

Illinois Department of Public Health

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| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:<br><br><b>IL6005193</b> | (X2) MULTIPLE CONSTRUCTION<br>A. BUILDING: _____<br><br>B. WING _____ | (X3) DATE SURVEY COMPLETED<br><br><b>C</b><br><b>06/15/2022</b> |
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| NAME OF PROVIDER OR SUPPLIER<br><br><b>ALDEN LAKELAND REHAB &amp; HCC</b> | STREET ADDRESS, CITY, STATE, ZIP CODE<br><b>820 WEST LAWRENCE<br/>CHICAGO, IL 60640</b> |
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| S 000              | Initial Comments<br><br>Complaint Investigation: 2284377//IL147641   | S 000         |   |                    |
| S9999              | Final Observations<br><br>Statement of Licensure Violations:<br><br>300.610a)<br>300.1210b)<br>300.1210d)5)<br>300.1230e)<br>300.3210t)<br><br>Section 300.610 Resident Care Policies<br>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.<br><br>Section 300.1210 General Requirements for Nursing and Personal Care<br>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. Restorative | S9999         | <b>Attachment A<br/>Statement of Licensure Violations</b>   |                    |

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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>measures shall include, at a minimum, the following procedures:</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. Section 300.1230 Direct Care Staffing</p> <p>e) The facility shall schedule nursing personnel so that the nursing needs of all residents are met. Section 300.3210 General</p> <p>t) The facility shall ensure that residents are not subjected to physical, verbal, sexual or psychological abuse, neglect, exploitation, or misappropriation of property.</p> <p>This REQUIREMENT was not met as evidenced by:</p> <p>Based on observation, interview and record review, the facility failed to ensure that pressure ulcer prevention interventions were being implemented. This failure resulted in delayed incontinence care and repositioning which along with R6's comorbidities subsequently led to the development of a facility-acquired unstageable pressure injury (Stage IV post debridement) on R6's sacrum.</p> | S9999         |   |                    |

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| S9999              | <p>Continued From page 2</p> <p>The Findings include:</p> <p>R6's Admission Record documents R6's initial date of admission as 03/18/2021. R6's diagnoses include but are not limited to Parkinson's disease, dysarthria (difficult articulation of speech), essential (primary) hypertension, acute embolism and thrombosis of unspecified deep veins of unspecified lower extremity, overactive bladder, unilateral inguinal hernia, and pressure ulcer of sacral region (unstageable).</p> <p>R6's MDS (Minimum Data Set) for Cognitive Patterns dated 05/05/2022 documents, in part, that R6 scored a 15 out of 15 on the BIMS (Brief Interview for Mental Status), indicating R6 is cognitively intact.</p> <p>R6's New Admission Skin/Wound Progress note dated 03/18/21 documents, in part, "Hospital records did not indicate any skin alteration. After head-to-toe assessment writer observed that skin is intact, dry, warm and appropriate color for R6's ethnicity."</p> <p>The 4th floor assignment sheet for 06/14/22 for the 7am-3pm shift listed 3 CNAs including V8 who is a RA (Resident Attendant)/CNA (Certified Nursing Assistant) in Training and V18 RA. The facility census as of 6/13/22 lists 66 residents on the 4th floor.</p> <p>On 6/14/22 at 10:03 AM, the surveyor entered R6's room and encountered V10 (Wound Care Nurse) who stated that V10 just finished changing R6's sacral dressing. R6 was observed lying on R6's back on a low air loss mattress with the head of the bed at a 45-degree angle and a wedge underneath R6's left upper back. When the surveyor asked R6 if R6 has been getting out</p> | S9999         |   |                    |

