

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: IL6014641	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED C 02/27/2023
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NAME OF PROVIDER OR SUPPLIER SYMPHONY MIDWAY	STREET ADDRESS, CITY, STATE, ZIP CODE 4437 SOUTH CICERO CHICAGO, IL 60632
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S 000	Initial Comments Complaint Investigations: 2381217/IL156350 2381470/IL156686 Facility Reported Incident of 1/19/23/IL156807	S 000		
S9999	Final Observations Statement of Licensure Violations (1 of 2): 300.610a) 300.1210b) 300.1210c) 300.1210d)2)5) 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. 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	S9999	Attachment A Statement of Licensure Violations	

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>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>c) Each direct care-giving staff shall review and be knowledgeable about his or her residents' respective resident care plan.</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>2) All treatments and procedures shall be administered as ordered by the physician.</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.</p> <p>These requirements were not met as evidenced by:</p> <p>Based upon observation, interview and record review the facility failed to follow the skin management policies, failed to transcribe physician orders correctly, failed to follow physician orders, failed to provide timely wound care and failed to offload wound for one of five</p>	S9999		

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S9999	<p>Continued From page 2</p> <p>residents (R5) reviewed for pressure ulcers. These failures resulted in R5's (stage 4) coccyx pressure ulcer exposed (without a dressing) and increased depth of R5's coccyx wound.</p> <p>Findings include:</p> <p>On 2/9/23 and 2/17/23, IDPH (Illinois Department of Public Health) received concerns regarding pressure ulcers.</p> <p>The (2/21/23) facility wound report affirms R5 has a stage 4 coccyx pressure ulcer.</p> <p>R5's (2/10/23) assessment for potential skin integrity impairment determined a score of 12 (high risk).</p> <p>R5's (1/27/23) BIMS (Brief Interview Mental Status) determined a score of 11 (moderately impaired).</p> <p>R5's (1/27/23) functional assessment affirms (1 person) physical assist is required for toilet use and (2 person) physical assist is required for bed mobility.</p> <p>R5's care plan includes (1/20/23) resident is incontinent of bowel and bladder requires total assist from staff. (1/21/23) Resident has pressure injury, site: coccyx. Intervention: pressure redistribution mattress. Remind/assist resident to reposition frequently. (1/30/23) Resident requires assistance with bed mobility.</p> <p>On 2/21/23 at 1:11am, R5 was lying atop of a LALM (Low Air Loss Mattress) on his back and there were no repositioning devices present. An incontinence brief, 4 sheet layers and a pad were between R5 and the LALM. R5 affirmed he has a</p>	S9999		

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S9999	<p>Continued From page 3</p> <p>wound "On my backside", however was unsure of treatment frequency. V7 (Certified Nursing Assistant) affirmed she was assigned to R5 and just returned from lunch break. V7 removed R5's incontinence brief (as requested). The (stage 4) sacrum wound was exposed, there was no dressing present. Surveyor inquired about R5's dressing. V7 stated, "There's not one on there now." Surveyor inquired if V7 told the Nurse that R5's dressing was off. V7 responded, "I didn't see anyone today and didn't tell them. If there's not one on there, I try to find someone to put one on. I didn't get a chance to tell the wound Nurse."</p> <p>R5's (2/21/23) coccyx dressing administration was documented on the TAR (Treatment Administration Record) at 5:28pm (over 4 hours after surveyor observation).</p> <p>On 2/22/23 at 9:44 am, R5 was lying atop of a LALM on his back and there were no repositioning devices present. An incontinence brief and 4 sheet layers were between R5 and the LALM. Surveyor inquired when R5's incontinence brief was last checked and/or changed R5 stated, "Last night, evening time."</p> <p>On 2/22/23 at 9:47 am surveyor inquired about R5's coccyx treatment orders. V6 (Wound Care Nurse) accessed the EMR (Electronic Medical Record) and stated he has dressing changes Monday's, Wednesday's, Friday's, and PRN (as needed). Surveyor inquired if changing dressings only 3 times weekly would be appropriate considering R5 is incontinent of bowel and bladder and has a stage 4 (open) coccyx wound. V6 responded, "It's whatever the Doctor says, I really couldn't tell you that. I would have to get the order from the Doctor. It all depends on whatever the Doctor decided."</p>	S9999		

