

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: IL6006886	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED C 12/30/2021
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NAME OF PROVIDER OR SUPPLIER ALDEN ESTATES OF SKOKIE	STREET ADDRESS, CITY, STATE, ZIP CODE 4626 OLD ORCHARD ROAD SKOKIE, IL 60076
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S 000	Initial Comments Facility Reported Incident of December 2, 2021 IL141405	S 000		
S9999	Final Observations Statement of Licensure Violations: 300.610 a) 300.1210 b) 300.1210 d)6) 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 care and personal care shall be provided to each resident to meet the total nursing and personal care needs of the resident. d) Pursuant to subsection (a), general	S9999	Attachment A Statement of Licensure Violations	

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE _____ TITLE _____ (X8) DATE _____

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S9999	<p>Continued From page 1</p> <p>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>These requirements were not met as evidenced by:</p> <p>Based on interview and record review, the facility failed to follow their practice to monitor and visually check the skin during heat therapy treatment, and failed to apply appropriate layers of toweling/padding to prevent an avoidable burn incident for 1 of 3 residents (R1) reviewed for safety and monitoring during heat therapy. This failure resulted in R1 developing blisters, swelling and redness to the right upper arm. R1 was assessed prescribed Silverdine 1% to applied to treat 2nd degree burn to the right upper arm.</p> <p>Findings include:</p> <p>R1's face sheet shows R1 is a 68 year old female with diagnosis of diabetes mellitus, muscle weakness, muscle wasting and atrophy.</p> <p>R1's Minimum Data Set, date 11/26/21, section C, shows, in-part, R1 has a BIMS score of 15 (cognitively intact).</p> <p>R1 Physician Order Sheet, dated 11/20/21, shows OT: pain management modalities as needed.</p> <p>Facility incident report, dated 12/9/21, completed</p>	S9999		

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S9999	<p>Continued From page 2</p> <p>by V5(nurse), shows, "patient (R1) called author to room to assess her right arm. Patient states she feels slight pain/discomfort to her right arm, states she had requested a heat pack earlier to the CPT therapist and CPT therapist applied heat pack to her right arm with layered towels between skin and heat pack. Noted slight redness to her Right upper arm in a small area. Noted what appears to be a few popped blisters small in size 0.1 x 0.1cm with no drainage/no odor. Patient description, patient called author to room and states 'I'm not sure if there's anything on my arm, but it started hurting a little bit so I wanted you to look at it. The therapist had a heat pack on my arm with towels on it.' Action taken, Physician Assistant made aware with orders to cleanse site with NSS (normal saline), apply silvadene Cream BID, cover with dry dressing, until healed. Patient made aware and is amenable for orders, will continue to monitor site. Patient at this time states she does not want author to inform family as she is alert and advocates for herself. Patient alert oriented x3. Nurse Practitioner made aware and will see patient for wound consult. Pain level is 1, Resident was not taken to the hospital, and resident is orient to place, time, person, and situation. Notes show per interview with the therapist (V2), R1 requested a heat pack for her arm. V2 stated she checked the temperature of the heating unit, wrapped the heat pack in a cover and towel, and placed the heat pack over R1 shirt. V2 stated she asked R1 multiple times if the heat pack was comfortable temperature on her arm, which R1 responded by telling her everything felt fine. V2 had returned R1 to her room."</p> <p>V5 is not available for interview.</p> <p>R1 wound assessments, dated 12/10/21, shows,</p>	S9999		

