30/2020</b>
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NAME OF PROVIDER OR SUPPLIER  <b>TAYLORVILLE CARE CENTER</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>600 SOUTH HOUSTON TAYLORVILLE, IL 62568</b>
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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 CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
S 000	Initial Comments  Complaint Investigation Survey: 2047619/IL127171	S 000		
S9999	Final Observations  Statement of Licensure Violations:  300.610a) 300.1210d)2) 300.1210d)5) 300.1230d)1) 300.3240 a)  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.  Section 300.1210 General Requirements for Nursing and Personal Care  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:  2) All treatments and procedures shall be	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

10/23/20

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S9999	<p>Continued From page 1</p> <p>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 300.1230 Direct Care Staffing</p> <p>d) Each facility shall provide minimum direct care staff by:</p> <p>1) Determining the amount of direct care staffing needed to meet the needs of its residents</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 requirements are not met as evidenced by:</p> <p>Based on observation, record review and interview, the facility failed to identify, assess, evaluate, monitor and treat pressure sores for 2 of 2 residents (R1, R2,) reviewed for pressure ulcers in the total sample of 4.</p> <p>Findings include:</p> <p>1. R1's Electronic Health Record, (EHR), documents that R1 was admitted to facility on</p>	S9999		
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S9999	<p>Continued From page 2</p> <p>7/31/20 with a diagnosis of fractured hip from a fall at home.</p> <p>R1's Care Plan dated 8/03/20 documents: I developed a stage 2 pressure injury to my right buttock after my admission. I remain at risk for development of new areas due to incontinence, limited mobility, and my preference of sitting up in the chair throughout the day during daytime hours.</p> <p>08/11/2020 Stage 2 pressure ulcer right upper buttock. This wound is distal to another wound on right buttock</p> <p>08/20/2020 Stage 2 right inferior buttock</p> <p>08/25/2020 Stage 2 left heel</p> <p>INTERVENTIONS: 08/08/20 Treatment per MD orders to right upper buttock stage 2, (proximal wound).</p> <p>08/11/20 Treatment per MD orders to right upper buttock stage 2, (distal wound).</p> <p>08/20/2020 Treatment per MD orders to right inferior buttock stage 2.</p> <p>08/20/2020 Treatment per MD orders to left heel stage 2.</p> <p>08/24/2020 2 new open areas on buttock. 4 totals, on buttock, measure and document wound measurements weekly. Notify my Physician and family weekly of wound progress.</p> <p>Wound physician to asses my wound weekly. To follow all recommendations made by MD, (Medical Doctor).</p> <p>Nurse to provide head to toe skin assessment weekly. Care staff will monitor and report any new or open areas noted during routine care or with schedules bathing.</p> <p>R1's Progress Note, dated 8/16/20 documents:</p>	S9999		
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S9999	<p>Continued From page 3</p> <p>"Spoke with night shift nurses earlier this AM. They reported that (R1) now has an area to his left heel. They stated, that is moving constantly through the night in bed writhing and constantly in motion. He likely is causing friction, due to frequent moving in bed."</p> <p>R1's Progress Note, dated 8/24/20 documents: Stage 2 blister (intact), noted on left heel. MD and (wife) notified. Will skin prep heel every shift. Currently has an alternating air flow mattress, Arginaid, extra protein, Vitamin therapy for wound healing. Spoke with Therapy this evening, to see if they can take a look at a heel float, area measures 3.7 x 4.6.</p> <p>R1's Skin Assessment dated, 8/13/20 documents: Right buttocks pressure ulcer 0.5 cm long and 0.3cm in width. Other pressure ulcer 1cm long and 1cm width.</p> <p>R1's Skin Assessment dated, 8/20/20 documents: "Resident has a stage 3 to the right superior, right inferior, left buttock and right buttock. Resident is receiving treatment to areas.</p> <p>R1's Skin Assessment dated, 8/27/20 documents: "Resident has a stage 3 to the right superior, right inferior, left buttock and right buttock. MD saw resident on 8/26 and is changing treatment. Resident also has a wound to left heel that is a stage 2 closed blister.</p> <p>R1's Weekly Wound Assessment, dated 9/02/20 documents: Right buttock stage 2 length 3cm x width 2cm and depth 0.1cm. Date acquired 8/11/20. Peri wound tissues slightly reddened but blanching wound edges even.</p> <p>Left buttock date acquired 8/20/20. Stage 2</p>	S9999		