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S9999	Continued From page 4 On 2/22/23 at 9:50 am, V17 (Certified Nursing Assistant in Training) affirmed that she's currently assigned to R5. Surveyor inquired when R5's incontinence brief was last checked and/or changed. V17 stated, "I haven't changed him. I don't know if anybody's changed him or not. A student is coming to do him." V17 proceeded to exit the room. On 2/22/23 at 10:01 am, surveyor inquired what's allowed on top R5's LALM (while in use). V6 responded, "It's either a sheet and a diaper or a pad and diaper, you can only have 2." Surveyor inquired how many sheet layers were currently beneath R5. V6 responded, "Look like it's four and he has the diaper." Surveyor requested to inspect R5's sacrum wound. V6 pulled back the sheet and stated, "Oh, my God. He (R5) had a bowel movement, it came a little bit outside you can see it." R5 had bowel movement on his thighs, sheet and mattress. V6 removed R5's sacrum dressing and stated, "He got poop up under there, it's under the rim. Thank God it's not on the wound." On 2/22/23 at 2:27 pm, surveyor relayed that both times surveyor observed R5 he was lying on his back. V2 (Director of Nursing) stated, "He should be getting repositioned." Surveyor inquired about appropriate wound care orders for residents with stage 4 wounds. V2 responded, "It actually just depends on whatever the order the doctor gives. I just had a meeting last Friday (2/17/23) with the wound care coordinator (V16) to make sure the residents have appropriate treatment orders. So, I just asked her (V16) if she can go through all the wounds for me and let me know if she felt that everybody is getting the appropriate treatment and she (V16) told me she would. She (V16)	S9999		

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S9999	Continued From page 5 hasn't gotten back to me yet." Surveyor inquired if treatments prescribed only 3 times weekly is appropriate for an incontinent resident with a stage 4 (open) coccyx wound. V2 replied, "I'm not a wound care nurse, so I really can't answer that question." R5's (2/7/23) physician order details (per wound assessment) state coccyx: cleanse wound with saline, apply skin prep, apply silver alginate, cover with dry dressing change (daily) and prn. Complicating factors affecting wound healing and prevention include impaired mobility - reposition every 2 hours. Incontinence - evaluate every 2 hours. R5's (2/7/23) physician orders affirm coccyx treatments were entered in the electronic medical record to be changed daily Monday, Wednesday, Friday and PRN (not daily as prescribed). R5's (February 2023) TAR affirms coccyx treatments were administered on Monday, Wednesday and Friday (not daily as prescribed). On 2/27/23 at 3:41 pm, surveyor inquired about the required frequency for (open) stage 4 coccyx wound treatments. V21 (Physician) stated, "It depends on how much drainage it is. Once a day is ok if it's not that much drainage, but the standard will be once a day." Surveyor inquired about potential harm to an incontinent resident with stage 4 (coccyx) wound, without a dressing in place. V21 responded, "In that case, it is possible that the urine or the stool can go to the wound and the wound can get infected." R5's (2/17/23) coccyx wound assessment includes exudate: light serosanguinous. Undermining present. Tunneling unknown. 3.1 x	S9999		

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S9999	<p>Continued From page 6</p> <p>2.5 x 0.7cm (centimeters). R5's (1/20/23) initial wound assessment affirms the wound measured 5.0 x 4.5 x 0.5cm therefore the depth increased 0.2cm. [Wound undermining occurs when significant erosion occurs underneath the outwardly visible wound margins resulting in more extensive damage beneath the skin surface].</p> <p>The skin management: specialty mattress policy (reviewed 3/22) states limit the amount of linen placed between the support surface and the resident.</p> <p>The skin management: dressing application policy (reviewed 1/22) states dress wound as directed. (B)</p> <p>Statement of Licensure Violations (2 of 2):</p> <p>300.610a) 300.1210b) 300.1210d)6)</p> <p>Section 300.610 Resident Care Policies</p> <p>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.</p> <p>Section 300.1210 General Requirements for Nursing and Personal Care</p>	S9999		

