

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

PRINTED: 02/08/2010
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 145937	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____		(X3) DATE SURVEY COMPLETED C 09/28/2009
NAME OF PROVIDER OR SUPPLIER FAIRVIEW NURSING PLAZA			STREET ADDRESS, CITY, STATE, ZIP CODE 321 ARNOLD AVENUE ROCKFORD, IL 61108		
(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) COMPLETION DATE	
F 514	Continued From page 14 shows 8 missing blood glucose checks and the sliding scale insulin is not documented for 25 different testing times. 4. Review of R2, R4, R6, R8, R10, R11, R12, R13, R14, R15, R16, R17 and R18's Medication Administration Records for August and September 2009 show numerous examples of sliding scale insulin not documented, blood glucose levels are not documented or not legible, and scheduled doses of insulin are not consistently documented. On 9/25/09 at 2:00 PM E2 (Director of Nursing) confirmed that the documentation for insulin dependent diabetics was not always complete and accurate.	F 514			
F9999	FINAL OBSERVATIONS LICENSURE VIOLATIONS 300.1010h) 300.1210a) 300.1210b)3) 300.3240a) Section 300.1010 Medical Care Policies h) The facility shall notify the resident's physician of any accident, injury, or significant change in a resident's condition that threatens the health, safety or welfare of a resident, including, but not limited to, the presence of incipient or manifest decubitus ulcers or a weight loss or gain of five percent or more within a period of 30 days. The facility shall obtain and record the physician's plan of care for the care or treatment of such accident, injury or change in condition at the time	F9999			

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F9999	<p>Continued From page 15 of notification.</p> <p>Section 300.1210 General Requirements for Nursing and Personal Care</p> <p>a) The facility must 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 assessment and plan of care. 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>b) 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>3) Objective observations of changes in a resident's condition, including mental and emotional changes, as a means for analyzing and determining care required and the need for further medical evaluation and treatment shall be made by nursing staff and recorded in the resident's medical record</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. (Section 2-107 of the Act)</p> <p>These requirements were not met as evidenced by:</p> <p>Based on interview and record review the facility failed to immediately arrange ambulance transport services for a resident with sustained elevated blood glucose levels. This failure</p>	F9999			

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F9999	<p>Continued From page 16</p> <p>contributed to delaying treatment for R1's elevated blood glucose levels. The resident was taken to a local hospital for treatment of diabetic ketoacidosis on 8/18/09.</p> <p>This applies to 1 of 3 diabetic residents reviewed. (R1)</p> <p>Findings include:</p> <p>The Physician Order Sheet of 8/1/09 for R1 documents R1 has Diabetes Mellitus.</p> <p>On 8/18/09 at 11:30 AM, Z1 ordered R1 be transferred to the hospital for emergency treatment of sustained elevated blood glucose levels. The transfer record documents R1's blood pressure as 176/80 (no time indicated).</p> <p>The ambulance dispatch record documents the request for emergency transfer was received at 12:50 PM and arrived to the facility at 1:05 PM. The ambulance staff documented R1's blood pressure at 90/36. The report states R1 was confused to voice and was weak. Intravenous access was started and R1 received 400 ml of normal saline solution prior to departure from the facility. The ambulance report states after the bolus of fluid the, "Patient's level of consciousness increased and the patient would now open his eyes and look around." The ambulance arrived at the hospital emergency department at 1:45 PM. Upon arrival to the hospital, R1's blood pressure was 72/40.</p> <p>The Hospital Discharge Summary dated 9/2/09 for R1 states, "The patient was sent to the hospital because he was not acting like himself. Blood sugar upon arrival to the hospital was 910</p>	F9999			

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F9999	<p>Continued From page 17</p> <p>mg/dl. He was found to be in diabetic ketoacidosis. The patient's breathing became more shallow. He was tachypneic (rapid breathing) with respiratory rate of 34. He was intubated in the Emergency Department and was admitted with diagnosis of acute respiratory and diabetic ketoacidosis.</p> <p>On 9/8/09 at 1:55 PM, E4 (Licensed Practical Nurse-LPN) stated, "At 8 AM he did not act right, he could talk and was alert, but his limbs were limp. At 9:30 AM, he was sleeping but could be aroused. He had no complaints of pain. At 10:30 I reassessed, and he was confused when I awakened him. At 11:30 when the staff went to get him up for lunch, he was unstable sitting in the chair." E4 confirmed that on the morning of 8/18/09, each blood glucose level she performed for R1 at 7:45 AM, 8:45 AM, 9:30 AM, 10:30 AM and 11:30 AM all had HI blood glucose results. E4 stated she did not call the doctor sooner because, "He was alert, and did not have signs and symptoms of hyperglycemia and I thought he was OK."</p> <p>The manufacturer's product information on the blood glucose monitoring system states, "HI results indicate your blood glucose level is higher than 525 mg/dl."</p> <p>According to Mosby's Medical and Nursing Dictionary, Diabetic Ketoacidosis is defined as an acute, life-threatening complication of uncontrolled diabetes mellitus. The person appears flushed, has hot dry skin, is restless, uncomfortable, agitated, diaphoretic and has a fruity odor to the breath. Coma, confusion and nausea are often noted. Untreated, the condition invariably proceeds to coma and death.</p>	F9999			