

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: IL6009567	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED C 09/14/2022
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NAME OF PROVIDER OR SUPPLIER GARDENVIEW MANOR	STREET ADDRESS, CITY, STATE, ZIP CODE 14792 CATLIN TILTON ROAD DANVILLE, IL 61834
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S 000	Initial Comments Complaint Investigation 2267026/IL150811	S 000		
S9999	Final Observations Statement of Licensure Violations: 1 of 2 300.610 a) 300.1210 b) 300.1210 c) 300.1210 d)2) 300.1210 d)3) 300.1210 d)5) 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	Attachment A Statement of Licensure Violations	

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.</p> <p>c) Each direct care-giving staff shall review and be knowledgeable about his or her residents' respective resident care plan.</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>2) All treatments and procedures shall be administered as ordered by the physician.</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, 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>These regulations are not met as evidenced by:</p> <p>Based on observation, interview, and record review, the facility failed to administer pressure ulcer treatments and interventions, failed to document measurements weekly, failed to change gloves and perform hand hygiene during</p>	S9999		
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S9999	<p>Continued From page 2</p> <p>wound treatments, and failed to timely implement nutritional recommendations for two (R2, R3) of three residents reviewed for wounds in the sample list of six. These failures resulted in a deterioration of R2's left hip Stage 4 Pressure Ulcer.</p> <p>Findings include:</p> <p>The facility's Wound Audit Tool, dated 7/22/22-9/16/22, documents R2 and R3 have facility acquired pressure ulcers.</p> <p>1.) R2's Minimum Data Set (MDS), dated 6/8/22, documents R2 scored a 12 on the Brief Interview for Mental Status, the higher range for moderate cognitive impairment. R2 requires extensive assistance of two staff for dressing and bed mobility, and R2 has one stage 4 Pressure Ulcer.</p> <p>R2's Care Plan, revised 11/11/21, documents R2 has a Stage 4 Pressure Ulcer of the left hip with interventions including to administer treatments as ordered and weekly wound measurements/assessments.</p> <p>R2's Order Summary Report, dated 9/14/22, documents orders for contact isolation precautions related to MRSA wound infection (Methicillin Resistant Staphylococcus Aureus) a multidrug resistant organism, gastrostomy tube feeding Jevity 1.2 at a rate of 60 ml (milliliters)/ hr (hour) for 24 hours continuously started on 5/11/22, wear heel protectors/float heels while in bed, and left hip treatment apply gauze moistened with Betadine, cover with an abdominal pad, and secure with tape twice daily, started on 9/9/22.</p> <p>R2's Wound Evaluation & Management</p>	S9999		

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S9999	<p>Continued From page 3</p> <p>Summaries recorded by V17, Wound Physician, document the following:</p> <p>*On 7/22/22, R2's left hip Stage 4 pressure ulcer measured 7 cm (centimeters) long by 6.5 cm wide by 0.1 cm deep. The treatment order was apply collagen, Daikin's moistened gauze, covered with an abdominal pad daily.</p> <p>* On 8/15/22, R2's wound was 6 cm by 5 cm by 0.1 cm.</p> <p>* On 8/21/22, the wound was 5 cm by 4 cm by 0.2 cm, and V17 changed the treatment to apply gauze moistened with Betadine and cover with an abdominal pad twice daily.</p> <p>* On 9/6/22, the wound was 4.8 cm by 4 cm by 0.1 cm and had 5 % slough (cellular debris). * On 9/12/22, the wound was 7.5 cm by 4.5 cm by 0.1 cm (larger in size) and had 30 % slough. The treatment is the same as noted on 8/21/22.</p> <p>There are no documented wound measurements between 7/30/22 and 8/14/22, or after 8/24/22 until 9/6/22. R2's July, August and September 2022 Treatment Administration Records (TARs) document: V17's order for Betadine twice daily was not implemented until 9/9/22 (19 days later). R2's left hip wound treatments were not signed out as administered on 15 days in July, and two days in September. There is no treatment scheduled daily for R2's wound in August; R2's dressing was scheduled to be "checked" every shift and the Collagen order was scheduled as needed.</p> <p>R2's Nutrition Notes recorded by V18, Registered Dietitian (RD), document on 7/8/22, V18 evaluated R2's nutritional status and recommended increasing R2's tube feeding to Jevity 1.2 at 65 ml/hr for 24 hour continuous. This recommendation provides 1872 kilocalories and 87 grams of protein. On 8/12/22, V18 evaluated</p>	S9999		

