

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>IL6012678</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>C</b> <b>07/31/2024</b>
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NAME OF PROVIDER OR SUPPLIER  <b>ASCENSION VILLA FRANCISCAN</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>210 NORTH SPRINGFIELD AVENUE JOLIET, IL 60435</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  Investigatiuon of Facility Reported Incident of 06-23-2024/IL 175146	S 000		
S9999	Final Observations  Statement of Licensure Violations: 300.610a) 300.1210b) 300.1210d)6)  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  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.	S9999		

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

TITLE

(X6) DATE  
08/23/24

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S9999	<p>Continued From page 1</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 interview and record review, the facility failed to provide a safe transfer with a mechanical lift for 1 resident (R1). This failure resulted in R1 falling off the side of her bed and obtaining an 8cm (centimeter) laceration to her head requiring 15 staples.</p> <p>The findings include:</p> <p>R1's electronic face sheet printed on 7/31/24 showed R1 has diagnoses including but not limited to lymphedema, repeated falls, hypertension, cognitive impairment, and morbid obesity.</p> <p>R1's facility assessment dated 6/4/24 showed R1 has severe cognitive impairment and requires substantial/maximum assistance with transfers.</p> <p>R1's care plan dated 12/29/21 showed, "Risk for falls and/or fall related injury related to decreased mobility, recent acute medical condition...keep within visibility of staff when up in chair, high risk for falls identifier in place."</p>	S9999		

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S9999	<p>Continued From page 2</p> <p>R1's fall risk assessment dated 6/23/24 showed R1 is a significant fall risk.</p> <p>R1's local hospital record dated 6/23/24 showed, "Patient presents to the emergency department after sustaining a witnessed fall at her nursing home. She is unable to answer questions appropriately due to baseline cognitive deficit. Fall was witnessed and observed to have no loss of consciousness however did sustain a wound to her head which is bleeding...there is an approximate 8cm laceration to the superior portion of the scalp running in a sagittal plane on the right side of the head. Procedure: laceration repair...location: scalp length: 8cm, staples: 15."</p> <p>On 7/30/24 at 10:17AM, R7 (R1's roommate) stated, "I heard (R1) fall. The CNA (certified nursing assistant) was putting her in bed, and I think when the CNA backed the lift away, (R1) fell and it sounded like (R1) hit the dresser and then the floor. She was in the corner crying and reached out her hand to me when I came around the curtain to see if she was ok. Her hand was all bloody and she was holding her head, so I knew something bad happened. There was no other CNA in the room except for the one girl."</p> <p>On 7/30/24 at 12:31PM, V4 and V6 (CNAs) stated, "When we transfer residents using the sit to stand machine, it is always a 2-person transfer. It has always been that way here as far as we know. (R1) is not safe at all to be sitting on her own on the edge of the bed. That's why you have to have 2 people with the transfer, while 1 person is removing the lift, 1 person can stay with the resident to be sure they don't fall."</p> <p>On 7/31/24 at 9:23AM, V5 (CNA) stated, "I took (R1) to her room to lay down and when I got her</p>	S9999		

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S9999	<p>Continued From page 3</p> <p>up in the machine and over to the bed, I set her down on the bed and when I was removing the lift, she fell forward. She hit her head on the table by her bed and then hit her head on the floor. I immediately went and got the nurse to assess her. I removed the lift in a manner where the lift was in front of me, and I was behind it and too far from (R1) to even be able to try to save her from falling because the lift was between us."</p> <p>On 7/31/24 at 1:31PM, V10 (R1's nurse practitioner) stated, "(R1) is generally weak and not good at following directions due to her severe cognitive impairment. I guess this would have been an avoidable incident and 2 staff members probably should have been with her."</p> <p>On 7/31/24 at 1:50PM, V2 (Director of Nursing) stated, "Prior to this incident, my expectation was for 2 staff to perform a sit to stand transfer as this is our policy. (V5) hasn't worked here that long, less than 3 months but she still should know the expectations. This incident could have been avoided if (V5) had another staff person with her who could have ensured (R1) was safe on the bed while (V5) backed the lift away from (R1)."</p> <p>The facility's policy titled, "Procedure: Lifting Machine, Using a Portable" dated 12/2017 showed, "The purpose of this procedure is to help lift residents using a manual lifting device. General guidelines: Two nursing associates are required to perform this procedure. Procedure for sit to stand: I. Crank (or raise) the resident up with the lift. Your helper guides the resident by holding the sling. J. Swing the frame of the lift over the bed and slowly lower the resident down onto the bed. K. remove the sling and waist belt from under/behind the resident. L. Reposition the bed covers. Position the resident in a comfortable</p>	S9999		

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S9999	Continued From page 4  position that promotes good body alignment...N. Remain with the resident until he or she is comfortable and free from any adverse effects from the transfer...P. Remove the equipment and supplies from the room."  (A)	S9999		