

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>IL6007918</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>01/19/2022</b>
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NAME OF PROVIDER OR SUPPLIER  <b>LANDMARK OF RICHTON PARK REHAB &amp; NS</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>22660 SOUTH CICERO AVENUE RICHTON PARK, IL 60471</b>
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S 000	Initial Comments  Annual Health Licensure Survey  Complaint Survey 2290476/IL142600	S 000		
S9999	Final Observations  (1 of 4) Statement of Licensure Violations:  300.610a) 300.1210b) 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	S9999	<p><b>Attachment A</b> <b>Statement of Licensure Violations</b></p>	

Illinois Department of Public Health LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
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S9999	<p>Continued From page 1</p> <p>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. 300.3240)a</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 evidenced by:</p> <p>Based on interview, and record review, the facility failed to follow their abuse policy by purchasing items on a resident's behalf without obtaining consent for one (R48) of four residents reviewed for misappropriation of funds.</p> <p>This failure resulted in R48 having her money spent on unwanted items purchased by the facility totaling \$899.00 and the resident not being able to use the money to assist her family.</p> <p>Findings include:</p> <p>R48 was admitted to the facility on 11/11/20 with a diagnosis of weakness, respiratory disorder, noncompliance with medical treatment, anemia, hypotension and nicotine dependence. Resident's brief interview for mental status score dated 11/5/21 is 13. A score of 23 indicates cognitively intact.</p> <p>On 01/19/22 02:20pm, R48 alert, and oriented at</p>	S9999		

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S9999	<p>Continued From page 2</p> <p>time of interview said V7(Business Office Manager)BOM, asked her if she needed any clothing or items. R48 said she requested one pair of shoes and 2 jogging suits. R48 said she received socks, bras, dresses, 2 pairs of shoes and 2 blankets. R48 said she never asked for those items or approved the facility to purchase those items on her behalf. R48 said she only wanted the requested items and thought it may cost around 200 dollars for the items. R48 said she never would have approved a purchase for 899 dollars. R48 said she accepted the items because she felt she had to use the money so she could continue to receive her social security benefits. R48 said she did not want to spend that money on clothing and would have liked to give the money to her son. R48 said she did not need all that clothing because she had clothing and people donate clothing. R48 said she only wanted one pair of shoes and did not need any blankets because the facility provided blankets. R48 said her son is currently incarcerated and has been sending him money. R48 said she could of used the money to bond her son out and makes her angry and sad that she cannot help him.</p> <p>On 01/19/22 at 02:50 PM, V7 (Business Office Manager) said she asked R48 if she needed any items. V7 said she will order items from catalog and purchased items for R48. V7 said R48 approved purchase for 899 dollars but was unable to provide documentation that the order was approved by R48. V7 said R48 was not in any kind of spend down.</p> <p>Facility concern form dated 5/7/21 documents: Writer (V7) spoke to resident. Resident said that writer can purchase clothing.</p> <p>Facility document titled resident essential receipt</p>	S9999		

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S9999	<p>Continued From page 3</p> <p>documents: two cotton anklets for 30.00; seven bras for 150.00; best walking shoes for 79.00; stability walker shoes 85.00, two comforters for 150.00; 5 pullover muumuus for 210.00; 5 dresses for 240.00. Total of 899.00.</p> <p>R48's statement landscape documents on 5/11/21 personal needs items for 899.00 was removed from residents account.</p> <p>Facility abuse prevention program policy revised 6/21/20 documents: It is the policy of this facility to prevent resident abuse, neglect, exploitation, mistreatment, and misappropriation of resident property. Misappropriation of resident property is the deliberate misplacement, exploitation or wrongful, temporary or permanent, use of resident's belongings or money without residents consent.</p> <p style="text-align: center;">" B"</p> <p>(2 of 4)</p> <p>300.610a) 300.1210b) 300.1220b)2)</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</p>	S9999		



