

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: IL6003339	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 12/19/2023
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NAME OF PROVIDER OR SUPPLIER PEARL PAVILION	STREET ADDRESS, CITY, STATE, ZIP CODE 900 SOUTH KIWANIS DRIVE FREEPORT, IL 61032
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S 000	Initial Comments Annual Licensure and Certification Survey	S 000		
S9999	Final Observations Statement of Licensure Violations 1 of 3 300.610a) 300.610c)2) 300.1210a) 300.1210b) 300.1210d)3) 300.1620a) 300.1620e) 300.1630d) 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. c) The written policies shall include, at a minimum the following provisions: 2) Resident care services, including physician services, emergency services, personal care and nursing services, restorative services, activity services, pharmaceutical services, dietary	S9999	<p>Attachment A Statement of Licensure Violations</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>services, social services, clinical records, dental services, and diagnostic services (including laboratory and x-ray);</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 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>	S9999		

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S9999	Continued From page 2 3) Objective observations of changes in a resident's condition, including mental and emotional changes, as a means for analyzing and determining care required and the need for further medical evaluation and treatment shall be made by nursing staff and recorded in the resident's medical record. Section 300.1620 Compliance with Licensed Prescriber's Orders a) All medications shall be given only upon the written, facsimile, or electronic order of a licensed prescriber. The facsimile or electronic order of a licensed prescriber shall be authenticated by the licensed prescriber within 10 calendar days, in accordance with Section 300.1810. All orders shall have the handwritten signature (or unique identifier) of the licensed prescriber. (Rubber stamp signatures are not acceptable.) These medications shall be administered as ordered by the licensed prescriber and at the designated time. e) The resident's licensed prescriber shall be notified of medications about to be stopped so that the licensed prescriber may promptly renew such orders to avoid interruption of the resident's therapeutic regimen. 300.1630 Administration of Medication d) If, for any reason, a licensed prescriber's medication order cannot be followed, the licensed prescriber shall be notified as soon as is reasonable, depending upon the situation, and a notation made in the resident's record.	S9999		

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S9999	<p>Continued From page 3</p> <p>These REQUIREMENTS are NOT met as evidenced by:</p> <p>Based on observation, interview, and record review the facility failed to ensure a resident received pain medication as scheduled for 1 of 1 resident (R9) reviewed for pain in the sample of 20. This failure has resulted in R9 requesting further pain control on 7/18/23 while reporting pain at a level 10 on the pain scale and on 10/18/23 while reporting pain at a level of 8 on the pain scale.</p> <p>Findings include:</p> <p>R9's face sheet showed she was admitted to the facility on 8/7/23 with diagnoses to include Alzheimer's disease, palliative care, cerebrovascular disease, Type 2 diabetes, rheumatoid arthritis, major depressive disorder, age related osteoporosis without current pathological fracture, and anxiety disorder. R9's facility assessment dated 11/3/23 showed she has moderate cognitive impairment.</p> <p>R9's care plan initiated 5/3/21 showed, "Resident and family have opted for hospice via [hospice company] for diagnosis of weight loss and failure to thrive... Resident will be enabled to live to the limit of potential in physical, mental, emotional, and spiritual health and will be kept as comfortable and as pain free as possible... Keep resident comfortable and as pain free as possible. Monitor for symptoms of pain and/or distress (i.e. restlessness, grimaces, etc.) and anticipate and meet needs throughout the day. Provide medication as ordered for comfort..."</p> <p>R9's care plan initiated on 2/11/21 showed, "Resident is at increased risk for alteration in</p>	S9999		

