Illinois Department of Public Health

STATEMENT OF DEFICIENCIES (X1) PROVIDER/SUPPLIER/CLIA (X2) MULTIPLE CONSTRUCTION (X3) DATE SURVEY AND PLAN OF CORRECTION IDENTIFICATION NUMBER: COMPLETED A. BUILDING: IL6006712 12/09/2022 NAME OF PROVIDER OR SUPPLIER STREET ADDRESS, CITY, STATE, ZIP CODE 1675 EAST ASH STREET RENAISSANCE CARE CENTER **CANTON, IL 61520** (X4) ID PREFIX SUMMARY STATEMENT OF DEFICIENCIES PROVIDER'S PLAN OF CORRECTION (X5) COMPLETE (EACH DEFICIENCY MUST BE PRECEDED BY FULL PREFIX (EACH CORRECTIVE ACTION SHOULD BE REGULATORY OR LSC IDENTIFYING INFORMATION) TAG CROSS-REFERENCED TO THE APPROPRIATE **TAG** DATE **DEFICIENCY**) S 000 **Initial Comments** S 000 Annual Licensure & Recertification S9999 Final Observations S9999 Statement of Licensure Violations 300.610a) 300.1010h) 300.1210b) 300.1210c)3) 300.3210t) Section 300.610 Resident Care Policies a) The facility shall have written policies and procedures, governing all services provided by the facility which 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. These policies shall be in compliance with the Act and all rules promulgated thereunder. These written policies shall be followed in operating the facility and shall be reviewed at least annually by this committee, as evidenced by written, signed and dated minutes of such a meeting. Section 300.1010 Medical Care Policies The facility shall notify the resident's physician of any accident, injury, or significant change in a resident's condition that threatens the health, safety or welfare of a resident, including, Attachment A but not limited to, the presence of incipient or Statement of Licensure Violations manifest decubitus ulcers or a weight loss or gain of five percent or more within a period of 30 days.

Illinois Department of Public Health

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X8) DATE

Illinois Department of Public Health
STATEMENT OF DEFICIENCIES
AND PLAN OF CORRECTION

(X1) PR

	STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:			E CONSTRUCTION		(X3) DATE SURVEY COMPLETED	
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NAME OF I	PROVIDER OR SUPPLIER	STREET ADI	DRESS, CITY,	STATE, ZIP CODE		JOIZUZZ	
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S9999	Continued From pa	ge 1	S9999	101	12401		
	plan of care for the	tain and record the physician's care or treatment of such hange in condition at the time	Į.		6	×	
65	Section 300.1210 G Nursing and Person	General Requirements for nal Care			2	8	
	care and services to practicable physical well-being of the research resident's com- plan. Adequate and care and personal corresident to meet the care needs of the re-	shall provide the necessary of attain or maintain the highest of attain or maintain the highest of attain and psychological sident, in accordance with aprehensive resident care properly supervised nursing care shall be provided to each of total nursing and personal esident. Restorative sude, at a minimum, the secondary attails and personal esident.	å ∴	7.5° 31			
	c) Each direct and be knowledgea respective resident	care-giving staff shall review ble about his or her residents' care plan.	84				
æ	resident's condition, emotional changes, determining care re further medical eval	oservations of changes in a including mental and as a means for analyzing and quired and the need for uation and treatment shall be aff and recorded in the ecord.		2) 11		.c. (a)	
=)	Section 300.3210 G	ieneral	9			83	
2d 13	not subjected to phy	shall ensure that residents are /sical, verbal, sexual or e, neglect, exploitation, or property.	⇒	To (8)			
inois Denar	These Regulations	were not met as evidenced				8	