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S9999	<p>Continued From page 4</p> <p>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 resident to meet the total nursing and personal care needs of the resident.</p> <p>Section 300.1220 Supervision of Nursing Services</p> <p>b)The DON shall supervise and oversee the nursing services of the facility, including: 2) Overseeing the comprehensive assessment of the residents' needs, which include medically defined conditions and medical functional status, sensory and physical impairments, nutritional status and requirements, psychosocial status, discharge potential, dental condition, activities potential, rehabilitation potential, cognitive status,</p>	S9999		

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S9999	<p>Continued From page 5 and drug therapy.</p> <p>These Requirements were Not Met evidenced by:</p> <p>Based on interview and record review, the facility failed to ensure residents who are dependent on staff for incontinence care were checked and changed at least every 2 hours and provide with assistance for proper personal hygiene. This failure affected 4 of 4 (R12, R33, R43, R160) reviewed for incontinence care.</p> <p>This Failure resulted in R12 not being changed in until the next day. R12 was left in feces and urine. R12 expressed feelings that demonstrated psychosocial harm to the resident.</p> <p>Findings Include:</p> <p>1. On 01/16/22 1:03 PM R12's light is on, R12 states she needs to be changed she has not been changed since yesterday morning and she has had urine and bowel movement. R12 states she put on the light the last time around lunch. Someone came and said they would be back and never came back. At 1:07 pm V20, (CNA) states he is not working on the 3rd floor and states he just came up to check on R12 and enters R12's room. V20 states he came to change R12.</p> <p>While R12 received care from V20, the surveyor observed R12's incontinence brief was stained from front to back with stool and urine. Stool and urine appear deeply saturated into the incontinence brief. The blue pad underneath resident was stained brownish. V20 looks at R12's incontinence brief and states "it looks likes</p>	S9999		

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S9999	<p>Continued From page 6</p> <p>it has been sitting on Resident # 12 for 2 shifts." R12 had a sacral wound was healing.</p> <p>On 01/18/22 10:07 AM R12 stated when they left her all evening and all day without changing her, "I felt s****y and wet. I felt bad and neglected because I was laying up in filth. They put me back there (in the COVID + unit) and forgot about me."</p> <p>On 1/17/2022 at 11:00 AM V2 (DON) states residents should be cleaned up upon request or every two hours. V2 states nurses and CNA's are expected to do rounds.</p> <p>On 1/17/2022 at 11:47 AM V22 (LPN) states she just got on the floor, they called her up because they were short staffed. At 12:50 V22 states they were short staffed. V22 states "It is a crisis."</p> <p>On 1/17/2021 at 1:54 PM. V5 states for the 11-7 shift we don't have as many CNA's as were supposed to have. The 4th floor should have one CNA for 11-7. There was no CNA on the 4th floor on the night of the 15th.</p> <p>On 1/19/2022 at 11:35 V29 (CNA) states, we are normally short all the time. It is very rare that we get 2 CNA's" on the 4th floor."</p> <p>On 1/19/2022 at 2:40 PM V30 (nurse) states she did not have a nurse or a CNA the night of 1/15/2022 to help her on the 4th floor. V30 states she wasn't able to get all her work done. V30 states, "The lights were going off and there was no one there but me."</p> <p>Review of staffing for 1/15/22 for the 11 PM -7 AM documents no CNA scheduled on the 4th floor.</p> <p>Review of facility's Activities of Daily living policy</p>	S9999		

