

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: IL6003263	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 08/31/2022
NAME OF PROVIDER OR SUPPLIER TOWER HILL HEALTHCARE CENTER		STREET ADDRESS, CITY, STATE, ZIP CODE 759 KANE STREET SOUTH ELGIN, IL 60177		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
S 000	Initial Comments	S 000		
	Annual Health Survey			
S9999	Final Observations	S9999		
	Statement of Licensure Violations: 1 of 2 300.610 a) 300.1210 b) 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 plan. Adequate and properly supervised nursing care and personal care shall be provided to each		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>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>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 requirements are not met as evidenced by:</p> <p>Based on observation, interview, and record review, the facility failed to ensure residents with a diagnosis of congestive heart failure were weighed daily, failed to re-assess a facility acquired wound, and failed to perform ordered dressing changes for a wound for four of 26 residents (R281, R116, R119, R67) reviewed for quality of care in the sample of 26. This failure resulted in R281 requiring a re-hospitalization for congestive heart failure.</p>	S9999		

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S9999	<p>Continued From page 2</p> <p>The findings include:</p> <p>1. R281's Admission Record shows she was initially admitted to the facility on 3/25/22, with diagnoses including cerebral infarction, weakness, need for assistance with personal care, dysphagia, myocardial infarction, chronic systolic congestive heart failure, and heart failure. R281 was re-admitted to the facility on 8/27/22.</p> <p>R281's Care Plan, initiated 4/5/22, shows, "The resident has congestive heart failure. Monitor/document/report to MD as needed any signs/symptoms of exacerbation: dependent edema of legs and feet, peri-orbital edema, short of breath upon exertion, cool skin, dry cough, distended neck veins, weakness, weight gain unrelated to intake, crackles and wheezes upon auscultation of the lungs, orthopnea, weakness and/or fatigue, increased heart rated, lethargy and disorientation." R281's Care Plan, initiated 5/4/22, shows R281 is on daily weights for congestive heart failure. Obtain and monitor weight report for any significant change.</p> <p>R281's Progress Notes, dated 8/1/22 at 2:11 PM, shows, "POA (Power of Attorney) was concerned regarding resident swelling in bilateral arms and legs. MD (Medical Doctor) was informed of swelling prior labs were done and she is on a daily weight. MD order to monitor resident. Resident is stable no shortness of breath noted or discomfort. POA was still concerned and wanted resident to be evaluated at the hospital. MD gave order to send to ER (Emergency Room) for evaluation and treatment. Transportation was called around 12:30 PM and will arrive in 30 minutes. POA was present and informed. Transportation arrived around 1:15 PM and was transported to [local hospital], writer called ER to</p>	S9999		

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S9999	Continued From page 3 give report." R281's Progress Note, dated 8/1/22 at 4:46 PM, shows, "Resident admitted to [local hospital] with diagnosis acute heart failure. All department heads notified." R281's Progress Note, dated 8/4/22 at 6:33 PM, shows R281 was re-admitted to the facility with diagnosis of acute congestive heart failure. R281's Progress Note, dated 8/5/22 at 2:20 PM, shows R281 still had swelling on her legs and arms and R281 was on a diuretic. R281's Medication Administration Record, dated 8/1/22-8/31/22, shows and order for daily weight; please notify physician if patient gains more than three pounds in a week to start on 8/6/22. This same record also showed an order for Check weight weekly times four then monthly every Friday to start 8/5/22. R281's Weights and Vitals summary, dated 7/1/22-8/31/22, shows R281 did not have a weight done on 8/5/22, 8/11/22, and 8/13/22. R281's weight on 8/7/22 was 180 pounds. R281's weight on 8/14/22 was 188.8. (8.8 pound weight gain in seven days) R281's Practitioner Note by V25, dated 8/11/22 at 4:58 PM, shows, "Patient with edema noted to bilateral hands right greater than left. She states hands have been 'puffy'. R281's Nursing Note, dated 8/15/22 at 10:11 AM, shows, "Writer received call from POA requesting resident to be sent out to [said hospital] related to continued swelling and ongoing nose bleed...resident transported to [said hospital]. MD	S9999			

