STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	IL6016950	A. BUILDING: _____ B. WING _____	C 07/23/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
ALDEN ESTATES CTS OF HUNTLEY	12140 REGENCY PARKWAY HUNTLEY, IL 60142

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S 000	Initial Comments Facility Reported Incident Investigation of 6-11-24/IL174872	S 000		
S9999	Final Observations Statement of Licensure Violations: 300.1210a) 300.1210b) 300.1210c) 300.1210d)6) 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 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) 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	S9999		

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S9999	Continued From page 1	S9999		

care and personal care shall be provided to each resident to meet the total nursing and personal care needs of the resident.

c) Each direct care-giving staff shall review and be knowledgeable about his or her residents' respective resident care plan.

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:

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.

These requirements were not met as evidenced by:

Based on observation, interview, and record review the facility failed to stop providing ADL-Activity of Daily Living care to prevent a fall when a resident exhibited known dementia related behaviors on a memory care unit for 1 of 5 residents (R1) reviewed for falls in the sample of 5.

This resulted in R1 fracturing her left hip and losing the ability to ambulate independently.

The findings include:

On 07/22/2024 at 11:50AM, R1 was lying in bed. R1 was calling out and complaining of pain.

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R1's current Care Plan on 07/22/2024 shows, multiple diagnosis including Wandering Diseases, Dementia, Behavioral Disturbance, Parkinson's, Anxiety Disorder, and Alzheimer's.

On 07/22/24 at 11:58AM, V7 RN-Registered Nurse said, R1 was in the wheelchair with family this morning. R1 started crying, complaining of left hip pain, she then requested to go back to bed. R1 transfers with extensive one person assists. R1 is using a wheelchair that the staff must propel. Prior to R1's fall she was able to ambulate with a walker. R1 only needed verbal cues to remember to use her walker.

On 07/22/24 at 12:14PM, V5 CNA-Certified Nursing Assistant said, I provided R1 with a shower on the day the resident fell. I put R1's shoes on. R1 became anxious and wanted to get out. R1 stood up as I was trying to finish. The back part of R1's shoe was folded over. I tried to get R1 to sit down so I could fix it, she wanted to leave. As I fixed the back of her shoe she stepped away and fell onto the floor. R1 did not have her walker when she fell. After R1 fell, I pulled the call light for help. The other CNA and the Nurse helped me.

On 07/22/2024 at 12:38PM, V4 R1's POA said, I do not know why they did not have her sit down before messing with her shoe. That contributed to her fall. R1 was able to walk before the fall; she is not able to walk now. Therapy says she has too much pain for rehabilitation.

On 07/22/24 at 2:46PM, V4 Restorative Nurse said, R1 is currently a two persons assist. R1 no longer initiates movement on her own. R1 will not get out of bed independently which is what she did prior to her falling. The new intervention to

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reduce the risk of falls for R1 is to ensure her shoes are on properly.

On 07/22/24 at 3:25PM, V6 R1's Primary Physician said, after the fall R1 was sent to the hospital. Imaging shows a femur fracture post fall. R1 received surgical intervention to repair the fracture.

On 07/23/24 at 11:30AM, V2 DON-Director of Nursing said, it is an expectation the CNA's know the resident's fall risk and precautions. R1 has a history of impulsive behavior. The CNA was adjusting R1's footwear and R1 fell. R1 is a Memory Care Dementia resident. The CNA was familiar with resident. R1 was independent. We have had conversations with V5 CNA and explained the need to have the resident sit down to adjust shoes.

R1's Fall Risk Assessment dated 04/05/2024 shows, At Risk for falls.

R1's Care Plan shows, At risk for falls initiated 03/21/23. Encourage appropriate use of walker. Monitor for changes in ability to navigate the environment. Provide proper, well-maintained footwear.

R1's Fall Investigation Report dated 06/11/2024 at 2:20PM, shows, Notes: dated 06/19/2024 shows, R1 has a history of Parkinson's disease, Alzheimer's disease, Anxiety, and Wandering disease. Resident is impulsive. On 06/11/2024 at 2:20PM, nurse noted resident with clothes on, One Shoe Off, lying on her left lateral side. New Intervention-CNA to ensure shoes on properly prior to resident walking.

(A)

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