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S9999	<p>Continued From page 4</p> <p>pain/discomfort related to compression fractures and Rheumatoid Arthritis. The resident will notify staff with onset of pain through next review... Notify MD for any new resident complaints of pain and or signs and symptoms of pain to obtain new order for medication regimen or break through pain management..."</p> <p>R9's care plan initiated 2/21/23 showed, "[R9] on hospice care related to terminal illness - alteration in comfort... Resident will have no observable indications of physical discomfort (moaning, restlessness, grimacing)... Provide cares per resident and/or family wishes to achieve acceptable level of comfort... Assess for pain and discomfort PRN. See Pain Care Plan..."</p> <p>R9's December 2023 POS (Physician Order Sheet) showed an order for Norco (Opioid Pain Medication) 5-325 mg, Give 1 tablet by mouth every 8 hours related to Rheumatoid Arthritis. The same POS showed an order for Fentanyl Transdermal Patch, Apply 1 patch transdermally every 72 hours..."</p> <p>R9's July 2023 eMAR (electronic Medication Administration Record) showed she did not receive any of her scheduled opioid pain medication on 7/26/23 (3 doses) and 7/27/23 (3 doses). R9 did not receive her 5:00 AM dose of Norco on 7/28/23. R9's eMAR notes showed the Norco was not available to be administered. This same eMAR showed R9 also did not receive her scheduled Fentanyl pain patch on 7/15/23, 7/18/23, and 7/24/23. R9's eMAR notes showed on 7/15/23 they were waiting for the physician to send the prescription to the pharmacy and the medication was not available for administration. R9's eMAR showed she received a dose of Morphine on 7/18/23 for pain she rated at a 10</p>	S9999			

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S9999	<p>Continued From page 5 out of 10 on the pain scale.</p> <p>R9's August 2023 eMAR showed she missed 2 doses of her Norco on 8/29/23. R9's eMAR notes showed the missed doses were due to the medication being "on order" and not available for administration.</p> <p>R9's September 2023 eMAR and Norco count sheet were reconciled to determine the number of doses R9 did not receive. The narcotic count sheet showed R9 ran out of Norco on 9/19/23 causing her to miss her scheduled dose at 9:00 PM. R9 missed all doses of her Norco from 9/20/23 through 9/23/23. (13 missed doses) R9's eMAR notes showed the Norco was "not available".</p> <p>R9's October 2023 eMAR and Norco count sheets were reconciled to determine the number of doses R9 did not receive. The narcotic count sheet showed R9 ran out of Norco on 10/13/23. R9 missed all doses of her Norco from 10/14/23 through 10/19/23 (24 missed doses). R9's eMAR notes showed the Norco was "on order". R9's same eMAR showed R9 did not receive her Fentanyl pain patch on 10/16/23, 10/19/23, 10/22/23, and 10/25/23. R9's narcotic count sheet for Fentanyl showed her last patch had been applied 10/13/23. R9's eMAR note showed her Fentanyl pain patch was "not available". R9's 10/18/23 eMAR note showed she requested Morphine for generalized pain. R9's eMAR showed she received a dose of Morphine on 10/18/23 when she reported pain at a level 8 out of 10 on the pain scale. Additionally, a 10/18/23 Mood/Behavior note was added for R9 that showed, "CNA (Certified Nursing Assistant) reported that patient was changed 14 times throughout the night. Patient repeatedly taking off</p>	S9999		

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S9999	<p>Continued From page 6</p> <p>brief without it being wet/soiled asking to be changed..."</p> <p>R9's December 2023 eMAR and Norco count sheets were reconciled to determine the number of doses R9 did not receive. The narcotic count sheet showed R9 ran out of Norco on 12/11/23. R9 missed all doses of her Norco from 12/12/23 through 12/13/23 (6 missed doses). R9's eMAR notes show a new prescription was needed.</p> <p>On 12/14/23 at 9:41 AM, V16 CNA said R9 complains about pain all the time. V16 said R9 has been complaining more recently and the aides report this to the nurses.</p> <p>On 12/14/23 at 12:45 PM, V12 RN (Registered Nurse) said, "I'm assuming it is [R9's] Rheumatoid Arthritis that is causing her pain. She has Norco and Fentanyl patches for pain treatment. The Norco came in today. Norco is given every 8 hours scheduled. It is not PRN (as needed). If I see that a medication is not here I call the pharmacy to find out if they need a new prescription, if they do need a new prescription, I call the doctor and ask them to send to the pharmacy. I let them know if we have none because I write "NONE" so they know that we don't have any. The pharmacy comes in one time a day early in the morning or you can STAT (rush) it if needed. There is a convenience box but if its a prescription issue we still can't get it."</p> <p>On 12/14/23 at 2:14 PM, V2 DON (Director of Nursing) said, "There was an order the other day that they changed it because we needed a prescription. So we had to go through hospice for that for the refills. We would have to reach out to see if there is something available that is comparable if we run out of medications. I haven't</p>	S9999		