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S9999	<p>Continued From page 4</p> <p>made aware of situation and agree with family."</p> <p>R281's Nursing Note, dated 8/15/22 7:54 PM, shows the ER nurse stated R281 will be admitted, but they are waiting for results of some labs before she gets a diagnosis.</p> <p>R281's Nursing Note, dated 8/27/22 at 4:00 PM, shows R281 was re-admitted to the facility with diagnoses of fluid overload.</p> <p>On 8/30/22 at 9:29 AM V23, MD (Medical Doctor), said R281 has daily weights ordered for monitoring of her congestive heart failure. V23 said daily weights is a standard order. V23 said if a weight gain is noticed, then he would increase the residents diuretic or put them on one if they are not on one already. V23 said the whole point of daily weights for congestive heart failure residents is to prevent re-hospitalizations.</p> <p>2. R116's Order Recap Report, dated 8/1/22-8/31/22, shows R116 was readmitted to the facility on 8/11/22, with diagnoses including repeated falls, dementia, acute kidney failure, atrial fibrillation, chronic kidney disease, and acute on chronic combined systolic congestive and diastolic congestive heart failure.</p> <p>R116's Discharge instructions provided by the hospital when R116 was readmitted to the facility, dated 6/21/22, shows, "Follow instruction for the Heart Failure Transfer sheet." R116's Heart Failure Transfer instructions, dated 6/21/22, shows, "Daily weight. Report weight gain of three pounds in a day or five pounds in a week."</p> <p>R116's Order Audit Report shows an order was entered on 6/21/22 for check weight weekly x 4, then monthly one time a day every Tuesday for</p>	S9999		

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S9999	<p>Continued From page 5</p> <p>one month.</p> <p>R116's Order Recap Report shows an order was entered on 7/7/22 for Weekly weight related to congestive heart failure, in the morning every Friday.</p> <p>R116's Discharge Education sheet provided by the hospital when R116 was readmitted to the facility, dated 8/11/22, shows, "If you have every been diagnosed with congestive heart failure, weight yourself every day and record. Notify your physician if you gain over two pounds per day or five pound in one week.</p> <p>R116's Order Recap Report, dated 8/1/22-8/31/22, shows an order was entered on 8/11/22 for check weight weekly x 4, then monthly one time a day every Thursday.</p> <p>R116's Weights and Vitals summary, dated 8/31/22, shows R116 was weighed on 6/7/22, 7/7/22, 7/8/22, 7/12/22, 7/22/22, 7/29/22, 8/5/22, 8/12/22, and 8/25/22.</p> <p>The facility's Weight policy reviewed on 6/21/22 shows, "To establish a policy for the consistent, timely monitoring and reporting of resident weights."</p> <p>The facility's Physician's Order policy, created on 8/1/21, shows, "The purpose of this policy is to provided guidance for licensed nurses and licensed therapist to accurately document physician and provider orders as determined by the licensee's scope of practice."</p> <p>3. R119's Physician Order Sheet (POS), dated 8/22, show R119 has diagnoses of left sided hemiplegia due to stroke.</p>	S9999		