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S9999	<p>Continued From page 3</p> <p>in part, "chief complaint patient seen consulted on the request of PCP(primary care physician) , for skin ulcers/lesions, pertinent diagnosis; deconditioning, weakness. R (right) upper arm superficial burn from the hot pack, R upper arm (lateral), a/o/2 in no apparent distress. Wound #1 R upper arm (lateral), exudate is light. Infection of inflammation is none. Seen with treatment nurse. Current medications reviewed for patient. Review of system, patient is overall stable, constitutional has fatigue, eyes no excessive tearing, eye pain, new visual changes, ENT and mouth. Denies nose bleed, dysphagia, ear pain, ear discharge, respiratory no cough, SOB (short of breath) wheezing, hemoptysis, CVS, denies chest pain, palpitation, swelling. Incontinence, muscle skeletal- has joint stiffness/weakness, difficulty in walking deconditioning, neurological weakness and poor balance, numbness tingling, tremors, headache, has allergies see allergy list. Integumentary has skin wound/lesions per wound sheet. Vitals BP 122/72, temp 98.7, pulse 72, weight 219LBS(pounds) , resp 17, BS 183, O2(oxygen) 97%, pain 0. Physical exam skin wound and skin lesion at wound #1- R upper arm (lateral). Constitutional - appears clean in no apparent distress, has generalized weakness. Built is fair, eyes conjunctive clear no drainage, GI incontinence, respiratory breathing comfortably, psychiatry and neurology A/o, affect-calm, cooperative on examination. Wound related exam 12/10/21 MSK functional status with chair dependent, contracture stiff. Right foot pulse ¼ capillary refill-seconds, left foot pulse ¼ capillary refill-seconds. Motor- weakness of limbs- yes. Assessment and Plan, wound related diagnosis, Burn of second degree of right upper arm, initial encounter, R upper arm (lateral), frequency of treatment daily and PRN(as needed), site should be clean with normal saline,</p>	S9999		
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S9999	<p>Continued From page 4</p> <p>primary dressing- silvadene, secondary dressing-4x4, secure with dry dressing, medical necessity, multiple problems and multiple risk factors, deconditioned, above multiple medical conditions can cause worsening of wounds, development of new wounds and delayed wound healing and infection. Therefore patient needs to be seen every week. Today's management: skin and wound was examined and plan of care was discussed with the wound team and charted. Goals- for skin ulcers, wound healing, prevention of infection, wound related pain management, prevention of further development of new ulcers. Wound assessment: wound number 1 , not resolved, R upper arm, date reported 12/10/21, size in Cm (LxWxD) 2x1x0.1 , volume based on area- 0.2, area based on LxW- 2, other tissue- 100% multiple open blisters, light exudate, no odor, no infection. Treatment done/ recommended on 12/10/21, date treatment initiated 12/10/21, treatment for 30 days, daily and PRN (as needed) clean with normal saline, apply topical silvadene, cover with 4x4, anchorage- dry dressing. Electronically signed by V4 (Wound Physician) on 12/10/21."</p> <p>R1 progress note, dated 12/09/21, "patient called author(V5) to room to assess her right arm. Patient states she feels slight pain/discomfort to her right arm, states she had requested a heat pack earlier to the CPT therapist and CPT therapist applied heat pack to her right arm with layered towels between skin and heat pack. Noted slight redness to her Right upper arm in a small area. Noted what appears to be a few popped blisters small in size 0.1 x 0.1cm with no drainage/no odor. Physician Assistant made aware with orders to cleanse site with NSS, apply silvadene Cream BID (twice a day), cover with dry dressing, until healed. Patient made aware and is</p>	S9999		
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S9999	<p>Continued From page 5</p> <p>amenable for orders, will continue to monitor site. Patient at this time states she does not want author to inform family as she is alert and advocates for herself. Patient alert oriented x3."</p> <p>Review of R1's TAR (Treatment Administration Record) shows R1 received treatment of silvadene cream 1% (silver silfadiazine) to right upper arm topically two times a day for skin condition, cleanse with normal saline, apply dry dressing until healed from 12/10/21 to 12/19/21.</p> <p>On 12/29/21 at 11:40am, R1 was observed to be sitting in R1's room doing upper arm exercises. R1 gave permission for entry to R1's room. R1 was observed to be alert and orient to person, place, time, and situation. R1 said during a therapy session on 12/09/21, R1 received a heat pack, and shortly after therapy, R1 was experiencing some discomfort, and R1 summoned the nurse, and asked the nurse to take a look. During that assessment, R1 had a few blisters on R1's arm. R1 said they are now healed. R1 raised the sleeve of R1's shirt to allow for observation. R1's skin was observed to be intact; 3 faint pink spots were observed where R1 pointed. R1 said R1 requested the heat pack as R1's usual from V2 (Occupational Therapy assistant). R1 said the hot pack was in the cloth pouch (terry cloth), and then V2 wrapped a towel around the pouch and placed it on R1's right upper arm.</p> <p>On 12/29/21 at 12:07pm, V2 (Occupational Therapy Assistant) said V2 was working with R1 on 12/9/21. V2 said during the upper body strengthening exercise, R1 requested a heat pack, and V2 applied the heat pack to R1's right upper extremity. V2 said V2 wrapped the hot pack in the terry cloth, and then double folded a</p>	S9999		

