

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: IL6004279	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED C 09/16/2019
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NAME OF PROVIDER OR SUPPLIER HERITAGE HEALTH-SPRINGFIELD	STREET ADDRESS, CITY, STATE, ZIP CODE 900 NORTH RUTLEDGE SPRINGFIELD, IL 62702
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S 000	Initial Comments Complaint #1946602/IL#115545 Complaint #1946557/IL#115491	S 000		
S9999	Final Observations Statement of Licensure Violations: 300.610 a) 300.1210 b) 300.1210 d) 6) 300.1220 b) 3) 200.3240 a) 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	S9999	<h2>Attachment A</h2> <h3>Statement of Licensure Violations</h3>	

Illinois Department of Public Health LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE Electronically Signed	TITLE	(X6) DATE 10/04/19
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S9999	<p>Continued From page 1</p> <p>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:</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>Section 300.1220 Supervision of Nursing Services</p> <p>b) The DON shall supervise and oversee the nursing services of the facility, including:</p> <p>3) Developing an up-to-date resident care plan for each resident based on the resident's comprehensive assessment, individual needs and goals to be accomplished, physician's orders, and personal care and nursing needs. Personnel, representing other services such as nursing, activities, dietary, and such other modalities as are ordered by the physician, shall be involved in the preparation of the resident care plan. The plan shall be in writing and shall be reviewed and modified in keeping with the care needed as indicated by the resident's condition. The plan shall be reviewed at least every three months.</p> <p>Section 300.3240 Abuse and Neglect</p> <p>a) An owner, licensee, administrator, employee or agent of a facility shall not abuse or neglect a resident</p> <p>These regulations are not met as evidenced by:</p> <p>Based on interview and record review, the facility</p>	S9999		

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S9999	<p>Continued From page 2</p> <p>failed to assess and implement progressive interventions to prevent further falls for 3 of 3 residents (R1, R2, R3) reviewed for accidents in the sample of 6. This failure resulted in R2 falling and receiving a right humerus (upper arm) fracture and Intraparenchymal Hemorrhage (bleeding within the brain).</p> <p>Findings include:</p> <p>R2's diagnosis from Admission Record, dated 09/09/19, documented Repeated falls, Unspecified muscle weakness (generalized). R2's Progress notes documented R2 has encountered 24 falls since her admission of 02/04/19.</p> <p>R2's Care Plan Goal, initiated on 2/19/19, documented R2 is a high risk for falls due to history of falls at home, recent fall with fracture to right distal humerus (upper arm bone), unsteady gait, confused and forgets to call and/or wait for assistance with transfers and/or walking. Family reported that (R2) is obsessed with neatness and is compelled to straighten wrinkles in her bed linens or pick up items dropped on the floor without calling for assistance. The care plan interventions, dated 8/5/19, stated to encourage her to stay in common areas while awake.</p> <p>The Report to Illinois Department of Public Health (IDPH) form, dated 8/23/19, documented R2 fell in her room on 8/19/19 at 3:30 PM and sustained a lacerated lip. The report documented she lost her balance while reaching out to the foot of the bed to have something to hold onto while she attempted to self-ambulate. The report noted she was sent to local hospital for treatment to the lip laceration. The report documented the care plan would be updated and interventions accordingly.</p>	S9999		

