

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: IL6007991	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED C 09/25/2022
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NAME OF PROVIDER OR SUPPLIER BRIA OF CHICAGO HEIGHTS	STREET ADDRESS, CITY, STATE, ZIP CODE 120 WEST 26TH STREET SOUTH CHICAGO HEIGHT, IL 60411
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S 000	Initial Comments Complaint Investigation #2297203/IL151027	S 000		
S9999	Final Observations Statement of Licensure Violations: 300.610a) 300.1210b) 300.1210c) 300.1210d)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 plan. Adequate and properly supervised nursing	S9999	Attachment A Statement of Licensure Violations	

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE _____ TITLE _____ (X6) DATE _____

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S9999	<p>Continued From page 1</p> <p>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>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 requirements are not met as evidenced by:</p> <p>Based on observation, interview, and record review, the facility failed to have effective interventions in place to prevent residents from developing new and worsening pressure ulcers for residents assessed to be at risk for developing pressure ulcers and who are totally dependent on staff for care. This failure applied to four (R2, R3, R5, and R6) of five residents reviewed for pressure ulcers and resulted in R2 and R3 developing facility acquired wounds; resulted in R5 being at an increased risk of Stage 4 pressure ulcer worsening or becoming infected and not progressing toward healing; and resulted in an</p>	S9999		

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S9999	<p>Continued From page 2</p> <p>increased risk for R6 to develop pressure ulcers as a result of untimely implementation of care plan interventions.</p> <p>Findings include:</p> <p>R5 is a 50-year-old female who was admitted to the facility on 7/08/2022, with past medical history including, but not limited to intervertebral disc stenosis of neural canal of lumbar region, muscle wasting and atrophy, reduced mobility, morbid (severe) obesity due to excess calories, etc.</p> <p>9/23/2022 at 12:45PM, R5 was observed in her room, alert and awake and stated that she has been in the facility since July 2022; she came from the hospital. R5 had her lunch tray, but stated that she has not been changed, she will usually call the staff, but she does not know who her assigned CNA (Certified Nurse Assistant) is, so she's not sure who to call. R5 stated that she was last changed around 5:00AM this morning, when asked if she need to be changed now, she said yes.</p> <p>9/23/2022 at 12:50PM, V5 (CNA) stated that she is the assigned CNA for R5 and that she has not changed R5 yet. V5 stated that R5 will usually call when she needs to be changed.</p> <p>At 1:22PM, surveyor observed V5, and another staff member provide incontinence care for R5. Surveyor noted that R5 was wearing three incontinence briefs and they were visibly soaked with urine and large amount of bowel movement that went towards resident's back. Surveyor questioned why R5 had on three incontinence briefs and V5 said, "We always do what she tells us to do." V5 and the other staff member who was assisting her cleaned R5 with two wet towels.</p>	S9999		

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S9999	<p>Continued From page 3</p> <p>Surveyor did not see that soap or water were used while providing incontinence care. V5 was about to put a clean incontinence brief on R5 when surveyor asked her if the resident had been washed up and she said, "she gets a bed bath, it is scheduled, I am not sure if she gets one today." R5 stated that she gets her bed bath MWF, meaning that she was supposed to get one today. V5 said, "Okay then we will give her a bed bath now."</p> <p>Care plan dated 7/15/202 states in part, R5 is incontinent of bowel and bladder secondary to morbid (severe obesity) low back pain, muscle wasting, etc. Interventions include check and change as needed, provide peri care after each incontinent episode.</p> <p>R5 requires assist with daily care needs, interventions include assist resident with ADLs, Encourage/Assist with turning and repositioning every two hours and as needed. Keep clean and dry after each incontinent episode.</p> <p>MDS assessment dated 7/15/2022 coded R5 as total dependence with two persons physical assist for transfers and toilet use and extensive assist with two persons physical assist for bed mobility, dressing and personal hygiene.</p> <p>9/24/2022 at 1:06PM, V14 (LPN/Wound care) said that she provided wound care to R5 around 6:00AM when she rounded with the wound care doctor, resident had one incontinence brief and a pad under her, she is not sure if night shift staff changed her again after the dressing change. V14 was asked if she has seen R5 or any other resident wearing more than one incontinence brief at a time, and she said that she has addressed that issue in the past; she educated</p>	S9999		

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S9999	<p>Continued From page 4</p> <p>the resident and the CNAs. V14 added that R5 should not be wearing more than one incontinence brief at a time because she has a stage 4 pressure ulcer to her right buttock.</p> <p>On 9/23/2022 at 12:50PM, surveyor was conducting random observation in the unit when she heard a resident screaming for help. R6 was observed lying in bed, awake and alert and stated that she needs to be changed. Surveyor told her that she will inform the staff.</p> <p>At 12:55PM, observed incontinence care with V5 (CNA) for R6 and noted resident's incontinence brief visibly soiled and brown in color. V5 stated that she changed resident around 6:00AM this morning because she worked night shift. V5 added that she has not changed R6 today since 6:00AM, she normally changes her residents after lunch. Surveyor asked V5 if it is the standard practice for night shift to change residents early in the morning and morning shift will change them after lunch and she said yes. She added that she is also assigned to R3, and she has not changed him either.</p> <p>Review of medical record for R6 shows a care plan in place for ADL care deficit, interventions include to Assist resident with ADLs, monitor for changes with daily care abilities and provide assist if needed, monitor skin integrity during routine care and report abnormal findings, etc.</p> <p>Facility Minimum Data Set assessment (MDS) for R6, dated 8/23/2022, section G (functional status) coded R6 as total dependence with two staff assist for transfer and toilet use and extensive assist with two- person physical assist for bed mobility, and personal hygiene.</p>	S9999			

