STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	IL6003008	A. BUILDING: _____ B. WING _____	C 09/16/2021

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
GROVE OF BERWYN, THE	3601 SOUTH HARLEM AVENUE BERWYN, IL 60402

(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 2196297/IL137604	S 000		
S9999	Final Observations Statement of Licensure Violations 300.610a) 300.1210b) 300.1210c) 300.1210d)2 300.1210d)5 300.3240a Section 300.610a) 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	S9999	Attachment A Statement of Licensure Violations	

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S9999	Continued From page 1 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: c) Each direct care-giving staff shall review and be knowledgeable about his or her residents' respective resident care plan. 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 administered as ordered by the physician. 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. 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) These Requirements were not met as evidenced by:	S9999		

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S9999	Continued From page 2 Based on interview and record review, the facility failed to ensure that a resident did not develop any new pressure ulcers while in the facility and failed to comprehensively assess, care plan, and prevent the worsening of a sacral wound noted upon admission to the facility for a resident assessed to be at risk for skin breakdown. This failure affected one (R2) of four (R1, R3, and R4) residents reviewed for pressure ulcers this failure resulted in R2 sustaining multiple new pressure sores on bilateral ankles, left foot, and worsening of a sacral wound. Findings include: R2 is a 67 year old with diagnoses listed in part (but not limited to): Parkinson's disease, diabetes, dementia, and heart failure. Admission summary dated 7/27/21, written by V6 (RN) reads: "Resident presented to facility post fall with imaging notable for left greater trochanter fracture, unclear if acute or chronic. Resident arrived at facility from (hospital) via stretcher x2 escort. Head-to-toe assessment completed. Vital signs taken. Resident is alert and oriented times 2-3, occasionally forgetful at baseline. Resident noted with sacral wound, dressing is clean, dry and intact." MDS (Minimum Data Set) of 7/28/21 reveals contradictory information showing no pressure ulcers at the time of admission but documented that (R2) was at-risk for developing pressure ulcers/injuries. On 7/28/21, V6 (RN) performed a virtual (telehealth) examination with an orthopedic doctor (V8) to communicate health status of R2.	S9999		

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S9999	Continued From page 3 There was no mention of a sacral wound to obtain orders for care documented in the medical record. Physician note dated 8/18/21, written by V9 (Attending Physician), reads: "Patient seen and examined by me today as a staff reported patient has leukocytosis. Patient white blood count appears comfortable today. Patient is sitting in his room appears to be comfortable. Patient states that he is feeling good. Patient denies any fever, chills, nausea, vomiting." There was no documentation or assessment in the medical record written by V9 related to (R2's) sacral wound or other skin/pressure-related injuries. Review of R2's medical record has no other entries regarding the noted sacral wound. There were no doctor's orders for treatment documented nor assessment or plan of care pertaining to pressure related wounds or skin breakdown for R2 in the medical record. Nursing note dated 8/25/21 at 10:17 AM, written by V5 (Licensed Practical Nurse) reads: observed R2 with a change of condition and transferred the resident to the hospital where R2 was admitted for diabetic ketoacidosis. Documentation did not include any skin assessment or condition of (R2's) skin prior to the hospital transfer. Hospital record includes assessement documentation written by both V10 (Hospital Physician) and V11 (Hospital Physician) dated 8/25/21 at 10:46 AM, includes: "Patient was found to have multiple pressure ulcers (5) on bilateral lower extremities and buttocks with gangrenous changes. Wound care consulted and daily dressing changes were performed."	S9999		

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S9999	Continued From page 4 Hospital documentation further includes the following physician orders for wound care: "1. Sacrum: daily enzymatic debridement. Offload the area as much as possible. Patient may need sharp debridement (surgical removal of dead tissue) to assist with wound healing. 2. Left lateral foot proximal: Every 2 days and as needed application of a foam dressing. Change as needed if soiled. Offload the area as much as possible. 3. Left lateral foot distal: Every 2 days and as needed application of a foam dressing. Change as needed if soiled. Offload the area as much as possible. 4. Left lateral ankle: Every 2 days and as needed application of a foam dressing. Change as needed if soiled. Offload the area as much as possible. 5. Right lateral ankle: Every 2 days and as needed application of a foam dressing. Change as needed if soiled. Offload the area as much as possible." 9/15/21 at 12:40 PM, V3 (Director of Nursing) stated, "I know that (R2) had a deep tissue injury on the sacrum when he was admitted. I do not know why they did not care plan for this but we should have if he came in with a pressure sore. We have a new wound nurse (V4, wound nurse/Licensed Practical Nurse) but she just started recently and can't answer any of your questions regarding R2 because he was in the hospital when she started." Surveyor asked who was responsible for conducting wound treatments in the facility and V3 stated, "Just (V4), the floor	S9999		

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S9999	Continued From page 5 nurses do not do wound care." Documentation provided by the facility during the course of this survey was reviewed and did not include any assessments, treatment orders, or care planning related to the prevention and/or treatment of pressure ulcers or skin breakdown for R2. (B)	S9999		