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S9999	<p>Continued From page 7</p> <p>heard anything in terms of her complaining of pain. The nurse yesterday said she was reaching out to hospice to see if they could switch her Norco to PRN... If they are out, the nurses should reach out to hospice because hospice fills the scripts..."</p> <p>On 12/19/23 at 5:02 PM, V19 (Medical Director) said R9 could start experiencing withdrawal signs and symptoms within 6-12 hours of her missed dose of Norco or Fentanyl. V19 said R9 would present with agitation, restlessness, and increased pain. V16 said he would expect the facility to request refills and new prescriptions timely to ensure the resident does not run out of medications. V16 said if the facility nurses have difficulty getting the hospice physician to ensure prescriptions are called in and a resident is without their pain medications they would be able to contact him to call in a prescription.</p> <p>The facility's policy and procedure with review date of 11/2022 showed, "Pain Management and Assessment... Purpose: To develop a standardized method for assessing, monitoring, evaluating, and documenting pain in both cognitively intact and impaired residents. Resident will receive necessary comfort, exercise greater independence, and enhance dignity through optimizing their ability to perform activities of daily living... 2. Assess and document pain including onset and duration, location, severity, alleviating and aggravating factors, possible causes, and accompanying signs and symptoms... 3. Evaluate for behavioral responses to pain:... crying or moaning... increase in body movements... irritability/mental confusion... 7. Evaluation of the effectiveness of analgesic pain medication will be conducted post administration... 9. If pain is not relieved, give</p>	S9999		

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S9999	<p>Continued From page 8</p> <p>further medication as the physician ordered. If there are no orders, notify the physician of assessment results and obtain an order. 10. The resident's care plan will reflect the individualized pain management plan, including both pharmacological and non-pharmacological interventions.</p> <p>(B)</p> <p>Statement of Licensure Violations 2 of 3</p> <p>300.610a) 300.610c)2) 300.1010h) 300.1210a) 300.1210b) 300.1210d)2)3)5) 300.3220f)</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>c) The written policies shall include, at a minimum the following provisions:</p>	S9999		

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S9999	Continued From page 9 2) Resident care services, including physician services, emergency services, personal care and nursing services, restorative services, activity services, pharmaceutical services, dietary services, social services, clinical records, dental services, and diagnostic services (including laboratory and x-ray); Section 300.1010 Medical Care Policies h) 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, but not limited to, the presence of incipient or manifest decubitus ulcers or a weight loss or gain of five percent or more within a period of 30 days. The facility shall obtain and record the physician's plan of care for the care or treatment of such accident, injury or change in condition at the time of notification. 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 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	S9999			

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S9999	<p>Continued From page 10</p> <p>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>2) All treatments and procedures shall be administered as ordered by the physician.</p> <p>3) Objective observations of changes in a resident's condition, including mental and emotional changes, as a means for analyzing and determining care required and the need for further medical evaluation and treatment shall be made by nursing staff and recorded in the resident's medical record.</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</p>	S9999		

