

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: IL6009765	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED C 05/18/2023
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NAME OF PROVIDER OR SUPPLIER WATSEKA REHAB & HLTH CARE CTR	STREET ADDRESS, CITY, STATE, ZIP CODE 715 EAST RAYMOND ROAD WATSEKA, IL 60970
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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 Investigations: 2363731/IL159485 & 2363717/IL159487	S 000		
S9999	Final Observations Statement of Licensure Violations: 300.610a) 300.1210b) 300.1210d)2 300.1210d)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 and shall be reviewed at least annually by this committee, documented by written, signed and dated minutes of the meeting. 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	S9999	Attachment A Statement of Licensure Violations	

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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>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>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 on interview and record review, the facility failed to provide treatment and services to promote wound healing for a resident. R1 was admitted to the facility with multiple burn wounds to R1's right front thigh, left front thigh, left rear knee, left rear lower leg, and back in which the facility failed to assess, monitor, obtain orders and provide treatments for R1's wounds. This failure affects one of three residents (R1) reviewed for wounds on the sample of five. These failures resulted in R1's open wounds on R1's back to deteriorate and become infected requiring hospitalization. The facility failed to ensure a resident received proper tracheostomy care to</p>	S9999		
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S9999	<p>Continued From page 2</p> <p>prevent the tracheostomy from becoming occluded and assist in respiratory infection prevention.</p> <p>Findings include:</p> <p>The facility's Skin Condition and Monitoring policy dated 3/16/23 documents it is the policy of the facility to provide proper monitoring, treatment, and documentation of any resident with skin abnormalities. This policy documents the nurse will assess and document the findings in the nurses notes and complete a skin evaluation. The nurse will then notify the physician and obtain a treatment order including type of treatment, location of area to be treated, frequency of treatment and cleansing of the wound. Any skin abnormality will have a specific treatment order until area is resolved. Documentation of the skin abnormality must occur upon identification and at least weekly thereafter until the area is healed. Documentation of the area must include size, shape, depth, odor, color and presence of granulation tissue or necrotic tissue, treatment and response to treatment and prevention techniques in place for the resident.</p> <p>R1's Hospital Discharge Skin/Wound Assessments dated 4/7/23 at 8:00am document the R1's burn wounds including burn wounds to the Left posterior thigh and "Back." These wound assessments document R1's dressing changes to each of these wounds as being changed on 4/6/23 and were "dry and intact."</p> <p>R1's Hospital records document an Assessment and Plan dated 3/30/23 at 2:08pm, including R1 has a history of Heart Failure, Chronic Hypoxemic Respiratory Failure status post Tracheostomy in March 2020. This plan documents R1 requires</p>	S9999		
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S9999	<p>Continued From page 3</p> <p>continuous trach collar at 26%, titrate supplemental Oxygen to maintain Oxygen Saturations of 90-96%.</p> <p>R1's Hospital records document on 4/11/23 at 2:00pm, R1 just left a LTAC (Long Term Acute Care facility) after a year long admission. These records document R1 admitted to the facility 4 days ago (4/7/23) and has now been in the Emergency Department twice. This note documents R1 is "hypoxic on trach collar to 89%-91% with copious trach secretions."</p> <p>R1's Emergency Room physician note dated 4/11/23 at 8:00pm documents R1 presents with excessive trach secretions, cough. This note documents R1's labs are concerning with an elevated White Blood Cell count, and a Chest X-ray consistent with Pneumonia. This note also documents R1 required 1 hour worth of suctioning and trach care upon arrival to the hospital and that R1 "is critically ill."