

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: IL6016497	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 11/04/2021
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NAME OF PROVIDER OR SUPPLIER SOUTH SUBURBAN REHAB CENTER	STREET ADDRESS, CITY, STATE, ZIP CODE 19000 SOUTH HALSTED HOMEWOOD, IL 60430
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S 000	Initial Comments	S 000		
	Annual Licensure and Certification Survey			
S9999	Final Observations	S9999		
	<p>Statement of Licensure Violations</p> <p>(Violation 1 of 3)</p> <p>300.610a) 300.1210b)4) 300.1210b)5)</p> <p>Section 300.610 Resident Care Policies</p> <p>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.</p> <p>Section 300.1210 General Requirements for Nursing and Personal Care</p> <p>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</p>		<p>Attachment A Statement of Licensure Violations</p>	

Illinois Department of Public Health LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X8) DATE
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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>4) All nursing personnel shall assist and encourage residents so that a resident's abilities in activities of daily living do not diminish unless circumstances of the individual's clinical condition demonstrate that diminution was unavoidable. This includes the resident's abilities to bathe, dress, and groom; transfer and ambulate; toilet; eat; and use speech, language, or other functional communication systems. A resident who is unable to carry out activities of daily living shall receive the services necessary to maintain good nutrition, grooming, and personal hygiene.</p> <p>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</p> <p>These requirements were not met as evidenced by:</p> <p>Based on interview and record review, the facility failed to provide a resident with restorative therapy to help with the use a prosthetic leg to maintain the resident's ability to walk for 1 of 54 residents (R155) reviewed for restorative therapy. This failure resulted in R155 who was adjusting to his disability, expressing words of disappointment and sadness because he was not provided with the daily restorative therapy using a prosthetic leg.</p> <p>Findings include:</p> <p>R155 is a 78 year old male admitted to the facility 2/20/2019. R155 has a Brief Interview for Mental</p>	S9999		

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S9999	<p>Continued From page 2</p> <p>Status (BIMS) score of 15 as indicated on the Minimum Data Set assessment with diagnoses that include hypertension, congestive heart failure, weakness, right below knee amputation, and diabetes mellitus type II.</p> <p>On 11/02/21 11:54AM R155 was observed in his room sitting in wheelchair watching television. R155's prosthetic leg observed in front of book cabinet.</p> <p>During interview with R155 on 11/02/2021 at 12:00PM, R155 said, "I am supposed to get therapy and use my prosthetic leg every day. I used to go to therapy and used it there, but they said I was discharged from therapy and haven't used it since. I feel like the nurses and those taking care of me don't want me to walk ever again. They just want me to waste away in this chair. I have a way to walk and they won't help me. They are supposed to help me and that makes me feel like no one cares about me."</p> <p>On 11/03/21 at 02:13pm V21 (Restorative Nursing Director/Restorative Nurse) said, "We have a certified occupational therapy assistant who provides restorative therapy to the residents as well as the CNA (Certified Nurse Aide) and restorative aide. I am responsible for supervising to make sure restorative nursing is completed or effective, and I do the quarterly and annual assessments. R155 has two programs in place, but I am not sure exactly which ones. I have not worked with him personally. I'm not familiar with his plan of care off the top of my head. If the minutes are not documented in the Point of Care charting, the CNA or Restorative Aide probably forgot to chart or it didn't happen. A resident with a prosthetic device should be worked with daily in order to reach their best potential."</p>	S9999		