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S9999	<p>Continued From page 11</p> <p>services to promote healing, prevent infection, and prevent new pressure sores from developing.</p> <p>Section 300.3220 Medical Care</p> <p>f) All medical treatment and procedures shall be administered as ordered by a physician. All new physician orders shall be reviewed by the facility's director of nursing or charge nurse designee within 24 hours after such orders have been issued to assure facility compliance with such orders. (Section 2-104(b) of the Act)</p> <p>These REQUIREMENTS are NOT met as evidenced by:</p> <p>Based on observation, interview, and record review the facility failed to ensure a resident (R14) with congestive heart failure was weighed daily to monitor for fluid overload. The facility also failed to ensure a resident (R57) received wound care as ordered. These failures affect 2 of 6 residents (R14, R57) reviewed for quality of care in the sample of 20. This failure resulted in R14's increased weights not being reported to the physician and R14 requiring hospitalization from 11/20/23 through 11/24/23.</p> <p>Findings include:</p> <p>1. R14's face sheet showed he was admitted to the facility on 6/15/22 with diagnoses to include chronic obstructive pulmonary disease with acute exacerbation, hypertensive heart and chronic kidney disease with heart failure and stage 1 through stage 4 chronic kidney disease, acute on chronic diastolic (congestive) heart failure, acute and chronic respiratory failure with hypoxia,</p>	S9999		

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S9999	<p>Continued From page 12</p> <p>chronic kidney disease, secondary hyperparathyroidism, morbid obesity, Type 2 Diabetes, anemia in chronic kidney disease, acquired absence of right leg below knee, acquired absence of left leg above knee, major depressive disorder, and anxiety disorder. R14's facility assessment dated 12/7/23 showed he has no cognitive impairment.</p> <p>On 12/11/23 at 9:45 AM, R14 was in his room and sitting in his wheelchair. R14 stated he does not get the care he needs at the facility. R14 said, "I am supposed to be weighed daily for congestive heart failure and kidney failure because I retain fluid. I end up in the hospital about once a month almost. Today they took me down to weigh me and the batteries in the scale were dead so I was sitting there waiting for them to find the batteries and I had to have them bring me back to my room because it was taking too long for me to do down there without my oxygen on. I keep my own list of my weights so you can see I wasn't weighed 12/5-12/9 and I was not weighed 12/10 or 12/11 and today now I'm still waiting. I don't know what they are writing down but these are my weights. I'm getting myself up and into bed and I get really really winded, that is when I know that I need to go to the hospital. I've been in the hospital probably 6 or more times this year."</p> <p>R14's care plan initiated 10/24/23 showed, "The resident demonstrates a potential for fluid overload related to:... Daily weight... Administer medication per physician's orders, Assess for signs and symptoms of fluid overload and notify the physician if signs and symptoms of fluid overload are present: edema... adventitious lung sounds... Observe, assess and record signs of edema. Report changes, new edema to</p>	S9999			

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S9999	<p>Continued From page 13</p> <p>physician..." R14's care plan initiated 10/24/23 showed, "The resident presents with altered respiratory function secondary to: ... Observe and report signs of congestions, lethargy, labored breathing, wheezing, etc... Notify the physician as needed..."</p> <p>R14's October and November 2023 eMAR (electronic Medication Administration Record) showed an order for "Lasix Oral Tablet 40 mg (milligrams).. Give one tablet by mouth every 24 hours as needed for weight gain greater than 3 lbs (pounds) in a 24 hour period..."</p> <p>R14's 10/26/23 weight was 277 lbs and his 10/27/23 weight was 282 lbs showing a 5 lb weight gain in 24 hours. R14's October 2023 eMAR showed no dose of Lasix 40 mg administered as a result of that 5 lb weight gain.</p> <p>R14's October and November 2023 eMAR (electronic Medication Administration Record) showed an order for "CHF (congestive heart failure) - weight daily - if weight gain of 2 lbs or more notify MD (physician)..."</p> <p>R14's documented weights showed his 11/8 weight was 269.9 and his 11/9 weight was 272 (2.1 lb weight gain). R14's 11/9/23 nursing progress note showed, "... stated he feels like he is gaining, refuses 911 transport for evaluation, resident alert and orientated x 4..." This note does not show physician notification made of resident 2.1 lb weight gain and report of feeling like he is gaining weight. R14's 11/9/23 Skin/Wound Note showed, "... swelling of hands noted. Floor nurse notified."</p> <p>R14's eMAR showed R14's 11/10 weight was 267.2 and his 11/11 weight was 273.2. (6 lb</p>	S9999		