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S9999	<p>Continued From page 3</p> <p>R2's Hospital History and Physical (H&P), dated 08/19/19, documented a sustained fall with laceration to the lip and breaking her dentures.</p> <p>Care Plan, dated 08/20/19, documented an intervention, "Activities to assess for music (therapy), dislikes and no bed side table."</p> <p>There is no documentation in R2's medical record regarding if the Activity Department assessed her for activity choices. There is no documentation as to why R2 could have no bed side table. There was no further assessment completed as to what type of supervision R2 required to prevent future falls.</p> <p>On 09/12/19 at 4:10 PM, V1, Administrator, stated that the music interventions implemented on 08/20/19 for R2's fall occurrence of 08/19/19 had not been addressed with the activity department at that time.</p> <p>R2's Fall Risk Scale post fall, dated 08/23/19, documented R2 is a high risk for falls with a score of 80 with a score greater than 45 indicating high risk. The Fall Risk Scale also documented impaired for using chair arms to get up, grasps furniture, and cannot walk unassisted.</p> <p>R2's Fall Occurrence, dated 08/23/19 at 8:15 PM, documented R2 was lowered to the ground.</p> <p>R2's Care Plan interventions, dated 08/26/19, documented, "request urinalysis." Documentation from lab results identified there was no indication of an infection. There were no added interventions to decrease R2's risk of further falls or to address her need for increased supervision.</p> <p>Fall Occurrence, dated 08/29/19 at 10:52 AM,</p>	S9999		
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S9999	<p>Continued From page 4</p> <p>documented R2 lowered self to ground.</p> <p>R2's Progress Note, dated 08/29/19, at 12:46 PM, written by V12, Licensed Practical Nurse, stated R2 was witnessed lowering herself down to her knees on bedside mat, no injuries noted.</p> <p>On 09/16/16 at 4:23 PM, V12 stated on 08/29/19 during his shift, he walked in R2's room and she was on the floor by the bed, and she was startled when she saw him.</p> <p>R2's Progress Note, dated 8/30/19, documented that resident had bruises on the right upper arm from the previous fall.</p> <p>R2's progress Note, dated 9/01/19 at 12:19 AM, documented R2 was complaining of pain to her right upper arm and a fax was sent to Doctor for request for X-ray.</p> <p>R2's Progress Note, dated 9/04/19 at 5:31 PM, documented R2 was sent to the emergency room for evaluation and treatment.</p> <p>R2's Hospital History and Physical (H&P), dated 9/4/19, documented R2 had an unwitnessed fall at the facility and sustained a right humeral head and neck fracture and intraparenchymal hemorrhage (bleeding within the brain).</p> <p>R2's Care Plan, dated 08/30/19, documented, "Reviewed interventions & (and) continue as planned." There were no added interventions to decrease R2's risk of further falls.</p> <p>On 09/12/19 at 4:10 PM, V2 stated that their management corporation stated that there does not have to be a new progressive intervention for each and every fall, as-long as the previous fall</p>	S9999		
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S9999	<p>Continued From page 5</p> <p>interventions have been reviewed.</p> <p>On 09/16/19 at 4:23 PM, V13 stated, "Staff always have called me with everything, requesting a fax was not the way. I expected a call on the first onset of her assessment."</p> <p>V1 continued to state, the care plan intervention, dated 08/30/19, requesting urinalysis, for R2's fall occurrence of 08/23/19 was an option, since she is always going to the bathroom unassisted. We are running out of interventions for her at this time. On 09/11/19, V1 stated she had interviewed staff during her investigation to assure R2's interventions addressed on her care plan were being implemented.</p> <p>2. R1's Minimum Data Set, dated 09/04/19, documented R1's cognition as alert and orientated to person, place and time, and requires minimum to extensive assistance from staff with all Activities of Daily Living (ADL's). This includes bed mobility, transfers, toilet use, and walking in room.</p> <p>R1's Fall Scale, dated 08/30/19, documented R1 as a score of 95, indicating at high risk for falling with a history of falls and impaired gait; with a score greater than 45 indicating high risk.</p> <p>R1's Fall Occurrence Report documented R1 had a fall (observed on floor) on 08/30/19, 09/02/19, 09/03/19, 09/04/19, 09/05/19 and 09/07/19.</p> <p>R1's Progress Note, dated 09/07/19, documented R1 found lying on his left side. Noted at the area on left eye was scabbed, had reopened and bleeding. R1 get himself up to his knees in front of the wheelchair and then to a standing position.</p>	S9999		

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S9999	<p>Continued From page 6</p> <p>R1's Care Plan Interventions, dated 09/07/19, documented a progressive intervention for each fall that occurred from 08/30/19 to 09/05/19, however 9/07/19 fall intervention documented, "review and continue to implement new interventions."</p> <p>R1's Care Plan, date of 09/09/19, documented R1 was at risk of fall related to decreased mobility, being unaware of safety needs, and occasional bladder and bowel incontinence.</p> <p>3. R3's Minimum Data Set, dated 07/31/19, documented R3's cognition as orientated to person only, and requires minimum assistance from staff with all ADL's, this includes bed mobility, transfers, toilet use, and balance as unsteady that requires to be stabilized with staff assistance.</p> <p>R3's Fall Scale, dated 08/08/19, documented R3 as a score of 80, with a score greater than 45 indicating high risk and a Fall Scale, dated 08/28/19, documented as a score of 75, indicating at high risk for falling with a history of falls and impaired gait and overestimates or forgets her limitations.</p> <p>R3's Fall Occurrence Report, documented R3 had a fall on 08/08/19, 08/14/19 and 08/28/19.</p> <p>R3's Care Plan, date 11/06/18, documented R3 is at risk for falls due to history of falls at home, confused, impulsive, unsteady, frequent bowel and bladder incontinence, attempts at times to get up without calling and waiting for assistance and has a history of seizures.</p> <p>Care Plan Interventions, dated 8/15/19, documented a fall occurrence on 08/14/19. The</p>	S9999		

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S9999	<p>Continued From page 7</p> <p>facility did not document a progressive intervention on the Care Plan for that fall occurrence on 08/28/19.</p> <p>The Facility's "Resident Assessment and Care Planning" policy and procedure, revision dated 11/2017, documents, "The facility must evaluate and modify, if necessary, the efficiency and appropriateness of each resident's care plan on at least a quarterly basis, and with a significant change in condition."</p> <p>(B)</p>	S9999		
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