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S9999	<p>Continued From page 7</p> <p>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>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>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>These requirements were not met as evidenced by:</p> <p>Based upon observation, interviews and record review, the facility failed to follow the facility Falls Management Policy, failed to provide supervision, and failed to address injuries of unknown origin in a timely manner for one of four residents (R13) reviewed for falls. The facility failed to ensure hazardous chemicals were stored in a locked area and not accessible to four of 18 residents (R8, R9, R10, R11) in the sample. These failures resulted in R13 sustaining a fracture to the right fifth metacarpus and distal ulna on 1/19/23 and has the potential to affect 62 (2nd floor) residents reviewed for hazardous chemicals.</p>	S9999		

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S9999	<p>Continued From page 8</p> <p>Findings include:</p> <p>R13 is an 84-year-old with diagnosis including but not limited to: Dementia, Wandering, Persistent Mood Disorder, Disorientation, Encephalopathy, Long Term use of Anticoagulants, Unspecified fall and Fracture of right femur. R13 was admitted 9/18/21.</p> <p>R13's 2/14/23 BIMS (Brief Interview for Mental Status) states, 'Resident is rarely/ never understood' and Daily Decision Making is Severely Impaired.</p> <p>R13's 9/18/21 fall risk assessment determined a score of 14 (moderate risk) and includes multiple falls.</p> <p>On 1/19/2023 initial facility reported incident states writer noted patient in wheelchair with a small abrasion with scant bleeding to right eyebrow. Third finger with broken nail and scant amount of blood. Resident unable to give description. Nurse Practitioner made aware with new orders for left hand/wrist x-ray.</p> <p>R13's 1/19/23 incident report includes level of pain "3."</p> <p>R13's 1/19/23 progress notes affirm "stat left hand/wrist" x-ray was ordered.</p> <p>R13's left wrist x-ray date of service was 1/23/23 (4 days later). Acute fracture of the distal ulna and 5th metacarpus are inclusive.</p> <p>On 2/23/23 at 10:50 am surveyor inquired about the 1/19/23 incident. V2 (Director of Nursing) said, R13 had a fall that was unwitnessed. We</p>	S9999		

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S9999	Continued From page 9 didn't send him out but the facility NP (V19) went up and assessed R13. The x-ray company lets us know that sometimes, due to availability, stat x-rays are not always done on the day ordered. The x-ray may be done on the next day. R13's x-rays were done on 1/20/23. I reached out to the x-ray company on 1/20/23 to get the results and was told that their files were corrupted and unreadable. I was told that the company would have to come back out and do another x-ray. On 1/23/23, I followed up with the x-ray company again about R13's x-ray and was finally given results via computer. Per the x-ray, R13 had a left wrist and left third finger fracture". R13's fall risk assessments exclude 1/19/23 fall risk assessment post fall. On 2/23/23 at 12:15 pm, V20 (R13's daughter) said, R13 hurt himself in the facility but we don't know how. R13 fractured his Left wrist somehow. R13 falls a lot here. I don't think that R13 knows how to use the call light or call for help. Surveyor observed, R13 was verbally unresponsive at this time. On 2/23/23 at 12:35 pm, surveyor inquired about the 1/19/23 incident. V18 (Unit Manager) said, "I noticed R13 propelling down the hallway bleeding from his finger. R13 was also holding his wrist. V19 (Nurse Practitioner) came to assess R13 and ordered stat x-rays. V19 did not send R13 out to the hospital at that time. Sometimes when we order stat x-rays, the company does not come until the next day depending on their availability. R13 was sent out to hospital on 1/22/23 because R13 appeared to have a GI (Gastrointestinal) bleed (therefore x-ray was obtained after hospital admission)."	S9999		