Illinois Department of Public Health

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S9999	<p>Continued From page 3</p> <p>Physical Therapy discharge summary documentation dated 7/23/2021 indicates R155 was to be transitioned to restorative nursing program in order to "facilitate patient maintaining current level of performance and in order to prevent decline, (sic) and instruction in the following Restorative Nursing Programs has been completed with the interdisciplinary team."</p> <p>Physician Order Sheet has an active order dated 3/23/2021 which states: Prosthesis program: (R155) will apply and remove prostheses with extensive staff assistance 6-7 days per week through next review. Care plan for ADL Functional Rehabilitation Potential updated 10/31/2021 indicated that R155 requires a restorative amputation/prostheses program. Goals of the care plan include, R155 will apply and remove prostheses with extensive staff assistance 6-7 days per week through next review.</p> <p>R155 Electronic Medical Record history was reviewed from 8/1/2021 to 11/2/2021 for amputation/prosthesis care. In August 2021 prosthesis care was charted as "not performed" for a total of 15 days. In September 2021 POC for prosthesis care was charted as "not performed" for 17 days. In October 2021 POC for prosthesis care was charted as "not performed" for 14 days.</p> <p>Facility Rehabilitative Nursing Care Policy states in part, General rehabilitative nursing care is that which does not require the use of a Qualified Professional Therapist to render such care. Nursing personnel are trained in rehabilitative nursing care. The facility's rehabilitative nursing care program is designed to assist each resident to achieve and maintain an optimal level of self-care and independence.</p>	S9999		

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S9999	<p>Continued From page 4</p> <p>(B)</p> <p>(Violation 2 of 3)</p> <p>300.1210b)4) 300.1210d)4)A) 300.1210d)4)B) 300.3240a)</p> <p>Section 300.1210 General Requirements for Nursing and Personal Care</p> <p>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.</p> <p>4) All nursing personnel shall assist and encourage residents so that a resident's abilities in activities of daily living do not diminish unless circumstances of the individual's clinical condition demonstrate that diminution was unavoidable. This includes the resident's abilities to bathe, dress, and groom; transfer and ambulate; toilet; eat; and use speech, language, or other functional communication systems. A resident who is unable to carry out activities of daily living shall receive the services necessary to maintain good nutrition, grooming, and personal hygiene.</p> <p>d) Pursuant to subsection (a), general nursing care shall include, at a minimum, the following</p>	S9999		

Illinois Department of Public Health

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S9999	<p>Continued From page 5</p> <p>and shall be practiced on a 24-hour, seven-day-a-week basis:</p> <p>4) Personal care shall be provided on a 24-hour, seven-day-a-week basis. This shall include, but not be limited to, the following:</p> <p>A) Each resident shall have proper daily personal attention, including skin, nails, hair, and oral hygiene, in addition to treatment ordered by the physician.</p> <p>B) Each resident shall have at least one complete bath and hair wash weekly and as many additional baths and hair washes as necessary for satisfactory personal hygiene.</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 were not met as evidenced by:</p> <p>Based on observation, interview and record review, the facility failed to provide grooming and hygiene assistance for Activities of Daily Living (ADLs) for dependent residents in order to avoid excessive wetness or having feces on them and not being groomed in appropriate manner. This applies to six dependent residents (R25, R60, R99, R126, R146, and R156) in a sample of 54. This failure resulted in R156 experiencing psychosocial harm as evidenced by R156 crying during interview and expressing how staff will not assist her in a timely manner and R156 displaying symptoms of depression.</p>	S9999		

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S9999	<p>Continued From page 6</p> <p>Findings include:</p> <p>1. On 11/01/21 at 12:06 PM R156 stated she receives a water pill at 6AM so she begins to urinate soon after. R156 stated she was last changed between 5-5:30 AM. R156 was crying as she stated staff won't change her because of her size. R156 stated she has explained to nursing aids that she is able to assist with being changed if they turn her a certain way to make it easier on them to encourage them to cooperate with changing her.</p> <p>On 11/01/21 at 01:05 PM, V31 (Restorative Aid) stepped in to assist with incontinence care for R156. R156's brief, pad, and linens were observed soaked in urine. V31 stated R156's bed linens and pad were wet.</p> <p>On 11/02/21 at 10:47 AM, R156 was crying while stating R156 was left soiled for long periods of time which makes her feel depressed, and it reminds her that she can't take care of herself. R156 stated she has asked the CNAs (Certified Nursing Assistants) if they would want someone to treat them like this.</p> <p>On 11/03/2021 at 2:25PM V23 (Social Services Director) stated R156 desires to return home and be able to care herself. V23 stated R156 did express depression and was referred to social services for depression.</p> <p>2. On 11/01/21 at 01:13 PM R126 stated she last received incontinence care at approximately 8AM. R126 stated she was pretty wet. Surveyor observed R126's brief, which was soaking wet. R126 was also observed soiled in feces when being changed by V32 (Certified Nursing Assistant).</p>	S9999		