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S9999	<p>Continued From page 7</p> <p>documents the following: ADL Care is provided throughout the day, evening and night as care planned and/or as needed.</p> <p>Review of R12's MDS BIMS score is 13/15. Review of R12's MDS section G documents R12 requires extensive one person physical assist for personal hygiene and toileting.</p> <p>2. R33 has the diagnosis of Schizoaffective, Bipolar and Cognitive Communication Deficit. Minimal data set dated 10/27/21 section C (brief interview for mental status) documents a score of 9 which indicates moderate impairment, section G (functional status) documents: R33 requires extensive assistance with one person physical assist for toileting. Section H (bladder and bowel) documents: R33 is frequently incontinent with 7 or more episodes of urinary incontinence. Care plan initiated 6/7/20 documents: R33 had bowel and bladder incontinence. R33 will maintain a clean/dry and odor free appearance.</p> <p>On 1/16/22 at 11:47am, R33 had a strong smell of urine. R33 was observed lying in bed, soaked and wet with an adult brief on, multiple large dried/wet, brown/yellow irregular shaped rings which covered the entire middle portion of R33's bed sheet. R33 was unable to report, the last time she was toileted/changed. V37 (nurse) said, I smell urine. R33 is soaked and wet with urine. R33 is confused. R33 is totally dependent on staff for toileting. The multiple large rings means R33 has not been provided incontinence care. R33 had multiple bladder incontinent episodes. R33 should have been toileted every two hours at a minimum.</p> <p>Activities of daily living policy not dated documents: Residents are given routine care to</p>	S9999		

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S9999	<p>Continued From page 8</p> <p>promote hygiene. Care is provide throughout the day, evening and night as care planned or as needed. Assist the resident.</p> <p>3. R43 has the diagnosis of Paranoid Schizophrenia, Hemiplegia/Hemiparesis affecting left non-dominate side and Cognitive Communication deficits. Minimal data set dated 11/1/21 section G (functional status) documents: R43 requires total dependence with two plus person physical assist for toileting. Section H (bladder and bowel) documents: R43 is frequently incontinent with 7 or more episodes of urinary incontinence. Care plan initiated 7/23/21 documents: R43 has a mixed and functional bowel and bladder incontinent related to confusion impaired mobility and physical limitations. Check and change R43 every 2-3 hours.</p> <p>On 1/16/22 at 12:07pm, R43 had a strong smell of urine. R43 was observed lying in bed soaked and wet with yellow and browns irregular rings underneath R43's body. R43's gown was wet on the right side leading up his back. R43 was unable to report the last time care was provided. V38 (cna) said, I smell urine. R43 is soaked and wet with urine. Those stains are dried/ wet stains of urine. R43 is totally dependent on staff for toileting. R43 has not been provide any incontinence care.</p> <p>Activities of daily living policy not dated documents: Residents are given routine care to promote hygiene. Care is provide throughout the day, evening and night as care planned or as needed. Assist the resident.</p> <p>4. R160 has the diagnosis of Dementia, Schizoffective and weakness. Minimal data set</p>	S9999		

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S9999	<p>Continued From page 9</p> <p>dated 12/27/21 section G (functional status) documents: R160 requires supervision with toileting. Section H (bladder and bowel) documents: R160 is occasionally incontinent with less than 7 episode of incontinence. Care plan requested and not provided by the facility.</p> <p>On 1/19/21 at 9:22am, R160 had a strong smell of urine. R160 was observed with wet jeans on the right lateral hip and sitting in two wet/died yellow/brown irregular shaped rings. R160 was unable to report the last time he was toileted last. V5 (staffing coordinator) said, I smell urine. I see a brown/yellow wet rings. Staff did not provide any incontinence care. If care was provide, R160 would not have yellow/brown, wet/dried stains of urine. V27 (cna) said, I did not provide incontinence care for R160.</p> <p>Activities of daily living policy not dated documents: Residents are given routine care to promote hygiene. Care is provide throughout the day, evening and night as care planned or as needed. Assist the resident.</p> <p style="text-align: center;">"B"</p> <p>(3 of 4)</p> <p>300.610a) 300.1210b) 300.1210d)3)5) 300.1220b)2)</p> <p>Section 300.610 Resident Care Policies</p>	S9999		

