

Illinois Department of Public Health

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| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: IL6008163 | (X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____ | (X3) DATE SURVEY COMPLETED C 01/02/2024 |
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| NAME OF PROVIDER OR SUPPLIER ALLURE OF ZION | STREET ADDRESS, CITY, STATE, ZIP CODE 3615 16TH STREET ZION, IL 60099 |
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| S 000 | Initial Comments Compliant Investigation: 23110581/IL167986 | S 000 | | |
| S9999 | Final Observations Statement of Licensure Violations 1 of 2: 300.610a) 300.1210a) 300.1210b) 300.1210c) 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 a) Comprehensive Resident Care Plan. A facility, with the participation of the resident and the resident's guardian or representative, as applicable, must develop and implement a comprehensive care plan for each resident that includes measurable objectives and timetables to meet the resident's medical, nursing, and mental | S9999 | | |

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

TITLE

(X6) DATE
01/22/24

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| S9999 | <p>Continued From page 1</p> <p>and psychosocial needs that are identified in the resident's comprehensive assessment, which allow the resident to attain or maintain the highest practicable level of independent functioning, and provide for discharge planning to the least restrictive setting based on the resident's care needs. The assessment shall be developed with the active participation of the resident and the resident's guardian or representative, as applicable. (Section 3-202.2a of the Act)</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>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</p> | S9999 | | |

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| S9999 | <p>Continued From page 2</p> <p>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 Regulations are not met as evidenced by:</p> <p>Based on observation, interview, and record review, the facility failed to have pressure relieving devices in place and failed to perform ordered treatments for a resident with pressure injuries for one of three residents (R1) reviewed for pressure injuries in the sample of eight. This failure contributed to R1's worsening pressure injuries.</p> <p>The findings include:</p> <p>R1's Order Summary Report dated December 27, 2023, shows R1 was admitted to the facility on February 28, 2023, with diagnoses including anxiety disorder, urinary tract infection, and restlessness and agitation. Orders for "apply pressure relieving mattress on bed and pressure relieving cushion on chair every shift" and "float heels while in bed" were entered on February 28, 2023.</p> <p>R1's Pressure Injury Risk dated November 3, 2023; shows she is at risk for developing pressure injuries.</p> <p>R1's Care Plan initiated on May 1, 2023, shows ensure that pressure relieving boots are on resident at all times while in bed.</p> <p>R1's Wound Evaluation and Management Summary dated November 20, 2023, shows R1 had a Stage III pressure injury on her sacrum that measured 1.2 cm long by 0.5 cm wide and 0.3</p> | S9999 | | |

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| S9999 | <p>Continued From page 3</p> <p>cm deep and an unstageable deep tissue injury to her right heel that measured 2.0 cm long by 4.0 cm wide. Recommendations were to off load the wounds and float heels in bed. Treatment for R1's sacrum wound was alginate calcium with silver, gauze island dressing daily and skin prep to the peri wound daily. Treatment for R1's unstageable right heel wound was betadine apply once daily for 30 days.</p> <p>R1's Treatment Administration Record (TAR) dated November 1, 2023-November 30, 2023, shows R1 treatment to her sacrum was not documented as being done on November 24-26, 2023, and November 28, 2023. R1's TAR shows her treatment was not documented as being done on November 25-26, 2023, and November 28-30, 2023.</p> <p>R1's Wound Evaluation and Management Summary dated December 20, 2023, shows R1 has a stage IV pressure injury on her sacrum that measures 4.0 cm long by 2.5 cm wide and 0.3 cm deep. Treatment recommendations include alginate calcium with silver and gauze island with border dressing once daily and as needed. Off load wound. R1 has a stage III pressure injury to her right heel that measures 1.5 cm long by 3.0 cm wide, and 0.3 cm deep. Treatment recommendations for alginate calcium with silver, gauze roll, and skin prep daily and as needed. Off load wound, float heels in bed.</p> <p>On December 26, 2023, at 11:18 AM, R1 was sitting in her wheelchair. There was no cushion in R1's wheelchair. R1 said her buttocks hurt. R1 said she used to have a cushion in her wheelchair. At 2:00 PM, R1 was taken to the bathroom to be toileted. V10 CNA (Certified Nursing Assistant) said R1 got up in the</p> | S9999 | | |