</p> <p>R1's Admission/Readmission Nursing Evaluation dated 4/7/23 at 3:46pm documents R1 admitted to the facility with reason for admission as "Tracheostomy care, wound care and an indwelling urinary catheter." This evaluation documents R1 has burn wounds to the right front thigh, left front thigh, left rear knee and left rear lower leg with measurements. There is no documentation of R1's multiple back wounds on admission to the facility. This evaluation documents R1 is alert and oriented to person, place, time and situation and communicates via communication board.</p> <p>R1's Electronic Clinical Physician Orders dated 5/18/23 at 6:10pm do not document orders for wound care/dressing changes for April 2023 and</p>	S9999		
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S9999	<p>Continued From page 4</p> <p>May 2023. R1's Electronic Treatment Administration Records (TAR) dated April 2023 and May 2023 do not document R1 received dressing changes to R1's multiple burn/skin graft wounds on R1's back or any other of R1's burn/skin graft wounds, including R1's lower extremities. There is no documentation of attempts by the facility to clarify/review post hospital visit needs for R1's wound treatments.</p> <p>R1's Hospital records document R1's wound counsult note for multiple wounds present on admission 4/11/23 and wound details as follows: 4/11/23 at 11:42pm, R1's lower thoracic spine wound was midline lower thoracic spine with partial thickness. The wound bed was clean, moist, pink. Periwound was scar tissue with a scant amount of serosanguineous drainage. 4/12/23 at 12:00am, R1's left scapula multiple wound beds were clean, moist, and pink. The periwound was scar tissue and A scant amount of serosanguineous drainage. 4/12/23 at 12:00am, R1's right scapula multiple wound beds were clean, moist, and pink. The periwound was scar tissue With a scant amount of serosanguineous drainage. 4/12/23 at 12:00am, R1's multiple Left posterior leg wounds extending up to the posterior knee learned about was clean moist and pink with periwound of scar tissue. This wound contained a scant amount of serosanguineous drainage. 4/12/23 at 12:00am, R1's Right abdomen wound bed was clean with red hypergranulation and sutures, multiple areas. Red granulation was 76 to 100%. peri-wound is documented as scar tissue and that these wounds had small amount of serosanguineous drainage. This was cleansed with sterile normal saline and a border dressing applied. 4/12/23 at 12:00am, left lateral hip multiple wound</p>	S9999		
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S9999	<p>Continued From page 5</p> <p>beds were clean, dry, pink. peri-wound is documented as scar tissue with no drainage. 4/12/23 at 10:05am, left second toe dorsal pressure injury deep tissue and present on admission. The wound bed is dry and maroon and purple and color. peri-wound is intact with no drainage.</p> <p>4/12/23 Left dorsal thigh multiple wound beds are clean, moist, and pink with no drainage and peri-wound as scar tissue.</p> <p>4/12/23 at 10:09am, right thigh medial multiple wound beds clean, moist, pink with peri-wound documented as scar tissue and contained a scant amount of serosanguineous drainage.</p> <p>4/12/23 at 10:10am, left lower back wound had full thickness with wound bed moist, pink, with slough. Red/granulation tissue 1-26%, yellow slough 51-75% with the peri-wound documented as scar tissue with a small amount of serosanguineous drainage.</p> <p>R1's Hospital Discharge Summary documents R1 discharged from the hospital on 4/25/23. This summary does not document wound care orders for R1's multiple wounds. R1's Hospital Discharge Instructions dated 4/25/23 do not document wound care/dressing change orders for R1' multiple wounds on R1's body. There is no documentation in R1's electronic medical record that the facility requested or obtained wound care orders upon readmission to the facility for R1's multiple wounds on multiple areas of R1's body.</p> <p>R1's Hospital Medical Records document a Pulmonary Tracheostomy Tube change procedure note dated 4/24/23 documents R1 had a size #6 XLT cuffed tracheostomy tube in place with the cuff deflated. R1 had a size #6 Cuffless XLT Tracheostomy tube placed on this date. These hospital records document "problems with</p>	S9999		
