

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>IL6016687</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED  <b>03/10/2022</b>
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NAME OF PROVIDER OR SUPPLIER  <b>HICKORY POINT CHRISTIAN VILLAGE</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>565 WEST MARION AVENUE FORSYTH, IL 62535</b>
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S 000	Initial Comments	S 000		
	Annual Licensure and Certification Survey			
S9999	Final Observations	S9999		
	Annual Licensure Recertification			
	Statement of Licensure Violations:  300.610a) 300.1210b)2) 300.1820c)2)  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 resident to meet the total nursing and personal			
			<b>Attachment A Statement of Licensure Violations</b>	

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>care needs of the resident. Restorative measures shall include, at a minimum, the following procedures:</p> <p>2) All nursing personnel shall assist and encourage residents so that a resident who enters the facility without a limited range of motion does not experience reduction in range of motion unless the resident's clinical condition demonstrates that a reduction in range of motion is unavoidable. All nursing personnel shall assist and encourage residents so that a resident with a limited range of motion receives appropriate treatment and services to increase range of motion and/or to prevent further decrease in range of motion.</p> <p>Section 300.1820 Content of Medical Records c)In addition to the information that is specified above, each resident's medical record shall contain the following:</p> <p>2) A physician's order sheet that includes orders for all medications, treatments, therapy and rehabilitation services, diet, activities and special procedures or orders required for the safety and well-being of the resident.</p> <p>These regulations were not met as evidenced by:</p> <p>Based on observation, interview, and record review the facility failed to provide range of motion restorative services for one (R28) of one resident reviewed for limited range of motion in the sample list of 36. This failure resulted in R28 developing bilateral hip and knee contractures.</p> <p>Findings include:</p> <p>The facility's Restorative Nursing Programs Policy</p>	S9999		

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S9999	Continued From page 2  dated 8/20/21 documents: "The community will provide maintenance and restorative services designed to maintain or improve a resident's abilities to the highest practicable level." "All residents will receive restorative services as needed, by certified nursing assistants, restorative aides, restorative nurse or other qualified associates." "Residents may receive restorative nursing services: 4.7.1 upon admission when not a candidate for specialized rehabilitation services. 4.7.2 when assessed with the potential to benefit from a combination of skilled therapy and restorative nursing services 4.7.3 when restorative needs arise during the course of a longer-term stay related to a decline or potential decline in function. 4.7.4 upon discharge from therapy." "A resident's restorative nursing plan will be addressed on the care plan to include: 4.10.1 The problem, need, or strength the restorative tasks are to address. 4.10.2 The type of activities to be performed. 4.10.2 Frequency of activities. 4.10.4 Duration of activities. 4.10.5 Measurable goal and target date. The Restorative Nurse or skilled therapist will communicate to the restorative aide(s) and/or the appropriate C.N.A.'s (Certified Nursing Assistants), the resident's restorative nursing plan, providing any necessary training to carry out the plan. Restorative aides and/or C.N.A.'s will implement the plan and provide required documentation."  R28's undated Census documents R28 admitted to the facility on 3/20/21. R28's Diagnosis List documents R28 has a diagnosis of Systemic Lupus Erythematosis.  R28's Minimum Data Set (MDS) dated 6/26/21 documents R28 has moderate cognitive impairment, requires extensive assistance of two	S9999		