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S9999	<p>Continued From page 10</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 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>3)Objective observations of changes in a resident's condition, including mental and emotional changes, as a means for analyzing and determining care required and the need for further medical evaluation and treatment shall be made by nursing staff and recorded in the resident's medical record.</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,</p>	S9999		
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S9999	<p>Continued From page 11</p> <p>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 300.1220 Supervision of Nursing Services</p> <p>b) The DON shall supervise and oversee the nursing services of the facility, including: 2) Overseeing the comprehensive assessment of the residents' needs, which include medically defined conditions and medical functional status, sensory and physical impairments, nutritional status and requirements, psychosocial status, discharge potential, dental condition, activities potential, rehabilitation potential, cognitive status, and drug therapy.</p> <p>These Requirements were Not Met evidenced by: Based on observation, record review, and interview, the facility failed to follow their wound management program policy and procedures, failed to implement wound care as ordered by the physician and failed to assess and document evaluation of wounds for three (R73, R106, R164) of four residents reviewed for pressure ulcers.</p> <p>As a result, R106 was left being without wound treatment for 7 days to a stage 3 pressure ulcer to left inner thigh.</p> <p>Findings include:</p>	S9999		



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NAME OF PROVIDER OR SUPPLIER  <b>LANDMARK OF RICHTON PARK REHAB &amp; NSC</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>22660 SOUTH CICERO AVENUE RICHTON PARK, IL 60471</b>
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S9999	<p>Continued From page 12</p> <p>1. R106 was admitted to the facility on 3/7/19 with a diagnosis of dementia, senile degeneration of brain, muscle weakness, and anxiety.</p> <p>On 1/18/22 at 2:25PM, R106 observed in bed. R106 was on a pressure reduction mattress with pillow in-between lower legs. Pillow was observed with dried brownish/red circles. R106 had wound dressing to left hip and right lower leg. V28 (therapy director) was present and assisted R106 with moving lower extremities which where contracted into a fetal position. Upon assessment surveyor observed open area to left inner thigh. Wound bed was red and yellow in color and had depth to the area.</p> <p>At 2:31 PM, V13(nurse) said, R106 was on pressure reduction mattress not an air loss mattress. V13 confirmed that there was an open area to R106 inner thigh with no dressing noted in the bed or on the resident.</p> <p>On 1/18/22 at 2:34PM, V27 Certified Nurse Aide (CNA) said, was assigned to R106 on 1/18/22. V27 said, did not observe any new open area to R106 and was unaware of open area to left inner thigh.</p> <p>On 1/18/22 at 2:44PM, V18 (wound nurse) said she was not aware of open areas to left inner thigh. V18 said R106 was seen and examined in the morning by wound doctor and herself and they did not observe area on left inner thigh. V18 said, open areas should be reported to the nurse, and wound care so treatments can be ordered. R106 should be placed on an air loss mattress due to wounds. V18 measured wound on left inner thigh to be 4cmx1.5cmx0.2 depth.</p>	S9999		

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S9999	<p>Continued From page 13</p> <p>On 1/19/22 at 5:46PM, V26(QA Nurse) said, the nurse who found the open areas on 1/11/22 should have placed orders on physician order sheet so treatments could be initiated. V26 said, treatments were started on 1/15/22 for left hip, and right leg but unable to explain why the left thigh was not documented on or treatment not provided.</p> <p>R106 treatment administration record for January 2022 documents treatment orders for left hip and right shin with start date of 1/15/22.</p> <p>R106's physician order sheet dated 1/18/22 documents : left medial thigh cleanse with normal sterile saline, pat dry, apply foam, dry dressing every Monday, Wednesday and Friday and PRN.</p> <p>R106's Braden risk review dated 1/14/22 documents a score of 16 which indicates a low risk for development of pressure ulcers. R106 Braden risk review dated 1/18/22 documents score of 13 which indicates moderate risk for development of pressure ulcers.</p> <p>R106's progress notes dated 1/11/22 documents: Writer noted skin laceration to left hip, left leg; left inner thigh, right lower leg, right inner lower leg, and small blister to middle of back. Cleansed with normal saline and applied dry dressing. MD made aware with new orders for wound care to assess and treat.</p> <p>R106's wound evaluation and management summary dated 1/18/22 documents: unstageable deep tissue injury to left lateral hip; unstageable deep tissue injury to right upper medial calf; wound to right shin.</p> <p>R106's medical record did not document any</p>	S9999		

