

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

PRINTED: 07/12/2012
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 145671	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____		(X3) DATE SURVEY COMPLETED C 04/10/2012
NAME OF PROVIDER OR SUPPLIER PROVIDENCE SOUTH HOLLAND			STREET ADDRESS, CITY, STATE, ZIP CODE 16300 WAUSAU STREET SOUTH HOLLAND, IL 60473		
(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 323	Continued From page 4 remember who that was, because one helped the other with her. No one reported it before R1's niece got me." The facility provided the interview of R6 (roommate of R1) on 3/1/2012. R6 is no longer living at the facility per E1 (administrator). The interview of R6 denotes in part the following: "Upon interviewing R6 who is the roommate of R1, R6 stated that when the girls got R1 up this morning (referencing 12/16/11) in that lift, R1 hit her foot on the bar of the lift. R6 said no one did it on purpose, the girls said they were sorry. R1 said ouch when her foot was bumped...."	F 323			
F9999	FINAL OBSERVATIONS LICENSURE VIOLATION: 300.1010h) 300.1210b)5) 300.1210d)6) 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	F9999			

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F9999	<p>Continued From page 5</p> <p>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 of notification.</p> <p>Section 300.1210 General Requirements for Nursing and Personal Care</p> <p>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>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>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 300.3240 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 the following:</p>	F9999			

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F9999	Continued From page 6 Based upon record review and interview the facility failed to ensure that 1(R1) of 6 residents in the sample received the necessary assistance and services to prevent an accident. This failure resulted in a Right Mildly Displaced comminuted distal tibia and fibula fractures just above the ankle joint. Finding Include: R1 had been discharged from the facility when onsite visit was initiated on 2/29/2012. Review of R1's closed record 12/17/2011 Consultation record in part depicts the following: "patient is a 92 year old female, alert, orientation 0. The right ankle Xray revealed a valgus impacted bimalleolar ankle fracture with significant osteopenia present." The X-ray report 12/16/2011 of the Right Ankle denotes in part the following: "Mildly Displaced comminuted distal tibia and fibula fractures just above the ankle joint." E3 and E4 were the assigned CNA's (certified nurse aides) for R1 on 12/16/2011. R1 is completely dependently on staff for ADL's (activities of daily living) per MDS (minimum data set) and nursing care plan. E4 is no longer employed per E1 (administrator). E3 was interviewed on 2/29/11-10:30 am stated, "E4 that morning asked me to help her clean R1. When I touched R1's right foot, R1	F9999			

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F9999	<p>Continued From page 7</p> <p>cried out a lot. I asked E4 about it, and E4 responded, R1 always cries out. I didn't tell anyone R1 cried out. I took off R1 sock, R1 cried out, I cleaned R1 foot. R1 cried out and I put another sock on, and R1 cried out. R1 was crying out before R1 got in the (mechanical) lift, did not hit foot on the (mechanical) lift."</p> <p>On 3/1/2012-10:00 am, E5 (R1's charge nurse) interviewed, and signed a written statement. E5 stated,"Around lunch time, (12/16/2011) the niece of R1 told me R1's right ankle was swollen, and asked me to look at it. I went, R1 was in the lobby. I assessed it, touched it and it was warm to touch. R1 was showing facial grimaces like pain. I had the aides lay R1 in bed. I removed R1's sock, I called R1's doctor and the doctor ordered an X-ray. I asked the aides if they noticed it, one of them said they didn't notice it, but I do not remember who that was, because one helped the other with her. No one reported it before R1's niece got me."</p> <p>The facility provided the interview of R6 (roommate of R1) on 3/1/2012. R6 is no longer living at the facility per E1 (administrator).</p> <p>The interview of R6 denotes in part the following:</p> <p>"Upon interviewing R6 who is the roommate of R1, R6 stated that when the girls got R1 up this morning (referencing 12/16/11) in that lift, R1 hit her foot on the bar of the lift. R6 said no one did it on purpose, the girls said they were sorry. R1 said ouch when her foot was bumped...."</p> <p>E4 and E3 failed to notify facility staff when R 1 cried out in pain during the ADL care.</p>	F9999			

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F9999	Continued From page 8 Subsequently, services were not rendered until the family member of R1 notified E5. B	F9999			