

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>IL6000780</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>05/18/2023</b>
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NAME OF PROVIDER OR SUPPLIER  <b>BEARDSTOWN HEALTH &amp; REHAB CTR</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>8306 ST LUKES DRIVE BEARDSTOWN, IL 62618</b>
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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  Annual Licensure and Certification Survey	S 000		
S9999	<p>Final Observations</p> <p>Statement of Licensure Violation: 300.1210b)4) 300.1210d)1)</p> <p>Section 300.1210 General Requirements for Nursing and Personal Care</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. Restorative measures shall include, at a minimum, the following procedures:</p> <p>4) All nursing personnel shall assist and encourage residents so that a resident's abilities in activities of daily living do not diminish unless circumstances of the individual's clinical condition demonstrate that diminution was unavoidable. This includes the resident's abilities to bathe, dress, and groom; transfer and ambulate; toilet; eat; and use speech, language, or other functional communication systems. A resident who is unable to carry out activities of daily living shall receive the services necessary to maintain good nutrition, grooming, and personal hygiene.</p> <p>d) Pursuant to subsection (a), general nursing care shall include, at a minimum, the</p>	S9999	<p><b>Attachment A</b> <b>Statement of Licensure Violations</b></p>	

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>following and shall be practiced on a 24-hour, seven-day-a-week basis:</p> <p>1) Medications, including oral, rectal, hypodermic, intravenous and intramuscular, shall be properly administered.</p> <p>These Regulations were not met as evidenced by:</p> <p>Based on observation, interview, and record review, the facility failed to provide pain management for one of three residents (R34) reviewed for pain management in the sample of 27. This failure resulted in R34 experiencing severe pain and Physical Therapy shortening therapy with R34 on 5/15/23.</p> <p>Findings include:</p> <p>The Facility Policy: Management of Pain dated 4/4/12, documents "Our mission is to facilitate resident independence, promote resident comfort and preserve resident dignity. The purpose of this policy is to accomplish that mission through an effective pain management program, providing our residents the means to receive necessary comfort, exercise greater independence, and enhance dignity and life involvement." "A standard format for assessing, monitoring, and documenting pain in both cognitively intact and cognitively impaired residents will be utilized. As part of a comprehensive approach to pain assessment and management, pain will be considered the "fifth" vital sign at the facility, along with temperature, pulse, respiration, and blood pressure. For the purpose of this policy, pain is defined as "whatever the experiencing person says it is, existing whenever the experiencing person says it does."</p>	S9999		
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S9999	<p>Continued From page 2</p> <p>On 05/15/23 11:30 AM, R34 was sitting in her wheelchair with a frown on her face. (R34) stated that she was having severe pain in her side and is supposed to be getting Norco (Hydrocodone-Acetaminophen oral tab 5-325 milligrams/mg), but the facility does not have it. R34 also stated "I know they have it (Norco) in a convenience box (C-Box), but they need authority to get in the box. I am hoping they will get it today but none so far. I have therapy every day, but I couldn't do it today because I hurt too bad. I was told it may be 8:00 PM before they get the medication. I took Tylenol earlier this morning, but it doesn't work as well as the Norco."</p> <p>On 5/15/23 at 11:35 AM, V3 (Licensed Practical Nurse) stated that V34's Norco was increased due to V34 having chronic pain. V34 ran out of the Norco last night (5/14/23). We asked V6 (R34's Primary Physician) to send an order to the pharmacy. Once the pharmacy gets the order, they will call us, and we can get the medication out of the Convenience Box.</p> <p>On 5/17/213 at 10:15 AM, V2 (Director of Nursing) stated that on 5/12/23 at 5:45 PM, R34's Norco order was changed from one tab to two tabs. The last Norco the facility had available for R34 was given to R34 on 5/15/23 at 12:15 AM. The facility policy is that the pharmacy must verify the order before we can pull it from the convenience box. There was Norco in the convenience box, but the facility was not allowed to take it from the C-Box without permission. The next time R34 got Norco was on 5/15/23 at 1:37 PM. V2 also stated "We should have contacted (V6/R34's Primary Physician) sooner to get the medication here so (R34) would not have had pain."</p>	S9999		
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S9999	<p>Continued From page 3</p> <p>On 5/17/23 at 11:35 AM, V4 (Therapy Manager) stated that R34 is getting therapy every day. On Monday 5/15/23, around 8:30 AM, R34 stated that she was in a lot of pain and did not know if she could do therapy. V5 (Physical Therapy) worked with R34 for a while on 5/15/23 but cut the session short because the resident was having pain. V5 told V3 that R34 was having pain.</p> <p>On 5/17/23 at 11:40 AM, V5 (Physical Therapy) stated that around 9:00 AM, on 5/15/23 R34 told V5 that she was having pain. V5 told V3 (Licensed Practical Nurse) that R34 was having pain and wanted pain medication. V3 told V5 that he had to get a script from V6 (R34's Primary Care Physician) for Norco for the pharmacy to allow him to remove the medication from the C-Box. R34 usually does 30 to 45 minutes of therapy but only did 25 minutes because of her pain. Around 11:00 AM, V5 went back to talk to V3 again to see if R34's pain medication was available. V3 stated that it could be as late as 8:00 PM, to get the Norco.</p> <p>On 5/18/23 at 10:45 AM, V1 (Administrator) stated that it takes a long time to get medication from the pharmacy or authorization to get in the C-Box if a resident runs out. When staff saw the medication was getting low the medication should have been ordered at that time instead of waiting until the last dose was given.</p> <p>R34's current Medical Record, documents R1 was admitted to the facility on 4/13/23 with diagnoses which included Aftercare following Joint Replacement, Presence of Right Artificial Hip Joint, Chronic Pain, Unilateral Primary Osteoarthritis (Right Hip), and Fibromyalgia.</p>	S9999		
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S9999	<p>Continued From page 4</p> <p>R34's Order Summary Report dated 5/17/23 at 9:50 AM, documents Hydrocodone-Acetaminophen Tablet 5-325 mg, give two tablets by mouth every six hours as needed for pain. 5/12/23 is the start date for the order.</p> <p>R34's Care Plan dated 4/24/23, documents R34 has chronic right hip pain, left knee pain and Diabetic neuropathy. Interventions: Administer analgesia as ordered. Give 30 minutes before treatment or care. Anticipate R34's need for pain relief and respond immediately to any complaint of pain.</p> <p>R34's Medication Administration Record dated 5/1/23 - 5/31/23 documents an order for Tylenol 325 mg, take 2 tablets by mouth every 4 hours as needed for pain. The Tylenol was given on 5/15/23 at 4:58 AM, and 12:15 PM with each pain level being a 10. An order for Hydrocodone-Acetaminophen Tablet 5-325 mg, give two tablets by mouth every six hours as needed for pain related to Fracture of Unspecified Part of Neck of Right Femur, Subsequent Encounter for Closed Fracture with Routine Healing. The Norco was given on 5/15/23 at 12:15 AM (pain level 10), then not given again until 1:37 PM on 5/15/23 (pain level 9).</p> <p>R34's Physical Therapy Progress Report dated 5/17/23 at 12:03 PM, documents that on 5/15/23, R34 was complaining of pain in her lower back during therapy treatment. Therapy was cut short, and nursing was notified.</p> <p>(B)</p>	S9999		
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