Illinois Department of Public Health

	STATEMENT OF DEFICIENCIES (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:		1	LE CONSTRUCTION		(X3) DATE SURVEY COMPLETED	
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10	PROVIDER OR SUPPLIER SANCE CARE CENTE	1875 EAC	DDRESS, CITY, S	STATE, ZIP CODE EET		BILVLL	
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S9999	Continued From pa	age 2	\$9999		94		
!	by:		1		25	==	
•0	Based on observati review, the facility for management for on reviewed for pain m	tion, interview, and record failed to provide pain ne of one resident (R41) nanagement. This failure		X			
## <u></u>	resulted in R41, wh services with the di- neoplasm of her rig adrenal gland, refus reposition because	no is a resident on hospice iagnoses of malignant ght lung, cervix, trachea, and sing to get out of bed and of R41's extreme pain with	* 4		A ee a	= 18	
	any kind of movements Findings include: The facility's Manage	gement of Pain policy, dated		55	9	#);	
i	independence, prompreserve resident dipolicy is to accomple effective pain mana our residents the micromfort, exercise grenhance dignity and achieve these goals accurately assessin Encouraging reside Increasing comfort anxiety in residents; and side effects; Pranticipated pain whe medication judicious desired level of pain unacceptable adverpurpose of this policions.	s, "Our mission is to facilitate mote resident comfort and dignity. The purpose of this dish that mission through an agement program, providing heans to receive necessary greater independence, and diffe involvement. We will se through: Promptly and and diagnosing pain; and reducing depression and and reducing depression and and reducing treatment efficacy reventing and minimizing the possible; Using pain and the resident's an relief with the avoidance of the consequences. For the coy, pain is defined as riencing person says it is,				: : : : : : : : : : : : : : : : : : :	
15	existing whenever the does.' Procedure: R	the experiencing person says it Residents and families will be by measure satisfaction related			W.	=	

Illinois Department of Public Health (X1) PROVIDER/SUPPLIER/CLIA

IL6006712 NAME OF PROVIDER OR SUPPLIER STREET ADDRESS, CITY, STATE, ZIP CODE 1675 EAST ASH STREET CANTON, IL 61520 (X4) ID		OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION A. BUILDING:		(X3) DATE SURVEY COMPLETED	
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CANTON, IL 61520 CANTON, CANTO	NAME OF F	PROVIDER OR SUPPLIER				#:	
ECAL DEFICIENCY MUST BE PRECEDED BY FULL RESULATORY OR ISC IDENTIFYING INFORMATION) S9999 Continued From page 3 Communication and Involvement-Pain will be assessed and managed in a timely fashion, especially if it is of recent onset. The physician will be notified of resident's complaint of pain when not relieved by medication as ordered by the physician will ensure an appropriate pain management plan." On 12/06/22 at 02:17 PM, R41 was alert and oriented lying-in bed on her right side. R41 stated she has lots of pain from her lung cancer, kidney stones, and my leg issues. A few nights ago, the nurse (V9 Licensed Practical Nurse) would not give me my pain medicine for some reason. I put my light on around 11:00 p.m. and asked her for a pain pill. She told me I couldn't get it just yet because I still had an hour before I was due. I was ok with this no big deal. So, an hour went by, 2 am went by 3 am went by 4 am went by, 5 am went by and she never brought me pain medication. She was in the room at 6 am finally and I asked her where my pill was. She told me I was sleeping when she came in. If I was sleeping it wasn't very good. I was in so much pain all I could do was doze off not actually sleep. She treated me like a dog. I'm in pain and I asked for a pain pill, but she says I don't even look like I'm in pain. If I get off my routine of pain medication it throws it completely off, and then I have to start all over again to try and get it under somewhat	RENAISS	SANCE CARE CENTE	R		ET		
Communication and Involvement-Pain will be assessed and managed in a timely fashion, especially if it is of recent onset. The physician will be notified of resident's complaint of pain when not relieved by medication as ordered by the physician. Thorough communication with the physician will ensure an appropriate pain management plan." On 12/06/22 at 02:17 PM, R41 was alert and oriented lying-in bed on her right side. R41 stated she has lots of pain from her lung cancer, kidney stones, and my leg issues. A few nights ago, the nurse (V9 Licensed Practical Nurse) would not give me my pain medicine for some reason. I put my light on around 11:00 p.m. and asked her for a pain pill. She told me I couldn't get it just yet because I still had an hour before I was due. I was ok with this no big deal. So, an hour went by she told me the same thing again. I am went by, 2 am went by 3 am went by, 4 am went by, 5 am went by and she never brought me pain medication. She was in the room at 6 am finally and I asked her where my pill was. She told me I was sleeping when she came in. If I was sleeping it wasn't very good. I was in so much pain all I could do was doze off not actually sleep. She treated me like a dog. I'm in pain and I asked for a pain pill, but she says I don't even look like I'm in pain. If I get off my routine of pain medication it throws it completely off, and then I have to start all over again to try and get it under somewhat	PRÉFIX	(EACH DEFICIENCY	MUST BE PRECEDED BY FULL	PREFIX	(EACH CORRECTIVE ACTION SHOU CROSS-REFERENCED TO THE APPRO	ILID BE COMPLETE	
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unable to reference a date. R41's MDS (Minimum Data Set), dated 10/23/22, documents that R41 scored a 13 on her BIMS	34 (X)	oriented lying-in be she has lots of pair stones, and my leg nurse (V9 Licensed give me my pain my light on around pain pill. She told necause I still had was ok with this no she told me the sa 2 am went by 3 am went by and she no medication. She wand I asked her whas sleeping when it wasn't very good could do was doze treated me like a da pain pill, but she in pain. If I get off rithrows it completed all over again to try control." Unable unable to reference R41's MDS (Minim	d on her right side. R41 stated from her lung cancer, kidney issues. A few nights ago, the d Practical Nurse) would not edicine for some reason. I put 11:00 p.m. and asked her for a ne I couldn't get it just yet an hour before I was due. I big deal. So, an hour went by me thing again. 1 am went by, went by, 4 am went by, 5 am ever brought me pain as in the room at 6 am finally here my pill was. She told me I a she came in. If I was sleeping. I was in so much pain all I off not actually sleep. She og. I'm in pain and I asked for says I don't even look like I'm my routine of pain medication it y off, and then I have to start and get it under somewhat to contact nurse. R41 was a date.				