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S9999	<p>Continued From page 14</p> <p>wound assessments prior to 1/18/22. Wound assessment dated 1/18/22 for left medial thigh documents a stage three wound measuring 4cmx1.5cmx0.1depth identified on 1/18/22 with moderate exudate.</p> <p>Facility wound management program undated documents: residents will have a visual inspection of their skin, the nursing assistant visually inspects the skin daily and with care. If an area is identified, the nurse will be notified. Under wound management: Identification of a new wound or pressure injury staff nurse will complete a skin and wound evaluation and document in the medical record. Wound nurse will complete a skin and wound assessment document wounds, measurements and wound assessment in the medical record. Under wound cleaning and dressing: It is the policy if this facility to perform wound dressing changes as ordered by physician using clean technique. Documentation of the dressing change is completed on the treatment administration record.</p> <p>2. R73 is 44 year old with diagnosis including, but not limited to Cerebral Infarction, Hemiplegia and Hemiparesis, Renal Dialysis, Anemia, Protein Calorie Malnutrition, and Diabetes. R73 is alert and oriented during interviews, cognitive scores intact.</p> <p>On 01/16/22 at 3:00 PM R73 said they have not been doing my dressings daily. R73 said the guy who does them is on vacation. R73 said my butt dressing has not been changed in about a week.</p> <p>01/16/22 03:15 PM V26, Quality Assurance Nurse, said floor nurses do their own treatment on the weekends.</p>	S9999		

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S9999	<p>Continued From page 15</p> <p>On 01/16/22 at 3:52 PM Surveyor observed wound care for R73. V26 removed R73's abdominal dressing, no date on the dressing. V26 had difficulty removing the packing. V26 had to irrigate with saline to pry the packing off. Following the abdominal dressing V26 was assisted to turn R73's to perform his sacral dressing. The dressing was observed by surveyor as a square pad with adhesive and additional strips of tape had been applied to the dressing. Surveyor observed the dressing removed to have heavy, brown colored drainage, that saturated the dressing.</p> <p>On 01/17/22 at 12:06 PM V18, Wound Care Nurse, observed removing R73's abdominal dressing. V18 was able to remove the packing easily. Surveyor observed V18 provide sacral wound care. V18 removed the dressing. V18 said the dressing has moderate drainage on it. Surveyor observed dressing light tan in color.</p> <p>On 01/18/22 at 10:08 AM V31, Wound Doctor, said I expect the facility nurses to follow the wound care orders I have written for them.</p> <p>On 01/18/22 at 10:36 AM surveyor observed wound care on R73 with V18 and V31. Surveyor observed V18 easily remove the packing on R73's abdomen. Sacral dressing was removed and V18 said it has moderate drainage.</p> <p>On 1/19/2022 at 9:47AM V26, Quality Assurance Nurse, said if electronic medical record and treatment administration records are not documented on then it was not done. "Nursing 101."</p> <p>Review of R73's Treatment Administration Record for January 2022 has no signatures on 1/9 and 1/15 for sacral and abdominal wounds.</p>	S9999		

