

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: IL6005029	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED C 06/27/2019
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NAME OF PROVIDER OR SUPPLIER ROYAL OAKS CARE CENTER	STREET ADDRESS, CITY, STATE, ZIP CODE 605 EAST CHURCH STREET, P O BOX 600 KEWANEE, IL 61443
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S 000	Initial Comments Complaint Investigation 1924476/IL113240 1924621/IL113388	S 000		
S9999	Final Observations Statement of Licensure Violations (Violation 1 of 2) 300.1010h) 300.1210b) 300.1210d)5) 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	S9999	<p>Attachment A Statement of Licensure Violations</p>	

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

Electronically Signed

TITLE

(X6) DATE

07/18/19

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S9999	<p>Continued From page 1</p> <p>resident to meet the total nursing and personal care needs of the resident.</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>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 300.3240 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 Requirements are not met as evidenced by:</p> <p>Based on record review, observation,, and interview, the facility failed to identify and treat a pressure ulcer for one (R3) of four residents reviewed for skin integrity in a total sample of 4.</p> <p>FINDINGS INCLUDE:</p> <p>R3's "Nursing Admission Assessment," dated 3/21/2019 documents, "Excoriation bilateral inner buttocks, abd[ominal] fold and bilat[eral] posterior knees."</p> <p>R3's Minimum Data Set dated 4/4/19 document R3's Brief Interview for Mental Status as a score</p>	S9999		

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S9999	<p>Continued From page 2</p> <p>of 15, indicating R3 is cognitively intact.</p> <p>R3's "Physician's Orders" dated 6/15/19 document, "Bilateral Inner Knees - Cleanse, apply TAO (triple Antibiotic Ointment) out edges of wounds every shift - wound clinic consult."</p> <p>R3's medical records documentation, entitled "Nursing Home Documentation Form," from "Family Practice Management," dated 5/18/19 and 6/22/19 document "Right knee red flaking," and "Bilateral medial knees with large open wounds," respectively.</p> <p>On 6/25/19 R3 was at R3's wound clinic consult. "Progress Notes" from V11 (Advanced Nurse Practitioner) document, "There is a strong odor or evidence of infection. The ulcer wounds are very tender to the touch. Wound Assessment: Leg Right Upper Medial Moist; eschar; slough; black; yellow; subcutaneous tissue visible; warm; painful; red; 3.4 cm (centimeters) long x 5.3 cm wide x 1.4 cm deep; undermining; yellow, green, purulent, malodorous drainage; extending full thickness. Leg LEFT Upper Medial Moist; eschar; slough; black; yellow; subcutaneous tissue visible; warm; painful; red; 8.7 cm long x 6.8 cm wide x 1.8 cm deep; undermining; serosanguinous, yellow, purulent, malodorous drainage; extending full thickness. PROCEDURE - ulcers were not debrided as patient requires a surgical debridement and will be admitted to the hospital for evaluation and treatment. PLAN: Patients ulcers are extremely painful erythemic, warm and indurated extending beyond the wound borders. Discussed with patient and power of attorney need for intravenous antibiotic therapy and surgical debridement. Hospitalist was consulted and he was in agreement and patient will be admitted."</p>	S9999		
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S9999	<p>Continued From page 3</p> <p>On 6/26/19, at 11:15 a.m., at the hospital where R3 was direct admitted to from the wound clinic on 6/25/19, R3 was observed to have two pressure wounds on the inner side of both R3's knees. R3's left inner knee pressure wound was approximately 3 inches (diameter) with induration and slough surrounding the edges and eschar covering the center. R3's right inner knee wound was approximately 2 inches (diameter) with induration and slough surrounding the edges and eschar covering the center.</p> <p>On 6/26/19, at 11:15 a.m., R3 stated, "Pain is a 10 and has been like that a long time. Tramadol does not work. They are not doing skin checks like they should have or they wouldn't have got this bad."</p> <p>On 6/27/19 at 12:25 p.m., V12 (R3's Power of Attorney) stated, "I was not once contacted regarding any of [R3's] wounds until the day of the wound clinic visit for [R3]."</p> <p>On 6/27/19 at 2:55 p.m. V11 (Advanced Practice Nurse) stated, "She [R3] had those wounds at least a month or longer and should have been treated sooner."</p> <p>(A)</p> <p>(Violation 2 of 2)</p> <p>300.1210b) 300.1210d)6) 300.3240a)</p>	S9999		
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S9999	<p>Continued From page 4</p> <p>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:</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 300.3240 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)</p> <p>These requirements were not met as evidenced by:</p> <p>Based on record review, observation, and interview the facility failed to safely provide a physical transfer in a manner that not cause harm to one resident (R1) of four residents reviewed for accidents/incidents in a total sample of 4.</p>	S9999		

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S9999	<p>Continued From page 5</p> <p>This failure resulted in R1 guarding R1's left arm from moving, crying in pain, and requiring pain control medication.</p> <p>FINDINGS INCLUDE:</p> <p>R1's Quarterly Minimum Data Set dated 4/19/19 document R1's Brief Interview for Mental Status score as 15 - indicating R1 is cognitively intact.</p> <p>R1's "Physician's Orders" dated 6/2019 document "[Mechanical] lift for transfers;" "6/17/2019 Acetaminophen 650 milligrams (mg) q (every) 6 hrs (hours) PRN (as needed);" and "6/23/19 Hydrocodone 5/325 mg q 6 hours PRN." Throughout the survey, R1 was administered these medications as documented on the Medication Administration Record.</p> <p>On 6/25/19 at 12:55 p.m. during the interview regarding the alleged fall during transfer, R1 wrote the following: "dropped," "2 aides," "[V7/Certified Nursing Assistant] black," "[V8/Certified Nursing Assistant] blonde," "after supper," "in room," "dragged me." When asked if R1 landed on the floor, R1 nodded "yes" and touched R1's legs with R1's right hand. R1 had a left-below the knee amputation and a right-above the knee amputation. When asked if V7 and V8 picked R1 up by the arms, R1 nodded "yes." R1 was guarding her left arm from moving. R1 confirmed pain and would make crying sounds when certified nursing assistants repositioned R1 prior to R1's interview. R1's left upper arm was observed to have a large faint yellow bruise covering the the distance from R1's antecubital space to the upper biceps muscle and 3 spots on outer aspect of R1's left upper arm. R1 was guarding her shoulder and did not want anyone to manipulate the arm.</p>	S9999		
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S9999	<p>Continued From page 6</p> <p>R1's local hospital "Discharge Summary" dated 6/22/2019 documents, "Patient also wrote down that she was dropped/suffered a fall to her left-side shoulder at the NH (nursing home) and cries when having pain." Additionally, "a limited single view of the left humerus shows chronic fracture deformities. No new displaced humeral fracture identified."</p> <p>On 6/27/19 at 1:35 p.m. V1 (Administrator) confirmed R1's left arm bruising and stated, "I wonder if the bruising was from an improper transfer?"</p> <p>(B)</p>	S9999		