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S9999	<p>Continued From page 4</p> <p>Right upper buttock (superior). Date acquired 8/8/20. Stage 2 pressure length 0.8cm x width 0.5cm.</p> <p>Right buttock (inferior) date acquired 8/20/20. Stage 2 length 0.8cm x width 0.3cm and depth 0.1cm.</p> <p>Left heel date acquired 8/24/20. Stage 2 pressure. Length 3cm x 4cm width.</p> <p>R1's BRADEN SCALE-For Predicting Pressure Sore Risk, dated 9/28/20, has total score of 13 which represents moderate risk.</p> <p>R1's Minimum Data Set, (MDS), dated 8/06/20 documents, R1 to be cognitively moderately impaired. R1's MDS documents, that R1 requires extensive assistance, 2-person physical assist with transfers, locomotion on and off unit, dressing and toilet use. R1 is frequently incontinent of bladder and occasionally incontinent of bowel.</p> <p>R1's Physician Order, dated 8/31/20 documents: "Apply medi honey to the wound then a calcium alginate dressing to stage 2 pressure ulcer located on right buttock daily Cover with island dressing daily."</p> <p>R1's Physician order dated 9/03/20 documents: "Cleanse left heel stage 2 pressure wound with NS/wound cleanser then apply hydrogel gel and cover with an island dressing daily."</p> <p>On 9/26/20 at 10:25AM, V7, CNA arrived to floor after lunch break, "I've been so busy." V7 CNA stated, "A midnight aide stayed over to about 9:00AM today to help me, we have just been short of staff."</p> <p>On 9/26/20 at 10:35AM V4 CNA stated, "I've been</p>	S9999		

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S9999	<p>Continued From page 5</p> <p>working by myself for a couple of days now." V4 stated, "If we have the staff then we have 2 aides on the floor, if not then just 1."</p> <p>On 9/26/20 at 09:45 AM V8 Certified Nurse Assistant, (CNA), stated, "I was working another hall, but that person went to lunch, so I am here covering."</p> <p>On 9/28/20 at 10:35AM, V14 LPN/Wound Nurse, "I was hired to be a Wound Nurse and I got to do that job maybe 2 days and since then I have been working as a floor nurse." V14 stated, "I usually try to do my dressings after lunch when the resident is laying down."</p> <p>09/28/20 at 11:00AM V13 CNA stated, "It's a mess around here." V13 stated, "I think they have called everyone, agency and they don't have anyone."</p> <p>On 9/28/20 at 11:50AM V12 Licensed Practical Nurse (LPN)n stated, "I haven't been able to do my job for the past 10 days." V12 LPN stated, "So my job is getting farther behind and corporate will not send us any relief."</p> <p>On 9/28/20 at 1:40PM, R1 stated, "Nobody wants to help me."</p> <p>On 9/28/20 at 1:41PM V12 and V14, LPN's entered R1's room. V12 asked, R1 to roll over onto his right side. A wet rolled up piece of gauze observed hanging off R1's buttocks. A stage 2 pressure ulcer located on right side of buttocks, pink wound bed, clear drainage. V12 cleaned wound bed and applied new dressing/treatment. R1's left heel was a large round pressure ulcer with necrotic tissue uncovered with no treatment. V14 stated, "R1 just came back from hospital."</p>	S9999		