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S9999	<p>Continued From page 4</p> <p>R2's nutritional status and documented R2's tube feeding is Jevity 1.2 at 60 ml/hr for 24 hours continuous. There is no documentation V18's recommendation to increase R2's tube feeding rate on 7/8/22 was implemented. There is no documentation in R2's medical record heel protectors are implemented regularly.</p> <p>On 9/13/22 at 11:18 AM, R2 was lying on a low air loss mattress with R2's feet lying directly on the mattress. R2 was not wearing heel protectors. Jevity 1.2 was infusing at 60 ml per hour via gastrostomy tube. R2 was on contact isolation precautions. V6, Licensed Practical Nurse (LPN), administered R2's left hip wound treatment. V8 and V23, Certified Nursing Assistants, (CNAs) assisted V6. V6 removed a dressing, dated 9/11/22, from R2's left hip that contained tan drainage. V6 stated the dressing was dated 9/11/22. There was a large, red, open wound to the bony prominence of R2's left hip. V6 changed gloves, did not perform hand hygiene, and cleansed R2's wound. V6 applied Betadine soaked gauze and an abdominal pad secured with tape. V6 changed V6's gloves, did not perform hand hygiene, and applied triple antibiotic ointment to an open area to R2's penis. V6 applied a skin protectant to R2's bilateral ankles and heels. V6, V8, and V23 left R2's room, and did not apply pressure relieving boots or elevate R2's heels.</p> <p>On 9/13/22 at 11:30 AM, R2 stated R2's left hip wound developed while R2 was in the facility.</p> <p>On 9/14/22 at 12:00 PM, R2 was sitting in a wheelchair near the nurse's station. R2's tube feeding was disconnected. V7, LPN, stated, "(R2's) tube feeding is Jevity 1.2 and runs at 60 ml/hr. We disconnect (R2's) tube feedings during</p>	S9999		

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S9999	<p>Continued From page 5</p> <p>meals, and then resume the feeding after (R2) eats."</p> <p>On 9/14/22 at 9:01 AM, V7, LPN, stated R2 does not wear heel protectors, but V7 thinks R2 needs them.</p> <p>On 9/14/22 at 9:48 AM, V5, Registered Nurse, stated, "Heel boots and pressure relief for heels should be recorded on the TAR. (V17) used to round with (V10, Former Wound Nurse) and give (V17's) notes to (V10). Since (V10) is gone, the floor nurses do not receive (V17's) notes, and no one rounds with (V17). (V17) is supposed to round weekly, but there have been times when (V17) has missed visits." V5 was not sure who assesses wounds in V17's absence. V5 thought V2 should be following up.</p> <p>On 9/14/22 at 1:05 PM, V18, RD, stated V18 visits the facility twice per month. V18 sends V18's recommendations via electronic mail to the facility's administrator, DON, and Dietary Manager on the same day as V18's visit. V18 expects V18's recommendations to be implemented within a week. "(R2's) tube feeding should be Jevity 1.2 continuous at 65 ml/hr, and may be stopped for short duration during care. They should not be stopping the feeding during meals, since (R2) has not been eating much by mouth. The tube feeding is ordered more to maintain (R2's) weight, and provide (R2's) estimated protein needs of 78 grams."</p> <p>On 9/14/22 at 2:40 PM, V14, Vice President of Clinical, reviewed R2's wound assessments and confirmed there were no documented wound measurements between 7/30/22 and 8/14/22, or after 8/24/22 until 9/6/22.</p>	S9999		

