

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: IL6004311	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED C 03/04/2024
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NAME OF PROVIDER OR SUPPLIER ARC AT STREATOR	STREET ADDRESS, CITY, STATE, ZIP CODE 1525 EAST MAIN STREET STREATOR, IL 61364
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S 000	Initial Comments Complaint Investigation: 2421230/IL169785	S 000		
S9999	Final Observations Statement of Licensure Violations: 300.1210a) 300.1210b)5) 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 care and personal care shall be provided to each resident to meet the total nursing and personal	S9999		

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

TITLE

(X6) DATE

Electronically Signed

03/19/24

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S9999	<p>Continued From page 1</p> <p>care needs of the resident.</p> <p>5) All nursing personnel shall assist and encourage residents with ambulation and safe transfer activities as often as necessary in an effort to help them retain or maintain their highest practicable level of functioning.</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>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>This REQUIREMENT is not met as evidenced by:</p> <p>Based on interview and record review the facility failed to ensure that a resident was assisted to the bathroom in a safe manner. This failure resulted in R2's legs giving out, requiring her to be lowered to the floor by staff and resulting in a right closed displaced spiral distal femoral shaft fracture on 1/14/24. This applies to 1 of 4 residents (R2) reviewed for safety in a sample of 4.</p> <p>The findings include:</p> <p>R2's Incident Report dated 1/14/24 at 6:40 AM states, "Aide came to this nurse with report that</p>	S9999		

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S9999	<p>Continued From page 2</p> <p>while walking resident to the restroom- she stated legs/knees were giving out- aide stated she lowered resident to the floor. Upon my visual- resident lying in restroom on the floor, right side. Denies any new injury/pain. Does complain of pain to right shoulder and hip, which resident has frequently. No visual new injury. Stated her legs were giving out and the aide lowered her to the floor. "</p> <p>R2's Progress Notes dated 1/14/24 state, "9:23 AM, Resident lying in bed on left side complaining of extreme pain to right leg. Resident requesting repositioning but crying out in pain when assisted. Resident unable to sit up in bed with assistance. Some swelling noted to right femur, no redness or bruising... Orders given for stat X-rays to Right hip and pelvis and Right femur. (Portable) X-ray called. Tech is delayed due to weather conditions but will call when closer."</p> <p>11:27 AM Resident requested to go to hospital due to extreme pain without relief. POA notified and consented to transfer resident to hospital via ambulance. Ambulance called. EMTs transporting resident to hospital at approximately 11:20 AM.</p> <p>3:02 PM- Resident being transferred to (Larger local hospital) d/t non-displaced spiral fracture to shaft of right femur.</p> <p>On 3/4/24 at 9:55 AM R2 was sitting in her recliner in her room. R2 appeared clean and well groomed. R2 was alert and pleasant and somewhat sarcastic. R2 stated, " I can walk with the walker, but I have to have help. I have to call them. I am just following the rules. My leg gets tired more easily now." R2 was asked how she fell on 1/14/24. R2 stated, "I had just finished scrubbing in the bathroom and I came out and I went down real easy. It wasn't like a big fall or a big hurt or anything. The x-ray showed the</p>	S9999		

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S9999	<p>Continued From page 3</p> <p>fracture of my leg. I didn't have surgery or anything. I don't remember if I was in the hospital or not. I'm okay now."</p> <p>On 3/4/24 at 10:55 AM V4 (Certified Nursing Assistant/CNA) stated, "(R2) had her slipper socks on and I used a gait belt. As we were walking from the bed to the bathroom, she said her legs felt weak and I told her 'a couple more steps' and then she started to go down. I went down first, and my leg hit the floor before she did. I lowered her to the floor. I asked her if she was ok, and she said she was and then I ran to get the nurse. When we moved her to try to get her up, she complained of pain to her right leg and was not able to roll over to her other side. We used a (mechanical lift) to get her off the floor and she was crying in a lot of pain. Then I heard that she went out and I thought it is just not possible with the way I put her on the floor. "</p> <p>R2's Orthopedic Consultation Note dated 1/14/24 states, "Admitting Diagnosis: Trauma. Assessment: Right closed displaced spiral distal femoral shaft fracture. Recommendations: The patient and her POA (Power of Attorney) do consent to orthopedic treatment that will consist of right femur retrograde intramedullary nail fixation with possible open reduction internal fixation...."</p> <p>On 3/4/24 at 3:16 PM V10 (Registered Nurse at Ortho Clinic) stated, "V7 (R2's Orthopedic MD) is a locum and he does not work out of this office- he just takes call for us. I know on 1/16/24, V2 (Director of Nurses/DON) from (facility), called here and spoke to our PA (Physician's Assistant). So, I can read you the note from that call. (V2) was claiming that the mechanism of the fall could not have resulted in the type of injury that (R2)</p>	S9999		
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S9999	<p>Continued From page 4</p> <p>had. So, the PA spoke to V7, and this is the note she wrote that says that V7 said that the spiral fracture is from trauma and not pathological in nature."</p> <p>A document dated 1/16/24 that V10 faxed to Surveyor from the Orthopedic Office reads, "I (PA) spoke with (V7) about this patient and received advice. Upon his consultation on 1/14/24, history obtained by the ED (Emergency Department) was that (R2) had experienced an unwitnessed fall, the patient was a poor historian. He also said that patient's family was unsure of mechanism of injury since the incident was unwitnessed. Her injury could have been due to a twist-and-fall, leading to a spiral fracture pattern. Osteopenic bone can fracture this way with a twisting injury. There is no concern for pathologic origin of the femur fracture."</p> <p>On 3/4/24 at 1:15 PM V6 (Director of Therapy) stated, "(R2) has been here a long time. Before the fall the last time, we worked with her was in October. She had had a general decline and we picked her up again in therapy. At that time, she required a sit to stand. In therapy she would participate well but she was not consistent enough to release her to pivot transfer with nursing. So, she needed to be a sit to stand with nursing. On October 25 she could ambulate 10 ft, but she was not consistent enough for us to release her to nursing for them to ambulate with her. She still required the use of the sit to stand. We considered a (Full mechanical lift) for her, but she didn't like it, so we told her then if you don't want to use the (full mechanical lift) then you have to hold on to the sit to stand. Therapy makes the recommendations and if there is a change in condition then we would screen the resident again. She could stand pivot, but her</p>	S9999		

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ARC AT STREATOR

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consistency was variable. She was what we call a self-limiting individual- when she says she wants to sit, she will just sit, and she expects that you are going to be there with a chair, or you are going to throw yourself on the floor to catch her. She is anxious at times but sometimes she just doesn't want to walk, and she doesn't decide before she starts, she decides right in the middle of the walk that she is done. Even in therapy we usually walked her with 2 people and always a wheelchair behind her."

R2's current care plan shows an intervention dated 10/20/23 stating, "Will initiate placing sign in room reminding staff resident is a stand/pivot transfer only with no ambulation."

On 3/4/24 at 2:35 PM V2 (Director of Nursing) stated, "As far as I am concerned the care plan should be accurate. We update their transfer status quarterly and as needed."

"A"

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