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S9999	<p>Continued From page 3</p> <p>staff for bed mobility and transfers, and has no limitations in range of motion to bilateral lower extremities (BLE). R28's MDS dated 9/8/21 documents R28 has severe cognitive impairment, and has impaired range of motion to BLE.</p> <p>R28's PT (Physical Therapy) Therapist Progress &amp; Discharge Summary dated 6/23/21 documents R28 demonstrates muscle strength of 4/5 of BLE (good with full range of motion against gravity and moderate resistance.) R28's Restorative Nursing Transfer Form dated 6/23/21 documents therapy recommended for R28 to have range of motion and active range of motion. There is no documentation that a restorative program for range of motion to BLE was implemented after 6/23/21.</p> <p>R28's PT Plan of Care dated 10/14/21 documents: R28 presented with increased hip and knee flexion and abduction as a result of increased BLE muscle tone for 3 to 4 weeks. R28 has diagnoses of muscle contracture to right and left lower legs. Therapy is required to improve BLE range of motion to decrease chances of contracture, loss of skin integrity, and improve R28's comfort while sitting in a wheelchair. R28 has spastic muscle tone to Right and Left lower extremities, and is able to complete 25 % of normal range of motion to BLE.</p> <p>R28's PT Therapist Progress &amp; Discharge Summary dated 11/3/21 documents: R28 demonstrated minimal improvement in left hip and knee flexion contractures due to increased tone and significant pain with movement despite receiving pain medication prior to therapy sessions. Discharge instructions included transition to a restorative nursing program. R28's Restorative Nursing Transfer Form dated 11/3/21</p>	S9999		

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S9999	<p>Continued From page 4</p> <p>documents to perform BLE range of motion exercises to avoid progression of bilateral lower extremity deformity, within R28's level of tolerance. This note documents precautions of decreased skin integrity and increased tone to BLE. There is no documentation in R28's medical record that a restorative program for range of motion to BLE was implemented after 11/3/21.</p> <p>R28's Hospital Discharge Summary dated 9/2/21 documents R28 admitted to the hospital on 8/28/21 with lower leg spasms and discharged from the hospital on 9/2/21. R28's Emergency Room Provider Note dated 8/28/21 at 11:10 AM documents R28 is "positive for leg contortion secondary to involuntary muscle use." This note documents R28 stated R28 is unable to straighten R28's legs, and V12 (R28's Spouse) noted R28 was unable to ambulate due to R28's legs being acutely contorted, similar to a muscle spasm. R28's Physical Therapy Evaluation note dated 9/1/21 documents R28 has severe internal rotation of the right hip, moderate internal rotation of left hip, and "very weak" lower extremities. This note documents transfers were not attempted due to R28's lower extremity posturing.</p> <p>On 3/07/22 at 3:13 PM R28 was sitting in a wheelchair and R28's hips and knees were bent and contracted. On 3/08/22 at 10:38 AM R28 was Lying on R28's right side in bed. R28's legs were bent and contracted.</p> <p>On 3/08/22 at 1:15 PM R28 was lying in bed. V13 and V14 CNAs provided catheter care for R28. V13 stated R28 is very contracted and instructed R28 to open R28's legs. R28's legs were bent and contracted, and R28's thighs and knees were pressed together. R28 was not able to open/move R28's legs.</p>	S9999		

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S9999	Continued From page 5  On 3/06/22 at 11:36 AM V12 (R28's Spouse) stated R28's left leg stays in a bent position. V12 stated V12 does exercises for R28's legs since the facility does not.  On 3/09/22 at 12:45 PM V9 Physical Therapist stated: R28's ankles were contracted upon admission, and R28 has Lupus which contributes to R28's contractures. Therapy orders were received in October for treatment of R28's contractures. We worked with R28 on tone and relaxing R28's legs with exercises, but R28's hips and knees would go back into flexion. Prior to that R28 received PT and Occupational Therapy in June 2021, and R28 had increased muscle tone and spasticity to the lower legs. A restorative nursing form is completed upon discharge from therapy services and given to nursing for implementation.  On 3/09/22 at 1:15 PM V9 stated R28 received therapy services from 4/8/21 until 6/23/21. R28 had no impairment to range of motion to bilateral knees and hips at that time. R28 would have benefited from a restorative program, and therapy recommended a restorative program for active range of motion to bilateral lower extremities at that time. On 10/14/21 therapy resumed due to R28 having hip and knee flexion. R28 was discharged from therapy in November with a recommendation for passive range of motion to bilateral lower legs. At that point R28 had impaired range of motion to R28's legs, and had pain with movement.  On 3/10/22 at 2:40 PM V1 (adminstrator) stated V1 was unable to provide documentation that R28 received range of motion for BLE as recommended by therapy.	S9999			

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