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S9999	<p>Continued From page 10</p> <p>On 2/23/23 at 1:45pm V19 (Nurse Practitioner) said, the Dementia floor Manager (V18) called me on 1/19/23 and said that a patient had an injury. V18 was not sure where the injury came from but said that R13 was bleeding from his finger and holding his wrist. I assessed R13 and ordered stat x-rays and pain medication. I did not feel the need to send R13 to the hospital at that time. When I re-evaluated R13 on 1/20/23, I realized that the x-ray results had not been received yet.</p> <p>On 2/23/23 at 3:00 pm, V1 (Physician) said the potential risks for unwitnessed falls or injuries or unknown origin could result in possible head injury. Generally, I ask if the patient is having symptoms and I consider the Nurses' judgement prior to sending a patient to the hospital. For joint pain, I recommend sending the patient out to the Hospital because getting an x-ray at the facility can take long and it may be a time sensitive event. If there is a fracture, it should be treated as soon as possible. Patients with injuries of unknown origin may be at increased risk of hematoma if taking an anticoagulant (blood thinner).</p> <p>On 2/27/23 at approximately 3:00pm, the IOUO (injury of unknown origin) policy was requested however the IOUO investigation policy (reviewed 6/21) was received. The IOUO investigation policy excludes required actions of the facility staff.</p> <p>The falls management policy (reviewed 6/22) states a fall risk will be completed on admission, readmission and quarterly, with each significant change and after each fall.</p> <p>////////////////////////////////////</p>	S9999		

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S9999	<p>Continued From page 11</p> <p>The (2/20/23) census includes 62 (2nd floor) residents. R8, R9, R10 and R11 reside on 2nd floor.</p> <p>On 2/21/23 at approximately 1:26pm, wallpaper paste remover, (brand name) disinfectant bleach wipes, disinfectant cleaner, joint compound and paint cans were observed atop of an (unattended) utility cart in the 2nd floor hallway. A large bag of foaming alcohol hand sanitizer and (brand name) disinfectant bleach wipes were also observed atop of a housekeeping cart in the (2nd floor) hallway. R8, R9, R10 and R11 were in the hallway at this time (near both carts). Surveyor inquired where unattended chemicals should be stored. V9 (Housekeeping) removed disinfectant cleaner from an (unlocked) compartment on the housekeeping cart and stated, "I put em (sic) down here." Surveyor inquired if V9 has a key to the housekeeping cart. V9 responded, "My boss have a key." Surveyor inquired (again) if V9 has a key to the housekeeping cart. V9 replied, "No."</p> <p>R8's (12/30/22) BIMS (Brief Interview Mental Status) determined a score of 12 (moderately impaired).</p> <p>R9's (2/1/23) BIMS determined a score of 8 (moderately impaired). R9's diagnoses include Alzheimer's disease.</p> <p>R10's (2/6/23) BIMS determined a score of 10 (moderately impaired).</p> <p>R11's (11/07/22) BIMS determined a score of 15 (cognitively intact).</p> <p>On 2/21/23 at 1:32pm, V10 (Maintenance) was observed painting the hallway. Surveyor relayed concerns regarding chemicals left unattended on</p>	S9999		

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S9999	<p>Continued From page 12</p> <p>the utility cart. V10 alleged he was watching the cart, however the utility cart was at the opposite end of the hallway. Surveyor inquired how V10 was watching the utility cart while (facing the wall) painting. V10 stated, "I am watching it because I'm right by it. It's in my peripheral." Surveyor inquired what "peripheral" means. V10 responded, "Peripheral means I can see it. I don't know if you know but some people can chew bubble gum and walk at the same time, like I can." Surveyor inquired what V10 was doing prior to interview. V10 stated, "I'm painting the wall."</p> <p>On 2/22/23 (the following day) at approximately 9:38am, a large bag of foaming alcohol hand sanitizer was observed (again) atop of an (unattended) housekeeping cart in the 2nd floor hallway (near room 202). R10 was in the hallway near the housekeeping cart at this time.</p> <p>The (undated) housekeeping equipment policy states proper attention should be given to daily use and storage of all items. Each cart should be kept locked. (B)</p>	S9999		