

Illinois Department of Public Health

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| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: IL6014963 | (X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____ | (X3) DATE SURVEY COMPLETED C 01/04/2023 |
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| NAME OF PROVIDER OR SUPPLIER WARREN BARR NORTH SHORE | STREET ADDRESS, CITY, STATE, ZIP CODE 2773 SKOKIE VALLEY ROAD HIGHLAND PARK, IL 60035 |
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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 |
|--------------------|---|---------------|---|--------------------|
| S 000 | Initial Comments Complaint Investigation 22110305/IL154753 | S 000 | | |
| S9999 | Final Observations Statement of Licensure Violations 300.690a) 300.690b) 300.690c) Section 300.690 Incidents and Accidents a) The facility shall maintain a file of all written reports of each incident and accident affecting a resident that is not the expected outcome of a resident's condition or disease process. A descriptive summary of each incident or accident affecting a resident shall also be recorded in the progress notes or nurse's notes of that resident. b) The facility shall notify the Department of any serious incident or accident. For purposes of this Section, "serious" means any incident or accident that causes physical harm or injury to a resident. c) The facility shall, by fax or phone, notify the Regional Office within 24 hours after each reportable incident or accident. If a reportable incident or accident results in the death of a resident, the facility shall, after contacting local law enforcement pursuant to Section 300.695, notify the Regional Office by phone only. For the purposes of this Section, "notify the Regional Office by phone only" means talk with a Department representative who confirms over the phone that the requirement to notify the Regional | S9999 | Attachment A Statement of Licensure Violations | |

Illinois Department of Public Health
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

Illinois Department of Public Health

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| S9999 | <p>Continued From page 1</p> <p>Office by phone has been met. If the facility is unable to contact the Regional Office, it shall notify the Department's toll-free complaint registry hotline. The facility shall send a narrative summary of each reportable accident or incident to the Department within seven days after the occurrence.</p> <p>This REQUIREMENT was not met as evidenced by:</p> <p>Based on interview and record review the facility failed to report a serious choking/unresponsive incident to IDPH (Illinois Department of Public Health) within 24 hours. This applies to all 136 residents residing in the facility.</p> <p>The findings include:</p> <p>The facility data sheet dated January 3, 2023 shows, there are 136 residents residing in the facility.</p> <p>R1's incident report dated December 28, 2022 shows, "Incident description: Nursing Description: this writer (V3 Licensed Practical Nurse/LPN) heard code blue. I immediately went to the dining room, saw the resident was unresponsive and CPR (cardiopulmonary resuscitation) initiated continuously and 911 called. Immediate Action Taken: Description: food particles were removed from the patient the mouth and suctioning was done in between..."</p> <p>The facility provided accident/incident list provided on January 3, 2023 does not list R1's incident that happened on December 28, 2022.</p> <p>On January 3, 2023 at 2:18 PM, V1 (Administrator) stated, R1's incident was not</p> | S9999 | | |

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| S9999 | <p>Continued From page 2</p> <p>reported to IDPH because they don't report choking or unresponsive code blues.</p> <p>The facility's incident report last revised July 28, 2022 shows, "Section 300.690(c) of the Skilled Nursing and Intermediate Care Facilities Code indicates that the facility shall, by fax or phone, notify the Regional Office within 24 hours after each reportable incident or accident. Policy Statement: It is the policy of the facility to ensure that all reportable incidents as stipulated in the Section 300.690 state regulations, are reported to the state agency. Procedures: 1. Any serious injury sustained by a resident that is not an expected outcome of the disease process will be reported to IDPH Regional Office. As per IDPH clarification "physical harm" does not include skin tear or bruise or something that can be covered by a band aid. Physical harm includes a fracture or blood flow not stopped by band aid or hospital treatment that involves more than diagnostic evaluation. Therefore, post ER evaluation that includes diagnostic evaluation only with subsequent findings of "No Injury" do not have to be reported. 3. The facility shall, by fax or phone, notify the Regional Office within 24 hours after each reportable incident or accident."</p> <p>(C)</p> | S9999 | | |