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STATEMENT OF DEFICIENCIES (X1) PROVIDER/SUPPLIER/CLIA (X2) MULTIPLE CONSTRUCTION (X3) DATE SURVEY AND PLAN OF CORRECTION IDENTIFICATION NUMBER: A. BUILDING: COMPLETED IL6006712 B. WING 12/09/2022 NAME OF PROVIDER OR SUPPLIER STREET ADDRESS, CITY, STATE, ZIP CODE 1675 EAST ASH STREET RENAISSANCE CARE CENTER **CANTON, IL 61520** SUMMARY STATEMENT OF DEFICIENCIES PROVIDER'S PLAN OF CORRECTION (X5) COMPLETE PRÉFIX (EACH DEFICIENCY MUST BE PRECEDED BY FULL PREFIX (EACH CORRECTIVE ACTION SHOULD BE TAG REGULATORY OR LSC IDENTIFYING INFORMATION) CROSS-REFERENCED TO THE APPROPRIATE TAG DATE DEFICIENCY) S9999 Continued From page 4 S9999 Afacility Grievance/Complaint form, dated 12/6/22, documents, "(R41) stated that (V9) did not give her PRN (as needed) pain meds over the weekend. Resident could not give exact time or date." The form also documents, "Follow Up Action Taken: Upon investigation, interviewed V9 She stated on 12/5/22 at 3:00 a.m., R41 asked for a pain pill. V9 stated when she brought the pain pill to R41, she was sleeping at that time. V9 attempted to wake R41 by calling her name. R41 did not wake up. Approximately at 5:30 a.m., V9 stated CNAs (Certified Nursing Assistant) informed her R41 was asking for a pain pill. At that time V9 stated she was in another resident's room that was having an emergency. V9 instructed the CNAs to let R41 know she would be down with her pain medicine as soon as she was done helping the resident that was having the emergency. V9 then stated informed the oncoming nurse at 6:00 a.m. that the resident asked for pain medicine. R41 received pain medicine at 6:05 a.m. R41's Controlled Drug Receipt/Record Disposition Form, dated 11/30-12/7/22. documents that R41 received Norco 10/325 mg one tablet on 12/4/22 at 8:10 p.m., and the next dose was not administered until 12/5/22 at 6:05 a.m. R41's Physician's orders, dated 12/7/22, documents that R41 has the following orders: Morphine Sulfate Solution 100 mg (milligrams)/5 ml (milliliters). Give 0.25 ml orally every six hours as needed for mild pain; Norco 10-325 mg one tablet by mouth every four hours as needed for R41's Care plan, dated 4/19/22, documents, "I

