

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>IL6001689</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>C</b> <b>03/27/2022</b>
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NAME OF PROVIDER OR SUPPLIER  <b>SYMPHONY OF BRONZEVILLE</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>3400 SOUTH INDIANA CHICAGO, IL 60616</b>
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S 000	Initial Comments	S 000		
S9999	<p>Complaint Investigation: 2282220/IL144871</p> <p>Final Observations</p> <p>Statement of Licensure Violations: 300.610 a) 300.1210 d)3)5)</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 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 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: 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>	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>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>This REQUIREMENT is not met as evidenced by:</p> <p>Based on observation, interview and record review, the facility failed to identify and assess a new pressure injury, failed to ensure that multiple sheets are not used when using a low air loss mattress, failed to complete daily skin checks, and failed to turn and reposition every 2 hours for 1 (R1) resident out of 3 residents reviewed for pressure ulcer prevention and intervention. These failures resulted in R1 acquiring multiple facility acquired pressure injuries on the sacrum and left inner thigh and 2 new pressure injuries, one on the right upper back and one on the right lower back discovered during this survey.</p> <p>R1 was admitted to the facility on 12/29/2021 and expired in the facility under hospice care on 3/26/2022. R1 was admitted to Hospice Care on March 25, 2022. Her medical diagnosis includes Dementia, Acute Embolism and Thrombosis of Unspecified Deep Veins of Lower Extremity, Anemia, Cataract, Dysphagia, Protein Calorie Malnutrition and COVID-19.</p> <p>On 3/26/2022 at 10:57 AM, R1 was observed lying in bed, on right side lying position with pillows in between the knees, with legs elevated</p>	S9999		

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S9999	<p>Continued From page 2</p> <p>using blue boots, on low bed, has special mattress, with oxygen on, non-verbal. Special mattress observed with top sheet, incontinent pad, and incontinence brief. V4 (3rd floor nurse supervisor) and V5 (Registered Nurse/RN in charge of R1) and V6 (Certified Nursing Assistant/CNA) was repositioning R1. Dressing on sacrum noted to be intact, no odor, no drainage noted. The left thigh wound is scabbed, no drainage noted. Two pressure injuries noted on back of R1, one on the right upper back and another one on the right lower back. Right upper back noted with no dressing, some serosanguineous drainage noted.</p> <p>On 3/26/2022 at 11:00 AM V6 (CNA) cleaned and repositioned R1. V6 stated "I reposition R1 every 2 hours."</p> <p>On 3/26/2022 at 11:58 AM V2 (Nurse Practitioner) stated "I know R1 had skin openings. If there was a new skin opening, I expect that I be notified, and treatment orders initiated right away. Knowing that R1 is high risk for pressure injuries, even on Hospice, it is expected that treatment orders are initiated right away." Asked if she thinks that a Deep Tissue Injury can develop overnight. V2 stated, "No I don't think that Deep Tissue Injury developed overnight, it should have been picked by the facility."</p> <p>On 3/26/2022 at 12:00 PM during wound care observation with V7 (Wound Care Registered Nurse), R1 is now on the left side lying position. V7 stated "R1 has pressure injuries on R1's sacrum and one on the front of left thigh. R1 doesn't have anything on R1's back. R1 only has orders for R1's sacrum and the one on R1's left thigh." V7 removed old dressing to sacrum</p>	S9999			

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S9999	<p>Continued From page 3</p> <p>wound. No drainage noted, wound bed is pink and red, peri wound area is darker in color than R1's natural skin. V7 cleaned the wound and changed to a new dressing. Surveyor pointed out to V7 two areas on right back area. Right upper back has an open area. V7 stated that it measured 1.4 x 1.1 cm noted, wound bed is 20% pink and 80% purplish in color. Another area on right lower back was noted to be purplish in color. V7 stated it measured 1.7 x 5.2 cm and stated, "I consider that a Deep Tissue Injury. This is my first time seeing R1, so I don't know if it was there yesterday already. But there are no treatment orders for those, so I assume those are new. I will call the doctor today and get orders."</p> <p>On 3/26/2022 at 1:05 PM, V8 (Director of Nursing/DON) stated "We do skin checks based on their Braden. If Braden is 9 and above, skin checks are done twice a week. The skin checks are documented by the nurse in the Medication Administration record. When a staff member discovers an open area or wound, they have to report it to the nurse. When on a special mattress, the resident can have a flat sheet and an incontinence pad. R1 should not have had have multiple linens on top of the special mattress."</p> <p>On 3/26/2022 at 4:14 PM V6 (CNA) stated "Those wounds on R1's back has been reported. I reported it to the nurse that it was red about a week ago. Yesterday it was already there, and the wound care nurse put a bandage on it."</p> <p>On 3/27/2022 at 12:34 PM, V9 (Wound Care Nurse) who worked on 3/25/22 stated "Yes, I worked on Friday, March 25, 2022, as the Wound Care Nurse. I really don't remember R1 because I only helped out there, I am from another sister</p>	S9999		
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S9999	<p>Continued From page 4</p> <p>facility. I was there around after 4:00 PM. I didn't put a dressing on her back. I can't really recall where R1's wounds are because I am not familiar with the residents there because I don't work there regularly. I don't recall seeing any wound on R1's back. I don't recall rolling anybody over and seeing a wound on their back. If I saw a dressing on it, I would have checked the wound."</p> <p>R1's Turning and Repositioning Log for February 25, 2022, to March 25, 2022, documents R1 is not being turned and repositioned every hour as ordered. R1's Daily Skin Check Log documents that daily skin check was not completed on 3/2/22, 3/5/22, 3/6/22, 3/12/22, 3/21/22 and 3/25/22.</p> <p>R1's Braden Assessment dated 3/11/22 documents a score of 11 which means that resident is high risk for developing pressure ulcers. Physician Orders Sheets (POS) documents that a Braden score of 0-12 requires a daily skin check. POS also documents an order to turn and reposition every 2 hours. No orders for the pressure injuries on the back were found on the POS. Treatment orders for the right lower and right upper back were ordered on 3/26/2022 after surveyor discovered the pressure injuries.</p> <p>Facility Wound Summary Report documents that R1 has a facility acquired Deep Tissue Pressure Injury on the Left Front Thigh that was identified on 3/17/2022 and a facility acquired stage 3 pressure injury on the sacrum that was identified on 3/9/12. There was no documentation regarding the pressure injuries on the right upper and right lower back identified by the surveyor during the survey.</p> <p>Progress notes document that V2 (Nurse</p>	S9999		

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S9999	<p>Continued From page 5</p> <p>Practitioner/NP) assessed R1 in person on 2/22/22. Progress notes document that V2 (Nurse Practitioner/NP) called family of R1 to update family on R1's condition and left a message. R1 was also assessed in person by V8 (NP) on 3/4/22, 2/18/22, 2/15/22, 2/2/22. R1 was also seen by an V9 (an Infectious Disease NP) on 2/1/22 to assess R1 after completing antibiotic dose.</p> <p>Facility presented document titled "Skin Care Prevention" dated 11/03 which documents in part under Guidelines:</p> <p>3. All residents will be observed daily for changes in their skin condition.</p> <p>4. Residents will be assessed during care for any changes in skin condition including redness or any alteration in skin integrity, and this will be reported to the nurse.</p> <p>Facility presented document titled "Skin Management: Specialty Mattress" dated 7/10 which documents in part under section Procedure:</p> <p>1. As per manufacturer guideline, no more than 1 piece of linen will be placed between the mattress and the resident.</p> <p>"B"</p>	S9999		