

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: IL6007983	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED C 05/02/2024
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NAME OF PROVIDER OR SUPPLIER BRIA OF CAHOKIA	STREET ADDRESS, CITY, STATE, ZIP CODE 3354 JEROME LANE CAHOKIA, IL 62206
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S 000	Initial Comments Complaint Investigation: 2442975/IL171966, 2443125/IL172176	S 000		
S9999	Final Observations Statement of Licensure of Violations I of II: 300.610a) 300.1210b)2) 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. Restorative measures shall include, at a minimum, the following procedures: 2) All nursing personnel shall assist and	S9999		

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

Electronically Signed

05/15/24

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S9999	<p>Continued From page 1</p> <p>encourage residents so that a resident who enters the facility without a limited range of motion does not experience reduction in range of motion unless the resident's clinical condition demonstrates that a reduction in range of motion is unavoidable. All nursing personnel shall assist and encourage residents so that a resident with a limited range of motion receives appropriate treatment and services to increase range of motion and/or to prevent further decrease in range of motion.</p> <p>This REQUIREMENT is not met as evidenced by:</p> <p>Based on observation, interview, and record review, the facility failed to ensure that residents with limited range of motion receive appropriate treatment and services to increase range of motion and/or to prevent further decrease in range of motion for 1 of 3 residents (R4) reviewed for range of motion/mobility, in the sample of 7.</p> <p>Findings include:</p> <p>On 4/26/24 at 1:00 PM, R4 was lying in bed in his room with grab bars on the sides of his bed watching television. He stated that he has not received any Restorative Therapy since he returned to the facility after hospitalization in March 2024.</p> <p>R4's Face Sheet documented that R4 was admitted to the facility on 5/25/23 with diagnoses including paraplegia, type 2 diabetes mellitus without complications, need for assistance with personal care, stage 4 pressure ulcer of sacrum, and abnormal findings on diagnostic imaging of abdominal regions.</p>	S9999		
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S9999	<p>Continued From page 2</p> <p>R4's Minimum Data Set (MDS) dated 3/31/24 documented that R4 was cognitively intact, required substantial/maximal assistance with bed mobility, and required total dependence with bed to chair transfer. R4 also had functional limitation in range of motion on both sides of lower extremities.</p> <p>R4's Care Plan dated 5/26/23 documented that R4 had self-care deficit in bed mobility. One intervention documented was that the resident was to attempt sitting on the edge of bed for ten minutes daily with moderate assistance.</p> <p>R4's Care Plan dated 6/16/23 documented that R4 was at risk for developing an impairment in functional mobility to BUE (Bilateral Upper Extremity). One intervention, documented, that the staff was to instruct R4 to do AROM (Active Range of Motion) to BUE 7 days per week. It also documented that R4 was at risk for developing an impairment in functional joint mobility and the intervention was PROM (Passive Range of Motion) to BLE (Bilateral Lower Extremities) 7 days per week.</p> <p>R4's April 2024 Restorative Nursing Assessment does not document that R4 received Bed Mobility on 4/1/24, 4/2/24, 4/5/24, 4/11/24-4/14/24, or 4/19/24-4/30/24.</p> <p>R4's April 2024 Restorative Nursing Assessment does not document that R4 received Active ROM (Range of Motion) to BUE (Bilateral Upper Extremities) on 4/1/24, 4/2/24, 4/5/24, 4/7/24, 4/9/24-4/14/24, or 4/20/24-4/30/24.</p> <p>R4's April 2024 Restorative Nursing Assessment does not document that R4 received PROM (Passive Range of Motion) to BLE (Bilateral</p>	S9999		

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S9999	<p>Continued From page 3</p> <p>Lower Extremities) on 4/7/24, 4/13/24, 4/14/24, 4/20/24, 4/21/24, 4/27/24, or 4/28/24.</p> <p>On 5/1/24 at 8:51 AM, V17 (Restorative Nurse) stated that the blank spaces on the Restorative Assessments mean the treatment was missed, and the X's mean the treatment was done. She stated the Certified Nursing Assistants (CNAs) are responsible for completing the Restorative Therapy.</p> <p>R4's Progress Notes did not document a reason for the above missed sessions of Restorative Therapy.</p> <p>On 5/1/24 at 7:50 AM, V8 (CNA) stated, "I think we have a restorative nurse. I think her name is (V17). I haven't seen (R4) getting any restorative other than just range of motion when we move him."</p> <p>On 5/1/24 at 12:53 PM, V18 (CNA) stated that she works on R4's hall at times but does not know if he gets Restorative Therapy.</p> <p>On 5/1/24 at 12:24 PM, V1 (Administrator) stated that she expects Restorative Therapy to be documented in the resident record, and if it is not provided, the rationale should be documented.</p> <p>The Facility's "Restorative Nursing Program" Policy, dated 9/2023, documented, "To promote each resident's ability to maintain or regain the highest degree of independence as safely as possible." It continued, "Each resident involved in a restorative program will have an individualized program with individualized goals, and measurable objectives documented in the plan of care." It continues, "Documentation of the interventions and resident's response will be</p>	S9999		