Illinois Department of Public Health

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Illinois Department of Public Health (X2) MULTIPLE CONSTRUCTION STATEMENT OF DEFICIENCIES (X1) PROVIDER/SUPPLIER/CLIA (X3) DATE SURVEY AND PLAN OF CORRECTION **IDENTIFICATION NUMBER:** COMPLETED A. BUILDING: B. WING IL6006712 12/09/2022 NAME OF PROVIDER OR SUPPLIER STREET ADDRESS, CITY, STATE, ZIP CODE **1675 EAST ASH STREET** RENAISSANCE CARE CENTER **CANTON, IL 61520** SUMMARY STATEMENT OF DEFICIENCIES PROVIDER'S PLAN OF CORRECTION (X4) ID (X5) COMPLETE (EACH DEFICIENCY MUST BE PRECEDED BY FULL PREFIX (EACH CORRECTIVE ACTION SHOULD BE PRÉFIX REGULATORY OR LSC IDENTIFYING INFORMATION) CROSS-REFERENCED TO THE APPROPRIATE DATE TAG TAG DEFICIENCY) \$9999 S9999 Continued From page 5 have altered respiratory status related to Lung Cancer. Intervention: Use pain management as appropriate. Monitor/document side effects and effectiveness." R41's History and Physical, dated 10/16/22, documents, "Chief Complaint: Pain. History of Present Illness: R41 complains of diffuse pain and achiness especially in her back but seems to be generalized. She has known metastatic lung cancer. Not currently undergoing active treatment. Impression and Plan: Chronic pain." R41's Pain Assessment, dated 10/23/22, documents that R41 has frequent severe pain. and that she complains of pain daily. R41's Significant change MDS, dated 10/23/22. documents in Section J Health Conditions that R41 has frequent severe pain R41's Medicare Daily Progress note, dated

10/23/2022 at 11:33 a.m., documents, "R41 refused to be repositioned in bed or get up for meals. R41 has been deciding if she wants hospice or not and R41 has decided that she does not want to treat lung cancer and prefers to have hospice services." R41's medical record has no documentation of physician follow up.

R41's Medicare Daily Progress note, dated 10/26/2022 at 09:56 a.m., documents, "As needed pain medications given with effectiveness noted, R41 states that she is still having pain. R41 refused to get up for AM meal. R41 is able to feed self but requires set up assistance. R41 has poor appetite and fluid intake and has been educated on coming to dining room but still refuses. R41 refused to go to appointment for renal scan. R41 has decided on hospice and

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AND PLAN OF CORRECTION I IDENTIFICATION AN IMPED: I		(X2) MULTIPLE CONSTRUCTION A. BUILDING:			(X3) DATE SURVEY COMPLETED		
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NAMEOF	PROVIDER OR SUPPLIER			STATE, ZIP CODE			· · · · · ·
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S9999	Continued From pa	ge 6	S9999	'	,		
	offered to reposition	today to evaluate R41. Staff R41 and R41 refused." R41's the was admitted to Hospice			e v		8
;;	documents, "R41 re despite staff encour reposition R41, and	dated 10/27/22 at 9:41 a.m., fuses to get up for meals agement. Staff offered to she refused. R41 prefers to pite being educated on skin					
	p.m., documents, "F New order to discor	dated 10/27/2022 at 12:42 R41 is admitted to hospice. Itinue Norco 7.5 mg/325 mg eded. Start Norco 10 mg/325 s needed."				D#	
	"Terminal illness-ad diagnosis. Goal: My maintained, and I w observable indicatio physical, mental, or staff monitoring and Provide Pain/Discor	ted 10/28/22, documents, mit to hospice due to Cancer self and my family's will be ill be comfortable without ns of pain and/or other psychological symptoms thru intervention. Intervention:					
· (#)	effects. Report char	nitor effectiveness and side ages in pain, uncontrolled ffects of medications to the	#/				
		dated 10/28/22 at 9:35 a.m., es to get up for meals. R41				V)	
	R41's Hospice Admi 10/28/33, document diagnosis for admiss neoplasm of R41's r	ssion Orders, dated s that R41's primary sion to hospice is malignant ight lung. The orders also					,