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S9999	<p>Continued From page 6</p> <p>R119's Facility assessment, dated 8/5/22, show R119 has no cognitive impairment.</p> <p>On 8/29/22 at 9:30 AM, R119 was in bed alert. R119's left hand was contracted and was drawn to her chest. R119's left hand was tightly closed to a fist. R119 said her hand hurts, pointing to her contracted left hand. R119 said she has a sore in the palm of her left hand.</p> <p>On 8/30/22 at 9 AM, V5 (Wound Nurse) said R119 has a wound in her contracted left hand. The wound was a facility acquired wound. V5 said it was from R119's ring finger digging in her hand or the nails from the ring finger. R119 said the wound was discovered last 6/22, and it is still open up to now. V5 said she does R119's treatments, and the wound has not healed.</p> <p>R119's progress notes, dated 6/29/22, show " Noted with open area with minimal bleeding and yellowish drainage."</p> <p>R119's electronic treatment administration record (TAR), dated 8/22, shows, "Cleanse left palm with normal saline, pat dry, apply antibiotic ointment cover with foam." The TAR also show skin check weekly. There were no further assessment done on R119's wound since the last one that was done last 6/29/22, as confirmed by V5 (Wound Nurse).</p> <p>On 8/30/22 at 9:30 AM, V5 said R119 has no further wound assessments. V5 said the last time R119's wound assessment was when it was discovered on 6/22.</p> <p>On 8/31/22 at 8:55 AM, V2 (Director Of Nursing/DON) said any resident with wound</p>	S9999		

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S9999	<p>Continued From page 7</p> <p>should be assessed at least weekly to know if the wound had any improvement or got worst and if there is a need to change the treatment.</p> <p>R119's latest careplan "[R119] is at risk for breakdown in skin integrity r/t impaired mobility, occasional incontinence and comorbidities including: CVA w/ Lt sided residual, PVD, DM II, neuropathy, protein-calorie malnutrition, CKD stage 3, depression, urinary retention, anemia, HTN. [R119] has an open area on left hand due to contracture."</p> <p>The facility policy entitled Wound Evaluation and Documentation, dated 1/22, shows, "6. wounds will be evaluated, a photo taken and evaluated/assessed every 7 days."</p> <p>4. R67's Wound Evaluation and Management Summary Report, dated 8/24/22, shows she has a wound on her left leg measuring 5.8 cm (centimeters) x 4.3 cm x 0.1 cm.</p> <p>R67's Physician's Order Sheet, printed on 8/30/22, shows an order, dated 8/3/22, for, "Cleanse LLE (left lower extremity) with NS (Normal Saline), pat dry, apply xeroform, cover with ABD pad and wrap with [rolled gauze] as needed and every day shift."</p> <p>On 8/30/22 at 9:05 AM, R67's left lower leg had a dressing on it, dated 8/27/22.</p> <p>On 8/30/22 at 10:18 AM, V5 (Wound Nurse) said R67's dressing is supposed to be changed daily. V5 said she does not know why R67's dressing was not changed.</p> <p>The facility's Skin Management: Dressing Application Policy, revised on 12/19, shows,</p>	S9999		

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S9999	<p>Continued From page 8</p> <p>"Dressings are changed as ordered by the physician or NP (Nurse Practitioner)."</p> <p>(B)</p> <p>2 of 2</p> <p>300.1210 b) 300.1210 d)1) 300.1620 a)</p> <p>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 nursing care shall include, at a minimum, the following and shall be practiced on a 24-hour, seven-day-a-week basis: 1) Medications, including oral, rectal, hypodermic, intravenous and intramuscular, shall be properly administered.</p> <p>Section 300.1620 Compliance with Licensed Prescriber's Orders a) All medications shall be given only upon the written, facsimile, or electronic order of a licensed prescriber. The facsimile or electronic order of a licensed prescriber shall be authenticated by the licensed prescriber within 10</p>	S9999		