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S9999	<p>Continued From page 6</p> <p>tracheostomy care and suctioning at the facility." These notes document to "consider standing tracheostomy suction and care order at the time of discharge."</p> <p>R1's Admission Assessment dated 4/25/23 at 11:58am documents R1 re-admitted to the facility on 4/25/23. This assessment documents R1's admitting diagnosis as Respiratory Failure with reason for admission, "tracheostomy." This assessment does not document R1's multiple skin wounds to R1's body.</p> <p>R1's Treatment Administration Record (TAR) dated April 2023 documents R1 is to receive:</p> <p>Oxygen - Oxygen at 8 L (liters) per trach collar every shift with a Start Date of 04/07/2023 6:00pm. There is no documentation of humidification administration with the Oxygen.</p> <p>Trach: Site care - Remove dressing from under flange, cleanse outer cannula and skin daily with Normal Saline (NS) and gauze. Cleanse under cannula with cotton applicator and replace dressing under the flange, every shift with a start date of 4/8/23 at 6:00am.</p> <p>There is no documentation of the care of R1's inner cannula or if the inner cannula was disposable.</p> <p>Trach: May Suction Tracheostomy to maintain O2 (Oxygen) saturations, when coughing or excess secretions noted as needed for secretions with a start date of 4/7/23 at 3:12pm.</p> <p>R1's TAR dated May 2023 documents R1 is to receive:</p>	S9999		
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S9999	<p>Continued From page 7</p> <p>Oxygen - Oxygen at 8 L per trach collar every shift with a Start Date of 04/07/2023 6:00pm. There is no documentation of humidification administration with the Oxygen.</p> <p>There is no documentation of respiratory therapy evaluation/care by the facility's respiratory company. There is no documentation of emergency equipment located at R1's bedside, including ambu bag or replacement tracheostomy tube.</p> <p>On 5/10/23 at 2:35pm, V5, Emergency Room Physician stated R1 admitted to the hospital on 5/3/23 with non-healing wounds and required "a lot of cares/frequent wound care." V5 stated R1 is at an increased risk for skin breakdown as well as infection/decline to R1's wounds due to R1's history of burn wounds with skin grafts and current open wounds.</p> <p>On 5/10/23 at 7:50am, V12, R1's Family stated V12 spent hours at the facility every day. V12 stated one unidentified nurse (per V12, unable to know most names due to no name tags) used the flexible suction catheter and attempted to place it in R1's mouth and suction down R1's throat. V12 stated R1 put R1's hands up and panicked. V12 stated V12 told the nurse R1 could not be suctioned that way and told the unidentified nurse how to suction R1 but the nurse wound not deep suction R1.</p> <p>On 5/10/23 at 1:48pm, V11, Respiratory Therapy Supervisor stated V11 received report from V10, Respiratory Therapist on R1. V11 stated R1's tracheostomy was completely occluded upon arrival to the emergency room and that R1's "rigged up" tubing with blue cap contained "hard, crusted build-up" inside the tube. V11 stated due</p>	S9999		
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S9999	<p>Continued From page 8</p> <p>to the condition of the tracheostomy and dressing around the tracheostomy, the facility had not been providing tracheostomy care for R1 as R1 required. V11 stated R1's thick copious secretions were signs R1 was not receiving humidification for R1's tracheostomy and should have been. V11 stated R1's tracheostomy dressing was so stuck to R1's skin that it had to be "soaked" multiple times to be able to remove it from around R1's tracheostomy and R1's skin under the tracheostomy dressing was red/irritated. V11 stated R1's tracheostomy showed signs it was severely neglected by the facility.</p> <p>R1's Hospital Nursing notes dated 5/3/23 at 9:55pm document R1 has poor skin turgor with breakdown, wounds with wound odor. These notes documents R1 has multiple open wounds to R1's back and legs bilaterally in area of previous burned skin. This note documents R1's dressings on R1's wounds were dated 4/27/2023 with purulent drainage noted. This note documents R1 has multiple dressings on legs, back and abdomen that were dated 4/27/2023. R1's wound dressings to R1's left hip, back, left thigh were draining yellow thick sanguineous and purulent drainage and had a foul odor. This note documents these dressings were "soaked off with normal saline soaks," R1's wound dressings were removed and R1's wound beds were "denuded with sanguineous, yellow thick green drainage noted in wound beds with a foul odor to R1's wounds. This note documents V12, R1's family stated R1's wounds were not that severe prior to admission to the facility. This note also documents 90% of R1's back is covered in full thickness open wounds with sanguineous drainage.</p>	S9999		