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S9999	<p>Continued From page 16</p> <p>The facility undated policy for Wound Management Program notes Wound Cleansing and Dressings. It is the policy of this facility to perform wound dressing changes as ordered by the physician.</p> <p>3. R164 is 51 years old with diagnosis including but not limited to Morbid obesity, Diabetes, and Anemia. R164 was last seen by the wound doctor on 1/4/22 when left and right buttock stage 3 wounds were resolved. R164 is alert and oriented during interviews, cognitive assessment indicates he is intact.</p> <p>On 01/16/22 at 11:37 AM R164 said I have skin sores on my bottom. R164 said my wound care has not been done.</p> <p>On 01/16/22 at 3:16 PM R164 said no one has been back to me and did my wound dressing. R164 said no one is here to do them, the wound nurse is on vacation.</p> <p>On 01/16/22 at 4:01PM V9, Licensed Practical Nurse, said R164 doesn't have treatments to be done. V9 checked R164's orders while surveyor was speaking to her. Surveyor accompanied V9 to check R164's bottom side. When R164 turned onto his side 2 areas observed bleeding bright red blood and blood running down R164's right and left buttocks.</p> <p>On 01/17/22 at 1:23 PM V18, Wound Care Nurse, said today is her first day in the building. V18 said she had not been provided wound treatment to R164 today. V18 said she was not made aware that V18 has a new wound. Surveyor, accompanied by V18, observed one</p>	S9999		

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S9999	<p>Continued From page 17</p> <p>foam dressing on R164's left buttock and one on his right buttock. V18 removed the dressing and noted an open area on the left buttock. V18 said if someone has dressings on, then there should be a physician order. V18 said R164 has a superficial opening on top of his scar tissue.</p> <p>On 1/19/22 at 9:47AM V26, Quality Assurance Nurse, said when a new wound is observed the nurse is expected to look at the new skin alteration, assesses the wound, completed an incident report, call the doctor, initiate any order, and follow up with wound care, on the same day. V26 said regarding the Treatment Administration Record if it's not documented then it was not done, nursing 101.</p> <p>Review of R164's Braden skin risk assessment dated 11/4/21 states R164 is at high risk for skin breakdown. R164 is noted to be constantly moist and have limited mobility.</p> <p>Review of R164's Order Summary Report dated 1/18/22 note left buttock cleanse with normal saline, pat dry, apply zinc oxide every shift. Order date 1/17/22 and start date 1/17/22</p> <p>Review of Treatment Administration Record dated January 2022 has no treatment for R164's buttock until 1/17/22.</p> <p>Review of R164's Progress Notes have no note related to wound care on 1/17/22.</p> <p>Review of R164's Weekly Wound Evaluations dated 1/17/22 note Left Buttock Pressure Ulcer, stage 3, length: 2.5 width 2.0 depth 0.1. When was the wound identified 1/17/22. Right Buttock Pressure Ulcer stage 3, length 1.3 width 1.0 depth 0.1. When was the wound identified 1/17/22.</p> <p>The facility undated policy for Wound</p>	S9999		

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S9999	<p>Continued From page 18</p> <p>Management Program notes upon identification of a new wound A.The staff nurse will complete a skin and wound assessment upon admission/readmission, identify any wounds, pressure injuries, or other skin abnormality, and document it in the medical record.</p> <p style="text-align: center;">" B"</p> <p>( 4 of 4 )</p> <p>300.610a) 300.1210b) 300.1210d)3) 300.1220b)2)</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</p>	S9999		

