

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: IL6011571	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED C 10/29/2020
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NAME OF PROVIDER OR SUPPLIER ACCOLADE HC OF PAXTON ON PELLIS	STREET ADDRESS, CITY, STATE, ZIP CODE 1001 EAST PELLIS STREET PAXTON, IL 60957
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S 000	Initial Comments Complaint # 2068464/IL128086	S 000		
S9999	Final Observations STATEMENT OF LICENSURE VIOLATIONS: 300.1210b)5)d)6) 300.3240a) 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: 5) All nursing personnel shall assist and encourage residents with ambulation and safe transfer activities as often as necessary in an effort to help them retain or maintain their highest practicable level of functioning. 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	S9999	Attachment A Statement of Licensure Violations	

Illinois Department of Public Health
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

11/18/20

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S9999	<p>Continued From page 1</p> <p>nursing personnel shall evaluate residents to see that each resident receives adequate supervision and assistance to prevent accidents.</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. (Section 2-107 of the Act)</p> <p>These regulations are not met as evidenced by:</p> <p>Based on observation, interview and record review the facility failed to safely transfer two of three residents (R1 and R3) using a partial weight bearing mechanical device. This failure resulted in R1 being manually lowered to the floor and sustaining a shoulder and humerus fracture.</p> <p>Findings Include:</p> <p>1.)The undated manufacturer's safety instructions document on page nine "Lower leg straps: Accessory used to ensure that the lower parts of the resident's legs stay close to the knee support. They pass around the knee supports, then around the resident's lower calves. To fasten, click the strap into it's socket as with a seatbelt. Ensure that the straps are firm but comfortable for the resident."</p> <p>R1's Progress Notes document the following:</p> <p>9/17/20 - R1 was seen via telemedicine by V14 Physician. "The patient {R1} states that she {R1} does not feel well. (R1) has a history of (urinary tract infection and congestive heart failure). Appears more weak and lethargic than normal. Medications reviewed. Levaquin and Lasix</p>	S9999		

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S9999	<p>Continued From page 2</p> <p>ordered with chest xray. Bronchitis suspected."</p> <p>9/19/20 - R1 observed sitting on the bathroom floor with Certified Nursing Assistant assisting R1 to maintain a seated position, legs out in front of R1. R1's left arm flaccid per baseline and complaining of left arm pain. R1's right leg gave out while on the (partial weight bearing mechanical lift) and the Certified Nursing Assistants lowered the resident to the ground.</p> <p>9/21/20 - R1 has been in bed all shift, still complaining of left shoulder discomfort. Bruising noted to both axilla areas. Orders received to obtain left shoulder xrays.</p> <p>9/21/20 - xray completed of the left shoulder</p> <p>R1's Patient Report dated 9/21/20 by V21 Physician/Radiologist documents, "Interval appearance of an acute or subacute horizontal fracture through the proximal metaphysis/diaphysis of the humerus, with up to 1.2 cm (centimeter) medial displacement of the distal fracture moiety. Interval appearance of an acute or subacute fracture of the middle to distal diaphysis of the left clavicle, with up to 2.8 mm (millimeters) cortical displacement at the fracture margins."</p> <p>R1's Progress Notes dated 9/21/20 documents R1 was sent to hospital for shoulder and humerus fractures.</p> <p>On 10/28/20 at 10:55 AM, R1 stated that R1 slipped and fell off of the sit to stand, resulting in a broken shoulder in two places. "I {R1} told them {unidentified Certified Nursing Assistants} that my {R1's} leg wouldn't hold that day, but they {unidentified Certified Nursing Assistants} said</p>	S9999		
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S9999	<p>Continued From page 3</p> <p>"we {unidentified Certified Nursing Assistants} won't let you {R1} fall". R1 stated there were two staff present during the transfer.</p> <p>R1's undated incident report documents V7 Certified Nursing Assistant and V17 Certified Nursing Assistant were present for R1's transfer and witnessed foot slip and leg give out.</p> <p>R1's Minimum Data Set dated 10/21/20 documents R1's cognitively intact.</p> <p>On 10/28/20 at 10:53 AM V7, Certified Nursing Assistant stated that V7 could not remember if V7 used a leg strap with R1 during the transfer on 9/19/20, when R1's leg gave away during the transfer.</p> <p>On 10/28/20 at 11:11 AM R1 stated that the unidentified Certified Nursing Assistants did not use a leg strap when they transferred R1 on the day that R1's leg gave away during the transfer.</p> <p>On 10/28/20 at 11:14 AM V7 Certified Nursing Assistant stated that V7 usually uses the straps on R1 because R1 has a history of legs buckling.</p> <p>On 10/28/20 at 11:25 AM V12 Occupational Therapy Assistant stated that a partial weight bearing mechanical lift could be used for a person with some leg weakness as long as they had some upper arm strength which R1 did have; however a leg strap should always be used.</p> <p>On 10/28/20 at 1:05 PM V10 Physical Therapy Assistant (PTA) stated that V10 was aware of at least one partial weight bearing mechanical lift in the building with a leg strap. V10 PTA stated that if a resident is weak and a partial weight bearing mechanical lift is used, without a leg strap, it can</p>	S9999		
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S9999	<p>Continued From page 4</p> <p>lead to injury.</p> <p>On 10/28/20 at 1:06 PM V11 Certified Nursing Assistant stated that (V11) does not use a leg strap unless instructed to do so.</p> <p>2.) R3's undated Face Sheet documents a Diagnosis of Repeated Falls.</p> <p>R3's Care Plan dated 8/6/20 documents R3 requires a partial weight bearing mechanical lift with maximum assistance of two staff for transfers.</p> <p>On 10/28/20 at 11:10 am, V7 CNA (Certified Nursing Assistant) and V8 CNA entered R3's room with the partial weight bearing mechanical lift, to transfer R3 from the bed to R3's wheelchair. V7 assisted R3 to a sitting position on the side of the bed and placed a standing sling around R3's back and hooked the sling onto the lift. V7 assisted R3 in placing R3's feet on lift's foot platform. V7 raised R3 up to standing position, using the partial weight bearing mechanical lift while V8 moved R3's wheelchair closer to R3. R3 was then lowered into the wheelchair. The partial weight bearing mechanical lift had a safety leg strap that was tied up to the machine and not used during R3's transfer. At 11:14 am, V7 stated V7 uses "the leg straps sometimes on residents whose legs buckle." At 11:15 am, V8 stated, "we {facility} use the leg straps on resident with weak legs."</p> <p>The undated Safety Instructions for the Partial Weight Bearing Mechanical Lift documents, "Lower Leg Straps: Accessory used to ensure that the lower parts of the resident's legs stay close to the knee support. They pass around the knee supports, then around the resident's lower</p>	S9999		
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S9999	Continued From page 5 calves. To fasten, click the strap into it's socket as with a seatbelt. Ensure that the straps are firm but comfortable for the resident." B	S9999		