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| S9999 | <p>Continued From page 4</p> <p>wheelchair before breakfast. There was no cushion in R1's wheelchair. R1's right heel did not have a gauze roll in place. On December 27, 2023, at 10:20 AM, R1 was laying in bed. R1's heels were directly on the mattress. There still was no gauze roll in place to R1's right heel. V9 CNA said she does not remember R1 having a wheelchair cushion.</p> <p>On December 28, 2023, at 1:02 PM, V1 Administrator said R1's wheelchair cushion needed to be clean and another one was not put in place while it was getting cleaned.</p> <p>The facility's Wound Treatment Management policy dated 2023 shows, "Wound treatments will be provided in accordance with physician orders, including the cleansing method, type of dressing, and frequency of dressing change. The facility will follow specific physician order for providing wound care, and treatments will be documented on the treatment administration record or in the electronic health record."</p> <p>The facility's Pressure Injury Prevention and Management policy dated February 2023 shows, "This facility is committed to the prevention of avoidable pressure injuries, unless clinically unavoidable, and to provide treatment and services to heal the pressure ulcer/injury, prevent infection and the development of additional pressure ulcers/injuries. The facility shall establish and utilize a systematic approach for pressure injury prevention and management, including prompt assessment and treatment; intervening to stabilize, reduce or remove underlying risk factors; monitoring the impact of the interventions; and modifying the interventions as appropriate. Evidence based interventions for prevention will be implemented for all resident</p> | S9999 | | |

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| S9999 | <p>Continued From page 5</p> <p>who are assessed at risk or who have a pressure injury present. Basic or routine care interventions could include but are not limited to: Redistribute pressure (such as repositioning, protecting and/or offloading heels, etc.) and provide appropriate, pressure redistributing, support surfaces."</p> <p>(A)</p> <p>Statement of Licensure Violations 2 of 2: 300.610a) 300.1210a) 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 and shall be reviewed at least annually by this committee, documented by written, signed and dated minutes of the meeting.</p> <p>Section 300.1210 General Requirements for Nursing and Personal Care</p> <p>a) Comprehensive Resident Care Plan. A facility, with the participation of the resident and the resident's guardian or representative, as applicable, must develop and implement a comprehensive care plan for each resident that includes measurable objectives and timetables to</p> | S9999 | | |

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| S9999 | <p>Continued From page 6</p> <p>meet the resident's medical, nursing, and mental and psychosocial needs that are identified in the resident's comprehensive assessment, which allow the resident to attain or maintain the highest practicable level of independent functioning, and provide for discharge planning to the least restrictive setting based on the resident's care needs. The assessment shall be developed with the active participation of the resident and the resident's guardian or representative, as applicable. (Section 3-202.2a of the Act)</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 Regulations are not met as evidenced by:</p> <p>Based on observation, interview, and record review the facility failed to ensure fall prevention interventions were in place and failed to supervise a resident with a history of falls for one of three</p> | S9999 | | |

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| S9999 | <p>Continued From page 7</p> <p>residents (R1) reviewed for safety/supervision in the sample of eight. This failure resulted in R1 experiencing a fall that required a local emergency room transfer and sutures to her head.</p> <p>The findings include:</p> <p>R1's Order Summary Report dated December 27, 2023, shows she was admitted to the facility on February 28, 2023, with diagnoses including history of falling, urinary tract infection, anxiety disorder, altered mental status, diabetic polyneuropathy, mood affective disorder, encephalopathy, and restlessness and agitation.</p> <p>R1's Fall Risk Evaluation dated November 27, 2023, shows R1 is at risk for falls, has had three or more falls in the past three months, is chair bound, has poor vision, and requires use of assistive devices.</p> <p>R1's Care Plan initiated March 14, 2023 shows R1 sustained a fall on March 13, 2023 while attempting to transfer from her wheel chair to the toilet unassisted, March 30, 2023 related to sliding out of the wheelchair, June 12, 2023 while attempting to transfer from the wheel chair to bed unassisted, September 20, 2023 while attempting to toilet herself unassisted, November 26, 2023 while trying to ambulate out of bed, and November 27, 2023 while trying to ambulate unassisted. Interventions/Tasks: Is at risk for falls due to history of falls and chronic ulcers of bilateral feet with necrosis of muscle. Resident has a history of not asking staff for assistance when needed and fall interventions are: provided 1:1 education on preventing additions falls that could result in serious injury, encourage to ask for assistance when help is needed. March 31,</p> | S9999 | | |