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S9999	<p>Continued From page 9</p> <p>R1's Hospital Therapy Notes dated 5/4/23 at 3:44pm document R1 has several open wounds from his previous burn injuries that have not been properly cared for and are infected. these notes document R1 would be appropriate to return to a skilled nursing facility, however it "does not appear that (R1's) current facility has been able to provide the quality of care needed by (R1.)"</p> <p>R1's Wound Consult note signed by V9, Wound Physician/General Surgeon dated 5/8/23 documents R1 has "multiple raw areas" on the back and behind the thigh that are "still bleeding" and that R1 needs to have operation on R1's wounds with potential skin grafts to wounds.</p> <p>On 5/10/23 at 1:00pm, V8, Licensed Practical Nurse (LPN)/Case Manager stated V9, Wound Physician/General Surgeon had recommended R1 go to surgery for skin grafting to R1's wounds. V8 was unsure if wound cultures were obtained but that V8 observed R1's wounds and they had slough and appeared infected. V8 stated when R1 came back to the hospital on 5/3/23, R1's wounds smelled awful and "the worst V8 has ever seen."</p> <p>On 5/18/23 at 3:25pm, V2, Director of Nursing (DON) stated when R1 initially admitted to the facility on 4/7/23, R1 had fine mesh gauze impregnated with a blend of 3% Bismuth Tribromophenate and petrolatum to R1's wounds to R1's legs including R1's front left thigh, left posterior knee, left lower posterior leg and R1's right thigh. V2 stated those dressings were removed and replaced. V2 stated R1 could not tolerate facility staff holding R1's leg up to wrap, so V2 "tried to do (internet search engine) search" to find a dressing that would not stick to R1's wounds. V2 stated R1's leg wounds had</p>	S9999		
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S9999	<p>Continued From page 10</p> <p>some serosanguinous drainage but no odor and R1's wounds did not appear infected on 4/7/23. V2 stated, "normally don't change (wound dressings) for 3-5 days" but R1 did not have orders when R1 admitted to the facility and R1 did not have wound dressings to R1's back or any open areas. V2 stated V2 completed the assessment of R1's skin and R1 had wounds to the thigh, back of knee, but not R1's back. V2 stated V2 and an additional staff member who V2 was unable to identify "slightly turned" R1 over to get to R1's leg but that V2 did not complete a full skin assessment to R1's back. V2 stated R1 had orders for fine mesh gauze impregnated with a blend of 3% Bismuth Tribromophenate and petrolatum and that these orders were on R1's "paperwork." V2 stated R1's electronic Clinical Physician Orders should document the wound care orders but do not. V2 stated V2 thought V2 put in R1's orders related to wound care/dressing changes, but (V2) working pretty late. V2 confirmed R1's wound care/dressing change orders were not entered in to R1's electronic medical record. V2 stated, "looks like a partial skin assessment" was completed when R1 readmitted to the facility on 4/25/23, but no detailed wound assessment. V2 stated V2 documented R1 had open burn wounds and asked staff (unsure of names of staff) to go back and document what staff found because V2 "had other things to get done." V2 stated, "Apparently I did not do a thorough (skin) assessment (on 4/7/23) if (V2) didn't see the wounds on (R1's) back." V2 stated V2 does not see documentation nor is V2 aware of any wound dressing changes being completed to R1's back while R1 was a resident at the facility.</p> <p>The facility's Tracheostomy Care policy dated 3/29/2019 documents tracheostomy care should</p>	S9999		
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S9999	Continued From page 11 be performed once per shift or as often as required to maintain patency of airway and minimize risk of infection. This policy documents to remove old tracheostomy dressing, and to change a disposable inner cannula daily. This policy also documents to replace the drain sponge behind the tracheostomy plate if being used. (A)	S9999		
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