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S9999	<p>Continued From page 6</p> <p>2.) R3's MDS, dated 6/6/22, documents R1 has short and long term memory impairment, requires extensive assistance of two staff for bed mobility and dressing, and has one unstageable ulcer and one stage 3 pressure ulcer both facility acquired.</p> <p>R3's Care Plan, revised 8/24/22, documents R3 has an unstageable pressure ulcer of the right lateral ankle and includes interventions to administer treatments as ordered, assess/record/monitor wound measurements and status weekly, follow facility's protocol for prevention and treatment of skin breakdown, monitor nutritional status.</p> <p>R3's Order Summary Report, dated 9/14/22, documents R3's diet includes fortified foods at every meal, a frozen nutritional supplement at noon, and a house shake with supper. R3's orders include to elevate R3's heels when in bed, cleanse R3's right ankle wound, dry, apply skin protectant, and cover with a bordered foam dressing three times per week.</p> <p>R3's Wound Evaluation & Management Summaries recorded by V17, Wound Physician, document: R3's left lateral ankle Stage 3 Pressure Ulcer measurements on 7/22/22 - 1.8 cm long by 0.8 cm wide, 8/5/22 - 1.8 cm by 1.3 cm, 8/15/22 - 1.5 cm by 1 cm, 8/21/22 - 1.5 cm by 1 cm, and 9/12/22 - 0.5 cm by 0.8 cm by 0.1 cm. R3 had a left heel unstageable deep tissue injury that resolved on 7/22/22. V17's recommendations include wearing a heel protector when in bed.</p> <p>There are no documented measurements of R3's wound between 7/9-7/21/22 (12 days) and 8/24-9/5/22 (16 days). R3's frozen nutritional supplement intake is not recorded in R3's medical record.</p>	S9999		

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S9999	<p>Continued From page 7</p> <p>R3's July TAR documents R3's wound treatment is not signed out as administered on 7 days. R3's August and September TARs document R3's wound treatment is scheduled to be administered daily (not three times per week as ordered), and is not signed out as administered on 11 of the scheduled days in August and 4 days in September. There is no documentation that interventions to elevate R3's heels or wear a heel protector in bed is implemented regularly.</p> <p>On 9/13/22 at 11:35 AM, V6, LPN, removed R3's right sock. There was an undated dressing to R3's right outer ankle, confirmed with V6. V6 applied two pairs of gloves (double gloved) and removed R3's dressing containing a small amount of drainage. V6 removed one pair of gloves and discarded them. V6 did not remove the 2nd layer of gloves, and did not perform hand hygiene. V6 cleansed the wound, and applied a bordered foam dressing. V6 confirmed V6 wore two sets of gloves. V6 stated V6 wore double gloves, because V6 administered R3's wound treatment independently, and it is just easier to remove the dirty gloves that way.</p> <p>On 9/13/22 at 12:01 PM and on 9/14/22 at 11:56 AM, R3 was eating lunch near the nurse's station. R3's meal did not include a frozen nutritional supplement. R3's meal ticket documents a frozen nutritional supplement as part of R3's noon meal.</p> <p>On 9/13/22 at 11:56 AM, V7, LPN, stated nutritional supplements are recorded on the Medication Administration Record (MAR). V7 reviewed R3's MAR and stated "I (V7) do not see where R3 is to have a (frozen nutritional supplement) at noon." V7 stated there is only one resident (not R3) who receives a frozen nutritional</p>	S9999		

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S9999	<p>Continued From page 8</p> <p>supplement on R3's unit. V8, CNA, stated V8 has not seen R3 receive a frozen supplement with the noon meals. V8 stated Dietary staff are supposed to serve the frozen nutritional supplements on the trays.</p> <p>On 9/14/22 at 9:00 AM, R3 was lying in bed on R3's right side. R3 was not wearing pressure relieving boots, and R3's heels were not elevated.</p> <p>On 9/14/22 at 9:34 AM, R3 was lying in bed on R3's left side. R3's heels were not elevated, and R3 was not wearing pressure relieving boots. V7, LPN, stated, "That is how R3 usually lays in bed, staff don't float (R3's) heels, and (R3) does not use pressure relieving boots." V7 confirmed R3 has an order to elevate R3's heels when in bed.</p> <p>On 9/14/22 at 1:05 PM, V18, RD, stated R3's frozen nutritional supplement was recommended for dual purpose of wound healing and nutrition.</p> <p>On 9/14/22 at 2:40 PM, V14, Vice President of Clinical, confirmed R3 had no documented wound measurements between 7/9-7/21/22 and 8/24-9/5/22.</p> <p>On 9/13/22 at 2:53 PM, V2, Director of Nursing (DON), stated the facility is looking to hire more nursing support staff, and currently the facility does not have a wound nurse. The former wound nurse (V10) quit before V2 was hired. V2 was hired about a month ago. V2 stated V2 tries to oversee wounds, and V2 also has to cover the floor when staff call off from work. At 3:20 PM, V2 stated V17, Wound Physician, rounds in the facility weekly with the floor nurses, and V17 reports V17's orders to the nurses. V2 was unsure how soon the facility receives V17's progress notes after V17's visits.</p>	S9999		