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S9999	<p>Continued From page 14</p> <p>weight gain) R14's medical record showed no evidence of notification to the physician regarding the 6 lb weight gain identified on 11/11/23. R14's November 2023 eMAR showed no evidence of Lasix given in response to this 6 lb weight gain.</p> <p>R14's 11/17 weight was 258 lbs and his 11/18 weight was 274 lbs (16 lb weight gain). R14's medical record showed no evidence of notification to the physician regarding the 16 lb weight gain identified on 11/18/23. R14's November 2023 eMAR showed no evidence of Lasix given in response to his 16 lb weight gain.</p> <p>R14's 11/20/23 nursing progress note entered at 9:16 PM showed, "Patient requested to be sent to ER (emergency room) for SOB (shortness of breath). Doctor and POA (power of attorney) was notified. [Ambulance Service] was provided for transport to [acute care hospital]..." R14's 11/24/23 nursing progress note entered at 3:36 PM showed R14 was readmitted from the acute care hospital.</p> <p>R14's Nurse Practitioner Note dated 12/1/23 showed, "... His most recent hospitalization was from 11/20/23 through 11/24/23. He presented to the emergency department with worsening shortness of breath x 2 days. Also reported a cough with increased congestion and sputum production.... O2 sat (saturation) 78. He was started on IV furosemide (diuretic), scheduled nebulizer treatments, prednisone (steroid), doxycycline (antibiotic). Nephrology was consulted and recommended continued diuresis without need for dialysis at that time. His weight at the time of discharge was 272 pounds... He was discharged back to the SNF (Skilled Nursing Facility)... Weight 11/28/23 263.7 lbs...."</p>	S9999		

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S9999	<p>Continued From page 15</p> <p>On 12/14/23 at 12:55 PM, V12 RN (Registered Nurse) said weights are documented on the eMAR and those flow over to the weights and vitals in each resident record. V12 said once entered they have to verify if he has had a two lb weight gain. If he has had 2 lb or more weight gain, we contact the doctor for his congestive heart failure. Physician notification gets documented in the progress notes. If [R14] has an increase in weight he could be having too much fluid building up on him. We monitor his weights to monitor his CHF."</p> <p>On 12/14/23 at 1:13 PM, V2 DON (Director of Nursing) said R14 is a daily weight to monitor his congestive heart failure. V2 said, "In fact, he had came back to us not too long ago from a hospitalization. He still is a daily weight, came back 11/25. Monitoring for weight gain for fluid. He builds up with edema, he has been educated often to elevate extremities, and he does not lay down during the day, he sits up in his chair during the day. If there is a weight gain of 2 lbs or more the nurses contact the physician. Notification to the physician should be documented in the progress notes and also depending on if faxed over or called. If faxed it is under the misc scanned in."</p> <p>On 12/19/23 at 5:02 PM, V16 (Medical Director) said he is not very familiar with R14 but that he would expect daily weights to be completed as ordered for CHF (congestive heart failure) residents. V16 said the physician should be notified of weight of changes as ordered as well. V16 said increased weight would be an indicator of increased fluid.</p> <p>A policy and procedure for care of a resident with congestive heart failure and daily weights was</p>	S9999		