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S9999	<p>Continued From page 19</p> <p><b>Nursing and Personal Care</b></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>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>3) Objective observations of changes in a resident's condition, including mental and emotional changes, as a means for analyzing and determining care required and the need for further medical evaluation and treatment shall be made by nursing staff and recorded in the resident's medical record.</p> <p><b>Section 300.1220 Supervision of Nursing Services</b></p> <p>b) The DON shall supervise and oversee the nursing services of the facility, including:</p> <p>2) Overseeing the comprehensive assessment of the residents' needs, which include medically defined conditions and medical functional status, sensory and physical impairments, nutritional status and requirements, psychosocial status, discharge potential, dental condition, activities potential, rehabilitation potential, cognitive status, and drug therapy.</p> <p>These Requirements were Not met evidenced by:</p>	S9999		
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S9999	<p>Continued From page 20</p> <p>Based on observations, interviews, and records review, the facility failed to administer psychotropic medications 2 of 4 days to one resident who has a known history of violence, aggressive and unstable behaviors. This applies to 1 of 32 resident (R158) reviewed for aggressive behaviors.</p> <p>This failure resulted in R158 hitting himself in the face with a closed fist multiple times, throwing items, and sustaining a wound to the lip.</p> <p>Findings include:</p> <p>On 01/16/22 3:35 PM, Surveyor observed R158 beating himself in the face and head, throwing things. Staff screaming "no R158" and running behind the nurse's station.</p> <p>R158's Physician orders documents the following: Give Clonazepam 0.5MG two times a day related to anxiety disorder. Risperdal tablet 4 MG give 1 tablet by mouth two times a day related to Schizophrenia, Unspecified.</p> <p>Review of resident's electronic medication administration record (eMAR) documents the above medications were due at 9:00 AM in the morning.</p> <p>On 1/19/2022 at 11:35 AM, V29 (CNA) states, I heard someone throwing something. I did my rounds and found it was R158. R158 was throwing stuff in his room. He went out of the room and started pacing. I asked what was wrong and he said he was agitated and then started punching himself in the face. He was punching himself with a closed fist. R158 "busted his lip and had a little blood, a bruise, and a cut. We are normally short all the time. It is</p>	S9999		

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S9999	<p>Continued From page 21</p> <p>very rare that we get 2 CNA's."</p> <p>On 1/17/2022 at 10:00 AM, record review showed no mention of R158's incident. V1 (Administrator) did not learn of the incident until surveyor mentioned it and V1 said, she would investigate it. V1 returns to 1st floor conference room and states, nurse did not document anything and that nurse was asked to come in to document.</p> <p>Review of R158's electronic medication administration record at 3:44 PM, on 1/16/2022 documents R158 did not receive his morning medications on 1/13/2022, and 1/16/2022.</p> <p>On 1/16/2022 surveyor on the 4th floor between 11:00 AM and 3:40 PM and did not witness medications being passed by nurses.</p> <p>On 1/16/2022 11:47 AM, V22 states, she just got up on the floor. She was pulled from the 2nd floor.</p> <p>On 1/16/2022 at 12:42 PM V22 states, someone called off and "We are short staffed. It is a crisis. I have not given any medications yet." Surveyor looks with V22 at the residents on the floor and each one electronic medication administration record was pink including R158. V22 states, pink means the medications have not been done yet. V22 states, she is going to call the medical director and ask if she can give the medications to the entire floor late.</p> <p>On 1/17/2022 at 12:11 PM, V23 states, sent R158 out for behavioral issues multiple times in the past. V23 states, he was not told that R158 had a violent outburst on 1/16/22. V23 states, with less medication R158 gets agitated quickly. V23 states, If R158 doesn't get his medication he</p>	S9999		

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S9999	<p>Continued From page 22</p> <p>will be a lot more problematic and very aggressive physically. V23 states, R158's outburst on 1/16/2022 can be related to not getting his medications. V23 states, he expects and prefers the facility call him if a resident has a violent outburst. V30 (LPN) was the evening nurse for R158 and did not return phone calls.</p> <p>On 1/17/2022 at 11:00 AM, V2 Director of Nurses(DON) states, nurses should be giving medications based on doctor's orders. V2 states, medications should be given an hour before or an hour after scheduled time. V2 states, 10 people gave medications yesterday. V2 states, V22 told her she gave medications on the fourth floor in the afternoon.</p> <p>Review of the facilities Medication Administration Policy and Procedure documents the following: Policy: unless otherwise specified by the physician, medications will be administered within 60 minutes before or after the facility's dosing schedule, except before or after meal orders and non -routine time ordered medications.</p> <p>" B "</p>	S9999		