

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>IL6008825</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>C</b> <b>08/01/2024</b>
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NAME OF PROVIDER OR SUPPLIER  <b>WARREN BARR SOUTH LOOP</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>1725 SOUTH WABASH CHICAGO, IL 60616</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  Complaint Investigation:  2485892/IL176053	S 000		
S9999	Final Observations  Statement of Licensure Violations:  300.690a) 300.690b) 300.690c)  Section 300.69 Incidents and Accidents  a) The facility shall maintain a file of all written reports of each incident and accident affecting a resident that is not the expected outcome of a resident's condition or disease process. A descriptive summary of each incident or accident affecting a resident shall also be recorded in the progress notes or nurse's notes of that resident.  b) The facility shall notify the Department of any serious incident or accident. For purposes of this Section, "serious" means any incident or accident that causes physical harm or injury to a resident.  c) The facility shall, by fax or phone, notify the Regional Office within 24 hours after each reportable incident or accident. If a reportable incident or accident results in the death of a resident, the facility shall, after contacting local law enforcement pursuant to Section 300.695, notify the Regional Office by phone only. For the purposes of this Section, "notify the Regional Office by phone only" means talk with a	S9999		

Illinois Department of Public Health  
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE  
Electronically Signed

TITLE

(X6) DATE  
08/19/24

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S9999	<p>Continued From page 1</p> <p>Department representative who confirms over the phone that the requirement to notify the Regional Office by phone has been met. If the facility is unable to contact the Regional Office, it shall notify the Department's toll-free complaint registry hotline. The facility shall send a narrative summary of each reportable accident or incident to the Department within seven days after the occurrence.</p> <p>These Requirements were NOT MET as evidenced by:</p> <p>Based on observation, interview and record review, the facility failed to maintain a file for a serious injury, failed to notify the Department of a serious injury and failed to notify the Regional Office within 24 hours after a serious injury for one of three residents (R11) reviewed for injury of unknown origin.</p> <p>Findings include:</p> <p>On 7/30/24 at 11:41am, R 11 was observed lying in bed, on his back, with a soft cast placed on R11's left hand, and with the 2 upper bed rails secured in up position. R11 stated, "I broke my left finger because I hit it on the rail (R11 pointed to the right upper bedrail that was secured in the up position). Man did it hurt! I called the nurse, and they sent me to the hospital. That's how I got this cast on my hand. I cannot believe I broke my finger on this rail."</p> <p>R11's progress note by V15 (Assistant Director of Nursing/ADON), dated 7/16/24 at 11:31am, documents, in part, " Late Entry: Note Text: Writer was notified by nurse on duty or/around 11:30 am that resident's left hand was swollen. When asked by writer and NOD (nurse on duty) what</p>	S9999		

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S9999	<p>Continued From page 2</p> <p>had happened to resident's hand, resident verbalized "I hit my hand on the bed.""</p> <p>R11's Left Hand X-Ray, dated 7/17/24, documents, in part, "Acute comminuted fracture in the middle phalanx of the second digit."</p> <p>On 7/31/24 at 10:00am, when asked how R11 fractured his finger, V2 (Director of Nursing/DON) replied, "(R11) stated to the ADON (Assistant Director of Nursing), primary physician and the NP (Nurse Practitioner) that he bumped it on the bed rail when he was repositioning himself." When asked if R11's fractured finger was a serious injury, V2 replied, "Yes, a fracture is a serious injury." When asked if R11's fractured finger was reported to IDPH (Illinois Department of Public Health), V2 replied, "No, I (V2) should have reported it. It won't happen again. We don't have a file for this injury because I didn't report it."</p> <p>On 7/31/24 at 10:48am, V15 (Assistant Director of Nursing/ADON) stated, "I was working the day R11's left finger was injured. I got a call from the nurse around noon to come check R11's hand because it was swollen. I checked R11's hand and it was swollen. I asked R11 what happened and R11 pointed to the upper bed rail. I notified the NP (Nurse Practitioner) and physician because he was rounding at the time, and he ordered an x-ray. The x-ray showed R11 had fractured it." When asked if R11's fractured finger is a serious injury, V15 replied, "Absolutely it's a serious injury."</p> <p>On 7/31/2024 at 12:37pm, V19 (Medical Director) stated, "I saw him (R11) the day he notified us about his finger. R11's finger was swollen. I saw him (R11) and sent him for an x-ray. The x-ray showed a fracture. Any fracture has some of level</p>	S9999		

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S9999	<p>Continued From page 3 of seriousness."</p> <p>On 7/30/2024, this surveyor reviewed the facility's Reportables from 7/3/2024 through 7/28/24. There was no reportable found for R11's serious injury that occurred on 7/16/24.</p> <p>Facility presented document titled, "Fracture," undated, which lists the residents with fractures in the facility and R11's name is listed.</p> <p>Facility policy titled, "Incident Reporting," documents, in part, "Section 300.690 (c) of the Skilled Nursing and Intermediate Care Facilities Code indicates that the facility shall, by fax or phone, notify the Regional Office within 24 hours after each reportable incident or accident. It is the policy of the facility to ensure that all reportable incidents as stipulated in the Section 300.690 state regulations, are reported to the state agency. Any serious injury sustained by a resident that is not an expected outcome of the disease process will be reported to IDPH (Illinois Department of Public Health) Regional Office. Physical harm includes a fracture... The facility shall send a narrative summary of each reportable accident or incident to the Department within seven days after the occurrence."</p> <p>Facility job description titled, "Director of Nursing," dated 12/01/2019, documents, in part, "Ensures the nursing department is in compliance with federal, state, and local regulations. Develop, implement, and update department policy and procedures when necessary or as directed."</p> <p>(C)</p>	S9999		