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S9999	<p>Continued From page 9</p> <p>On 9/14/22 at 10:58 AM, V17, Wound Physician, stated: "When I (V17) round at the facility, often times no one rounds with me (V17). They are short staffed with nurses and do not have a wound nurse, and their DON is changing all the time. I (V17) give my written orders to the nurses the day I (V17) visit. I (V17) expect my (V17's) recommendations to be implemented by the next day. There should be someone at the facility assessing the wounds in my (V17's) absence. I (V17) was on vacation in August. There isn't anyone in the facility consistently overseeing wounds. R2's wound is pressure related. It took the facility 2-3 weeks before they implemented (V17's) order for Betadine twice daily. (R2's) wound worsened, and was larger in size. (R2's) current left hip wound treatment is Betadine twice daily. (R3) should have (R3's) heels elevated or wear pressure relieving interventions when in bed."</p> <p>On 9/14/22 at 12:29 PM, V2, DON, stated, "Wounds are to be assessed when identified, upon admission, and weekly. Dressings should be labeled with a date. Gloves should be changed when moving from soiled to clean areas during wound treatments and hand hygiene performed when gloves are removed. Staff should not be "double gloved." (V10) used to complete the wound assessments, and now (V17) does them. Nurses are to obtain wound treatment orders when wounds are identified and sign out the TAR when treatments are administered. The floor nurses should be implementing (V17's) orders." V18, RD provides V18's recommendations to V2 via electronic mail after V18's visit, but was unsure the timeframe when V2 receives the recommendations. V2 has 24-72 hours to follow up and implement the recommendations.</p>	S9999		

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S9999	<p>Continued From page 10</p> <p>"Nutritional recommendations are implemented as a diet order to notify dietary in order for the meal ticket to be updated. If nutritional supplements are entered as an order and transcribed to the MAR, the nurses should be recording the administration."</p> <p>The facility's Wound Prevention Program, dated February 2022, documents: " Interventions include the use of pillows and support devices such as a low air loss mattress to protect bony prominences susceptible to pressure, and use pillows to offload heels and elevate off of the mattress. Assess for signs of malnutrition and weight loss, report pressure ulcers to the dietitian, and implement nutritional and protein supplements as indicated. "Notify the physician for any changes in the skin condition and obtain wound care treatment orders. Apply wound treatment as ordered by the physician."</p> <p>(B)</p> <p>2 of 2</p> <p>300.610 a) 300.1210 b) 300.1210 c)</p> <p>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</p>	S9999		

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S9999	<p>Continued From page 11</p> <p>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>c) Each direct care-giving staff shall review and be knowledgeable about his or her residents' respective resident care plan.</p> <p>These regulations are not met as evidenced by:</p> <p>Based on observation, interview, and record review, the facility failed to provide assistance with eating for one (R1) of three residents reviewed for nutrition in the sample list of six. This failure resulted in R1 sustaining a significant weight loss.</p> <p>Findings include:</p> <p>1.) R1's undated diagnosis list documents R1 has diagnoses of Parkinson's Disease and Dysphagia (difficulty swallowing).</p> <p>R1's Minimum Data Set (MDS), dated 5/18/22,</p>	S9999		

