

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: IL6002745	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 09/01/2022
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NAME OF PROVIDER OR SUPPLIER EL PASO HEALTH CARE CENTER	STREET ADDRESS, CITY, STATE, ZIP CODE 850 EAST SECOND STREET EL PASO, IL 61738
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S 000	Initial Comments	S 000		
S9999	<p>Annual Licensure and Certification</p> <p>Final Observations</p> <p>Statement of Licensure Violations:</p> <p>300.610a) 300.1210b) 300.1210c)3) 300.1210d)5) 300.1220b)2)3) 300.3240a)</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 which 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. These policies shall be in compliance with the Act and all rules promulgated thereunder. These written policies shall be followed in operating the facility and shall be reviewed at least annually by this committee, as evidenced by written, signed and dated minutes of such a 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</p>	S9999	<p>Attachment A Statement of Licensure Violations</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>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. Restorative measures shall include, at a minimum, the following procedures:</p> <p>c) Each direct care-giving staff shall review and be knowledgeable about his or her residents' respective resident care plan.</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>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>Section 300.1220 Supervision of Nursing Services</p>	S9999		

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S9999	<p>Continued From page 2</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>3) Developing an up-to-date resident care plan for each resident based on the resident's comprehensive assessment, individual needs and goals to be accomplished, physician's orders, and personal care and nursing needs. Personnel, representing other services such as nursing, activities, dietary, and such other modalities as are ordered by the physician, shall be involved in the preparation of the resident care plan. The plan shall be in writing and shall be reviewed and modified in keeping with the care needed as indicated by the resident's condition. The plan shall be reviewed at least every three months.</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 Regulations were not met as evidenced by:</p> <p>Based on observation, interview, and record review, the facility failed to perform daily and/or weekly skin checks on a resident at a high risk for</p>	S9999		
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S9999	<p>Continued From page 3</p> <p>developing pressure ulcers and assess a resident's skin condition. This failure affected one resident (R41) reviewed for pressure ulcers. This failure resulted in R41's pressure ulcer being discovered at a Stage 3.</p> <p>Findings include:</p> <p>The facility Pressure Sore Prevention Guidelines, dated 1/18, documents, "It is the facility's policy to provide adequate interventions for the prevention of pressure ulcers for residents who are identified as High or Moderate risk for skin breakdown as determined by Braden Scale. The nurse will complete a skin assessment on all residents upon admission then weekly for four weeks. After the weekly skin assessments are completed they must then be done with an annual, quarterly and significant change MDS or in the event a pressure ulcer develops. The following guidelines will be implemented for any resident assessed at a Moderate or High skin risk." The guidelines also document in a chart if a resident is at high risk for developing pressure ulcers daily skin checks will be performed, and if at moderate risk weekly skin checks will be completed. Also documenting, "Any resident scoring a high or moderate risk for skin breakdown will have scheduled skin checks on the treatment record. Skin checks will be completed and documented by the nurse."</p> <p>On 8/29/22 at 11:45 a.m., R41 had an oval shaped open area with depth on his sacral area.</p> <p>R41's Braden Scale for Predicting Pressure Ulcer Risk assessments, dated 4/18/22 and 7/18/22, document that R41 is at a high risk for developing pressure ulcers.</p> <p>R41's TAR (Treatment Administration Record),</p>	S9999		

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S9999	<p>Continued From page 4</p> <p>dated 6/1-6/30/22, documents for the nurses to perform weekly skin care on Sundays. The TAR documents that this was completed three times during this time period on 6/5, 6/12, and 6/19/22. There is no documentation of daily skin checks being completed.</p> <p>R41's TAR dated 7/1-7/31/22, documents for the nurses to perform weekly skin care on Sundays. The TAR documents that this was completed once during this time period on 7/10/22. There is no documentation of daily skin checks being completed.</p> <p>R41's Nurses' notes, dated 8/3/22, documents, "R41 has open area to buttocks. New order received apply collagen to buttocks then calcium alginate cover with border foam."</p> <p>R41's medical record has no documentation of an assessment being completed of R41's pressure ulcer when it was discovered on 8/3/22.</p> <p>R41's Wound Evaluation & Management Summary, dated 8/10/22, documents, "(R41) has a Stage 3 pressure wound sacrum for at least 1 day duration. Stage 3 Pressure Wound Sacrum Full Thickness: Wound size: 2 x 0.7 x 0.2 cm (centimeters). Dressing treatment plan: Primary dressing: Alginate calcium with silver. Secondary dressing: gauze island with border daily."</p> <p>R41's Pressure Ulcer care plan, dated 8/17/22, has no documentation of revision that R41 had developed a pressure ulcer.</p> <p>R41's Wound Evaluation & Management Summary, dated 8/24/22, documents, "(R41) has a full thickness Stage 3 pressure wound to his sacrum that measures: 0.7 x 0.5 x 0.1 cm</p>	S9999		

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S9999	<p>Continued From page 5 (centimeters)."</p> <p>On 8/31/22 at 1:00 p.m., V9 (Corporate Nurse) stated, "(R41) does not have an initial wound assessment. His wound was not fully assessed until he was seen by the wound doctor. When the wound was identified an AIMs for Wellness should have been completed that would have documented the full wound assessment and notified the physician. That was not done. If a resident is a high risk for developing pressure ulcers then daily skin checks should be documented on the TAR." V9 confirmed that daily skin checks were not done for R41 nor were all weekly skin checks.</p> <p>(B)</p>	S9999		