STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	IL6015630	A. BUILDING _____ B. WING _____	C 12/21/2017

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
DEKALB COUNTY REHAB & NURSING	2600 NORTH ANNIE GLIDDEN ROAD DEKALB, IL 60115

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S 000	Initial Comments Complaint #1717368/IL98922	S 000		
S9999	Final Observations Statement of Licensure Violations: 300.610a 300.1210b)c)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. 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 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	S9999	**Attachment A** **Statement of Licensure Violations**	

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S9999	Continued From page 1	S9999		

care and personal care shall be provided to each resident to meet the total nursing and personal care needs of the resident

c) Each direct care-giving staff shall review and be knowledgeable about his or her residents' respective resident care plan.

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

These regulations are not met as evidenced by:

Based on observation, interview and record review the facility failed to safely transfer a resident. This failure resulted in a fall causing a left femur fracture which needed surgical repair.

This applies to 1 of 3 residents (R1) reviewed for falls in the sample of 3.

The findings include:

The face sheet for R1 shows him to have diagnoses of hypertension, anemia, osteoarthritis and left hip fusion. The MDS (Minimum Data Set) assessment dated September 20, 2017 shows R1 to be cognitively intact and requires two assist from staff for transfers. The bedside

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S9999	Continued From page 2	S9999		

care plan for R1 shows two assist was needed for transfers. The resident fall investigation report dated December 9, 2017 shows R1 was being transferred to the bed from his wheelchair by one staff when he fell to the floor.

On December 15, 2017 at 1:00 PM, V1 (R1's family member) stated after R1 fell he was taken to the local hospital where it was determined he had a fracture to his left femur. He was then transferred to another hospital to have surgery. V1 stated after the surgery R1 was in alot of pain and was crying out, V1 stated this was very difficult for him to watch. V1 stated R1 said to two family members at different times that R1 had asked the staff to get another person to help with the transfer but the single staff told him they were fine they could do this.

On December 19, 2017 at 3:10 PM, V5 CNA (Certified Nursing Assistant) said she was transferring R1 by herself because she had seen other staff transfer R1 by themselves and she felt it was fine to do this. V5 said she never looked at R1's bedside care card until after the fall. V5 said she stood R1 up and went to pivot him when his knee gave out and they both fell to the ground. V5 stated she does not recall the resident asking her to get another staff to help her.

On December 19, 2017 at 11:15 AM, V3 restorative nurse stated she does all the assessments for residents to determine the safe number of people or equipment needed to safely transfer a resident. V3 said R1 has always been a 2 person assist transfer. V3 said R1 should not have been transferred by just one CNA.

On December 19, 2017 at 12:40 PM, V2 DON (Director of Nurses) stated R1 should not have

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been transferred by just one CNA. V2 said a fall can be life changing for a resident and can even lead to death.

On December 19, 2017 V6, V7 and V8, CNA's, all stated R1 was a two person assist for transfers and if unsure about a residents transfer status they should check the bedside care plan.

On December 19, 2017 V4 and V9 RN's (Registered Nurse) stated the CNA's are to check the bedside care cards to determine the number of staff needed to safely transfer a resident.

The Safety Risk Data Collection assessment with quarterly review dates of January 20, 2017 and September 20, 2017 shows R1 requires two staff for all transfers.

The care plan for R1 dated February 6, 2017 for falls shows "I am at risk for falls as I have a fused left hip and cannot bend. I am impulsive and I have poor judgement". The approach dated May 2, 2017 shows two assist using gait belt with all toileting/transfers. The care plan for R1 for ADL (Activities of Daily Living) with a review date of October 2, 2017 shows "I need assist from two staff members to transfer to/from bed/chair at all opportunities".

The hospital records dated December 10, 2017 for R1 show a displaced angulated mid shaft left femur fracture after a fall during a transfer at the facility. R1 was transferred to another hospital for a left femur fracture intramedullary nailing surgery December 10, 2017.

The facility's Fall Policy revised 2017 shows All residents who are assessed as being at high risk for falls will be identified and indivualized fall

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S9999	Continued From page 4 precautions will be developed for that resident. Preventative measures shall be taken to decrease the number of falls whenever possible... Changes in safety approaches is communicated via log book, care plan, bed card, and unit education inservices. (A)	S9999		