

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: IL6008783	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 01/16/2020
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NAME OF PROVIDER OR SUPPLIER APERION CARE SPRING VALLEY	STREET ADDRESS, CITY, STATE, ZIP CODE 1300 NORTH GREENWOOD STREET SPRING VALLEY, IL 61362
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S 000	Initial Comments Annual Licensure and Certification. F684G cited	S 000		
S9999	Final Observations Statement of Licensure Violations: 300.1010h) 300.1210b) 300.1210c)3) 300.1210d)6) 300.3220f) 300.3240a) Section 300.1010 Medical Care Policies 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 accident, injury or change in condition at the time of notification. 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	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

02/06/20

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S9999	<p>Continued From page 1</p> <p>care needs of the resident. Restorative measures shall include, at a minimum, the following procedures:</p> <p>c) Each direct care-giving staff shall review and be knowledgeable about his or her residents' respective resident care plan.</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>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>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 300.3220 Medical Care</p> <p>f) All medical treatment and procedures shall be administered as ordered by a physician. All new physician orders shall be reviewed by the facility's director of nursing or charge nurse designee within 24 hours after such orders have been issued to assure facility compliance with such orders. (Section 2-104(b) of the Act)</p>	S9999		

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S9999	<p>Continued From page 2</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 were not met as evidenced by:</p> <p>Based on observation, interview and record review, the facility failed to monitor a resident for bleeding and failed to notify the physician of a potential life threatening condition for one of one resident (R29), reviewed for medication side effects, in the sample of 43. This failure resulted in R29 developing diffuse, scattered bruising throughout and a large hematoma to the left lower leg.</p> <p>FINDINGS INCLUDE:</p> <p>R29's facility Admission Record, documents that R29 was admitted to the facility on 9/28/19 with the following diagnoses: Cerebral Infarct due to Thrombosis of the Left Anterior Cerebral Artery, Acute on Chronic Systolic Heart Failure, Epilepsy, Hemiplegia, Traumatic Brain Injury.</p> <p>R29's Admission Physician Order Sheet documents R29 received the following medications on admission: Aspirin (antiplatelet) 81 MG (milligrams) by mouth daily.</p> <p>R29's Weekly Skin Observation form, dated 12/17/19 documents R29's skin as, "Skin intact. No concerns."</p> <p>R29's Progress Notes, dated 12/18/2019 at 7:28 P.M. document, " Resident returned from appt</p>	S9999		
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S9999	<p>Continued From page 3</p> <p>(appointment) with V6/Neurologist. N.O. (New Order) received to increase Aspirin 81 mg to BID (two times daily). Start Plavix (anticoagulant) 75 mg PO (by mouth) daily. Monitor for bleeding. PT/OT/ST (Physical Therapy, Occupational Therapy and Speech Therapy) to evaluate and treat. Return 4/24/20 at 11:30. Will need husband or family member to go with to discuss memory due to at risk for vascular dementia. Call placed out to (spouse). He was notified of new orders and his presence needed at upcoming appointment.. He also stated he will attend."</p> <p>R29's Progress Notes, dated 12/18/2019 document, "The order you have entered, Plavix Tablet 75 MG give 1 tablet by mouth in the morning has triggered the following drug protocol alerts/warning(s):Drug to Drug Interaction Aspirin Tablet 81 MG give 1 tablet by mouth one time a day. Severity: Moderate Interaction: The risk of life-threatening bleeding such as intracranial or gastrointestinal hemorrhage may be increased in patients receiving Plavix Tablet 75 MG with Aspirin Tablet 81 MG, especially among patients following a recent transient ischemic attack, ischemic or lacunar stroke."</p> <p>R29's facility Physician Order Sheet, dated 12/18/19 and signed by V6/Physician documents the following orders: Increase Baby ASA (aspirin) to 81 MG BID (twice daily), Plavix one daily, 75 MG, PO (by mouth) and Watch for bleeding.</p> <p>R29's Medication Administration Records, dated December 2019 and January 2020 do not include the standard facility practice of facility nurse's monitoring R29 each shift for abnormal bruising or bleeding.</p> <p>On 01/13/2020 at 9:58 A.M., V4 and V5/Certified</p>	S9999		
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S9999	<p>Continued From page 4</p> <p>Nursing Assistant (CNA) prepared to assist R29 from the wheel chair to the bed. After assisting R29 into bed, V5/CNA removed R29's jeans. Multiple, diffuse bruises, mainly purple in color were scattered over R29's bilateral legs, hips and arms and a large, prominent, deep purple hematoma to R29's left shin was present. At that same time, R29 stated she was unaware of when or how the injuries occurred.</p> <p>On 1/13/2020 at 9:58 A.M., V3/Licensed Practical Nurse (LPN) stated, "I don't know when all these bruises occurred. I don't know anything about watching (R29) for bleeding. I just started on day shift, two weeks ago."</p> <p>R29's Weekly Skin Observations, dated 1/14/2020 document the following bruises, 22.5 CM X 6.9 CM X 4.7 CM bruise to face; 13.3 CM X 6.3 CM X 3.3 CM bruise to right medial malleolus; 3.2 CM X 2.7 CM X 1.7 CM bruise to left intercostal rib area; 0.5 CM X 0.9 CM X 0.8 CM bruise to outer, upper left arm; 3.1 CM X 2.9 CM X 1.5 CM bruise to left buttock; 4.9 CM X 3.7 CM X 2.1 CM bruise to right lateral thigh; 1.1 CM X 1.3 CM X 1.2 CM bruise to right lateral calf; 22.4 CM X 7.2 CM X 5.1 CM bruise to left dorsum; 4.2 CM X 3.2 CM X 1.9 CM bruise to front left thigh; 25.4 X 10 CM X 4.5 CM hematoma to left lateral thigh; 11.6 CM X 8.7 CM X 3.6 CM hematoma to left shin and 18.4 CM X 16 CM X 2.3 CM hematoma to right lateral calf.</p> <p>On 1/14/2020 at 3:30 P.M., V2/Director of Nurses (DON) stated, "The staff are supposed to monitor (R29) for bleeding and bruising. Our facility practice is for staff to monitor her skin each shift and document they did, on the MAR (Medication Administration Record). I don't know why (R29)'s December and January MAR didn't get the</p>	S9999		
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S9999	Continued From page 5 monitoring added to it." On 1/15/2020 at 10:27 A.M., V6/Physician stated, "I was not aware of any bruising on (R29). If I had been made aware of all those bruises, I would have altered the treatment that (R29) receives. I gave an order for (facility) staff to monitor her for bleeding and to let me know right away if they noticed something. They have not called me before today." (B)	S9999		
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