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: IL6009567	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED C 09/14/2022
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NAME OF PROVIDER OR SUPPLIER GARDENVIEW MANOR	STREET ADDRESS, CITY, STATE, ZIP CODE 14792 CATLIN TILTON ROAD DANVILLE, IL 61834
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S9999	<p>Continued From page 12</p> <p>documents R1 required assistance of one staff person for setup and supervision with eating, and was dependent upon one staff person for bathing.</p> <p>R1's MDS, dated 8/17/22, documents for eating assistance, the activity only occurred once or twice during the 7 day look back period. R1 has a significant weight loss of 5 % or more in one month or 10 % or more in 6 months.</p> <p>R1's Care Plan, revised 5/4/22, documents R1 has self care deficits and requires assistance with ADLs, and includes interventions to assist with eating and meal setup, encourage R1 to feed self, and provide assistance with ADLs as needed.</p> <p>R1's Care Plan, dated 5/27/22, documents R1 has dysphagia and includes interventions to inform staff of R1's special dietary and safety needs, check mouth for food and debris after meals, instruct R1 to eat in an upright position, eat slowly, chew bites thoroughly.</p> <p>R1's Speech Therapy (ST) Progress & Discharge Summary, dated 6/8/22, documents R1 received ST from 5/11/22-6/8/22. Upon discharge from ST, R1 requires cues to increase oral intake, assistance with oral intake for optimal intake, and aspiration precautions (swallowing precautions.)</p> <p>R1's meal intake log, dated 5/12/22-9/12/22, documents R1's meal intake varies between 0 and 100 %. This log does not consistently record R1's meal intakes for all three meals each day.</p> <p>R1's undated weight report documents R1 weighed 140.2 lbs (pounds) on admission on 4/21/22, 138 lbs on 6/6/22 and 6/13/22, 126.4 lbs on 7/8/22, 124 lbs on 8/5/22, and 126 lbs on</p>	S9999		

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S9999	<p>Continued From page 13</p> <p>8/25/22. R1's Nutrition Notes document on 7/22/22, V18 (Registered Dietician) evaluated R1 for significant weight loss of 8% in one month and 9% in three months.</p> <p>On 9/13/22 at 12:29 PM and 12:40 PM, R1 was in bed with the head of bed elevated approximately 45 degrees. R1 was lying on R1's right side. R1's meal tray was on an overbed table, and R1 was attempting to feed R1's self. R1 had tremors to R1's hands and arms. There were no staff present in R1's room. At 12:53 PM, R1 had drank all of R1's milk, and ate a few bites of mashed potatoes and turkey. R1 stated R1 was finished eating. There was food on R1's shirt, and there were no staff present in R1's room.</p> <p>On 9/13/22 at 1:00 PM, V12, Certified Nursing Assistant, stated R1 is able to feed R1's self, and staff provide tray setup and supervision. V12 confirmed R1 has hand/arm tremors. V12 stated, "(R1) has days where (R1) is more tired, and then we provide feeding assistance for (R1). Today has been a good day, and (R1) was feeding himself. (R1) generally has a poor appetite."</p> <p>On 9/13/22 at 1:02 PM, V9 (R1's Power of Attorney) V9 is concerned staff are not feeding R1, and R1 has lost weight.</p> <p>On 9/14/22 at 11:33 AM, V15, Rehab Director/Certified Occupational Therapy Assistant, reviewed R1's ST notes from June 2022, and confirmed R1's diagnosis of dysphagia and noted aspiration precautions. V15 stated R1 is someone who should not be eating alone, and should be supervised when eating.</p> <p>On 9/14/22 at 12:29 PM, V2 stated, "Staff should assist (R1) with meals. Usually (R1) comes out to</p>	S9999		

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S9999	<p>Continued From page 14</p> <p>the dining room and staff feed (R1). (R1) needs some assistance from staff with eating."</p> <p>On 9/14/22 at 3:47 PM, V1, Administrator, stated staff should be recording meal intakes in the resident's electronic medical record.</p> <p>The facility's Assistance with Meals policy, dated July 2016, documents: "Residents shall receive assistance with meals in a manner that meets the individual needs of each resident." "Residents who cannot feed themselves will be fed with attention to safety, comfort and dignity." "Encourage the resident to eat, notify the nurse or physician for any changes of resident condition noted such as poor appetite."</p> <p>(B)</p>	S9999		