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S9999	<p>Continued From page 4</p> <p>completed with each implementation."</p> <p>"B"</p> <p>Statement of Licensure Violations II of II: 300.1210b) 300.1210d)1) 300.1620a) 300.1630b) 300.3220f)</p> <p>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.</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: 1) Medications, including oral, rectal, hypodermic, intravenous and intramuscular, shall be properly administered.</p> <p>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</p>	S9999		

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S9999	<p>Continued From page 5</p> <p>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.</p> <p>Section 300.1630 Administration of Medication b) The facility shall have medication records that shall be used and checked against the licensed prescriber's orders to assure proper administration of medicine to each resident. Medication records shall include or be accompanied by recent photographs or other means of easy, accurate resident identification. Medication records shall contain the resident's name, diagnoses, known allergies, current medications, dosages, directions for use, and, if available, a history of prescription and non-prescription medications taken by the resident during the 30 days prior to admission to the facility.</p> <p>Section 300.3220 Medical Care 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>This REQUIREMENT is not met as evidenced by:</p> <p>Based on interview and record review, the facility failed to ensure hospital discharge instructions/physician's orders were followed after readmission to maintain the resident's highest practicable physical well-being for 1 of 3 residents</p>	S9999		

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S9999	<p>Continued From page 6</p> <p>(R2) reviewed for quality of care in the sample of 7. This failure resulted in R2 not receiving Lokelma, a medication to treat high levels of potassium in the blood. R2 was hospitalized with elevated potassium levels, shortness of breath, chest pains, and increased heart rate.</p> <p>Findings include:</p> <p>R2's Face Sheet, undated, documented that R2 was admitted to the facility on 10/25/16 with diagnoses including chronic kidney disease stage 3, systolic heart failure, atrial fibrillation, hypertension, and ST elevation myocardial infarction.</p> <p>R2's Minimum Data Set (MDS), dated 4/9/24, documented that R2 was cognitively intact, required supervision with bed mobility, and required partial assistance with transfer.</p> <p>R2's Care Plan, dated 4/15/24, did not address hyperkalemia.</p> <p>R2's Progress Notes, dated 3/24/24 at 2:28 PM, documented that R2 complained of pain and was sent to the hospital where she was admitted with cellulitis, hyperkalemia, acute kidney injury and possible sepsis.</p> <p>R2's After Visit Summary, from 3/24/24-3/29/24 hospitalization, documented that hyperkalemia was the hospital problem with an order to start 10 grams sodium zirconium cyclosilicate (Lokelma) daily.</p> <p>R2's Physician Orders for March and April 2024 did not document an order for sodium zirconium cyclosilicate (Lokelma).</p>	S9999		
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S9999	<p>Continued From page 7</p> <p>R2's Medication Administration Records (MARs) for March and April of 2024 did not document an order for sodium zirconium cyclosilicate (Lokelma).</p> <p>R2's Progress Note, dated 4/12/24 at 7:35 PM, documented that R2 complained of shortness of breath with mild chest pains and chills, had clammy skin, and heart rate was jumping from 101-123 (beats per minutes). R2 then phoned 911 and was sent to the hospital.</p> <p>R2's Discharge Summary, from the 4/12/24-4/19/24 hospitalization, documented that R2 had a potassium level of 6.5 mmol/L (millimoles per liter) in the Emergency Department (ED). It also documented that R2 was admitted two weeks prior with a similar issue that resolved with Lokelma, but she never received the medication at the facility. The discharge orders also documented an order to discharge with 30-day supply of Veltassa, as the facility has confirmed they do have that medication in stock.</p> <p>R2's Physician Orders for March and April 2024, did not document an order for Patiromer calcium sorbitate (Veltassa).</p> <p>R2's MARs, for March and April 2024, did not document an order for Patiromer calcium sorbitate (Veltassa).</p> <p>On 4/30/24 at 8:39 AM, V9 (Social Services Director/SSD), stated that she was unaware of R2 having any issues with medication coverage.</p> <p>On 4/30/24 at 9:20 AM, V2 (Director of Nursing/DON), stated that she was unaware of R2 being on a potassium lowering medication or</p>	S9999		

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S9999	<p>Continued From page 8</p> <p>having any problems with medication coverage. She also stated that the nurse puts in medications orders after residents return from hospital, then the doctor looks over them to confirm, but does not always carry every medication over.</p> <p>On 5/1/24 at 7:45 AM, V14 (Licensed Practical Nurse/LPN), stated that the nurse assigned to the resident returning to the facility, will review their hospital discharge orders and review the admission packet. She also stated that she thinks R2 was on a medication called Lokelma and was unaware of any issues with it.</p> <p>On 5/1/24 at 7:58 AM, V15 (LPN) stated that nurses enter medication orders when residents are readmitted. She also stated that she was unaware of R2 ever being on a potassium lowering medication.</p> <p>On 5/1/24 at 8:45 AM, V16 (LPN) stated, "I recently took over the "Triple Check Process" within the last couple of weeks. When residents come in, I cross check medication orders and make sure ancillary orders are added. If there is any discrepancy, I talk to (V19 Nurse Practitioner) about it. If the medication is not covered, pharmacy faxes us a notification, then I talk to (V19), and if there is no generic or alternative. I talk to (V1 Administrator) and she signs off for it." V16 also stated that she did not recall R2 being on any potassium lowering medications.</p> <p>"A"</p>	S9999		
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