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S9999	<p>Continued From page 6</p> <p>2. R2's EHR documents that R2 was admitted initially to facility on 6/07/17 and readmission 12/19/19 with a diagnosis: BIFASCICULAR BLOCK, BRADYCARDIA, and BILATERAL PRIMARY OSTEOARTHRITIS OF KNEE.</p> <p>R2's skin assessment dated 8/22/20 documents: right buttock pressure. Length 2cm x width 2cm. Stage II.</p> <p>R2's skin assessment dated 8/29/20 documents right buttock pressure. Length 6cm x width 4.2cm and depth 0.8cm unstageable.</p> <p>R2's Weekly wound assessment dated 9/02/20 documents date acquired 8/28/20 slough tissue present, necrotic tissue present. Length 2.5cm, width 1.5cm and depth 0.5cm. Recommendations- Off-load wound; Reposition per facility protocol; limit sitting to 30 minutes.</p> <p>R2's Wound Care Assessment/Treatment Plan dated 9/16/20 documents, (site1) Stage 4 pressure wound sacrum. Primary dressing frequency BID (twice a day) for 16 days. Wound size length 3cm x width 3cm and depth 0.5cm (site2), Venous wound of left leg. Recommendations-Compression hose</p> <p>The facility's 'Weekly Skin Integrity Report, dated 9/16/20 documents: R2 sacrum stage 4 measuring 3cm length, 3cm wide and 0.5cm depth. Treatment start date, 8/28/20 and original date 8/28/20.</p> <p>On 9/26/20 at 10:35AM, R2 was observed sitting in recliner in room</p> <p>On 9/26/20 at 11:50AM, V4 CNA assisted R2 up</p>	S9999		
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S9999	<p>Continued From page 7</p> <p>with gait belt, R2 was unable to straighten legs or put a foot forward. R2 stated, "Get some help." V4 CNA then sat R2 down into a wheelchair so that he could have a window visit. R2 was not checked for incontinence.</p> <p>On 9/26/20 at 12:50PM V3 Corporate Nurse and V8 CNA assisted R2 with gait belt from wheelchair back into recliner. R2 was not checked for incontinence.</p> <p>On 9/26/2020 at 2:39PM skin check requested for R2. V4 and V16 CNA's, stood R2 up from recliner and pulled down pant and incontinent brief. A large area of blood mixed with feces observed in incontinent brief. A stage 4 open area about size of a fifty-cent piece observed on R2's sacrum with drainage and no treatment covering wound. V4 CNA stated, "I think there is supposed to be a dressing on it."</p> <p>On 9/30/20 at 1:15PM, V17 R2's Doctor stated, "I would expect staff to be checking and repositioning residents. V17 Doctor stated, "I would expect staff to be applying treatments as ordered. V17 stated, "I thought the facility had a wound nurse." V17 stated, "I don't want a resident to be sitting in stool."</p> <p>Facility's Policy and Procedure 'Decubitus Prevention and Treatment' dated 6/99 documents: Prevention protocol is considered good nursing care and will not require an order. Goal: No other single fact points to negligent, inadequate nursing care more clearly than the presence of decubitus ulcers. Treatment protocols: Assess need for position change schedule. Initiate if needed. The average turn and position schedule call for a frequency of every 2 hours. The CNA will observe skin daily</p>	S9999		
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S9999	<p>Continued From page 8</p> <p>and or each time resident is changed, dressed, undressed etc. The license nurse will provide care ordered by the Physician and will observe daily.</p> <p>(B)</p> <p>300.610a) 300.1010h) 300.1210d)3) 300.3240a)</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 and shall be reviewed at least annually by this committee, documented by written, signed and dated minutes of the meeting.</p> <p>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</p>	S9999		
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S9999	<p>Continued From page 9</p> <p>accident, injury or change in condition at the time of notification. (B)</p> <p>Section 300.1210 General Requirements for Nursing and Personal Care</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 made by nursing staff and recorded in the resident's medical record.</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 requirements are not met as evidenced by:</p> <p>Based on observation, interview and record review the facility failed to timely assess, respond and provide interventions for 1 of 1 resident (R2) reviewed for shortness of breath. This failure resulted in R2 waiting for over 45 minutes after notifying aide that he couldn't breathe. R2 was sent out to hospital with a diagnosis of pneumonia.</p> <p>Findings include:</p> <p>1. R2's EHR documents, that R1 was admitted initially to facility on 6/7/2017 and readmission</p>	S9999		