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| S9999 | <p>Continued From page 3</p> <p>of bed, R6 replied, "No, not anymore. I would like to. I presume it's because of lack of staff." When asked if R6 asked staff to get out of bed, R6 stated, "I mentioned it a few times, but then I just let it go." When asked if R6 is being repositioned, R6 replied, "Yes. A couple times a day, but I have to ask them to do it, and sometimes they complain that they're not strong enough to do it." The surveyor inquired if R6 is being turned or repositioned every two hours. R6 replied, "Oh hell no. That's fancy." R6 added that sometimes R6 sees a CNA early in the morning and then not until the afternoon. Regarding call light responsiveness, R6 stated that there have been times when no one has showed up at all. R6 stated that R6 wears a condom catheter due to urinary incontinence, but it falls off frequently leaving R6 wet. When R6 has a bowel movement, R6 stated that R6 will usually wait for a CNA to round, but if R6 has been waiting too long, then will use the call light to get changed.</p> <p>On 06/14/22 at 11:30 AM, According to V16 (CNA/Staffing Coordinator), V18 RA is not in school yet. V16 added that a RA in school can do patient care but transfers have to be done with another certified CNA. "If you're a CNA in training, it's the same thing as an RA in school," per V16.</p> <p>On 06/14/22 at 12:08 pm, the surveyor observed R6 still lying in the same position on R6's back with wedge still under the left upper back and head at approximately a 45-degree position, but R6's body was lower down in the bed with R6's left foot pushed up against the bed board. At 12:11 pm, V18 RA brought R6's lunch tray and commented, "Why they got you sitting down so low today?" V18 assisted R6 with pushing the bed control to lift R6's head of the bed up higher then exited the room. When the surveyor asked R6 if</p> | S9999 |  |  |
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| S9999 | <p>Continued From page 4</p> <p>R6 had been repositioned since 10:03 am, R6 replied, "No."</p> <p>On 6/14/22 at 2:02 pm, the surveyor observed R6 lying in the same position as was observed at 12:08 pm. When the surveyor asked if anyone had been in to reposition R6, R6 stated, "No. No one's been here. I could use somebody to change me." R6 was observed to be wearing an incontinence brief.</p> <p>On 6/14/22 at 2:12 pm, the surveyor asked V8 if V8 had provided incontinence care to R6 today. V8 stated, "No, I haven't been in there yet." V8 added that having to pass out breakfast and lunch takes a lot of time so it isn't until after that task is finished that V8 can get back to changing beds and providing incontinence care. V8 stated that when there's only 2 or 3 CNAs working, each will get 13 residents or more. "Today there's only 3 (CNAs)." V8 added that sometimes residents only get changed once a day due to the workload. When the surveyor asked if R6 has been repositioned since the start of V8's shift, V8 replied, "That I don't know because the RA (Resident Attendant) is supposed to go around and do that."</p> <p>On 06/14/22 at 2:16 PM, The surveyor asked V10 (Wound Care Nurse) if R6 appears to be in the same position as was at 10:03 AM when V10 finished with wound care. V10 replied, "R6 does." When the surveyor asked R6 if R6 would like to be repositioned, R6 stated, "Yes." V10 stated that staff should be repositioning R6 because, "I don't think R6 has the mobility to do it R6-self." The surveyor asked V10 what the low air loss mattress settings were set at. V10 stated that the pump was set at 340 pounds with a 20-minute alternating cycle. V10 stated, "The settings</p> | S9999 |  |  |
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| S9999 | <p>Continued From page 5</p> <p>shouldn't be this," and explained that for a resident with a pressure ulcer, the settings should be based on weight. V10 added that the pump should be set to "one step above the resident's weight" with a 10-minute alternating cycle to allow for pressure redistribution to prevent further deterioration of the wound. V10 proceeded to change the setting to 280 pounds at a 10-minute alternating cycle. When asked what R6's current weight is, V10 stated, "I don't know off the top of my head." V10 added that R6 had voiced a concern that the low air loss mattress has been losing air. As a result, stated V10, "Staff thinks by changing the settings, it will get better." V10 stated that there was a technician that came out last week to look at the mattress but could not find a problem so V10 requested a new mattress since they couldn't find another solution, but the mattress hasn't arrived yet. V10 stated that V10 never saw any signs of deflation, and the first time V10 was made aware of the issue was when V10 first assessed R6's wound on 05/03/2022. R6 stated, "That's how I got the wound in the first place; because it was deflated and felt like I was sleeping on the frame." R6 added that this is the same mattress that R6 was on when was moved from the 2nd floor to the 4th floor. Per V2 (Assistant Administrator), R6 transferred from the 2nd floor on 10/25/2021. The surveyor inquired about the layering of linens. Per V10, the resident can have a flat sheet as well as one other layer such as an incontinence brief, but no other chucks or lift sheets. R6 was noted to have just a flat sheet and incontinence brief on.</p> <p>On 06/14/22 At 2:29 pm, V8 arrived to R6's room to provide incontinence care. R6 was noted to have a large, brown BM was a baseball sized brown stain to the flat sheet. When the surveyor asked when R6 had the bowel movement (BM), R6 stated that it was before lunch but wasn't sure</p> | S9999 |  |  |
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| S9999              | <p>Continued From page 6</p> <p>if R6 was finished with the BM so waited to call and then fell asleep. The surveyor inquired about the risk of lying in urine or feces for an extended period of time. V10 stated that there's a risk of infection and worsening/deepening of the wound as well as a potential for "maceration of the skin" if not being changed promptly.</p> <p>On 06/14/22 at 3:10 pm, the surveyor asked V18 (RA) if V18 had repositioned any patients on the 4th floor today. V18 stated, "No, I didn't."</p> <p>On 06/15/22 at 11:48 am, V11 DON (Director of Nursing) stated that a RA who is not in school is not allowed to use lifts, assist with transfers or toileting, and not allowed to dress or ambulate a resident. When the surveyor asked if an RA not in school can reposition a resident, V11 stated, "No."</p> <p>On 06/15/22 at 12:45 PM, during a phone interview with V20 PA (Physician Assistant) the surveyor inquired about the risk factors that may lead to a Stage IV pressure sore? V20 replied, "In my expertise, it would have to be incontinence, not being able to move (immobility), and if they have any psychiatric disease where they may not be able to tell when they're wet or in pain." V20 added that a resident should be repositioned at least every two hours. The surveyor asked whether incorrect low air loss mattress setting could lead to further skin alteration. V20 stated, "That's a possibility, but ultimately that's not the only reason. All the other comorbidities can make the wound worse." The purpose of the low air loss mattress is to prevent any further pressure ulcer formation by redistributing the pressure on the body so it's not all in one area, according to V20. V20 agreed that residents still need to be repositioned despite the use of a low air loss</p> | S9999         |   |                    |

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| S9999              | <p>Continued From page 7</p> <p>mattress and that if the resident is incontinent for a long period of time, then that can lead to worsening of the wound.</p> <p>R6's Skin/Wound progress note dated 10/10/2021 documents, in part, "Assigned CNA reported skin alteration. Noticed R6 has some redness on R6's sacrum and buttocks area ...treatment orders received and completed. Low air loss, turning schedule in place." The wound type/location was documented as MASD (Moisture-Associated Dermatitis) of the sacrum/buttocks. On 10/22/2021, the site was documented to be "resolved."</p> <p>R6's Skin/Wound progress note dated 05/03/2022 documents, in part, "R6 was noted with a new skin condition. This morning the writer and Wound Specialist V20 assessed R6. Noticed unstageable pressure wound on R6's sacrum. Educated staff and resident to shift weight frequently, to stay clean and dry at all times to prevent further skin break down. R6 is on low air loss, turning clock and heels offloaded."</p> <p>R6's Skin/Wound progress note dated 05/17/2022 documents, in part, "Doctor debrided sacral wound and classified it as stage 4."</p> <p>R6's Skin/Wound progress note dated 05/19/2022 documents, in part, "Wound NP (nurse practitioner) saw R6 today. NP debrided sacral wound and noted increase in depth post debridement." The following notes on 05/24/22, 06/02/22, and 06/07/22 all document, "noted increase in depth post debridement."</p> <p>The facility Pressure Injury report documents the letter "F" in the column labeled "Where acquired" for R6's sacral wound. Per V2 (Assistant</p> | S9999         |   |                    |



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| S9999              | <p>Continued From page 8</p> <p>Administrator) the "F" stands for facility acquired.</p> <p>Review of R6's POC (Point of Care) response history from 5/16/22 until 06/14/22 for the task of "Turned and Repositioned: at no greater than every 2 hours based on resident need" documents the response "No" for the dates of 05/17 (6:33 pm), 05/19 (10:18 pm), 05/24 (12:07 am), 05/28 (10:20 am), 6/2 (11:42 am), 6/7 (9:36 am) and 6/9 (8:47 pm).</p> <p>R6's Braden Scale for Predicting Pressure Ulcer Risk dated 05/04/22 documents a score of 12 indicating R6 has a High Risk for developing a pressure ulcer.</p> <p>R6's care plan dated 03/18/2021 documents, in part, "Focus: R6 has actual alteration in skin integrity - pressure injury to sacrum and MASD to perineum, potential for alteration in skin integrity. R6 is at risk for further alteration in skin integrity r/t (related to) requiring assistance with ADLs (Activities of Daily Living), incontinent, dx (diagnosis) with Parkinson's, HTN (hypertension), UTI (Urinary Tract Infection), overactive bladder and vasomotor rhinitis." Interventions/Tasks include but are not limited to "Inspect skin daily with care, peri-care after incontinent episodes, pressure reduction foam mattress redistribution support (low air or alternation air) in bed, turn and reposition every two hours as needed."</p> <p>R6's care plan dated 08/06/2021 documents, in part, "Focus: R6 requires assistance form staff for bed mobility; unable to turn and reposition self in bed without physical assistance from staff secondary to weakness and Parkinson's Disease." Interventions/Tasks include but are not limited to, "Assist/cue resident into side lying position, reposition using full body sling lift or</p> | S9999         |   |                    |

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| S9999 | <p>Continued From page 9</p> <p>friction reducing devices."</p> <p>The facility policy titled "Prevention and Treatment of Pressure Injury and Other Skin Alterations" dated 04/2021 documents, in part, "Policy: 1. Identify residents at risk for developing pressure injuries. 2. Identify the presence of pressure injurie and/or other skin alterations. 3. Implement preventative measures and appropriate treatment modalities for pressure injuries and/or other skin alterations through the Individual Program Plan (IPP)." Procedure includes but is not limited to, "All implemented measures (preventive and/or therapeutic) will be documented within the IPP and will be revised via Special Staffing as needed; at least daily, staff should remain alert for any skin changes during resident care and communicate these changes to the nurse on duty."</p> <p>The facility policy titled "Routine Resident Checks" and dated 9/2020 documents, in part, "Policy interpretation and implementation: 1. To ensure the safety and wellbeing of our residents, a resident check will be made at least every two (2) hours throughout each 24-hour shift by nursing service personnel. 2. Routine checks involve entering the resident's room to determine if the resident's needs are being met ...needs toileting assistance, etc."</p> <p>The facility policy titled "Alternating Pressure Air Mattress" dated 09/20 documents the purpose: "1. To maintain and promote adequate circulation. 2. To relieve pressure and aid in healing and/or prevention of pressure ulcers. 3. To reduce pain due to pressure. Procedure: 9. Make periodic checks to check for proper inflation of mattress."</p> | S9999 |  |  |
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Illinois Department of Public Health

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| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:<br><br><b>IL6005193</b> | (X2) MULTIPLE CONSTRUCTION<br>A. BUILDING: _____<br><br>B. WING _____ | (X3) DATE SURVEY COMPLETED<br><br><b>C</b><br><b>06/15/2022</b> |
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|---|---|
| NAME OF PROVIDER OR SUPPLIER<br><br><b>ALDEN LAKELAND REHAB &amp; HCC</b> | STREET ADDRESS, CITY, STATE, ZIP CODE<br><b>820 WEST LAWRENCE<br/>CHICAGO, IL 60640</b> |
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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 |
|--------------------|--|---------------|---|--------------------|
| S9999              | Continued From page 10<br><br><b>(B)</b>   | S9999         |   |                    |