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S9999	<p>Continued From page 7</p> <p>3. On 11/01/21 at 11:40 AM R146 stated she had not been changed since 9:30PM last night. V32 (Agency Certified Nursing Assistant) came to provide care for R146. R146's incontinence pad laying underneath her was heavily soiled and brown. V32 stated R146's incontinence status was terrible. R146's brief was soaked through to the pad underneath her. V32 wiped feces from between R146's legs. V32 stated R146 does have feces in her genital area. R146 stated she had pulled call light for incontinence care assistance and was still waiting to be changed. R146 stated she just doesn't want to develop bed sores. R146 stated she pressed her call light at 8AM and staff told her they don't start until 8:30. R146 stated she pressed her call light again later and the nurse responded and told her the CNAs (Certified Nursing Assistant) would be making rounds. R146 stated when the nurse came to give her medication, R146 asked the nurse where the CNAs were and reported they hadn't come yet. R146 stated the nurse checked and stated they were making rounds and would be on their way. R146 stated she reported to the nurse it was getting close to lunch time and still hadn't been changed since last night. R146 stated a CNA made sure to change her last night before her shift ended at 10PM, but she had not been changed since then.</p> <p>4. On 11/01/21 at 01:03 PM R99 received incontinence care from V35 (Certified Nursing Assistant) and V32 (Certified Nursing Assistant). R99's brief was observed soaked with urine through to the pad underneath him.</p> <p>On 11/01/21 V32 (Agency Certified Nursing Assistant) stated she started working in another unit at 7AM and was just beginning to do rounds</p>	S9999		

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S9999	<p>Continued From page 8</p> <p>on the unit where R99, R126, R146, and R156 are located. V32 stated she was initially working on the dementia unit and was then pulled over to work on the unit R99, R126, R146, and R156 are located.</p> <p>On 11/04/21 at 01:05 PM V2 (Director of Nursing) stated CNAs (Certified Nursing Aides) are expected to conduct resident rounds every two hours and as needed. V2 stated residents who require incontinence care should not have to wait more than two hours to be changed and should not be left soiled for extended periods of time.</p> <p>5. On 11/01/21 at 11:12 AM R60 was in room his room with door closed. R60's room had a strong urine odor. R60's bottom half was naked. R60 appeared confused.</p> <p>On 11/03/21 at 09:02 AM R60 was observed with long fingernails and hair only half groomed.</p> <p>On 11/02/21 at 03:12 PM V39 (Family Member) stated R60 could use more frequent haircuts, shaves and grooming.</p> <p>6. On 11/02/21 at 11:45 AM R25 was alert and oriented sitting in wheelchair in room. R25 stated the care received by nursing staff isn't very good and that no staff check on R25 during the night. R25 stated there are no staff after 3pm and R25 has to wait hours for assistance to bed. R25 stated, "Lots of agency people here. Sometimes we get good ones then we don't see them anymore." R25 stated that he needs assistance with bathing/dressing. R25's care plan indicates R25 as an extensive staff assist of one. R25 stated shower days are Wednesday and Saturday and that staff come to resident for showers. R25 doesn't remember the last time he received a</p>	S9999		

