

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: 146063 | (X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____ | | (X3) DATE SURVEY COMPLETED 05/24/2012 |
|---|--|---|---|----------------------|---|
| NAME OF PROVIDER OR SUPPLIER WALNUT MANOR | | | STREET ADDRESS, CITY, STATE, ZIP CODE 308 SOUTH SECOND STREET WALNUT, IL 61376 | | |
| (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 356 | Continued From page 21 specified above on a daily basis at the beginning of each shift. Data must be posted as follows: o Clear and readable format. o In a prominent place readily accessible to residents and visitors. The facility must, upon oral or written request, make nurse staffing data available to the public for review at a cost not to exceed the community standard. The facility must maintain the posted daily nurse staffing data for a minimum of 18 months, or as required by State law, whichever is greater. This REQUIREMENT is not met as evidenced by: Based on observation, record review and interview, the facility failed to post staffing data regarding the number of licensed and unlicensed nursing staff directly responsible for resident care on each daily shift. This failure has the potential to effect all 57 residents. Findings include: On 5/21/12 at 10:30 am, it was confirmed with E5 that the Nurse Staffing Information was not posted for the following dates Friday, 5/18/12, Saturday 5/19/12, Sunday 5/20/12, and Monday 5/21/12 at the designated location on a communal bulletin board near the nursing station. | F 356 | | | |
| F9999 | FINAL OBSERVATIONS LICENSURE VIOLATIONS: 300.610a) | F9999 | | | |

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| F9999 | Continued From page 22 300.1210b) 300.1210d)6) 300.3240a) Section 300.610 Resident Care Policies a) The facility shall have written policies and procedures, governing all services provided by the facility which 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. These policies shall be in compliance with the Act and all rules promulgated thereunder. These written policies shall be followed in operating the facility and shall be reviewed at least annually by this committee, as evidenced by written, signed and dated minutes of such a 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. 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: 6) All necessary precautions shall be taken to assure that the residents' environment remains | F9999 | | | |

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| F9999 | <p>Continued From page 23</p> <p>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 a) An owner, licensee, administrator, employee or agent of a facility shall not abuse or neglect a resident.</p> <p>These Requirements are NOT MET as Evidenced by:</p> <p>Based on interview and record review, the facility failed to apply and monitor moist hot packs in a manner to prevent the development of a burn for one of one resident (R1) who receive hot packs in the sample of 15. This failure resulted in R1 sustaining a two centimeter full thickness burn which required two months to heal.</p> <p>Findings include:</p> <p>Nurses notes dated 02/27/12 (no time documented) state that a CNA was showering R1 and noted a red broken blister area on R1's right shoulder. This circular area measured 2 centimeters. Nurses notes state that R1 said "Therapy got that too hot, after they put a hot pack on me Sat. (Saturday)"</p> <p>The facility's Occurrence Report dated 02/27/12 and investigation dated 02/28/12 completed by E2 stated that "Upon conclusion of all interviews, including the resident." (R1) "received a 2 cm.</p> | F9999 | | | |

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| F9999 | <p>Continued From page 24</p> <p>burn on her right shoulder from a hot pack placed on her Rt. (right) shoulder by therapy." This investigation includes documentation of an interview with E16 (Occupational Therapist), who stated that she had treated R1 on 02/24/12 after lunch and placed hot packs from the hydrocolator on R1's right shoulder. E16's statement documents that after 5 minutes into the treatment R1 stated that "this is getting hot." E16's statement documents that she removed the towel and the hot pack and placed a second towel down and replaced the pack. E16's statement says that when E16 removed the final hot pack, she (E16) noticed an area of redness and moisture like water on R1's skin. E16's statement continues stating, "maybe I didn't drain all the water off, I'm not sure why it got so hot."</p> <p>The facility's inservice information dated 02/29/12, states when applying moist heat packs to apply 4-6 layers of towels or 2 layers of commercial towels.</p> <p>Physician's order dated 02/27/12 instructed nurses to apply Silvadene cream to R1's burn twice daily. The facility's Wound Care Plan Treatment Plan dated 02/27/12 documents R1's wound type as a burn on right shoulder, measuring 2 by 2 cm. The Patient Wound Care Order Sheet dated 03/01/2012 by the consulting wound nurse states that R1's burn wound is a full thickness wound and has increased to 2 by 2.5 cm. This documentation states that R1's wound bed is light brown/grey thin eschar, with thin fragile pink peri-wound tissue.</p> <p>The Patient Wound Care Order Sheet dated 04/02/12 by the consulting wound nurse states</p> | F9999 | | | |

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| F9999 | <p>Continued From page 25</p> <p>that R1's burn is 100% yellow brown slough with thin pink fragile peri-wound tissue with a light purple discoloration 2 cm. perimeter. This form documents that the treatment for R1 was changed to an enzymatic debridement agent Santyl with Hydrogel gauze to maintain a moist wound environment with a bordered foam dressing to protect the frail, fragile tissue.</p> <p>The April 2012 Treatment Administration Record documents that R1's burn was healed and treatment discontinued on 04/23/12.</p> <p>On 05/23/12 at 9:20 a.m., E2 confirmed that she had completed an investigation of R1's burn and determined that the cause of R1's burn was from the application of the hot packs.</p> <p style="text-align: center;">(B)</p> | F9999 | | | |