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S9999	<p>Continued From page 6</p> <p>large towel and placed the hot pack to R1's right shoulder area, and the hot pack rested on the upper arm (hot pack on top). V2 said the double folded towel and the terry cloth is considered 6 layers. V2 added R1 had a shirt on, but it wasn't considered another layer of protection. V2 said V2 asked R1 several times "how does it feel" and R1 said okay. V2 said V2 did not check R1's skin before a applying the heat therapy, V2 did not check R1 skin during the heat therapy treatment, and V2 did not check R1's skin after the heat therapy treatment. V2 said it was toward the end of the session, and R1 only had the heat pack on for about 8 minutes. V2 said after occupational therapy services, V2 escorted R1 back to R1's room. V2 said V2 was supposed to check R1 arm prior to, during and after the heat therapy.</p> <p>On 12/29/21 at 11:52am, V3 (Therapy Supervisor) said heat therapy application can last up to 15 minutes, depending on how the resident feels. During an observation of the heating unit, the water temp was observed to be at 158 degrees Fahrenheit. V3 said the water temperature can get as high as 162 degrees Fahrenheit. V3 said there should be 6 to 8 layers of protection between the resident's skin and the heat packs. V3 said the use of 6 to 8 layers of towels depends on how the resident feels. V3 said each side of the terry cloth is considered 2 layers, a folded towel is considered one layer, and a double folded towel is considered 2 layers. V3 present temperature log (temp range noted to be 162 degrees Fahrenheit) for heating unit and a document titled thermal therapy.</p> <p>On 12/30/21 at 10:24am, V3 (Therapy supervisor) said V3 does not know when the time should start for the heat therapy application. V3 does not know if it's when the patient starts feeling the</p>	S9999		

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S9999	<p>Continued From page 7</p> <p>treatment (heat), or when the application is applied. V3 said the resident's skin should be checked before applying the heat therapy for irritation and anything abnormal, and after applying the heat therapy for blisters, more redness than usual (because there will be some light redness from use), irritation to the skin, burns, and anything abnormal. When asked do you visually check the skin during treatment, V3 said the skin is checked during treatment by asking the resident "do you feel heat", and this is done periodically. V3 said V3 does not have a time frame for periodically checking the skin during heat therapy.</p> <p>On 12/30/21 at 12:00pm, V1 (Director of Nursing) said it is V1's expectation there is a visual assessment of the resident skin during a heat therapy treatment for redness or any reactions to the treatment. V1 said residents should also be asked "is the treatment comfortable, is it too hot, is it too warm and is there any discomfort." V1 said the facility does not have a policy on use of thermal therapy, but the therapist has guidelines they follow. V1 said V1 expects the therapist follow their guidelines when using the thermal therapy. V1 said R1 sustained a superficial burn to the right arm and was treated with cream. V1 said V1 can't say what the frequency for periodically checking the skin during heat therapy. V1 said R1 was seen by the wound doctor on 12/10/21.</p> <p>Facility in-service/ meeting attendance record, dated 12/9/2021, shows, in part, topic- proper layers for hot packs (6 to 8 layers) and cold packs. Proper layers for hot pack/cold packs. Demonstration and therapist demonstration, checking skin site before and after treatment. Towel equal 1 layer, folded towel equal 2 layers,</p>	S9999		

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S9999	<p>Continued From page 8</p> <p>hot pack cover equal 2 layers.</p> <p>Review of the in-service document does not show in-service education on periodically visually checking the skin during the thermal therapy; it does not show education on asking the resident about discomfort, asking if the heat therapy is too hot, or too warm.</p> <p>Facility policy Titled "Accidents/ Incident Reports", dated 09/2020, shows, in part, "Procedure- an accident refers to the unexpected or unintentional incident, which may result in injury or illness to a resident. This does not include adverse outcomes that are a direct consequence of treatment or care that is provided in accordance with current standards of practice (i.e drug side effects or reaction). "</p> <p>The Thermal Therapy Guideline document, with no date noted, shows, in part, "must obtain a MD (Medical Doctor) order in order to use these modalities, hot moist pack, definition: moist heat applied by means of a preheated chemical pack of silica get insulated in six to eight layers of toweling. Temperature: 160 degrees Fahrenheit to 165 degrees Fahrenheit, or defer to manufacture for temp range; temperature checks need to be recorded daily. Normal treatment time 15 minutes with periodic checks.</p> <p>Effects/Indications; relief of pain, increase blood flow, relaxation of muscle spasm. Precautions: special care must be taken with thin, aged persons and children, avoid chilling and burning. Take care not to burn unconscious , paralyzed, diabetic, edematous patients or patient with impaired local circulation, do not apply where the is danger of hemorrhage, do not apply where there is suspected malignancy unless physician orders for palliative care measures, do not spread</p>	S9999		

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S9999	Continued From page 9 infection, always have covering between patient skin and pack for sanitary reasons, remove all clothing and inspect skin before and after application, use intensity of heat as indicated by the patient condition, comfort, and the effect to obtain, protect sensitive spots and bony prominences, packs should be check periodically for hot spots or burning. Contraindications: acute DVT, absent temperature sensation." (B)	S9999		