document R41's related diagnoses are malignant

(X2) MULTIPLE CONSTRUCTION

A. BUILDING;

(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:

(X3) DATE SURVEY COMPLETED

Illinois Department of Public Health
STATEMENT OF DEFICIENCIES
AND PLAN OF CORRECTION

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5.0		IL6006712	B. WING		12/0	9/2022
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	neoplasm of the ad cervix."	Irenal gland, trachea, and		***		
		, dated 10/30/22 at 12:47 p.m., tates pain is all over."				
	documents, "No be change in pain and	te, dated 11/1/22 at 2:24 a.m., shaviors noted or reported from anxiety meds. Continues ds on same schedule as	5 <u>-</u> =	8 nyn 3	£0-	
1		, dated 11/3/22 at 8:28 p.m., aining comfort as much as)). (3)	ži.		1) 10 10 10 10 10 10 10 10 10 10 10 10 10
	a.m., documents, "If at 01:00 a.m. and ra asking for another pwould not tell anyon early.' R41 was told administering anyth increasing her requidenials she continumedications that ha available to her like	ave been discontinued or not	7%			
2.	a.m., documents, "f at 03:50 a.m. I told hours since her last since being adminis She stated, 'it was o since it's only like 10 was more than an h issuing her medicat	e, dated 11/3/2022 at 4:00 R41 request another pain pill her it has been less than 4 t pill and this is her 3rd request stered a pain pill at 01:00 a.m. okay to give it to her early 0 minutes early. I told her it hour early and I would not be tions early. I also explained ng requests and attempts at	dg.			**************************************

(X2) MULTIPLE CONSTRUCTION

(X3) DATE SURVEY

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES
AND PIAN OF CORRECTION

(X1) PROVIDER/SUPPLIER/CLIA
IDENTIFICATION NUMBER:

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S9999	Continued From pa	ge 8	S9999				
*	the attempt times a against the orders to entering her room to asleep and woke up	pills we have to chart all of s well and would not be going o give them early. When o answer the call light she was o when turned the call light note was signed by V9.			= à		
	R41's physician or h requesting pain med being scheduled du On 12/08/22 at 9:54 confirmed that V9 s	rd has no documentation of nospice being notified of R41's dication, on 11/3/22, prior to e to pain not being controlled. AM, V2 (Director of Nursing) hould have notified the e of R41's increased pain, but	8		8	2. V.	
	documents, "Appea note also document available." R41's Nurses' note,	dated 11/6/22 at 6:29 p.m., rs in no pain." However, the s, "Requesting Norco when dated 11/8/22 at 10:48 a.m., fuses to get up for meals."	To the state of th	50 100 100 100 100		E	
	document, "R41 reformance R41's Nurses' notes	s, dated 11/9/22 at 9:16 a.m., used to get up for meal." s, dated 11/11/22 at 6:26 p.m., rt maintained as much as	di S		3 glorg		
30 VA	a.m., documents, "F meals. She is a tota ADLs (activities of d She is hospice statu as needed pain med	dated 11/13/2022 at 09:21 Resident refuses to get up for I staff assist for transfers, aily living), and tray set up. is. Her pain is controlled with dications." However, R4's documents, "Resident refuses	27	VA ST		77 28	
lanta Bana		Stating 'if I move, I hurt.' Staff		αi			