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S9999	<p>Continued From page 5</p> <p>R3 is a 72-year-old male who has resided at the facility since 2014, with past medical history of Vitamin D deficiency, other lack of co-ordination, muscle weakness, pressure ulcer of sacral region stage 3, obesity, non-pressure chronic ulcer of left heel and midfoot, etc.</p> <p>9/23/2022 12:00PM during random observation in the unit, R3 was observed in his room sleeping and could not awake to answer any questions. Resident was lying on his back; room appears cluttered with personal items.</p> <p>At 12:50PM, V5 (CNA) said that she is assigned to the resident, she has not changed him yet, she normally changes all her residents after lunch, night shift will change them in the morning and the day shift changes them after lunch.</p> <p>At 1:50PM, observed two staff members in resident's room with his door closed, stated they just finished changing resident. Surveyor asked if any of them is the assigned CNA for resident and they said no.</p> <p>Per record review, R3 was admitted to the facility with intact skin per initial skin assessment dated 12/10/2016 documented an intact skin. R3 had a Braden score of 17 indicating at risk for alteration in skin integrity. Further review of medical record shows that R3 is currently being treated for a stage 3 facility acquired pressure ulcer to his Coccyx.</p> <p>Wound care assessment dated 6/24/2022 documented a stage 3 pressure ulcer to the coccyx, in-house acquired, measuring 2.7 x 4.1 x 0.9cm.</p> <p>Most current wound assessment dated 9/23/2022 documented a stage 3 in-house acquired</p>	S9999		

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S9999	<p>Continued From page 6</p> <p>pressure ulcer to the coccyx measuring 4.0 x 4.8 x 1.1cm.</p> <p>Physician order sheet dated 5/27/2022 shows an order for weekly skin assessment every day shift on Thursday.</p> <p>Care plan dated 1/31/2019 for at risk for skin complications states to observe and assess regularly, skin assessments weekly.</p> <p>ADL care plan dated 4/28/2020 includes, R3 requires assistance from staff with ADLs. Resident has a dx/hx of Bipolar, Schizophrenia and HTN. Resident is an extensive assistance of two staff members for bed mobility, toileting and transfer, Resident is supervision with set up for meals. Resident has functional incontinence of bowel and bladder, etc. Interventions include Monitor for changes with daily care abilities and provide assist if needed, monitor skin integrity during routine care and report abnormal findings, stage 3 pressure injury to coccyx; Assist and encourage resident to turn and reposition every one to two hours and PRN (as needed).</p> <p>R3 is coded as needing extensive assist with two persons physical assist for transfer, bed mobility, toileting, dressing and personal hygiene.</p> <p>R2 is a 55-year-old female who has resided at the facility since 2018, with a past medical history including but not limited to Chronic obstructive pulmonary disease, schizoaffective disorder, heart failure, pulmonary hypertension, constipation, morbid severe morbid obesity, pressure ulcer of buttock unstageable, pain etc.</p> <p>R2 is no longer at the facility.</p>	S9999		

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S9999	<p>Continued From page 7</p> <p>Review of R2's medical records shows an initial skin assessment dated 9/7/2018 with intact skin.</p> <p>Skin assessment dated 4/24/2019 showed an in-house acquired pressure ulcer with no site or measurement.</p> <p>Medical record documents that on 7/31/2020, R2 has an abrasion to the left buttock, in-house acquired measuring 2.2cm x 0.8cm.</p> <p>Wound care assessment for R2 dated 8/14/2020 documented an in-house acquired abrasion to the right buttock measuring 3.5cm x 2.0cm.</p> <p>R2 has a care plan dated 9/07/2018 for at risk for new or worsening skin breakdown, interventions include educate resident, family and care givers the causes of skin breakdown including frequent repositioning, remind and assist resident to change position frequently, at least every two hours.</p> <p>R2's ADL care plan include assisting resident with ADL, keep clean and dry after each incontinent episode. MDS assessment dated 10/01/2020 coded R2 as extensive assistance with two persons physical assist for bed mobility, transfer, dressing, toilet use and personal hygiene.</p> <p>9/23/2022 at 3:48P V2 (DON) stated that her expectation for staff during incontinence care is for them to introduce themselves to the resident, ask them if they are wet, if yes, inform them that they are going to provide incontinence care. She added that they are supposed to provide privacy, perform hand hygiene, and make sure resident is cleaned properly. If a resident has a bowel movement, they should be cleaned with soap and water, residents should not be wearing more than</p>	S9999		

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S9999	<p>Continued From page 8</p> <p>one incontinence brief under any circumstance. V2 added that residents should be changed every two hours or as needed. V2 also said that the CNAs should know their assignments once to arrive on their shift; they can arrange with the residents the time they would like to have their showers or bed baths.</p> <p>A document provided by V2 (DON) titled, Incontinence Care Guideline (revision date of 3/2022), states in part, incontinence care is provided to keep residents as dry, comfortable and odor free as possible. It also helps in preventing skin breakdown. Under general, the policy states: clean peri area with appropriate cleanser and dry. Appropriate cleanser can mean soap and water, peri wash, etc. Cleansing should always be from front to back.</p> <p>(B)</p>	S9999		