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S9999	<p>Continued From page 9</p> <p>shower.</p> <p>On 11/03/21 at 02:14 PM R25's bath and skin report sheets were reviewed. These sheets did not specify whether bath or shower was given. The following entries were documented: June 2021 documentation only for 6/2/2021; July 2021 documentation only for 7/14/2021; no documentation available for August and September 2021. October 2021 with documentation only for 10/2, 10/6 and 10/9.</p> <p>On 11/04/2021 at 11:55 AM, V2 (DON) stated bath sheets should be filled out on days completed. V2 also stated her expectation of nursing staff is to complete bathing as scheduled. Per facility bathing sheets, skin assessment is to be completed by floor nurse on shower days. R25's physician orders reflect weekly skin assessments to be done on Wednesdays and Saturdays weekly. When asked who tracks the completed bathing sheets, V2 states she will find out from the nursing staff.</p> <p>On 11/04/21 at 01:14 PM surveyor made multiple requests to facility staff for bathing/ADL policies, however documentation was not provided during the course of this survey.</p> <p style="text-align: center;">(B)</p> <p>(Findings 3 of 3)</p> <p>Section 300.675 COVID 19 Training Requirements Emergency</p> <p>b) Required Frontline Clinical Staff Training 3) Facilities shall ensure 100% of the frontline</p>	S9999		
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S9999	<p>Continued From page 10</p> <p>clinical staff have completed the CMMS Training by February 28, 2021. 4) Facilities shall require, within 14 days after hiring, CMMS Training for all frontline clinical staff hired after January 31, 2021. c) Required Management Staff Training 3) Facilities shall ensure 100% of management staff have completed the CMMS Training by February 28, 2021. 4) Facilities shall require, within 14 days after hiring, CMMS Training for all management staff hired after January 31, 2021.</p> <p>This requirement is not met as evidenced by:</p> <p>Based on interview and record review, the facility failed to ensure a 100% compliance of the Targeted COVID-19 training for Frontline Clinical staff and Management staff after February 28, 2021 and failed to ensure that the Targeted COVID-19 training was completed within 14 days after hiring.</p> <p>Findings include:</p> <p>In a review of training document titled "Certificate of Completion CMS (Centers for Medicare and Medicaid Services) Targeted COVID-19 (Coronavirus 19) Training for Nursing Home Management and CMS Targeted COVID-19 Training for Frontline Nursing Home Staff, the following staff have no certificates of completion as presented:</p> <p>Certified Nurse Aides (CNAs): V16, V35, V42, V43, V44, V45, V46, V47, V48, V49, V50, V51, V52, V53, V54, V55, V56, V57, V58, V59, V60, V61, V62, V63, V64, V65, V66, V67, V68, V69, V70, V71, V72.</p>	S9999		

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S9999	<p>Continued From page 11</p> <p>V26 (Assistant Director of Nursing); V82 (Administrative Assistant/Office Manager); V95 (Administrative Assistant/Office Manager); V73 (Registered Nurse/RN); V74 (RN).</p> <p>Licensed Practical Nurses (LPNs): V8, V13, V19, V78, V80, V81, V84, V85, V88, V91, V92</p> <p>V15 (Restorative/Rehab Aide); V25 (Dietary Manager); V28 (Cook); V38 (Activity Aide); V75 (Cook); V76 (Restorative/Rehab Aide); V77 (Housekeeper); V79 (Restorative/Rehab Aide); V83 (Housekeeper); V86 (Receptionist); V87 (Dietary Aide); V89 (Housekeeper); V90 (Escort/Resident Assistant); V93 (Housekeeper); V94 (Cook)</p> <p>V17 (CNA) was hired on 03/03/21 but training was completed on 11/03/21. V96 (Staffing Coordinator) was hired last 08/04/21, training was completed on 11/03/21.</p> <p>On 11/03/21 01:48 PM, V26 (Assistant Director of Nursing) was interviewed regarding CMS training. V26 stated that V41 (Human Resources Director) is responsible for tracking the certificate training and completion. V41 was asked about completion of the CMS training. V41 stated, "These certificates need to be completed as a requirement. For newly hired staff, they have to complete it within 14 days. The list that I gave you are all the active staff working in the facility. We are still working on the certificates. The newly hires are required to finish it."</p> <p>Facility's policy titled "Orientation and Inservice Training Policy," undated, documented in part but not limited to the following: Policy: It is the policy of this facility to assure competency of each employee by providing orientation and continuing</p>	S9999		

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S9999	<p>Continued From page 12</p> <p>educational inservice programs for all employees, which are planned and conducted for the development and improvement of skills, including training related to problems in specific job assignments. And that staff have qualifications that are commensurate with defined responsibilities, applicable licensure, laws, regulations, and certification to meet the resident's needs. Policy Specifications: To define the practices with regard to initial orientation and training of all personnel and the facility's ongoing staff education programs. Responsibility: To define the practices with regard to initial orientation and training of all personnel and the facility's ongoing staff education programs. Standards: 1. The facility makes every attempt to abide by all appropriate state and federal requirements specified regarding orientation and inservice training, as well as any additional requirements mandated by the Corporation.</p> <p>(C)</p>	S9999		