Illinois Department of Public Health STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION (X1) PROVIDER/SUPPLIER/CLIA

IDENTIFICATION NUMBER:	A. BUILDING:	(X3) DATE SURVEY COMPLETED
IL6006712	B. WING	12/09/2022

NAME OF PROVIDER OR SUPPLIER

STREET ADDRESS, CITY, STATE, ZIP CODE

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S9999	Continued From page 9	S9999		
	R41's MAR (Medication Administration Record), dated 11/22, documents that R41's tolerable pain is a 4 (on a pain scale of 0-10). R41's Pain assessments document that 17 out of 30 days, R41's pain level exceeded her tolerable pain rating it from a 5-10 (on a pain scale of 0-10). The MAR also documents that R41 is being administered Norco 10-325mg on an average of daily two to four times a day with the exception of five days when R41 requested it one time during the day. In addition to the Norco, R41 was started on Morphine as needed 11/3/22, and R41 requested the Morphine (11/3-11/30/22) one time a day nine days and twice a day four days.			
	On 12/08/22 at 12:08 PM, V8 (Certified Nursing Assistant) stated, "(R41) complains a lot of being in pain. She doesn't show facial expressions of pain, but I'm not in her body so I don't know what she is feeling. When we provide incontinent care to R41, R41 cry's out and will be saying, 'Oh that hurts' the whole time especially if we have to roll her to her left side."	÷.		9 9
	On 12/08/22 at 9:54 AM, V2 (Director of Nursing) stat "(R41) does have frequent pain."			
	On 12/08/22 at 10:43 AM, V5 (MDS-Minimum Data Set Coordinator) stated, "(R41) frequently requests a change in her pain medication or an increase." V5 also confirmed that a person can build up a tolerance to pain medication, and that R41 has active cancer.			
	On 12/08/22 at 11:00 AM, V6 (Hospice Registered Nurse) was assessing R41. R41 stated, "My pain is just all over. I'd say it's a 7 (scale of 0-10) right now. It's stabbing and aching. The main places it hurts are my kidneys and my			

	TATEMENT OF DEFICIENCIES (X1) PROVIDER/SUPPLIER/CLIA ND PLAN OF CORRECTION IDENTIFICATION NUMBER:		(X2) MULTIPL	E CONSTRUCTION	(X3) DATE SURVEY	
AND PLAN	OF CORRECTION	IDENTIFICATION NUMBER:	A. BUILDING:		COMP	LETED
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		IL6006712	B. WING 12/		12/0	9/2022
NAMEOF				STATE, ZIP CODE		7.
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(X4) ID SUMMARY STATEMENT OF DEFICIENCIES		ID	PROVIDER'S PLAN OF CORRECT	ION	(V6)	
PREFIX TAG		MUST BE PRECEDED BY FULL SCIDENTIFYING INFORMATION)	PREFIX TAG	(EACH CORRECTIVE ACTION SHOU CROSS-REFERENCED TO THE APPRI DEFICIENCY)	JLD BE	(X5) COMPLETE DATE
S9999	Continued From pa	ge 10	S9999	112		(9)
	get out of bed beca even move to roll o pain is so bad. I can help with the pain. I fluttering and beatin was speaking she was facial grimacing three explained to (R41), You hurt then you spain isn't controlled and your pain keep is getting anxious a "I feel like (R41) wo Norco to something feel that her body mand she needs a co ahead of her pain. (had multiple fractur On 12/09/22 at 10: stated that (R41) is	primarily in my lungs. I don't use I hurt too much. I can't ver let alone get out of bed the n only lay in one position to My heart has also been ng fast more lately." While R41 was constantly fidgeting and oughout the conversation. V6 "Your pain is a vicious cycle. tart getting anxious. If your, you get even more anxious s going up because your body and worked up." V6 also stated, ould benefit from changing her plike Methadone because I hay have built up a tolerance constant schedule to keep (R41) has lung cancer and has ses so she for sure has pain."				
) E		eels that (R41) is just a pain because she is always medications.		va .	8.5	40. F. (c.f.)
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