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S9999	<p>Continued From page 16</p> <p>requested. On 12/14/23 at 11:30 AM, V1 (Administrator) stated the facility has no policies addressing either congestive heart failure or daily weights but that the nurses are to follow physician orders as written.</p> <p>2. R57's Admission Record showed and original admission date of 9/22/23 with diagnoses to include cellulitis (skin infection) of left lower limb, sepsis (blood infection), diabetes, and obesity.</p> <p>R57's 9/29/23 Admission Minimum Data Set showed moderate cognitive impairment with a brief interview for mental status (BIMS) score of 10 out of 15.</p> <p>On 12/12/23 at 2:24 PM, R57 was alert and oriented to person, place, time, and medical condition. R57 stated he had sepsis from right leg wound. R57 stated he had a wound to his left leg that requires daily treatment. R57 stated the facility is known to not perform the dressing changes daily. R57 stated the dressing had not been changed on 12/11/23 or 12/10/23.</p> <p>R57's November and December 2023 Treatment Administration Record (TAR) showed an order for daily left knee wound care to include an antibacterial wound treatment. The treatment began on 11/8/23 and was discontinued on 12/13/23. During this time, 8 treatments to the left knee were not documented as being completed out of a total possible 36 treatments (22 percent of R57's treatments were not documented as being done; 12/11/23 treatment was not documented as being done.)</p> <p>On 12/13/23 at 4:29 PM, V2 Director of Nursing stated the purpose of wound care is "to promote healing, treat the condition, and it can help</p>	S9999		

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S9999	<p>Continued From page 17</p> <p>prevent infection. When a nurse does a treatment it should be documented in the treatment record or a progress note. It's possible that it wasn't done if it's not documented. You could also talk to the patient and see if the treatment had been done. He should be having daily dressing changes."</p> <p>The facility's Dressing Non-Sterile policy (revised 2/17/20) showed the purpose of wound care is "To protect open wounds from contamination and to absorb drainage." The policy states, following wound care, to "Initial Treatment Administration Record electronically..."</p> <p>(A)</p> <p>Statement of Licensure Violations 3 of 3</p> <p>300.615c)</p> <p>Section 300.615 Determination of Need Screening and Request for Resident Criminal History Record Information</p> <p>c) Any person who seeks to become eligible for medical assistance from the Medical Assistance program under the Illinois Public Aid Code to pay for long-term care services while residing in a facility shall be screened in accordance with 89 Ill. Adm. Code 140.642(b)(4). (Section 2-201.5(a) of the Act)</p> <p>These REQUIREMENTS are NOT met as evidenced by:</p> <p>Based on interview and record review the facility</p>	S9999		

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S9999	<p>Continued From page 18</p> <p>failed to initiate criminal background checks within 24 hours of admission to the facility for 3 of 3 residents (R166, R265, R266) reviewed for identified offenders.</p> <p>Findings include:</p> <p>On 12/14/23 at 4:20 PM - V8 (Social Services) said, We run background checks before the residents are in the facility. It's done during the referral process. Once they are in the door we get the CHIRP (Criminal History Information Response Process) done. Staff at another of the company's facilities runs the CHIRP for us because she has the login for the company. If there is a hit on the CHIRP then we get the fingerprints started for the resident. We usually run them on the day of admission but we have 48-72 hours to run them once they are in the facility.</p> <p>The facility's records for R166, R265, and R266 show:</p> <p>R166 was admitted on 12/7/23 and her background check was initiated on 12/13/23. R265 was admitted on 11/25/23 and her background check was initiated on 11/27/23. R266 was admitted on 12/5/23 and his background check was initiated on 12/11/23.</p> <p>The facility's undated Identified offender policy and procedure Policy Statement shows it is the policy of this facility to establish a resident sensitive and resident secure environment. In accordance with the provisions of the Nursing Home Care Act, this facility shall check the criminal history background on any resident seeking admission to the facility in order to identify previous criminal convictions. 3. Conduct</p>	S9999		

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S9999	<p>Continued From page 19</p> <p>a Criminal History Background Check: Within 24 of admission, request a name based uniform conviction information act (UCIA) criminal history background check based on name, date of birth and other identifiers required by the Department of State Police for any resident seeking admission to the facility ...</p> <p>(C)</p>	S9999		