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| S9999 | <p>Continued From page 8</p> <p>2023-anti slip sheet placed under resident's wheelchair cushion.</p> <p>R1's Progress Notes dated December 19, 2023, at 11:28 AM and entered by V3 LPN (Licensed Practical Nurse) shows, [R1] went to her room by herself, advised her do not go to her bed, wait for the CNA (Certified Nursing Assistant). One PT (Physical Therapist) called that [R1] was on the floor. Called 911 at 9:55 AM.</p> <p>On December 27, 2023, at 11:10 AM, V3 LPN said R1 is alert but confused. V3 said R1 always screams for help. V3 said that R1 wanted to go to bed before her fall and V3 told R1 to stay near V3 while V3 finished passing out her morning medication pass. V3 said R1 wheeled herself to her room. V3 said she let V4 and V5 (both CNAs) know that R1 wanted to go to bed, but V4 and V5 were finishing up feeding residents. V3 said that V4 and V5 "were very busy" and she doesn't know if V4 or V5 went into R1's room prior to the fall. V3 said V6 Physical Therapist came and told V3 that R1 was on the floor. V3 went into R1's room and saw R1 on the floor laying on her right side and R1's head was on the ground. V3 said there was a lot of blood and called 911. V3 said R1 now has sutures in her head. V3 said that R1 has transferred herself in the past.</p> <p>On December 27, 2023, at 2:14 PM, V6 PT said he was walking past R1's room and saw her laying on the floor and immediately went and told V3.</p> <p>On December 27, 2023, at 1:50 PM, V4 CNA said he was helping another resident with a mechanical lift transfer with V5 CNA prior to R1's fall. V4 said right before they were getting ready to transfer the other resident, V3 LPN came into</p> | S9999 | | |

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| S9999 | <p>Continued From page 9</p> <p>the resident's room and said that R1 was on the floor. V4 said that R1 was laying near the foot of her bed. V4 said he remained with R1. V4 said that prior to the fall, R1 was asking for her daughter and was not oriented. V4 said that V3 mentioned to him to put R1 back to bed, but V4 said he let V3 know that he was working with another resident. V4 said that there was blood around R1's head which was on the floor. V4 and him and V5 were trying to help other residents prior to R1's fall, because other residents were waiting.</p> <p>On December 27, 2023, at 2:17 PM, V5 CNA said her and V4 were working on the hall together. V5 said it was busy with just the two of them. V5 said R1 fell after breakfast and after V4 and V5 finished gathering the breakfast trays. V5 said her and V4 were in another resident's room when the nurse came in and said that R1 was on the floor in her room. V5 said she followed V3 and V4 into R1's room and saw that R1 was on the floor with her right face and right shoulder on the ground. V5 said that R1 was bleeding. V5 said V3 asked her to take care of the other residents that had a call light on, so she left R1's room.</p> <p>R1's Emergency Room visit notes dated December 19, 2023, shows R1 was seen due to fall and blunt head trauma.</p> <p>R1's medical doctor progress note dated December 20, 2023, shows, fall yesterday trying to stand unassisted, resulting in scalp laceration and emergency room visit. She was noted to have bruising/selling/pain to right hand on return, unsure if this was evaluated in the emergency room. She has bilateral periorbital hematomas. Discontinue sutures at seven days.</p> | S9999 | | |

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| S9999 | <p>Continued From page 10</p> <p>On December 26, 2023, at 11:18 AM, R1 was observed sitting in her wheelchair in the dining room with other residents present, but no staff were present. There was no cushion or anti slip sheet in R1's wheelchair. R1 was calling out for help. R1 said her buttocks hurt. R1's entire face was covered in a yellow/blue color. R1 had a dressing intact to the middle of her forehead. R1 was trying to push against the table but was not able to. R1 was still yelling for help at 11:32 AM. At 11:39 AM, V10 CNA gave R1 some water to drink. At 12:29 PM, R1 was eating her lunch. No staff were present at this time.</p> <p>The facility's Fall Prevention Program dated October 2022 shows, "Each resident will be assessed for fall risk and will receive care and services in accordance with their individualized level of risk to minimize the likelihood of falls. Implement universal environmental interventions that decrease the risk of resident falling, implement routine rounding schedule, monitor for changes in resident's cognition, gait, ability to rise/sit, and balance. Each resident's risk factors, and environmental hazards will be evaluated when developing the resident's comprehensive plan of care."</p> <p>(A)</p> | S9999 | | |