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S9999	<p>Continued From page 10</p> <p>12/19/2019 with a diagnosis: BIFASCICULAR BLOCK, BRADYCARDIA, and BILATERAL PRIMARY OSTEOARTHRITIS OF KNEE.</p> <p>On 9/28/2020 at 09:00 AM R2's call light was on.</p> <p>On 9/28/2020 at 09:15 AM V11 Certified Nurse Assistant, (CNA), stated, "Yes, I am the only CNA on this hallway.</p> <p>On 9/28/20 at 09:15 AM V11 CNA entered into R2's room. R2 was observed sitting in his recliner. R2 stated, "I can't breathe." R2 stated, "I just need air." R2 stated, "I want to go to hospital." R2 stated, "I'm very ill." R2 then opened his shirt showing a large bruise on his right side of chest. V11 CNA stated, "I saw that when I got you up this morning." V11 CNA stated, "I don't know what happened, I got nothing in report." V11 left the room and returned stating, "I told the nurse that R2 can't breathe and about the bruise."</p> <p>On 9/28/2020 at 09:20 AM R2's call light is on. At 09:25 AM V11 CNA in room with R2. R2 stated, "I need to go to hospital." "I need to see a Doctor." R2 stated, "I don't think they can take care of me here."</p> <p>On 9/28/2020 at 9:27 AM V11 CNA, turned off R2's call light and left the room. V11 CNA, then left the COVID unit, no staff present on hall at this time.</p> <p>On 9/28/2020 at 09:29 AM V11 CNA stated, to R2, "I know I saw that bruise when I was getting you dressed, and I told the nurse."</p> <p>On 9/28/2020 at 09:42 AM V11 CNA stated, "I told the nurse that (R2) was having trouble breathing and that his ribs were hurting and that he wanted</p>	S9999		

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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 CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
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S9999	<p>Continued From page 11</p> <p>to go to hospital." V11 CNA stated, that the nurse stated she would be down in a minute." V11 CNA stated, "I don't know what happened to (R2)." V11 CNA stated, "I got nothing in report about that bruise. (R2) didn't have that Friday. V11 stated, "They said he didn't fall."</p> <p>On 9/28/2020 at 10:14 AM V3 Corporate Nurse, (RN), entered COVID Unit. V3 stated, "I would expect staff to respond immediately to a resident who states "I can't breathe" or "I need air."V3 then placed a pulse oximetry, (device to measure oxygen levels), on R2's finger indicating an oxygen level of 85% down to 82% then decreased to 79%. V3 then placed oxygen via nasal canula on R2. R2's oxygen level increased to 94% at this time. V3 obtained R2's temperature indicating 99.5.</p> <p>On 9/28/2020 at 10:27 AM V14 LPN stated, "(V11) stated, that R2 had a bruise."</p> <p>On 9/28/2020 at 10:27 AM R2, was sent out to local hospital.</p> <p>On 9/30/2020 at 1:15PM V17 R2's Doctor stated, "I would expect staff to respond immediately to shortness of breath." V17 Doctor stated, "A resident that is short of breath needs an immediate assessment."</p> <p>R2's Progress Note dated, 9/28/2020 documents: Late Entry: Note Text: (R2) resident was noted to be having SOB. SPO2% 82. 2L O2 applied. MD was contacted. Awaiting call back from MD staff decided to send resident to (local Hospital) for evaluation due to condition worsening even with O2. ambulance was contacted for transport as well as POA.</p>	S9999		
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Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>IL6009369</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>C</b> <b>09/30/2020</b>
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S9999	<p>Continued From page 12</p> <p>R2's Progress Note, dated 9/28/2020 documents: "Call placed to (local hospital) to inquire about resident, resident was transferred to another hospital. Writer called hospital to inquire, resident was admitted to their COVID Unit with pneumonia, elevated white count, and elevated BNP."</p> <p>On 9/30/20 at 2:00PM V1 Administrator, (Adm), stated, "I don't think we have a policy and procedure for that, but I am still checking and will let you know."</p> <p>On 9/30/20 at 3:00PM V1 Adm stated, "I agree with V3 RN, (R2), should have been assessed immediately." V1 Adm stated, "We are unable to find a policy and procedure for this incident."</p> <p>(A)</p>	S9999		
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