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S9999	<p>Continued From page 9</p> <p>calendar days, in accordance with Section 300.1810. All orders shall have the handwritten signature (or unique identifier) of the licensed prescriber. (Rubber stamp signatures are not acceptable.) These medications shall be administered as ordered-by the licensed prescriber and at the designated time.</p> <p>Based on observation, interview, and record review, the facility failed to transcribe an ordered medication, resulting in R91 missing her antidepressant medication for 14 doses for 1 of 26 residents reviewed for medications in the sample of 26. This failure resulted in R91 being sad, irritable, anxious, and wanting to cry and stay in bed all the time.</p> <p>The findings include:</p> <p>R91's Physician Order Sheet (POS), dated 8/22, shows R91 was admitted to the facility on 5/30/2020, with admitting diagnoses including severe major depression and end stage renal disease. The same POS shows R91 had been an antidepressant since admission. R91's order of : Venlafaxine ER 150 MG CAP, Give 1 capsule by mouth one time a day for Depression, with original order date of 05/30/2020.</p> <p>R91's progress notes, dated 8/12/22, show R91 was sent to the hospital. R91 was readmitted to the facility on 8/17/22.</p> <p>R91's hospital discharge orders, dated 8/17/22, show "Summary of Discharge Medications- order resume Venlafaxine XR 150 mg 24 hour capsule (Effexor XR) for depression"</p> <p>On 8/29/22 at 9:30 AM, R91 was sitting in her wheelchair in her room. R91 said she cannot</p>	S9999		

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S9999	<p>Continued From page 10</p> <p>understand herself; she has been feeling down and depressed lately, and just wanted to cry all the time.</p> <p>On 8/30/22 at 8:30 AM, V13 (License Practical Nurse-LPN) and this surveyor went through R91's medications, and reviewed R91's electronic medication administration record (EMAR). The record shows from 8/17/22 through 8/30/22, R91's Effexor XR 150 mg capsule one time a day was blank (not given), and was confirmed by V13 (LPN) V13 said R91 used to get the Venlafaxine, but it has not been being given since R91's readmit on 8/17/22.</p> <p>On 8/30/22 at 9:30 AM, V10 (Registered Nurse-MDS) said the facility made a huge error. V10 said R91's prescribed ordered antidepressant medications of Effexor ER was not carried out. V10 said R91 has not been getting her antidepressant since she came back from the hospital 8/17/22 (14 days ago) V10 said if this surveyor did not bring the error to their attention, R91 would still be not be getting her antidepressant medication up to now.</p> <p>On 8/31/22 at 8:50 AM, R91 was in the dining room and asked to speak to this surveyor. R91 said she was told yesterday afternoon they (staff) made a mistake on her medications. R91 said they have not been giving her antidepressant medications for 2 weeks now . R91 stated "no wonder I have been been feeling different. I did not understand myself. I was sad, irritable, anxious and wanted to cry and stay in bed all the time." R91 said she had to call her brother so the brother can convince her to get out of bed even now. R91 said she told the staff how she felt. "I was honest with them, I felt horrible"</p>	S9999		

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S9999	<p>Continued From page 11</p> <p>R91's Venlafaxine Information, dated 8/31/22, provided by the facility show, "Venlafaxine brand name Effexor is an antidepressant medication. It is used to treat major depressive disorder, anxiety and panic disorder. Due to its short half life, withdrawal symptoms are possible after abrupt discontinuation... Withdrawal symptoms include: anxiety, agitation, confusion, irritability...."</p> <p>A Medication Error Report, dated 8/30/22, shows, "Type of error-missed medication upon readmission. Original Order-Venlafaxine ER 150 mg capsule one time a day. Medication given-none. Precaution taken to prevent similar error-Medication reconciliation upon admission."</p> <p>R91's careplan, dated through 9/6/22, shows, [R91] taking antidepressant daily related to depression. [R91] admitted to this facility with this order (2020) with intervention that include, administer antidepressant medications as ordered by physician.</p> <p>On 8/31/22 at 11 AM, V2 (Director Of Nursing) said R91's admitting order of her antidepressant was not carried out. All orders should be double checked to prevent medication errors. Missing doses of antidepressant medications can affect the mood and behavior of the resident and can cause withdrawal symptoms.</p> <p>On 8/31/22 at 11:45 AM, V23 (R91's physician) said all prescribed medications should be carried out as ordered. V23 said the Director of Nursing and Admission Nurse should have a process that all prescribed medications are carried out to prevent medication errors.</p> <p>(B)</p>	S9999		

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(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE