

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: IL6005177	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 05/06/2022
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NAME OF PROVIDER OR SUPPLIER APERION CARE LAKESHORE	STREET ADDRESS, CITY, STATE, ZIP CODE 7200 NORTH SHERIDAN ROAD CHICAGO, IL 60626
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S 000	Initial Comments Annual Licensure Survey	S 000		
S9999	<p>Final Observations</p> <p>Statement of Licensure Violations: 300.610a) 300.1210b) 300.1210d)6) 300.1220b)3)</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 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.</p> <p>Section 300.1210 General Requirements for</p>	S9999	<p>Attachment A Statement of Licensure Violations</p>	

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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>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: 6)All necessary precautions shall be taken to assure that the residents' environment remains as free of accident hazards as possible. All nursing personnel shall evaluate residents to see that each resident receives adequate supervision and assistance to prevent accidents.</p> <p>Section 300.1220 Supervision of Nursing Services b)The DON shall supervise and oversee the nursing services of the facility, including 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>These regulations were not met as evidenced by: Based on interviews and record reviews, the facility failed to follow their Fall Prevention Program by (a) not orienting a resident to use the nurse call device when assistance is needed, (b) not identifying risk for falls and implement</p>	S9999		

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S9999	<p>Continued From page 2</p> <p>appropriate fall interventions for a resident who is at risk for falls, and (c) not providing supervision to the washroom to prevent a resident from falling for 1 (R44) of 2 residents reviewed for fall incidents in a sample of 34. These failures resulted in R44 having a fall incident while using the washroom unassisted which resulted in numerous fractures.</p> <p>Findings Include:</p> <p>R44's Hospital records (2/28/22), Emergency Room Documentation documents in part, "69-year-old female from nursing home with mechanical fall with bimalleolar fracture to the left ankle. Discussed with orthopedic surgery plan to take patient to surgery today for ORIF". History and Physical Reports read in part, R44 admitted from skilled nursing facility with trimalleolar fracture status post-surgery. CT left ankle without contrast impression: trimalleolar fracture with moderate displacement and moderate comminution, complex mildly displaced intra-articular fractures base of third and fourth metatarsals, nondisplaced base of second metatarsal fracture, nondisplaced intra-articular fracture base of first metatarsal, and severe soft tissue swelling. X-ray of pelvis impression: bimalleolar fracture with minimal medial widening of the mortise. X-ray of left tibia/fibula impression: bimalleolar fracture with minimal medial widening of the mortise.</p> <p>On 5/03/22 at 12:17 PM, R44 was sitting on a wheelchair alert and able to verbalize needs. Surveyor noted R44's left foot swollen. R44 stated, "I fell on 2/28 in the bathroom. I broke my bones on my left leg. I had a broken ankle. They took me to surgery. The cast was removed Friday. I was by myself. I was getting up from the</p>	S9999		
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S9999	<p>Continued From page 3</p> <p>toilet and I tripped. The nurse came and got me up on the wheelchair."</p> <p>R44's facility record reviewed. R44's initial admission in the facility was 11/18/2021. Facility's "fall-initial occurrence note - V2" with an effective date of 2/28/22 at 11:00 AM shows R44 was found on the floor of the washroom lying on her (R44) right side. V25 (Licensed Practical Nurse) assessed R44 with swollen left ankle with pain, and received an order to send R44 to the local hospital. Resident statement: "I finished using the washroom and want to come out and fell and hurt my ankle".</p> <p>On 5/4/22 at 12:12 PM, an interview conducted with V2 (Director of Nursing). V2 stated he (V2) is in charge of fall prevention program. V2 stated that the fall assessments are completed for residents upon admission, and fall precautions should be added as interventions in the fall care plan. V2 stated that the purpose of the fall care plan is to specify and let the staff know what type of care the resident needs. V2 stated that the fall care plan should be initiated and fall precautions should be implemented upon admission of the resident. V2 stated that fall interventions are implemented based on the condition of the resident such as history of falling, assistance needed with activities of daily living (ADL), and limitations with mobility. V2 stated all residents residing in the facility are considered at risk for falls, and staff has to make sure that all residents receive the assistance they need.</p> <p>Surveyor reviewed with V2 R44's minimum data set (MDS) assessments in R44's electronic health record (EHR). R44's Admission MDS with assessment reference date (ARD) of 11/25/21 shows R44 requires supervision with setup help</p>	S9999		

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S9999	<p>Continued From page 4</p> <p>from the staff for toileting, bed mobility, transfer, walk in room, and dressing. R44's Quarterly MDS with ARD 1/21/22 shows R44 requires supervision one staff physical assist for toileting, bed mobility, transfer, walk in room, and dressing. Surveyor and V2 checked R44's EHR for a quarterly fall risk assessment but none was found. V2 stated that if R44 requires supervision assistance with ADLs, R44 is at risk for falling. V2 stated a fall risk assessment should have been completed. V2 stated that staff should be assisting R44 to the washroom at all times. V2 stated that staff should not leave R44 in the washroom alone. Surveyor and V2 also reviewed R44's comprehensive care plan from the day of R44's admission on 11/18/21 through the day of R44's fall on 2/28/22. V2 confirmed that R44 did not have a fall care plan in place, and did not have any fall interventions in place. V2 stated that if R44 had no fall care plan that means fall precautions to prevent R44 from falling were not implemented. V2 stated fall interventions that should have been implemented to prevent R44 from falling are frequent monitoring of R44 if R44 needs to go to the bathroom and provide assistance, toileting program, and rounding at least every 2 hours. V2 stated that moving forward fall assessments are done and fall care plans are initiated for all residents.</p> <p>R44's EHR indicates R44 has diagnoses listed not limited to nondisplaced transverse fracture of shaft of right fibula, initial encounter for closed fracture , schizophrenia, unspecified, type 2 diabetes mellitus , complications, bipolar disorder, Ccurrent episode mixed, mild, vascular dementia with behavioral disturbances, long term (current) use of insulin, and psychotic disorder with delusions due to known physiological condition. R44's MDS with ARD of 1/21/22 shows R44 is</p>	S9999		
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S9999	<p>Continued From page 5</p> <p>cognitively intact.</p> <p>R44's physician order sheet (POS) shows R44 has ordered high risk medications which includes, Lantus Solution 100 UNIT/ML (Insulin Glargine) Inject 10 unit subcutaneously at bedtime, Insulin Lispro Solution 100 UNIT/ML Inject 3 unit subcutaneously three times a day, Citalopram Hydrobromide Tablet 20 MG Give 1 tablet by mouth at bedtime, Lovenox Solution 40 MG/0.4ML (Enoxaparin Sodium) Inject 40 mg subcutaneously in the morning, risperiDONE Tablet 0.5 MG Give 1 tablet by mouth two times a day.</p> <p>On 5/4/22 at 12:59 PM, surveyor observed R44 resting in bed alert and verbally responsive. Able to verbalize needs. Surveyor asked R44 if staff assistance is being provided every time R44 needs to go to the bathroom. R44 stated, "I go with my wheelchair. I wheel my wheelchair to the bathroom. I have a good right leg. I can stand with my right leg and go use the toilet." Surveyor also asked R44 if assistance was provided whenever R44 needed to go to the toilet before her (R44) fall in February. R44 stated, "Before I fell I was able to walk just like you. I was able to go on my own." Surveyor asked R44 if staff provided her (R44) education on asking for help when needed especially when she (R44) needs to go to the bathroom. R44 answered, "No. Nobody educated me to call if I need help going to the bathroom. I call the staff for something else like my food tray but not going to the bathroom." Surveyor asked R44 if staff educated R44 on using the call light to call for help. R44 answered, "No. I ask my roommate to call for help. I didn't know I have a call light."</p> <p>At 1:03 PM, an interview conducted with V12</p>	S9999		

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S9999	<p>Continued From page 6</p> <p>(Registered Nurse). V12 stated that before R44's fall on 2/28/22, R44 was able to do all her (R44) ADLs by herself (R44). V12 stated that R44 never calls for help. V12 stated R44 would go to the washroom by herself with no staff assistance. V12 stated that R44 was independent and still wants to be.</p> <p>At 1:09 PM, an interview conducted with V18 (Certified Nursing Assistant (CNA). V18 stated she (V18) is R44's regular CNA. V18 stated before R44 fell, R44 walked independently. V18 stated R44 was going to the washroom on her own. V18 stated that R44 was independent and prefers to do her everything on her (R44) own.</p> <p>On 5/5/22 at 12:15 PM, reviewed R44's EHR and could not find any documentation that R44 was educated on the use of the call light when assistance is needed.</p> <p>At 12:21 PM, an interview conducted with V6 (Wound Care Nurse/Assistant Director of Nursing). V6 stated call light education provided to the residents are documented in the progress notes. Surveyor requested from V6 to provide copy of documentation that education was provided to R44 on the use of the call light prior R44's fall on 2/28/22.</p> <p>At 12:51 PM, V6 came back to this surveyor and stated that there is no documentation found in R44's clinical record indicating that education was provided on the use of call light.</p> <p>Reviewed facility's policy titled, "Fall Prevention Program" revised on 11/21/17 reads in part: Purpose: To assure the safety of all residents in the facility, when possible. The program will include</p>	S9999		
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S9999	<p>Continued From page 7</p> <p>measures which determines the individual needs of each resident by assessing the risk of falls and implementation of appropriate interventions to provide necessary supervision and assistive devices are utilized as necessary. Quality Assurance Programs will monitor the program to assure ongoing effectiveness.</p> <p>Guidelines: The Fall Prevention Program includes the following components: Methods to identify risk factors Methods to identify residents at risk Use and implementation of professional standards of practice Immediate change in interventions that were successful Care plan incorporates: - Identification of all risk/issue - Addresses each fall - Interventions are changed with each fall, as appropriate - Preventative measures</p> <p>Standards: A Fall Risk Assessment will be performed at least quarterly and with each significant change in mental or functional condition and after any fall incident. Safety interventions will be implemented for each resident identified at risk. The admitting nurse and assigned CNA are responsible for initiating safety precautions at the time of admission. All assigned nursing personnel are responsible for ensuring ongoing precautions are put in place and consistently maintained. Fall/safety interventions may include but are not limited to: At the time of admission and in accordance with the plan of care the resident will be oriented to use the nurse call device. The nurse call device will be placed within the resident's reach at all</p>	S9999		

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S9999	<p>Continued From page 8</p> <p>times. The location of the placement will be verbalized for those residents with visual deficits. Residents who require staff assistance will not be left alone after being assisted to bathe, shower, or toilet.</p> <p>Nursing personnel will be informed of residents who are at risk of falling. The fall risk interventions will be identified on the care plan. Residents at risk of falling will be assisted with toileting needs as identified during the assessment process and as addressed on the plan of care.</p> <p>The resident will be reminded as needed to call for assistance before attempting to ambulate.</p> <p>(A)</p>	S9999		